2022 NPCR PENNSYLVANIA SUCCESS STORY

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The Enhancement of the Pennsylvania Cancer Registry over 30 Years

National Program of Cancer Registries SUCCESS STORY

SUMMARY

The Pennsylvania Cancer Registry (PCR) has gone through lots of changes over the last 30 years. The PCR now meets or exceeds all NPCR Standards.

CHALLENGE

Thirty years ago, the PCR did not meet the following major NPCR standards:

- Collect all NPCR required data items in NPCR required standardized format.
- Within 12 months of the close of the diagnosis year, 90% completeness in case reporting.
- Electronic reporting by hospitals, labs, and other non-hospital sources
- Reporting by private pathology labs, physicians, surgeons, and all other health care practitioners

SOLUTION

The PCR has participated in the National Program of Cancer Registries (NPCR) since funding began in 1994. Since then, the following major events lead to meeting the above standards:

2/1995- In mainframe database, converted PCR-specific codes to NAACCR Standard codes for Race, Sex, Marital Status, Laterality, Diagnostic confirmation, and Stage.

/1996- Designated Quality Control Coordinator and Non-Hospital Source Coordinator started. This allowed the PCR to have dedicated to staff to focus on implementation of reporting by non-hospital facilities and to expand on PCR Quality Control activities.

Fall/1996- First electronic path lab reports received from Corning and Smith Kline

Started to use Abstract Plus internally to process paper abstracts. This allowed the PCR to fully test Abstract Plus before implementing the use by reporting hospitals.

1/2000 Implemented Prep Plus

/2000 First install of Abstract Plus at non-registry hospitals. The use of Abstract Plus eliminated any paper reporting by the hospitals.

4/2003 Converted from mainframe to CRS+.

72006 First 12-month data submission to NPCR CSS. The file was 65% complete.

1/2007 12-month data submission to NPCR CSS was 95% complete.

1/2009 First files uploaded through of Web Plus. This eliminated shipments being received on CD or floppy disc through the

US mail.

2009 First non-hospital case received.

1/2015 Received first Meaningful Use CDA file

RESULTS

The PCR consistently meets NPCR standards and expectations. All hospitals and labs report electronically. 76% of other non-hospital sources are reporting electronically. All NPCR required data items are collected or derived. All data is collected, maintained, and submitted in the required NAACCR record layout.

SUSTAINING SUCCESS

To remain a successful registry, the PCR continues to educate staff and reporting facilities and to monitor data quality, completeness, and timeliness. The biggest key to sustaining success is to always look for ways to improve.

With a strong and stable history, the PCR has established a state-of-the-art cancer reporting program that has become an important component in the Department of Health's Cancer Control Program. The PCR uses current technology and national data collection standards to continually enhance the completeness, accuracy, and timeliness of cancer data. As the volume of PCR incidence data increases over time, the utility of these data for program planning, evaluation, and epidemiologic studies increases as well. The establishment and ongoing operation of the PCR ensure that sufficient and reliable cancer incidence data are available to provide answers to our questions, to reduce the burden of cancer in Pennsylvania and to improve the lives of cancer survivors and their families.

REGISTRY CONTACT INFORMATION

1-800-272-1850 Pennsylvania Cancer Registry Website



