ATTACHMENT 6

NPCR Program Evaluation
2015 Results Web Display

Program Evaluation Instrument (PEI) Report for Survey Year 2015

Awardee | Logout

New Report Criteria   Revise Report Criteria   Print

National Report

Staffing

1.   On December 31, 2014, how many total FTE central cancer registry (CCR) staff positions were funded? In this table, you may include positions outside the registry; ONLY IF the registry pays a portion of the salary. Remember to use the calculation method above when computing partial FTEs.

Funding Category	Total Count FTEs	
	Filled	Vacant
	National Median (Range)	National Median (Range)
NPCR-funded non-contract FTEs	5.5 (0.1 - 20.1)	0.0 (0.0 - 3.0)
NPCR-funded contract FTEs	0.0 (0.0 - 14.2)	0.0 (0.0 - 4.0)
State-funded non contract FTEs	1.9 (0.0 - 26.5)	0.0 (0.0 - 9.0)
State-funded contract FTEs	0.0 (0.0 - 31.8)	0.0 (0.0 - 1.0)
Other funded non-contract FTEs	0.0 (0.0 - 17.0)	0.0 (0.0 - 3.0)
Other funded contract FTEs	0.0 (0.0 - 90.3)	0.0 (0.0 - 2.5)
Totals	10.8 (4.0 - 147.0)	1.0 (0.0 - 10.0)
	Total Respondents: 48	

2. Please complete this table with the number of FTEs who work in the capacity of the position titles listed. In this table, include both filled and vacant, as well as time contributed by non-registry staff (e.g. chronic disease epidemiologist), regardless of funding in your total FTE count. So, if a position is vacant, it still counts as a position. Remember to use the same FTE calculation method as described above. Please note CTR credentials may be held by several registry positions and should be counted accordingly.

Position (FTE or percentage of FTE)	Total Count FTEs	
	Non Contractor	Contractor
	National Median (Range)	National Median (Range)
Principal Investigator	0.1 (0.0 - 1.0)	0.0 (0.0 - 2.3)
Program Director	0.5 (0.0 - 1.0)	0.0 (0.0 - 2.0)
Registry Administrator	0.0 (0.0 - 1.0)	0.0 (0.0 - 2.3)
Program Manager	0.4 (0.0 - 6.0)	0.0 (0.0 - 4.8)
Budget Analyst	0.1 (0.0 - 1.0)	0.0 (0.0 - 3.5)
CTR Quality Control Staff	1.8 (0.0 - 16.0)	0.0 (0.0 - 33.0)
Non-CTR Quality Control Staff	0.0 (0.0 - 15.0)	0.0 (0.0 - 12.5)

CTR Education /Training Staff	0.5 (0.0 - 2.0)	0.0 (0.0 - 2.5)
Epidemiologists	1.0 (0.0 - 6.9)	0.0 (0.0 - 9.3)
Statisticians	0.2 (0.0 - 4.0)	0.0 (0.0 - 6.8)
Computer / IT / GIS Specialists	0.4 (0.0 - 8.0)	0.0 (0.0 - 26.8)
Other staff	1.0 (0.0 - 27.3)	0.0 (0.0 - 39.3)
Total Number of Staff	10.4 (0.1 - 55.8)	0.4 (0.0 - 144.8)
Total Number CTRs (of total number of staff)	3.5 (0.0 - 24.0)	0.0 (0.0 - 67.0)
	Total Respondents: 48	

Legislative Authority

3. Does your state/territory have current legislation or regulations in support of all 8 criteria of the Public Law authorizing the NPCR? (Program Standard I.b.)

National (Yes) Percentage (Count)
100.0% (48)

4a. Does your state/territory's current law/regulation include any penalties regarding reporting compliance as mandated by current legislation or regulations? (Program Standard I. a.) (If "No", skip to 4d)

National (Yes) Percentage (Count)
66.7% (32)

4b. If "Yes", in which law/regulations are the penalties included? (Check only one):

	National Percentage (Count)
Cancer-specific reporting law/regulations	46.9% (15)
General public health law/regulations	34.4% (11)
Both	18.8% (6)
None of the above	
Total Respondents: 48	

4c. If "Yes" to 4a, have you had to impose the penalty?

National (Yes) Percentage (Count)
12.5% (4)

4d. Have any law/regulations been revised to address cancer reporting in the past two years?

