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| **Delaware Cancer Consortium Delaware Cancer Registry Advisory Committee (DCRAC)**  **Monday, October 11, 2021**  **Virtual Meeting**  **Time: 10:00am – 11:00am** | |
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| **Attendance** | |
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| **Members** |  |
| Did Not Attend | Rachel Gardner, Nanticoke Health Systems |
| Attended | Robert Hall-McBride, Christiana Care Health Systems |
| Did Not Attend | Stephanie Guarino, Nemours |
| Did Not Attend | James M. Monihan, MD, Allied Diagnostic Pathology Consultants, PA |
| Attended | Nicholas Petrelli, MD, Helen F. Graham Cancer Center |
| Attended | Rishi Sawhney, MD, Bayhealth Medical Center |
| Attended | John D. Shevock, Bayhealth Medical Center |
| Attended  Attended | James Spellman, MD– Beebe Healthcare - Tunnell Cancer Center  Scott D. Siegal, PHD, Christiana Care Hospital |
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| **Staff** |  |
| Attended | Wilhelmina Ross, Delaware Cancer Registry/Westat |
| Attended  Attended | Jason Lawson, Delaware Division of Public Health  Sumitha Nagarajan, Delaware Division of public Health |

**Welcome**

Members of the Delaware Cancer Registry (DCR) attended the meeting. Attendance was taken for the committee in the meeting

**Old & New Business**

**Assigned Tasks Updates**

Dr. Nicholas Petrelli opened the meeting with Mr. Jason Lawson updates on the Data Modernization Plan. Mr. Lawson informed the committee that all cancer registry software has been updated to NAACCR Version 21 except for eMarC Plus, as the CDC will have a new version early next month. Dr. Petrelli had previously asked Mr. Lawson to produce a brief summary on how to navigate the software used by the Registry to address the medical community for the Delaware Medical Journal (DMJ). Dr. Petrelli briefly updated the committee on the DMJ status, and stated that the journal will most likely transit to an online platform, the date of transit is undetermined at the time of the meeting.

Ms. Wilhelmina Ross provided updates on Delaware Cancer Registry (DCR) activities. DCR is currently in Call for Data and are very busy cleaning the data for Submission before the end of November. DCR cases capture is at 96% completeness level based on 2019 data. Additionally, the registry is completing death clearance follow-back activities. The Registry has reached out to corresponding hospitals and smaller facilities to receive the follow back information. Ms. Ross bought to the attention of Committee members that hospice care or nursing home are reluctant to provide or have the patient’s cancer records. Ms. Ross asked if the committee has any suggestions on this topic since the law states if the facilities has had any care, diagnosis, or treatment of the cancer they, are by law to report.

The cancer cases at these facilities sometimes are captured before death. The registry has death certificate only cases, where the patient had cancer because Cause of Death listed as such, but it never reported. Their treatment or diagnosis, are absent from the registry for many valid reasons. Dr. Petrelli suggested having a legislature advocate for changes in the law. Mr. John Shevock recommended examining the scope of the issue more closely, because many hospice canters have palliative care, and considered a component of care. Dr. Robert Mc-Bride stated that this process should be amended at a regulatory standpoint. It is a lot easier than changing the law.

Dr. Robert McBride provided an update on the Rapid Quality Reporting System (RQRS). The committee wanted updates on the RQRS globally for all the cancer in state. Dr. McBride states that he can work with the State Registry with the measures. Dr. McBride is however, unable to work in RQRS because he is unable to get or access hospitals data. The Central registry level has alleviated involving the hospitals into this scope of work.

Afterwards, Dr. Petrelli inquired on website updates. Sumitha Nagarajan, did not have the number of websites hit but can provide that that information in the next meeting to bring the Executive Plan up to date. Sumitha briefly mentioned during the Advisory Council about the registry data appearing on My Healthy Community website. Sumitha has sent over 2012 – 2016 all site cancer incidence and mortality statistics. Additionally, cancer incidence and mortality up to 2017 are usually on the website also, Sumitha will add it the website also.

