

INTRODUCTION

Issue 3 | October 2021

The Binational Colorectal Cancer Audit (BCCA) is a Clinical Quality Registry. What began as a clinical audit by surgeons for surgeons in 2007 has evolved into a well-established surgical registry readily accessible to all. With the aim of advancing knowledge and understanding of treatment for colorectal cancer, the clinical findings enable best practice by collecting relevant, standardised data to be used for research and quality improvement purposes. The BCCA is endorsed by RACS, CSSANZ, GSA and NZAGS and Medical Oncology Group Australia. All clinicians treating colorectal cancer throughout Australia and New Zealand are invited to join. For your convenience, all data fields are ready to enter directly online via bowelcanceraudit.com.

To join, [email BCCA](mailto:info@bowelcanceraudit.com) today.

Why join BCCA

More accessible, more useful and easier to access than ever before, the interface through which cases are entered forms a safely stored database of colorectal cancers treated by each surgeon.

The BCCA continues to grow and thanks to the collaborative efforts of participating clinicians and public and private hospitals across Australia and New Zealand, this year's report presents over 43,000 treatment episodes submitted from 2007 - 2020.

The analysis of 2020 data published in the 2021 Annual Report provides an insight into colorectal cancer management and various clinical quality indicators. Your valuable contribution to BCCA will enable the registry to:

1. Support in-depth qualitative research at a population level that enables cross-comparisons between Australia and New Zealand.

2. Deliver risk-adjusted, evidence-based reports to clinicians and hospitals to ensure patients receive up-to-date information about the risks and benefits of specific approaches to bowel cancer treatment.

3. Assess patterns of coordinated care and identify factors that predict better treatment outcomes.

4. Increase the implementation of consistent, patient-centred care in keeping with best practice guidelines for treatment.

5. Streamline pathways and reduce variation in patient outcomes.

6. Provide participants with an Approved Activity certification for the purposes of Clinical Professional Development (CPD) for the Royal Australasian College of Surgeons (RACS).

Whether you are a surgeon looking to benchmark your performance against your peers or a specialist wanting to advance your knowledge and understanding of treatment for colorectal cancer, being a part of the BCCA puts you within arm's reach of BCCA research panel experts who are committed to excellence in the prevention, diagnosis and treatment of patients with colorectal cancer.



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ANNUAL REPORT

NEWS

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It has been an exciting year for BCCA with improved reach, many research applications granted and more proposals underway.

An international registry collaboration project was established with the United Kingdom, United States, New Zealand and the Netherlands.

BCCA went abroad. Dr Philip Smart and Prof Alexander Heriot attended a virtual meeting in August to collaborate internationally and establish relationships with National Bowel Cancer Audit in the UK (NBOCA), United States, New Zealand and Europe.

A pilot proposal in South Australia was submitted by the BCCA for data linkage with the National Cancer Screening Register.

BCCA is currently in discussions with The National Cancer Screening Register (NCSR) to collaborate, providing the register with the BCCA's in-depth clinical information and expanding the reach of the BCCA's work. The [National Cancer Screening Register](#), operated by Telstra Health on behalf of the Australian Government, currently has an [online portal](#) for healthcare providers which integrates with primary care practice management systems. These systems enable access to patients' bowel and cervical screening information. BCCA users are encouraged to provide feedback regarding evaluating the National Cancer Screening Register's new health care provider portal through this [link](#).

Quality Assurance reports released to 69 research centers.

In keeping with our rigorous reporting systems, Quality Assurance Reports were provided to 69 qualifying centres. Of these 69, 27 were Colorectal Surgical Society of Australia and New Zealand (CSSANZ) training units. These reports are sent to

(CSSANZ) training units. These reports are sent to units that have submitted ≥ 50 surgical cases over a three year period.

BCCA endorsed by more professional bodies.

The Australian Register of Clinical Registries has endorsed and published BCCA on The Australian Commission on Safety and Quality in Health Care [website](#). Also, BCCA received formal endorsement from the Medical Oncology Group of Australia who now has its representative on BCCA Operations Committee.

Valued addition to BCCA Operations Committee.

BCCA welcomed Prof. Katherine Clark (Palliative Care Australia Representative), A/Prof Christophe Rosty (Pathologist, RCPA Representative) and Prof. Eva Segelov (Medical Oncology Group of Australia representative) to the committee. The committee is also proud to welcome Ms Nicole Cooper as member. Nicole is a patient advocate and change management expert with an interest in propelling the voice and interests of patients.