National (Yes) Percentage (Count)
16.7% (8)

5a. With passage of Public Law 107-260 (the Benign Brain Tumor Cancer Registry Amendment Act), NPCR-funded registries are required to collect data on benign brain tumors beginning in diagnosis year 2004. Do regulations or legislation in your state or territory authorize you to collect data on benign brain tumors?

National (Yes) Percentage (Count)
100.0% (48)

6. Does your state or territory have legislation or regulations prohibiting you from reporting county level data?

National (Yes) Percentage (Count)

4.2% (2)

7. Does your state law/regulations protect your cancer registry data from the Freedom of Information Act (FOIA)?

National (Yes) Percentage (Count)
77.1% (37)

8a. Does your state law/regulations protect your cancer registry data from subpoena?

National (Yes) Percentage (Count)
68.8% (33)

8b. If "No", are data received through interstate data exchange protected from subpoena?

National (Yes) Percentage (Count)
13.3% (2)

Administration

9.   Does your CCR maintain an operational manual that describes registry operations, policies and procedures that, at a minimum, contains the following? (Program Standard II.a.) Check all that apply

	National (Yes) Percentage (Count)
Reporting laws/regulations	100.0% (48)
List of reportable diagnoses	100.0% (48)
List of required data items	100.0% (48)
Data processing operational procedures for (check all that apply):	
a. Monitoring timeliness of reporting	97.9% (47)
b. Receipt of data	100.0% (48)
c. Database management including description of the registry operating system(software).	100.0% (48)
d. Conducting death certificate clearance	100.0% (48)
Procedures for Implementing and maintaining a quality assurance/control program including (check all that apply, e-h)	
e. Conducting follow-back to reporting facilities on quality assurance issues	100.0% (48)
f. Conducting record consolidation	95.8% (46)
g. Maintaining detailed documentation of all quality assurance operations	89.6% (43)
h. Education and Training	91.7% (44)
Procedures for conducting data exchange including a list of states with which case-sharing agreements are in place	100.0% (48)
Procedures for conducting data linkages	93.8% (45)
Procedures for ensuring confidentiality and data security including disaster planning	91.7% (44)
Procedures for data release including access to and disclosure of information	95.8% (46)
Procedures for maintaining and updating the operational manual	91.7% (44)
	Total Respondents: 48

10. Does your CCR produce reports that are used to monitor the registry operations and database, including processes and activities? (Program standard II. b) (Check all that apply)

National (Yes) Percentage (Count)

Quality control report (central registry)	87.5% (42)
Quality control reports for each facility	81.3% (39)
Data completeness report for each facility	89.6% (43)
Timeliness of data report for each facility	83.3% (40)
Data workflow report	66.7% (32)
All of the above	45.8% (22)
Other	14.6% (7)
None of the above	2.1% (1)
Total Respondents: 48	

11. Does your CCR have an abstracting and coding manual that is provided for use by all reporting sources? (Program Standard II.c)

National (Yes) Percentage (Count)
93.8% (45)

Reporting Completeness

12a. Hospital and Pathology Laboratory Reporting:

Please list the number, by type, that are required to report and the number that were compliant with reporting at the end of 2014. Also report the number reporting electronically. (e.g. in a standardized format that minimizes the need for manual data entry.)

- **"Hospital cancer registry" is defined as one (single or joint institution) that collects data to be used internally and that would continue to do so regardless of the central cancer registry requirements to collect and report cancer data.**
- **For those types of Hospitals and Pathology Labs which are not applicable to your state/territory (e.g., IHS Hospitals), record zero (0) in "Number Required to Report" and record zero (0) in "Number Compliant with Reporting". In these instances, "Number Reporting Electronically" should also be recorded as zero (0). (Program Standards V c-d, IV b-c)**

Facilities Required to Report Cancer Cases by Type	Number Required to Report (Denominator)	Number Compliant with Reporting* at the end	Number Reporting Electronically 2014**
Hospital			
	National	National Total	National Total
		# (%)	# (%)
Hospitals with a cancer registry (non-federal)	(0 - 155)	2104 (99.1)	2113 (99.5)
Hospitals without a cancer registry (non-federal)	(0 - 410)	2456 (92.6)	1988 (74.9)
VA Hospitals	(0 - 13)	72 (54.1)	76 (57.1)
IHS Hospitals	(0 - 10)	20 (55.6)	21 (58.3)
Tribally Owned Hospitals	(0 - 41)	8 (12.1)	8 (12.1)
Pathology Laboratories			
In-State Independent Pathology Laboratories	(0 - 444)	1058 (76.7)	783 (56.7)
Out-of-State Independent Pathology Laboratories	(0 - 195)	823 (91.9)	619 (69.1)