**Updates on Research Goals**

Dr. Scott Siegel is working on a project with the Cancer Registry. The project is looking at hotspots for triple negative breast cancer in New Castle County. Dr. Siegel noted a trend in higher incidence of triple negative breast cancer relative to the other invasive forms of breast cancer. Dr. Siegel is using that set of results to help inform additional research as well as programmatic activities to address racial disparities and breast cancer morality. Access to call point level data or the addresses of these cases were from the data in the Delaware Cancer Registry.

Dr. Siegel but is interested in exploring the possibility of doing a statewide research on this topic. However, typically cancer registry do not release point level data. Dr. Siegel is curious to know if there are any set of protocols or arrangement that established that will allow keeping the data secure, and locating statewide hotspot in order to address Delaware’s high ranking of triple breast cancer. Dr. Petrelli agreed that this scope of work is very important. Dr. Siegel has been fortunate enough to receive some funding for Grand Center and Wistar Cancer Center. Dr. Siegel can extend the research by looking at all three counties in the state. Dr. James Spellman recommended that Dr. Siegel can look at DHIN for any missing pieces in his data. Dr. Siegel inquired on access.

**Review of DCC Teal Book**

Dr. Petrelli went over the Teal Book with the members on the very little changes made. Dr. Petrelli went into detail on each Goal and Objectives with the members and asked for feedback on their respective sections. Dr. Petrelli asked for suggestions on Objective 3B: *In which the committee produce at least three articles per year*. The committee agreed on the number of publications. Mr. Shevock asked for clarifications on 2A: *Posting quality care reports*. Dr. Petrelli elaborated that it means posting on the Cancer Registry website and the articles Dr. Mc-Bride has produced in the past. Dr. Petrelli asked the committee for approval of these changes. The committee approved the changes and suggestions.

Dr. Petrelli asked Dr. Spellman to provide feedback on Goal 4: for the the All payers claim and two upcoming projects. Dr. Grubbs project on Lung cancer CT data set and difficulty to upload that into database for alter extraction. They do have registries but then there is freestanding centers as well and are having a little bit of difficulty in getting it up to speed. It has been difficult to analyze that information. Financial assistance or help is pending to help develop an easier way of developing a database for all of this information, so that the input and outtake is more efficient. Furthermore, the second project has to do with the effects on COVID for screening and diagnosis. Dr. Sawhney believes these are great projects to work on.

**Review of Executive Plan**

Objective 1A was changed. Ms. Ross explained that this initiative is where they are taking a lot of the Pathology Laboratories and putting them on a cloud platform for electronic reporting. The cancer registry will be a part of, and might involve some cloud reporting. For Strategy 2, Dr. Petrelli, wanted to discuss (Quality Oncology Practice Initiative (QOPI). Dr. Petrelli inquired with the physicians if they have switched to QOPI certification. Beebe Health has switched to QOPI. Dr. Sawhney mentioned BayHealth is not QOPI certified due to redundancy with the certification they have with Penn Medicine. These changes will be reflected in the execution plan.

Dr. Petrelli asked Dr. Spellman if he would like to keep Objective 2C: *All Payers Claims Database*, Dr. Spellman asked to keep it on the agenda with the Advisory Council next. Dr. Petrelli asked Sumitha to elaborate on the Objective 2B: *Share DCR data with My Healthy Community to make data more accessible to public*. My healthy Community portal, is a way to access public data for the general population. My Heathy Delaware would like the Registry data. Sumitha has provided all site incidence and mortality data for 2012-2016. Data so for now it's just the all site incidents and mortality data they do have different parameters that they were using. They follow the parameters that are in current event reporting. Dr. Petrelli, asked Sumitha to give a presentation on the My Healthy Community to the committee in the next meeting, Sumitha agreed. Objective 5A *Ensure use of cancer registry data for public health & surveillance research purposes in at least 5 of the following ways* listed will be discussed at the end of the year. Once new data is available for 2021 the committee will review it next year to update the results.

**Sharing Time**

No items discussed.

**Public Comment**

Dr. Petrelli reminded the members of the Incidence and Mortality Report presentation at 12 pm, Dr. Petrelli will provide link to presentation.

**Adjournment**

The meeting adjourned at or about 11:00 am.

**Future Meetings**

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| **Next Meeting:** | **Upcoming Meetings:** |