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## Program Evaluation Instrument (PEI) Report for Survey Year 2018

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### National Report

#### Staffing

1. On December 31, 2017, 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)
Number of NPCR-funded (non-contracted) FTE positions	4.00 (0.00 - 19.00)	0.00 (0.00 - 3.00)
Number of NPCR-funded, contracted FTE positions	0.00 (0.00 - 15.10)	0.00 (0.00 - 2.00)
Number of State-funded (non contracted) FTE positions	1.40 (0.00 - 25.00)	0.00 (0.00 - 9.30)
Number of State-funded, contracted FTE positions	0.00 (0.00 - 33.70)	0.00 (0.00 - 1.00)
Number of non contracted FTE positions funded by other sources	0.00 (0.00 - 18.80)	0.00 (0.00 - 1.00)
Number of contracted FTE positions funded by other sources	0.00 (0.00 - 80.10)	0.00 (0.00 - 0.50)
Totals	9.20 (1.30 - 136.00)	1.00 (0.00 - 12.30)
<b>Total Respondents: 50</b>		

**2. Please indicate number of FTEs in the positions listed below. Please 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. Use the FTE calculation method as described previously. 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	0.00 (0.00 - 1.00)	0.00 (0.00 - 2.70)
Program Director	0.50 (0.00 - 1.00)	0.00 (0.00 - 2.50)
Program Manager	0.50 (0.00 - 6.00)	0.00 (0.00 - 2.90)
Budget Analyst	0.10 (0.00 - 1.00)	0.00 (0.00 - 2.70)
CTR Quality Control Staff	2.00 (0.00 - 17.00)	0.00 (0.00 - 40.50)
Non-CTR Quality Control Staff	0.10 (0.00 - 18.00)	0.00 (0.00 - 3.00)
CTR Education /Training Staff	0.80 (0.00 - 2.00)	0.00 (0.00 - 3.00)
Epidemiologists	0.80 (0.00 - 4.90)	0.00 (0.00 - 9.60)
Statisticians	0.00 (0.00 - 4.00)	0.00 (0.00 - 3.10)
Computer / IT / GIS Specialists	0.30 (0.00 - 6.30)	0.00 (0.00 - 20.00)
Other staff	1.00 (0.00 - 24.30)	0.00 (0.00 - 40.20)
Total Number of Staff	9.20 (0.10 - 56.80)	0.00 (0.00 - 127.10)
Total Number CTRs (of total number of staff)	3.00 (0.00 - 21.00)	0.00 (0.00 - 59.00)
<b>Total Respondents: 50</b>		

### Legislative Authority

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

<b>National (Yes) Percentage (Count)</b>
24.0% (12)

### Administration

**4. Does your CCR maintain an operational manual that describes registry operations, policies and procedures that, at a minimum, contains the following? Check all that apply**

	<b>National (Yes) Percentage (Count)</b>
Reporting laws/regulations	100.0% (50)
List of reportable diagnoses	100.0% (50)
List of required data items	100.0% (50)
<b>Data processing operational procedures for (check all that apply):</b>	
a. Monitoring timeliness of reporting	94.0% (47)
b. Receipt of data	100.0% (50)
c. Database management including description of the registry operating system (software).	98.0% (49)
d. Conducting death certificate clearance	98.0% (49)
<b>Procedures for implementing and maintaining a quality assurance/control program including (check all that apply, e-h)</b>	
e. Conducting follow-back to reporting facilities on quality assurance issues	96.0% (48)
f. Conducting record consolidation	98.0% (49)
g. Maintaining detailed documentation of all quality assurance operations	94.0% (47)
h. Education and Training	88.0% (44)
Procedures for conducting data exchange including a list of states with which case-sharing agreements are in place	98.0% (49)
Procedures for conducting data linkages	90.0% (45)
Procedures for ensuring confidentiality and data security including disaster planning	98.0% (49)
Procedures for data release including access to and disclosure of information	100.0% (50)
Procedures for maintaining and updating the operational manual	92.0% (46)
<b>Total Respondents: 50</b>	

