

SOP: Data cleansing for SACT

OBJECTIVE AND SCOPE

It is mandatory for every Trust to upload all their SACT (systemic anti-cancer therapy) data monthly. The SACT dataset has 43 fields, of which some are mandatory. If any of the mandatory fields are missing the patient is not accepted by the SACT portal at upload, and the patient will not be included in the monthly upload.

If data is not submitted there are penalties to the Trust, these penalties vary depending on contracts, but consequently it is imperative that SACT data is uploaded accurately.

As SACT data, eg mortality data, is published, it is important to ensure the data submitted to SACT is accurate.

RESPONSIBILITIES

Data Set Field Descriptions

1. NHS number (mandatory field)
2. Date of birth (mandatory field)
3. Gender – current (mandatory field)
4. Ethnicity (mandatory field)
5. Patient postcode (mandatory field)
6. Registered GP practice code
7. Consultant GMC code (preceded by C)
8. Consultant specialty code
9. Organisational code of provider (mandatory field)
10. Primary diagnosis (IC10 code) (mandatory field)
11. Morphology (mandatory field if primary diagnosis not included)
12. TNM Stage Grouping (Final Pretreatment)
13. SACT Programme number
14. Regimen number
15. Intent of treatment
16. Regimen (mandatory field)
17. Height at start of regimen
18. Weight at start of regimen
19. Performance status at start of regimen
20. Co-morbidity adjustment
21. Date decision to treat
22. Start date of regimen (mandatory field)
23. Clinical trial 24. Chemo-radiation
25. Number of cycles planned
26. Cycle number (mandatory field)
27. Start date of cycle (mandatory field)
28. Weight at start of cycle
29. Performance status at start of cycle
30. OPCS procurement code
31. Drug name (this is repeated for each anti-cancer drug in the regimen) (mandatory field)
32. Actual dose per administration
33. SACT Administration route
34. Administration date (mandatory field)
35. Organisational code of provider (for each administration)
36. OPCS delivery code
37. Date of final treatment
38. Regimen modification – dose reduction
39. Regimen modification – time delay
40. Regimen modification – stopped early
41. Regimen outcome summary
42. Date of death
43. NHS number status indicator code

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USEFUL REPORTS

Reports must be run for short periods of time, or outside normal working hours, as they will slow ARIA down for all users.

- SACT – Public Health DATA – Patient Drug Administration Details – 2014
- SACT – Public Health DATA – Patient Drug Dispensed Details – 2014

- Agent / Diagnosis Support Registry – Override Listing
- Demographics – Patients with Missing Information (not so useful for Trusts which schedule all patients including those not receiving chemotherapy)

RESPONSIBILITIES

This SOP describes how to improve SACT data prior to SACT upload. The mandatory fields must be completed, the other fields should be completed in full where possible.

Add data for empty fields directly to ARIA for all blank spaces where possible (see how to enter data in ARIA using 'Aria use to ensure SACT compliance' SOP). This will ensure the majority of data only has to be entered once, though in some cases eg postcode it should be entered on to the Trust PAS system too, to ensure the field added to Aria is not overwritten by the PAS system.

Reports must be run for short periods of time, or outside normal working hours, as they will slow ARIA down for all users.

1 Run the report: SACT – Public Health DATA – Patient Drug Dispensed Details – 2014

Check the blank fields on the report, particularly the mandatory fields.

This gives details of patients that may have had treatment but not been marked as administered, and therefore need to be marked as administered on Aria to be included on the SACT upload.

2 Run the report: SACT – Public Health DATA – Patient Drug Administration Details – 2014

Check the blank fields on the report, particularly the mandatory fields.

For those fields eg treatment intent for supports, where the support has not been added in the correct order, the treatment intent will need to be added directly into the csv field, prior to upload. In this case the treatment intent for the supports should be the same as the treatment intent for the main regimen.

Start date of cycle will need to be entered directly into the downloaded file from Aria (as this appears blank on the Aria report if a drug has been added to a regimen on Aria).

If the GP practice code field is blank on the SACT report, but the patient has GP entered as provider in demographics, contact the TVCN pharmacists and give them the relevant patient's NHS number. The GP practice code will be entered to the GP data centrally.

If the Consultant GMC code field or Consultant speciality code is blank on the SACT report, check under provider in demographics that the patient has a Consultant allocated. Check the Consultant classification states Clinical Oncologist, Medical Oncologist or Consultant Haematologist, and check the relationship states Consultant. If the appropriate classification is not stated (eg it states not applicable) modify and add a new provider, picking the correct Consultant with appropriate classification, and delete the incorrect provider. If the relationship stated is anything other than Consultant modify and pick the Consultant from the drop down menu.

If it is a new Consultant is not available on the drop down list, with appropriate classification, then contact the TVCN pharmacists and give them the relevant Consultant name. The Consultant code will be entered to the Consultant centrally.

The data cleansing needs to be undertaken prior to the date the Trust downloads the monthly SACT report prior to upload. Check with your Trust which day the SACT download is run (in many Trusts around 7th of the month).

Once any changes have been made to Aria the SACT report will need to be re-run before uploading.

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