Other Pathology Laboratories	(0 - 34)	82 (100.0)	28 (34.1)
		Total Respondents: 48	

* Those facilities that report -not only those reporting in a timely manner
**Electronic Reporting is the collection and transfer of data from source documents by
hospitals, physician offices, clinics or laboratories in a standardized, coded format that does not
require manual data entry at the Central Cancer Registry (CCR) level to create an abstracted record
Although these groups are not required to report in accordance with state law, please
indicate the number of known facilities that diagnose or treat cancer for residents of your state.

12b. Physician Reporting:

The NPCR Program Standard for physician reporting focuses on annually increasing the number reporting to the CCR. The NPCR Physician Reporting document provides guidance on how to count physician reporting. In the table below, please provide the baseline number of physician specialties that were reporting at the end of 2014 (column b.). In column d. record the number of physician specialties from column b. that are reporting electronically.

CCRs may use the Practice Method, Physician Method or a combination of the two (see definition below). For example, you may count Hematology using the Practice Method (2 practices) but for Dermatology use the Physician Method (10 physicians). However you may not count the Hematology Practice (2 practices) and then count the physicians in those practices again in the Individual Physician section.

Counting physician reporting is not an exact science; however, CCRs should use a consistent methodology. If the CCR is unable to determine whether a physician is reporting on behalf of a practice, count the reporting source as an individual physician. If the type of physician is unknown, group the physician into an "Other" category

Physician Group (Center/Clinics/Practices) - Use this top section to report specialty physicians counted using the Practice Method****			
a. Physician Specialty	**Number reporting* at the end of 2014**	**Number currently Reporting****	**Number reporting Electronically****
	National (Range)	**National Total (Pct)**	**National Total (Pct)**
		# (%)	**# (%)**
Surgery	(0 - 226)	0 (0.0)	552 (52.8)
Independent Radiation Therapy	(0 - 59)	0 (0.0)	204 (66.4)
Hematology	(0 - 133)	0 (0.0)	111 (64.2)
Medical Oncology	(0 - 41)	0 (0.0)	161 (59.9)
Urology	(0 - 36)	0 (0.0)	151 (51.0)
Dermatology	(0 - 124)	0 (0.0)	475 (53.6)
Gastroenterology	(0 - 25)	0 (0.0)	68 (38.0)
Other	(0 - 258)	0 (0.0)	736 (63.5)
Individual Physicians - Use this lower section to report specialty physicians counted using the Individual Physician Method****			
Radiation Oncologists	(0 - 219)	0 (0.0)	0 (0.0)
Medical Oncologists	(0 - 369)	0 (0.0)	398 (49.2)
Urologists	(0 - 342)	0 (0.0)	402 (38.0)
Dermatologists	(0 - 634)	0 (0.0)	780 (42.1)
Gastroenterologists	(0 - 187)	0 (0.0)	14 (3.9)

Surgeons	(0 - 510)	0 (0.0)	30 (3.6)
Hematologists	(0 - 102)	0 (0.0)	4 (1.9)
Others	(0 - 1187)	0 (0.0)	137 (4.3)
			Total Respondents: 48

*Surgeons that diagnose or treat patients in the office
**Those facilities that report -not only those reporting in a timely manner
***Electronic Reporting is the collection and transfer of data from source documents by hospitals, physician offices, clinics or laboratories in a standardized, coded format that does not require manual data entry at the Central Cancer Registry (CCR) level to create an abstracted record.
****Practice Method: Each specialty practice is counted as a single reporting source without consideration for the number of physicians in the practice.
****Individual Physician Method: Each individual specialty physicians is counted as a single reporting source

13. Do you require that non-analytic (classes 30-37) cases be reported to your CCR?

National (Yes) Percentage (Count)
89.6% (43)

14a. Do you receive data from the Department of Defense's Automated Central Tumor Registry (ACTUR) dataset? (If "No," skip to 14d):

National (Yes) Percentage (Count)
20.8% (10)

14b. If "Yes", how often? Please check only one.

	National Percentage (Count)
Every quarter	
Every 6 months	40.0% (4)
Once/year	40.0% (4)
Other	20.0% (2)
Total Respondents: 48	

14c. If "Yes" for 14a, have these data proven to be helpful in finding new incident cases?