**5. Does your CCR produce reports that are used to monitor the registry operations and database, including processes and activities? (Check all that apply)**

	<b>National (Yes) Percentage (Count)</b>
Quality control report (central registry)	86.0% (43)
Quality control reports for each facility	72.0% (36)
Data completeness report for each facility	90.0% (45)
Timeliness of data report for each facility	82.0% (41)
Data workflow report	72.0% (36)
All of the above	52.0% (26)
Other	24.0% (12)
None of the above	2.0% (1)
<b>Total Respondents: 50</b>	

**6. Does your CCR have an abstracting and coding manual that is provided for use by all reporting sources?**

<b>National (Yes) Percentage (Count)</b>
90.0% (45)

### Reporting Completeness

#### 7. 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 2017. 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).

Facilities Required to Report Cancer Cases by Type	Number Required to Report (Denominator)	Number Compliant with Reporting* at the end of 2017*	Number Reporting Electronically**
	National (Range)	National Total (Pct) # (%)	National Total (Pct) # (%)
<b>Hospital</b>			
Hospitals with a cancer registry (non-federal)	(0 - 173)	1702 (95.4)	1653 (92.6)
Hospitals without a cancer registry (non-federal)	(0 - 423)	2393 (92.5)	2021 (78.1)
CoC Hospitals #	(0 - 108)	1204 (98.9)	1183 (97.2)
VA Hospitals #	(0 - 13)	65 (50.0)	86 (66.2)
IHS Hospitals #	(0 - 8)	12 (44.4)	8 (29.6)
Tribally Owned Hospitals #	(0 - 41)	3 (4.5)	2 (3.0)
<b>Pathology Laboratories</b>			
In-State Independent Pathology Laboratories	(0 - 897)	757 (38.7)	499 (25.5)
Out-of-State Independent Pathology Laboratories	(0 - 299)	745 (68.0)	475 (43.3)
Other Pathology Laboratories	(0 - 42)	165 (108.6)	107 (70.4)
<b>Total Respondents: 50</b>			
* 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.			

**8. Do you require that non-analytic (classes 30-38) cases be reported to your CCR?**

National (Yes) Percentage (Count)
88.0% (44)

**9. Do you receive data from the Department of Defense's Automated Central Tumor Registry (ACTUR) dataset? (If No, please skip to question 12)**

National (Yes) Percentage (Count)
12.0% (6)

**10. If Yes, how often? Check only one.**

	National Percentage (Count)
Quarterly	
Every six months	50.0% (3)
Annually	50.0% (3)
Other	

**11. If Yes, have these data proven to be helpful in finding new incident cases?**

National (Yes) Percentage (Count)
100.0% (6)

**12. If No, why not? Check all that apply.**

	National (Yes) Percentage (Count)
Data are incomplete.	2.3% (1)
Data are not in the proper format for us to consolidate with existing records.	2.3% (1)
We don't have time to deal with it.	15.9% (7)
Other	88.6% (39)

**13a. Do you receive data directly from the Veteran's Administration's cancer registries in your state?**

National (Yes) Percentage (Count)
62.0% (31)

**13b. How many VA facilities currently report your CCR indirectly from the VA central cancer registry in Washington, DC?**

National (Range)
(0 - 99)

**14. 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 - 4000)

**15a. Industrial or Occupational History Data**

**From what sources are you able to ROUTINELY collect information on industrial or occupational history (without seeking additional data sources for only these variables)? Check all that apply.**

	National (Yes) Percentage (Count)
Administrative records (e.g. billing or claims databases, or patient forms that are not part of the medical record)	4.0% (2)
Medical records	58.0% (29)
Death certificate linkages	60.0% (30)
Other	16.0% (8)
Do not collect information on industrial or occupational history	10.0% (5)
<b>Total Respondents: 50</b>	

**15b. Do you conduct any ADDITIONAL activities (e.g. linkages with external databases) to collect or improve upon industrial or occupational history information?**

	<b>National Percentage (Count)</b>
No	
Yes	8.0% (4)
Please describe:	
<b>Total Respondents: 50</b>	