The BCCA 2021 Annual Report went live in May.

The 2021 Annual Report provides an insight into colorectal cancer management and various clinical quality indicators, serving as a foundation for improving reporting and analysis capabilities. Annual Report shows that with a progressive annual increase in participation, the BCCA has now more than 43,000 treatment episodes and has captured 26.5% of diagnosed bowel cancer in 2018 and 28.7% in 2019.

To access the 2021 Annual Report, click [here](#).



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NEWS CONTINUED

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BCCA in recent publications.

The BCCA itself has been the subject of a recently published paper in the [ANZ Journal of Surgery](#) as a main data source for clinical outcomes. The BCCA research was also cited by Cancer Australia [recent publications](#) examining the impact of COVID 19 on cancer related medical services.

Proposal to GSA for recognizing BCCA as a Quality Assurance Activity for SET applicants.

Operations Committee member Dr Thomas Arthur has been in discussions with General Surgeons Australia (GSA) to consider participation in BCCA to satisfy Quality Assurance Activities incorporated into the SET trainees' selection guidelines for the programme. Currently, GSA is considering the proposal.

Temporary hold on QLD data entry:

Due to expired PHA application, data entry from QLD sites has been temporarily suspended. BCCA is working with Queensland Department of Health to resolve the issue.

BCCA is approved by RACS for CPD

All contributions to BCCA across Australia and NZ are now recognized towards the RACS Continuing Professional Development - Category 1 (Peer Review Audit), further assisting surgeons towards maintaining surgical standards with consideration of the regulatory authority requirements.

BCCA is proudly endorsed by



Colorectal Surgical
Society of Australia and
New Zealand



General Surgeons
Australia



Royal Australasian
College of Surgeons



NEW ZEALAND
ASSOCIATION OF
GENERAL SURGEONS



Medical Oncology
Group of Australia



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BCCA RESEARCH

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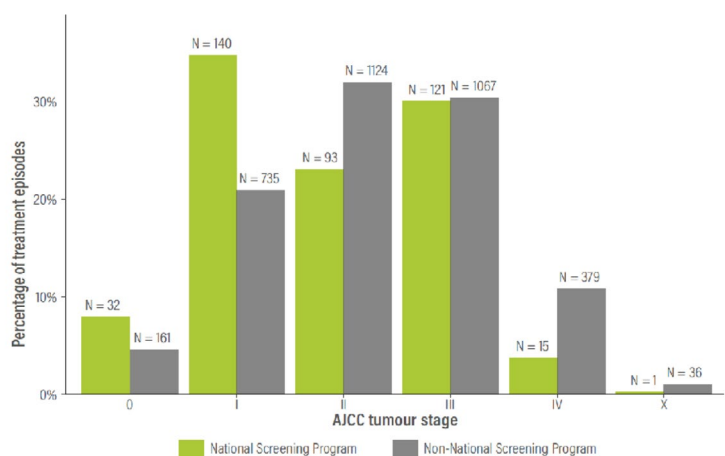
The Research Committee was established in 2020 as a sub-committee of the BCCA Operations Committee to facilitate research access to the BCCA database and provide recommendations to the Operations Committee on data access and research proposals.

The BCCA Research Committee also intends to provide critical feedback to applicants regarding research applications, maintain an online log of published scientific papers resulting from the use of BCCA data, and foster research collaboration both within BCCA contributors and with external parties.

BCCA is soon to add long term National Death Index data to the registry, which represents a significant opportunity for participating clinicians to examine long term causes of death in the BCCA cohort. BCCA strongly encourages research and invites all contributing centres and CSSANZ fellows to take advantage of the data collected by BCCA. We also welcome external requests which will be considered on individual basis and in accordance with the BCCA research governance and guidelines. Research applications and their progress as well as the rapidly growing list of published papers can now be tracked on the BCCA [website](#).

FROM THE ANNUAL REPORT

Perhaps one of the more significant findings from the BCCA's 2021 Annual Report, it was found that patients diagnosed via the NBCSP were at an earlier stage than non-screened patients. This finding highlights the significant value of the NBCSP and further illustrates that early stage diagnosis is strongly linked to survival.



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