National (Yes) Percentage (Count)
100.0% (10)

14d. If "No" for 14a, why not? Check all that apply.

	National (Yes) Percentage (Count)
Data are incomplete.	7.9% (3)
Data are not in the proper format for us to consolidate with existing records.	5.3% (2)
We don't have time to deal with it.	13.2% (5)
Other	89.5% (34)
Total Respondents: 48	

15. How many VA facilities currently report your CCR indirectly from the VA central cancer registry in Washington, DC?

National (Range)
(0 - 26)

16. Based on historical data, how many cases per diagnosis year do you estimate are missed (i.e., not ever received) by your CCR because of non-reporting by VA facilities?

National (Range)
(0 - 5000)

17. How many providers have contacted you regarding meaningful use?

National (Range)
(0 - 1833)

17a. Of those who have contacted you, how many have signed on/initiated* the Meaningful Use process with your registry?

National (Range)
(0 - 1266)

17b. Of those who have contacted you, how many are reporting data to you?**

National (Range)
(0 - 44)

*This would include:
1) Providers that have indicated plans to report to you once the Stage 2 MU reporting period begins in 2014; and
2) Providers that have begun working with you to test their data submissions (also known as "on-boarding")
**This number should represent providers that are reporting live, production level data to you for MU (i.e., they are in
"ongoing submission" as defined by MU).

Data Exchange

18. Does your CCR use and require the following standardized, CDC-recommended data formats for the electronic exchange of cancer data from reporting sources (Program Standards IV a.):

18a. Hospital Reports (The NAACCR record layout version specified in Standards for Cancer Registries Volume II: Data Standards and Data Dictionary)?

National (Yes) Percentage (Count)
97.9% (47)

18b. Pathology reports (NAACCR Standards for Cancer Registries Volume V: Pathology Laboratory Electronic Reporting)?

	National Percentage (Count)
Yes	75.0% (36)
No	12.5% (6)
Not Applicable	12.5% (6)
Total Respondents: 48	

18c. Ambulatory healthcare providers using electronic health records (Implementation Guide for Ambulatory Healthcare Provider Reporting to Central Cancer Registries)

National

	Percentage (Count)
Yes	33.3% (16)
No	20.8% (10)
Not Applicable	45.8% (22)
Total Respondents: 48	

19. Do your exchanged data meet the following minimum criteria? (Program Standards V.d.):

19a. Within 12 months of the close of the diagnosis year, your CCR exchanges that year's data with other central cancer registries where a data-exchange agreement is in place:

National (Yes) Percentage (Count)
95.8% (46)

19b. Your CCR collects data on all patients diagnosed and/or receiving first course of treatment in your registry's state/territory regardless of residency:

National (Yes) Percentage (Count)
97.9% (47)

19c. The recommended frequency of data exchange is at least two times per year. Your CCR exchanges data at the following frequency:

	National Percentage (Count)
Annually	14.6% (7)
Biannually (two times per year)	75.0% (36)
Other	10.4% (5)
Total Respondents: 48	

19d. Exchange agreements are in place with all bordering central cancer registries:

National (Yes) Percentage (Count)
85.4% (41)

19e. What type of records do you transmit for interstate exchange?

	National Percentage (Count)
Consolidated cases	43.8% (21)
Source records with text	52.1% (25)
Source records without text	4.2% (2)
Total Respondents: 48	

19f. NPCR core data items are included in the dataset submitted to other states:

National (Yes) Percentage (Count)
97.9% (47)

19g. 99% of data submitted to other states passes an NPCR-prescribed set of standard edits:

National (Yes) Percentage (Count)
95.8% (46)

19h. Exchanged data are transmitted via a secure encrypted Internet-based system:

National (Yes) Percentage (Count)
97.9% (47)

19i. The standardized, NPCR-recommended data exchange format is used to transmit data reports (The current NAACCR record layout version specified in Standards for Cancer Registries Volume II: Data Standards and Data Dictionary):

National (Yes) Percentage (Count)
97.9% (47)

20. What type of secure encrypted Internet-based system is used?

	National (Yes) Percentage (Count)
PHINMS	39.6% (19)
Secure FTP	68.8% (33)
WebPlus	72.9% (35)
HTTPS	22.9% (11)
N-IDEAS	41.7% (20)
Secure encrypted e-mail	35.4% (17)
Other	6.3% (3)
Total Respondents: 48	

