



National Cancer Audit Collaborating Centre

UPCARE: Programme name - please do not change this field.*

National Cancer Audit Collaborating Centre

Workstream name (if applicable) - please do not change this field.*

National Oesophagogastric Cancer Audit (NOGCA)

Contract status

Ongoing

Audit or non-audit

Audit

HQIP commissioned*

Yes

HQIP AD

CR

HQIP PM

SW

1.0 Included in current NHS Quality Accounts*

Yes

1.1a Geographical coverage - HQIP agreement*

England; Wales

1.2a Topic - please select which ONE of the following best describes the topic area for the programme or workstream. If more than one apply, please select 'Other' and add comment to the next question.*

Cancer

1.3a Healthcare setting*

NHS secondary or tertiary care

1.4 Inclusion and exclusion criteria*

The OG cancer audit stream includes patients diagnosed in England and Wales with invasive epithelial cancer of the oesophagus or stomach (ICD10 codes C15 and C16).

The following are excluded:

- Patients without a confirmed histology of OG cancer
- Patients diagnosed via death certificate only
- Gastro-intestinal stromal tumours (GISTs)
- Neuroendocrine tumours

- Malignant melanoma Sarcomas (these very rare cancers originate from connective tissue and often behave differently from epithelial cancers)
- Recurrences or progressions of cancer

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| 1.5 Methods of data submission* | Extraction from existing data source(s) |
| 1.6a 2023/24 data submission closes - please indicate date, series of dates or frequency.* | n/a |
| 1.6b 2024/25 data submission closes - please indicate date, series of dates or frequency.* | n/a |
| 1.7 Data flow diagram | https://www.natcan.org.uk/wp-content/uploads/2024/11/NATCAN-Data-Flows_291124_V1.4.pdf |
| 1.8 Data quality & analysis plan | Refer to https://www.nogca.org.uk/resources/quality-improvement-resources/ |
| 1.9 Outlier policy | https://www.nogca.org.uk/resources/nogca-outlier-policy/ |
| 2.1 Outcome measures | Refer to https://www.nogca.org.uk/resources/quality-improvement-resources/ |
| 2.2 Process measures | Refer to https://www.nogca.org.uk/resources/quality-improvement-resources/ |
| 2.3 Organisational measures | n/a |
| 2.4 Patient reported outcome measures | n/a |
| 2.5 Patient reported experience measures | n/a |
| 2.6a Do measures align with any of the following sources of evidence (select all that apply) | NICE clinical guideline; Professional society; NICE quality standard |

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| 2.6b Evidence supplemental information | NHSE Faster Diagnosis Standard (2023) |
| | NHSE 62-day referral to treatment standard (2023) |
| | Association of Upper Gastrointestinal Surgery of Great Britain and Ireland (AUGIS) Outcome standards (2016) |
| | NHS Long Term Plan |
| | Wales Cancer Network Cancer Improvement Plan for NHS Wales |
| | NCEPOD: summary 2.indd (ncepod.org.uk) |
| 3.1 Results visualisation | Static data files; Annual report; Patient report; Other |
| 3.2a Levels of reporting* | National; Trust or health board; Cancer alliance; Hospital or specialist unit |
| 3.3 Timeliness of results feedback | Within 2 years |
| 3.4 Link to dynamic reporting* | http://www.nogca.org.uk/trust-results |
| 2023/24 Dataset covers the period FROM/TO (within financial year 01/04 to 31/03)* | 01/04/2023 - 30/03/2024 |
| 2024/25 Dataset covers the period FROM/TO (within financial year 01/04 to 31/03)* | 01/04/2024 - 31/03/2025 |
| 2025/26 Dataset covers the period FROM/TO (within financial year 01/04 to 31/03)* | 01/04/2025 - 31/03/2026 |
| Dataset #1 name | Clinical dataset |
| Dataset #1 type* | Clinical audit |
| Dataset #1 population coverage* | All eligible patients |
| Dataset #1 items collected (n) | 0 |
| Dataset #1 use of existing national datasets | Cancer outcomes and services dataset (COSD); Hospital episode statistics (HES); Office for National Statistics (ONS); Radiotherapy dataset (RTDS); Systemic anticancer treatment (SACT); Patient episode database for Wales (PEDW); Cancer waiting times (CWT); Cancer network information system Cymru |

(CaNISC); Diagnostic imaging dataset (DID); Cancer patient experience survey (CPES); Emergency care dataset (ECDS); Other

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| Dataset #1 specification | www.nogca.org.uk/resources/nogca-key-cosd-data-items-2025/ |
| Dataset #2 name | Not applicable |
| Dataset #3 name | Not applicable |
| Dataset #4 name | Not applicable |
| When was your healthcare quality improvement plan (referred to as a QI Plan) last reviewed? Please upload under 'Files' below using the HQIP naming convention (click on response to see pop-up help text). | 05/09/2024 |
| Please add the hyperlink to where your clinical performance indicators (referred to as metrics) are published on your project website.* | https://www.nogca.org.uk/resources/quality-improvement-resources/ |
| National report publication date (within calendar year 01/01 - 31/12/2023)* | 12/01/2023 |
| Published/planned national report publication date (within calendar year 01/01 - 31/12/2024)* | 11/01/2024 |
| Planned national report publication date (within calendar year 01/01 - 31/12/2025)* | 09/01/2025 and 11/09/2025 |
| Planned national report publication date (within calendar year 01/01 - 31/12/2026)* | TBC |

Please add the most recent date that you have reviewed and updated an online version of UPCARE Workstream section(s) on your project's website (click into the response to see pop-up guidance).

13/12/2024

Please add a hyperlink to UPCARE Workstream section(s) on your website (click into the response to see pop-up guidance).*

<https://www.nogca.org.uk/resources/understanding-practice-in-clinical-audit-and-registries-tool-upcare-tool-2/>

Files 20240905_NATCAN-NOGCA-Qlplan.pdf

2024-09-26 Metrics NOGCA.xlsx