**Data Exchange**

**16. Does your CCR use and require the following standardized, CDC-recommended data formats for the electronic exchange of cancer data from reporting sources:**

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

<b>National (Yes) Percentage (Count)</b>
98.0% (49)

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

	<b>National Percentage (Count)</b>
Yes	84.0% (42)
No	4.0% (2)
Not Applicable, not receiving electronic pathology reports	12.0% (6)
<b>Total Respondents: 50</b>	

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

	<b>National Percentage (Count)</b>
Yes	54.0% (27)
No	12.0% (6)
Not Applicable, not receiving Ambulatory healthcare provider reports	34.0% (17)
<b>Total Respondents: 50</b>	

**17. Do your exchanged data meet the following minimum criteria?**

**a. 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:**

<b>National (Yes) Percentage (Count)</b>
98.0% (49)

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

<b>National (Yes) Percentage (Count)</b>
98.0% (49)

c. 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	6.0% (3)
Biannually (two times per year)	80.0% (40)
Other	14.0% (7)
<b>Total Respondents: 50</b>	

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

	National Percentage (Count)
Yes, with all bordering CCRs plus other non-adjacent CCRs	88.0% (44)
Yes, with all bordering CCRs but no others	4.0% (2)
Yes, with some bordering CCRs	6.0% (3)
No, no exchange agreements in place with neighboring states, but some are in place with non-neighboring states	
No, no exchange agreements in place	2.0% (1)
<b>Total Respondents: 50</b>	

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

	National (Yes) Percentage (Count)
Consolidated cases	62.0% (31)
Source records with text	50.0% (25)
Source records without text	2.0% (1)
<b>Total Respondents: 50</b>	

f. Are NPCR core data items are included in the dataset submitted to other states?

National (Yes) Percentage (Count)
98.0% (49)

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

National (Yes) Percentage (Count)
94.0% (47)

h. Are exchanged data are transmitted via a secure encrypted Internet-based system?

National (Yes) Percentage (Count)
98.0% (49)

i. Is 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):



<b>National (Yes) Percentage (Count)</b>
98.0% (49)

**18. What type of secure encrypted Internet-based system is used for interstate data exchange?  
Check all that apply.**

	<b>National (Yes) Percentage (Count)</b>
PHINMS	18.0% (9)
Secure FTP	50.0% (25)
WebPlus	70.0% (35)
HTTPS	24.0% (12)
N-IDEAS	66.0% (33)
Secure encrypted e-mail	26.0% (13)
Other	10.0% (5)
<b>Total Respondents: 50</b>	

#### Data Content And Format

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

	<b>National Percentage (Count)</b>
Yes	96.0% (48)
Currently being developed and/or implemented	2.0% (1)
No, not able to receive	2.0% (1)
No, able to receive, but not receiving	
<b>Total Respondents: 50</b>	

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

	<b>National Percentage (Count)</b>
Commercial Vendor	40.0% (20)
In-House Software	14.0% (7)
CRS Plus	46.0% (23)
<b>Total Respondents: 50</b>	

**21. Which of the following Registry Plus programs do you use? Check all that apply**

	<b>National (Yes) Percentage (Count)</b>
Abstract Plus	44.0% (22)
Prep Plus	52.0% (26)
CRS Plus	46.0% (23)
Link Plus	86.0% (43)
Web Plus	72.0% (36)
eMaRC Plus	84.0% (42)
CDA Validation Plus	50.0% (25)
All of the above	18.0% (9)
None of the above	
<b>Total Respondents: 50</b>	

### Data Quality Assurance

**22. Please respond to each of the following statements to describe your CCR's quality assurance program:**

	<b>National (Yes) Percentage (Count)</b>
A designated CTR is responsible for the quality assurance program	96.0% (48)
Qualified, experienced CTRs conduct quality assurance activities	96.0% (48)
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)	88.0% (44)
Data consolidation procedures are performed consistently from all source records	100.0% (50)
Procedures are in place for follow-back to reporting facilities on quality issues	100.0% (50)
<b>Total Respondents: 50</b>	