Data Content And Format

21. Does your CCR collect or derive all required data items using standard codes as prescribed by NPCR? (See Chapter VIII, Required Status, NAACCR, vol 2, http://www.naaccr.org/LinkClick.aspx? fileticket=EEnPpGkO0Jc%3d&tabid=133&mid=473)

National (Yes) Percentage (Count)
100.0% (48)

22. Is your CCR able to receive secure, encrypted cancer abstract data from reporting sources via the Internet?

	National Percentage (Count)
Yes	95.8% (46)
Currently being developed and/or implemented	2.1% (1)
No, not able to receive	2.1% (1)
No, able to receive, but not receiving	
Total Respondents: 48	

23a. What is the primary software system used to process and manage cancer data in your CCR? Please check only one:

	National Percentage (Count)
Commercial Vendor	37.5% (18)
In-House Software	18.8% (9)
Registry Plus	43.8% (21)
Total Respondents: 48	

23b. Which of the following Registry Plus programs do you use (check all that apply):

	National (Yes) Percentage (Count)
Abstract Plus	47.9% (23)
Prep Plus	50.0% (24)
CRS Plus	47.9% (23)
Link Plus	85.4% (41)
Web Plus	66.7% (32)
eMaRC Plus	83.3% (40)
All of the above	14.6% (7)
None of the above	2.1% (1)
Total Respondents: 48	

Data Quality Assurance

24.   Please respond to each of the following statements to describe your CCR's quality assurance program: (Program Standard VII a)

	National (Yes) Percentage (Count)
A designated CTR is responsible for the quality assurance program	97.9% (47)
Qualified, experienced CTRs conduct quality assurance activities	97.9% (47)
At least once every 5 years, case-finding and/or re-abstracting audits from a sampling of source documents are conducted for each hospital-based reporting facility. This may include external audits (NPCR/SEER)	89.6% (43)
Data consolidation procedures are performed according to an accepted protocol	100.0% (48)
Procedures are performed for follow-back to reporting facilities on quality issues	93.8% (45)
Total Respondents: 48	

25. Does your CCR have a designated education/training coordinator, who is a CTR, to provide training to CCR staff and reporting sources to ensure high quality data? (Program Standard VII.b 2.)

National (Yes) Percentage (Count)
91.7% (44)

26. In the past year, which of the following type of quality control audits or activities did your CCR conduct?

	National (Yes) Percentage (Count)
Casefinding	81.3% (39)
Re-abstracting	58.3% (28)
Re-coding	66.7% (32)
Visual editing	95.8% (46)
Total Respondents: 48	

27a. Does your CCR match all causes of death against your registry data to identify a reportable cancer?

National (Yes) Percentage (Count)
95.8% (46)

27b. Does your CCR match by tumor (site/histology) and not just by patient identifying information?

National (Yes)

Percentage (Count)
79.2% (38)

28a. Does your CCR update the CCR database following death certificate matching:

	National (Yes) Percentage (Count)
Death information	100.0% (48)
Missing demographic information	93.8% (45)
Total Respondents: 48	

28b. If "Yes", what percentage(s) of the updates are performed manually or electronically? (Provide best estimate; may be some overlap between automation and manual review.)

	Manually	Electronically
	National Percentage (Range)	National Percentage (Range)
Death information	0.0 (0 - 100)	0.0 (0 - 100)
Demographic information	0.0 (0 - 100)	0.0 (0 - 100)
Total Respondents: 48		

29. Does your CCR perform record consolidation on the following:

	Electronic	Manual	Both	Neither
	National (Yes) Percentage (Count)	National (Yes) Percentage (Count)	National (Yes) Percentage (Count)	National (Yes) Percentage (Count)
Patient data group	6.3% (3)	10.4% (5)	83.3% (40)	0.0% (40)
Treatment data group	10.4% (5)	16.7% (8)	72.9% (35)	0.0% (35)
Follow-up data group	10.4% (5)	6.3% (3)	64.6% (31)	0.0% (31)
Total Respondents: 48				

30a. Does your CCR provide an edit set to your reporting facilities and/or vendors for use prior to data submissions to your CCR?

National (Yes) Percentage (Count)
70.8% (34)

30b. If "Yes", are facilities required to run prescribed edits prior to their data submission to your CCR?

National (Yes) Percentage (Count)
62.5% (30)

30c. Does your CCR have an established threshold for percent of records passing edits on incoming submissions?

National (Yes) Percentage (Count)
62.5% (30)

30d. If "Yes" what is the threshold?

