

# 2023 NPCR RHODE ISLAND SUCCESS STORY

Victoria Fruh; Nancy Lebrun, BS, CTR

## Implementation of a Standardized Template to Improve the Timeliness and Consistency of Early Case Reporting for Pediatric, Adolescent, and Young Adult Cancer Cases to the Rhode Island Cancer Registry

### National Program of Cancer Registries SUCCESS STORY

#### SUMMARY

The Rhode Island Cancer Registry Program (RICR), in collaboration with CDC, opted to participate in a federal incentive program designed to facilitate reporting of all pediatric, adolescent, and young adult cancer incidences to the state central registry within 30 to 45 days of initial physician contact. The state's Certified Tumor Registrars (CTRs), working on the Surveillance, Treatment, Access, and Research Act (STAR) Project, developed a data dictionary that could be used by facilities when submitting reports to RICR.

#### CHALLENGE

- Addressing delays in reporting of pediatric, adolescent, and young adult cancer incidences to the state's central registry.
- Case reporting delays limit enhancement in childhood cancer surveillance, which is needed for ongoing and future cancer research.
- Additionally, case reporting delays restrict identification of pediatric cancer cases that may be related to environmental exposures.

#### SOLUTION

- The intervention was to develop a standardized electronic template of required data fields to streamline the process of reporting and improve the timeliness of monthly reports submitted to RICR.
- Facilities use this template for putting cases into suspense in their operating system. Every month, facilities pull the report with the selected data items and send it to RICR through sFTP. The SME's, with the STAR team, review these submissions for potential inclusion in STAR.

#### RESULTS

- Over a 6-month period, RICR observed a 33% increase in the number of facilities using the template, demonstrating the success of the initiative. Subsequently, RICR can easily track reporting timeliness for these facilities.
- This 33% increase in use demonstrates that reporting facilities can successfully implement the use of new templates without additional work on the part of hospital registries.
- One anticipated key barrier to implementation was the increased workload for hospital CTRs, which was mitigated because the template focused on already required NAACCR data items.
- Steps that were taken to implement this work included creating a standardized template to submit monthly reports using elements from the data dictionary and information gathered from widely used rapid case reporting systems; introducing early case reporting facilities of pediatric, adolescent, and young adult cancer cases to the new template; evaluating template use; and discussing the barriers to implementation.
- A subset of reporting facilities in Rhode Island and the central registry participated in this implementation.

#### SUSTAINING SUCCESS

- Proposed next steps include evaluating the success rate of data dictionary template use over a longer period, continuing to encourage facilities to send the data items in NAACCR format and to add to our database, and identifying and resolving potential barriers to implementation that facilities may encounter.
- Additional next steps include encouraging ACOS Commission on Cancer- (CoC) accredited hospitals to adopt STAR protocols as annual quality improvement/ quality assurance (QI/QA) projects for reaccreditation and offering certificates of participation to encourage template adoption.
- This work is sustainable given that the template standardizes and streamlines the process of reporting and improves the timely submission of monthly reports.

#### STORY QUOTE

***“The rollout process did not go without hiccups; however, our reporting facilities see the need to send data in a timely manner to help with cancer investigations in the state of Rhode Island.”***  
– Central Cancer Registry Director, Rhode Island Cancer Registry

#### REGISTRY CONTACT

Rhode Island Cancer Registry (RICR)  
[https://health.ri.gov/programs/detail.php?pgm\\_id=124](https://health.ri.gov/programs/detail.php?pgm_id=124)



**U.S. Department of Health and Human Services**  
Centers for Disease Control and Prevention