**23. Does your CCR have a designated CTR education/training coordinator, who is a CTR, to provide training to CCR staff and reporting sources to ensure high quality data?**

<b>National (Yes) Percentage (Count)</b>
92.0% (46)

**24. In the past year, which of the following type of quality control audits or activities did your CCR conduct? Check all that apply:**

	<b>National (Yes) Percentage (Count)</b>
Casefinding	84.0% (42)
Re-abstracting	48.0% (24)
Re-coding	52.0% (26)
Visual editing	92.0% (46)
Data Item Consolidation	84.0% (42)
Other	14.0% (7)
<b>Total Respondents: 50</b>	

**25. Although required to match on all underlying causes of death, does your CCR match all causes of death against your registry data to identify a reportable cancer?**

<b>National (Yes) Percentage (Count)</b>
86.0% (43)

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

<b>National (Yes) Percentage (Count)</b>
84.0% (42)

**27a. Does your CCR update the CCR database following death certificate matching within 3 months of linkage**

	<b>National (Yes) Percentage (Count)</b>
Death information	94.0% (47)
Missing demographic information	92.0% (46)
<b>Total Respondents: 50</b>	

**27b. 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.)**

	<b>Manually</b>	<b>Electronically</b>
	<b>National Percentage (Range)</b>	<b>National Percentage (Range)</b>
Death information	14.8 (0 - 100)	85.2 (0 - 100)
Demographic information	21.9 (0 - 100)	78.1 (0 - 100)

**28. Does your CCR perform record consolidation on the following:**

	<b>Electronic</b>	<b>Manual</b>	<b>Both</b>	<b>Neither</b>
	<b>National (Yes) Percentage (Count)</b>	<b>National (Yes) Percentage (Count)</b>	<b>National (Yes) Percentage (Count)</b>	<b>National (Yes) Percentage (Count)</b>
Patient data group	6.0% (3)	10.0% (5)	84.0% (42)	0.0% (42)
Treatment data group	6.0% (3)	18.0% (9)	76.0% (38)	0.0% (38)
Follow-up data group	8.0% (4)	4.0% (2)	76.0% (38)	0.0% (38)
<b>Total Respondents: 50</b>				

**29a. 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)
78.0% (39)

**29b. If Yes, are facilities required to run prescribed edits prior to their data submission to your CCR?**

National (Yes) Percentage (Count)
76.0% (38)

**29c. Does your CCR have an established threshold for percent of records passing edits on incoming submissions?**

National (Yes) Percentage (Count)
72.0% (36)

**29d. If Yes, what is the threshold?**

	National Percentage (Count)
100%	44.4% (16)
90% or greater	50.0% (18)
80% or greater	5.6% (2)
Less than 80%	
<b>Total Respondents: 50</b>	

**29e. How often does your CCR provide feedback to reporting facilities on the quality, completeness, and timeliness of their data?**

	National Percentage (Count)
Quarterly	32.0% (16)
Every six months	6.0% (3)
Annually	16.0% (8)
Other	46.0% (23)
<b>Total Respondents: 50</b>	

#### Data Use

**30. 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?**

National (Yes) Percentage (Count)
64.0% (32)

**31a. 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).**

National (Yes) Percentage (Count)
92.0% (46)

**31b. 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)
82.0% (41)

**31c. If Yes, indicate what information was included in the report: Check all that apply.**

	National (Yes) Percentage (Count)
Screening-amenable Cancers	97.6% (40)
Tobacco-related Cancers	87.8% (36)
Obesity-related Cancers	68.3% (28)
HPV-related Cancers	85.4% (35)
All the above	61.0% (25)
Other	19.5% (8)
<b>Total Respondents: 50</b>	

**32a. What is the most current diagnosis year a data file or report is available to the public?**

	National Percentage (Count)
2011	2.0% (1)
2013	4.0% (2)
2014	20.0% (10)
2015	68.0% (34)
2016	6.0% (3)
<b>Total Respondents: 50</b>	

**32b. In what format is this report available? Check all that apply.**

	National (Yes) Percentage (Count)
Hard (paper) copy	32.0% (16)
Electronic word-processed file	66.0% (33)
Web page/query system	74.0% (37)
<b>Total Respondents: 50</b>	