	National Percentage (Count)
100%	43.3% (13)
90% or greater	53.3% (16)
80% or greater	3.3% (1)
Less than 80%	

Total Respondents: 48

Data Use

31. Within 12 months of the end of the diagnosis year with data that are 90% complete, did your CCR calculate incidence count or rates in an electronic data file or report for the diagnosis year for Surveillance Epidemiology and End Results (SEER) site groups as a preliminary monitor of the top cancer sites within your state/territory? (Program Standard VIII.a.)

National (Yes) Percentage (Count)
62.5% (30)

32a. Within 24 months of the end of the diagnosis year with data that are 95% complete, did your CCR calculate incidence rates and counts in an electronic data file or report? (The report should include, at a minimum, age-adjusted incidence rates and age-adjusted mortality rates for the diagnosis year by sex for SEER site groups, and, where applicable, by sex, race, ethnicity, and geographic area). (Program Standard VIII.b.)

National (Yes) Percentage (Count)
93.8% (45)

32b. Within 24 months of the end of the diagnosis year with data that are 95% complete, does the CCR create biennial reports providing data on stage and incidence by geographic area with an emphasis on screening-amenable cancers and cancers associated with modifiable risk factors (e.g., tobacco, obesity, HPV).

National (Yes) Percentage (Count)
85.4% (41)

32c. If yes, indicate what information was included in the report.

	National (Yes) Percentage (Count)
Screening-amenable Cancers	100.0% (41)
Tobacco-related Cancers	92.7% (38)
Obesity-related Cancers	78.0% (32)
HPV-related Cancers	75.6% (31)
All the above	58.5% (24)
Other	2.4% (1)
Total Respondents: 48	

33a. What is the most current diagnosis year a data file or report is available to the public?

	National Percentage (Count)
Before 1990	
1990	
1991	
1992	
1993	
1994	
1995	
1996	
1997	

1998	
1999	
2000	
2001	
2002	
2003	
2004	
2005	
2006	
2007	
2008	
2009	
2010	6.3% (3)
2011	14.6% (7)
2012	66.7% (32)
2013	12.5% (6)
2014	
Total Respondents: 48	

33b. In what format is this report available? (Check all that apply)

	National (Yes) Percentage (Count)
Hard copy	25.0% (12)
Electronic word-processed file	68.8% (33)
Web page/query system	75.0% (36)
Total Respondents: 48	

34a. Has the CCR, state health department, or its designee used registry data for planning and evaluation of cancer control objectives in at least three of the following ways in the past year? (Program Standard VIII.c.)

- Comprehensive cancer control detailed incidence/mortality estimates
- Detailed incidence/mortality by stage and geographic area
- Collaboration with cancer screening programs for breast, colorectal, or cervical cancer
- Health event investigation(s)
- Needs assessment/program planning (e.g., Community Cancer Profiles)
- Program evaluation
- Epidemiologic studies

National (Yes) Percentage (Count)
100.0% (48)

34b. If "Yes", indicate the number of times data was used for each category in the table below:

	National (Yes) Average (Range)
Comprehensive cancer control: Number per Year	11.5 (0 - 83)
Detailed incidence/mortality estimates: Number per Year	14.1 (0 - 129)
Collaboration with cancer screening programs for breast, colorectal, or cervical cancer	5.4 (0 - 40)
Health event investigation(s): Number per Year	9.5 (0 - 64)

Needs assessment/program planning: Number per Year	11.8 (0 - 92)
Program evaluation: Number per Year	4.0 (0 - 50)
Epidemiologic studies: Number per Year	11.2 (0 - 79)
Other, describe: Number per Year	303.0 (1 - 4089)
Total Respondents: 48	

35a. Have any of the above uses of data been included in a journal publication in the last two years (1/1/11-12/31/12)?

National (Yes) Percentage (Count)
54.2% (26)

35b. If "Yes", please list the citation(s) in the space provided:

36.   During the past year, for which areas of registry data utilization did your CCR acknowledge CDC-NPCR funding, as required in the Notice of Cooperative Agreement Award? Check all that apply:

	National (Yes) Percentage (Count)
Publications (e.g.; journal articles, annual report, other reports)	87.5% (42)
Web site	81.3% (39)
Presentations, posters	85.4% (41)
Release of data	54.2% (26)
Education meeting, training program, conference	85.4% (41)
Press releases, statements	25.0% (12)
Requests for proposals, bid solicitations	16.7% (8)
None	
Other	8.3% (4)
Total Respondents: 48	

37. Does your CCR use United States Cancer Statistics (USCS) data when performing comparative analyses?

National (Yes) Percentage (Count)
70.8% (34)

Collaborative Relationships

38a. Does your CCR actively collaborate with your state/territory's comprehensive cancer prevention and control (CCC) planning efforts, including establishing a working relationship to ensure the use of registry data to assess and implement cancer control activities? (Program Standards X.a-c.)

National (Yes) Percentage (Count)
100.0% (48)

38b. If "Yes", please check all of the ways you collaborate with CCC:

	National (Yes) Percentage (Count)
Member of the Program Management, Leadership, and Coordination Team (Component 1)	77.1% (37)
Member of our state/territory's comprehensive cancer control (CCC) planning group (coalition, committee, or workgroup)	93.8% (45)
Provide data for CCC planning and/or	97.9% (47)

Provide data for CCC activities	97.9% (47)
Provide technical assistance and collaborate on data analyses for CCC program publications	95.8% (46)
Regular meetings with CCC departmental staff	87.5% (42)
Provides subject matter expertise to CCC	95.8% (46)
Data linkages	54.2% (26)
All of the above	37.5% (18)
Other	8.3% (4)
None	
	Total Respondents: 48

39a. Has your CCR established and regularly convened an advisory committee to assist in building consensus, cooperation, and planning for the registry? (Advisory committee structures may include a CCC program committee or an advocacy group). (Program Standard X.c.)

National (Yes) Percentage (Count)
75.0% (36)

39b. If "Yes", the Advisory Committee includes representation from (Check all that apply):

	National (Yes) Percentage (Count)
Representatives from all cancer prevention and control components:	43.8% (21)
Vital Statistics	16.7% (8)
Hospital cancer registrars	45.8% (22)
American Cancer Society	47.9% (23)
Clinical-laboratory personnel	14.6% (7)
Pathologists	33.3% (16)
Clinicians	64.6% (31)
Researchers	64.6% (31)
Oncologists	56.3% (27)
American College of Surgeons	27.1% (13)
All of the above	2.1% (1)
Other	31.3% (15)
	Total Respondents: 48

39c. If you have an Advisory Committee, how often does this group convene, including in-person and teleconferences? Check only one :

	National Percentage (Count)
Quarterly	22.9% (11)
Annually	12.5% (6)
Biannually	12.5% (6)
Other	52.1% (25)
Total Respondents: 48	

40. In what ways does your CCR collaborate with your state's National Breast and Cervical Cancer Early Detection Program (NBCCEDP) and National Comprehensive Cancer Control Program (NCCCP)? Check all that apply:

	National (Yes)

	Percentage (Count)
Provides assistance in staging NBCCEDP cases	64.6% (31)
Regular meetings with NBCCEDP departmental staff	66.7% (32)
Provides training/technical assistance to NBCCEDP staff	64.6% (31)
Provides data to NBCCEDP	97.9% (47)
Provides technical material for publications to NBCCEDP	54.2% (26)
Provides subject matter expertise to NBCCEDP	79.2% (38)
Data linkages (NBCCEDP database, Minimum Data Elements (MDE) Study	100.0% (48)
All of the above	27.1% (13)
Other	4.2% (2)
None of the above	
Total Respondents: 48	

41. With which chronic disease programs does your CCR collaborate?

	National (Yes) Percentage (Count)
Tobacco Control	79.2% (38)
Oral Health	58.3% (28)
Diabetes	39.6% (19)
Physical Activity and Nutrition/Obesity	58.3% (28)
Radiation Control	27.1% (13)
Environmental Health	72.9% (35)
Infectious disease (HIV/AIDS, HPV, hepatitis)	66.7% (32)
All of the above	8.3% (4)
Other	12.5% (6)
Total Respondents: 48	

Advanced Activities

42.   If your CCR receives electronic pathology reports, in which format are these received? (Check all that apply.)

	National (Yes) Percentage (Count)
NAACCR, HL7 Format (Volume V), Version 2.x	81.3% (39)
NAACCR, Pipe Delimited Format (Volume V), Version 2.x	31.3% (15)
NAACCR, HL7 Format (NAACCR Volume II, Version 11, Chapter VI)	12.5% (6)
NAACCR, Pipe Delimited Format (NAACCR Volume II, Version 10,Chapter VI)	4.2% (2)
Other	20.8% (10)
Not applicable	10.4% (5)
Total Respondents: 48	