**33. Indicate the number of times the CCR, state health department, or its designee used registry data for planning and evaluation of cancer control objectives for each category in the table below:**

	<b>National Average (Range)</b>
Comprehensive cancer control detailed incidence/mortality estimates: Number per Year	2012.7 (0 - 99999)
Detailed incidence/mortality by stage and geographic area: Number per Year	2030.3 (0 - 99999)
Collaboration, as defined in DP17-1701, with cancer screening programs for breast, colorectal, or cervical cancer: Number per Year	2005.1 (0 - 99999)
Health event investigation(s): Number per Year	2009.0 (0 - 99999)
Needs assessment/program planning (e.g. Community Cancer Profiles): Number per Year	2008.7 (0 - 99999)
Program evaluation: Number per Year	2003.7 (0 - 99999)
Epidemiologic studies: Number per Year	2014.2 (0 - 99999)
Other, describe: Number per Year	4169.8 (0 - 68222)
<b>Total Respondents: 50</b>	

**34a. Have any of the above uses of data been included in a journal publication in the last two years?**

<b>National (Yes) Percentage (Count)</b>
58.0% (29)

**35. 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:**

	<b>National (Yes) Percentage (Count)</b>
Publications (e.g.; journal articles, annual report, other reports)	84.0% (42)
Web site	82.0% (41)
Presentations, posters	88.0% (44)
Release of data	52.0% (26)
Education meeting, training program, conference	86.0% (43)
Press releases, statements	16.0% (8)
Requests for proposals, bid solicitations	22.0% (11)
None	2.0% (1)
Other	4.0% (2)
<b>Total Respondents: 50</b>	

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

	<b>National Percentage (Count)</b>
No	
Yes	84.0% (42)
Explain:	
<b>Total Respondents: 50</b>	

### Collaborative Relationships

**37a. 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).**

<b>National (Yes) Percentage (Count)</b>
82.0% (41)

**37b. If Yes, the Advisory Committee includes representation from: Check all that apply:**

	<b>National (Yes) Percentage (Count)</b>
Representatives from all cancer prevention and control components:	72.0% (36)
Vital Statistics	22.0% (11)
Hospital cancer registrars	70.0% (35)
American Cancer Society	64.0% (32)
Clinical-laboratory personnel	20.0% (10)
Pathologists	38.0% (19)
Clinicians	68.0% (34)
Researchers	70.0% (35)
Oncologists	60.0% (30)
American College of Surgeons	38.0% (19)
All of the above	6.0% (3)
Other	26.0% (13)
<b>Total Respondents: 50</b>	

**37c. If you have an Advisory Committee, how often does this group convene, including in-person and teleconferences? Check only one**

	<b>National Percentage (Count)</b>
Quarterly	36.0% (18)
Annually	8.0% (4)
Biannually	16.0% (8)
Other	40.0% (20)
<b>Total Respondents: 50</b>	

**38. 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:**

	<b>National (Yes) Percentage (Count)</b>
Provides assistance in staging NBCCEDP cases	70.0% (35)
Regular meetings with NBCCEDP and NCCCP departmental staff	86.0% (43)
Provides training/technical assistance to NBCCEDP and NCCCP staff	70.0% (35)
Provides data to NBCCEDP and NCCCP	98.0% (49)
Provides technical material for publications to NBCCEDP and NCCCP	64.0% (32)
Provides subject matter expertise to NBCCEDP and NCCCP	84.0% (42)
Data linkages	98.0% (49)
Partner on collaborative projects	86.0% (43)
All of the above	34.0% (17)
Other	6.0% (3)
None of the above	2.0% (1)
<b>Total Respondents: 50</b>	