43. What method is used to identify reportable conditions from pathology lab reports:

	National Percentage (Count)
Manual Review	25.0% (12)
Search routine based on NAACCR search term list	4.2% (2)

Both manual and search routine	70.8% (34)
Other	
	Total Respondents: 48

44. **For which of the following cancer surveillance needs has your CCR been in contact with your Health Department's PHIN / NEDSS staff? Check all that apply.**

	National (Yes) Percentage (Count)
Pathology laboratory reporting	72.9% (35)
Physician disease reporting	45.8% (22)
Other healthcare data reporting	12.5% (6)
None of the above	22.9% (11)
	Total Respondents: 48

45. Does your CCR conduct at least one of the following advanced activities? Check all that apply

	National (Yes) Percentage (Count)
Survival analysis	54.2% (26)
Quality of care studies	33.3% (16)
Clinical Studies	14.6% (7)
Publication of research studies using registry data	62.5% (30)
Geo-coding to latitude and longitude to enable mapping	89.6% (43)
Other healthcare data reporting. Describe:	16.7% (8)
Other innovative uses of registry data such as Survivorship Care Plan. Describe	18.8% (9)
None of the above	2.1% (1)
	Total Respondents: 48

46a. Does your registry have a system in place for early case capture (rapid case ascertainment)?

National (Yes) Percentage (Count)
35.4% (17)

46b. If 'Yes" is early case capture performed for:

	National (Yes) Percentage (Count)
All cases	10.4% (5)
Subset of cases (eg. Pediatric)	16.7% (8)
Special Studies	18.8% (9)
	Total Respondents: 48

47a. How often does your CCR link to the National Death Index (NDI)? Please check only one. (If Never, skip to question 48.):

	National Percentage (Count)
Every year	52.1% (25)
Every other year	18.8% (9)
Every 3 - 5 years	8.3% (4)
Never	8.3% (4)
Other	12.5% (6)

47b. For which of the following has the NDI linkage proven to be useful? Check all that apply:

	National (Yes) Percentage (Count)
Survivorship	66.7% (32)
Data quality	70.8% (34)
Research	54.2% (26)
Other	6.3% (3)
Not applicable	
Total Respondents: 48	

47c. Does your CCR update your database following NDI linkage?

	National Percentage (Count)
Yes	87.5% (42)
No	
Not Applicable	4.2% (2)
Total Respondents: 48	

48.   With which databases did your CCR link its records in 2014 for follow-up or some other purpose? Check all that apply.

	National (Yes) Percentage (Count)
State Vital Statistics	100.0% (48)
National Death Index	66.7% (32)
Department of Motor Vehicles	20.8% (10)
Department of Voter Registration	10.4% (5)
Indian Health Service	68.8% (33)
Medicare (Health Care Financing Administration)	20.8% (10)
Medicare Physician Identification and Eligibility Registry	2.1% (1)
Medicaid	14.6% (7)
CDC's National Breast and Cervical Cancer and Early Detection Program	85.4% (41)
CDC's National Colorectal Cancer Screening Program	35.4% (17)
Insurance Claim Databases (Ex.: BC&BS, Kaiser, Managed Care Organization, fee for service etc.)	8.3% (4)
Hospital Discharge	39.6% (19)
Hospital Radiation Therapy Dept	2.1% (1)
Hospital Disease Indices	33.3% (16)
Other	27.1% (13)
None	
Total Respondents: 48	

49. In a given calendar year, what percentage of your total pathology reports (both electronic and paper) received was sent by the following independent laboratories? (Estimates acceptable if exact % not available, must add up to 100%)

	National (Yes) Median (Range)
Laboratory Corporation of America (LabCorp):	2.7 (0.0 - 59.4)

Quest Diagnostics:	0.2 (0.0 - 60.3)
Bostwick Laboratories:	1.0 (0.0 - 50.0)
Mayo Laboratories:	0.0 (0.0 - 13.2)
Bioreference	0.2 (0.0 - 16.0)
GI Pathology	0.4 (0.0 - 28.0)
AmeriPath	1.0 (0.0 - 48.0)
Clarent	0.0 (0.0 - 51.5)
Miraca Labs	0.5 (0.0 - 17.2)
CBL Path	0.0 (0.0 - 24.1)
Other	22.8 (0.0 - 99.0)
Local:	5.0 (0.0 - 97.0)
	Total Respondents: 48

Contact Info

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