**39. With which other Department of Health programs does your CCR collaborate? Check all that apply.**

	<b>National (Yes) Percentage (Count)</b>
Tobacco Control	86.0% (43)
Oral Health	44.0% (22)
Diabetes	42.0% (21)
Heart Disease and Stroke Prevention	44.0% (22)
Asthma	18.0% (9)
Physical Activity and Nutrition/Obesity	56.0% (28)
Radiation Control	28.0% (14)
Environmental Health	78.0% (39)
Infectious disease (HIV/AIDS, HPV, hepatitis)	70.0% (35)
Immunization	66.0% (33)
All of the above	12.0% (6)
Other	18.0% (9)
<b>Total Respondents: 50</b>	

**Advanced Activities**

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



	<b>National (Yes) Percentage (Count)</b>
NAACCR, HL7 Format (Volume V), Version 2.x	78.0% (39)
NAACCR, Pipe Delimited Format (Volume V), Version 2.x	26.0% (13)
NAACCR, HL7 Format (NAACCR Volume II, Version 11, Chapter VI)	16.0% (8)
NAACCR, Pipe Delimited Format (NAACCR Volume II, Version 10, Chapter VI)	4.0% (2)
Other	28.0% (14)
Not applicable	10.0% (5)
<b>Total Respondents: 50</b>	

**41. 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.**

	<b>National (Yes) Percentage (Count)</b>
Pathology laboratory reporting	70.0% (35)
Physician disease reporting	34.0% (17)
Other healthcare data reporting	2.0% (1)
None of the above	26.0% (13)
<b>Total Respondents: 50</b>	

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

	<b>National (Yes) Percentage (Count)</b>
Survival analysis	64.0% (32)
Quality of care studies	24.0% (12)
Clinical Studies	14.0% (7)
Publication of research studies using registry data	60.0% (30)
Geo-coding to latitude and longitude to enable mapping	90.0% (45)
Other healthcare data reporting	26.0% (13)
Other innovative uses of registry data such as Survivorship Care Plan	12.0% (6)
None of the above	2.0% (1)
<b>Total Respondents: 50</b>	

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

<b>National (Yes) Percentage (Count)</b>
36.0% (18)

**44. If Yes, is early case capture performed for:**

	<b>National (Yes) Percentage (Count)</b>
All cases	12.0% (6)
Subset of cases (eg. Pediatric Cancer)	16.0% (8)
Special Studies	14.0% (7)
Other	4.0% (2)
<b>Total Respondents: 50</b>	

**45a. How often does your CCR link to the National Death Index (NDI)? Please check only one. (If Never, skip to question 46.):**

	<b>National Percentage (Count)</b>
Every year	70.0% (35)
Every other year	12.0% (6)
Every 3 - 5 years	
Never	12.0% (6)
Other	6.0% (3)
<b>Total Respondents: 50</b>	

**45b. For which of the following has the NDI linkage proven to be useful? Check all that apply:**

	<b>National (Yes) Percentage (Count)</b>
Survivorship	72.0% (36)
Data quality	82.0% (41)
Research	64.0% (32)
Other	6.0% (3)
Not applicable	

**45c. Does your CCR update your database following NDI linkage?**

	<b>National Percentage (Count)</b>
Yes	97.7% (43)
No	2.3% (1)
Not Applicable, not receiving electronic pathology reports	

**46. With which databases did your CCR link its records in 2016 for follow-up or some other purpose? Check all that apply.**

	<b>National (Yes) Percentage (Count)</b>
State Vital Statistics	98.0% (49)
National Death Index	78.0% (39)
Department of Motor Vehicles	24.0% (12)
Department of Voter Registration	22.0% (11)
Indian Health Service	76.0% (38)
Medicare (Health Care Financing Administration)	10.0% (5)
Medicare Physician Identification and Eligibility Registry	
Medicaid	14.0% (7)
CDC's National Breast and Cervical Cancer and Early Detection Program	92.0% (46)
CDC's National Colorectal Cancer Screening Program	26.0% (13)
Insurance Claim Databases (Ex.: BC&BS, Kaiser, Managed Care Organization, fee for service etc.)	8.0% (4)
Hospital Discharge Database	38.0% (19)
Hospital Radiation Therapy Dept	8.0% (4)
Hospital Disease Indices	34.0% (17)
Other	36.0% (18)
None	2.0% (1)
<b>Total Respondents: 50</b>	

## Contact Info

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