

INTRODUCTION

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.

Join BCCA now

All surgeons 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)

Why join BCCA

More accessible, more useful and easier to access than ever before, the interface through which cases are entered forms a convenient, 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 Annual Report provides an insight into colorectal cancer management and various clinical quality indicators. The annual reports are available to view via the BCCA website. 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

HIGHLIGHTS

In December 2020, BCCA Operations Committee member [Prof Susannah Ahern](#) and colleagues published an important BCCA paper in the [Medical Journal of Australia](#) demonstrating National Bowel Cancer Screening Program Participants had fewer surgical complications as well as shorter length of stay.

The NBCSP currently spends \$75MAUD annually screening patients aged 50-74 biannually but [does not currently report outcomes of screening](#). BCCA provides bowel cancer screening outcomes data for almost 30% of incident cases with budget of \$150K AUD per annum: a compelling argument for ongoing BCCA funding and support. The MJA paper generated much interest and was featured in [MJA Insight](#) as well as [ABC Radio National's Health Report with Norman Swan](#). The longstanding partnership with [Monash Registries](#) has been of great benefit to BCCA, and Prof Ahern and Prof Zalcborg are congratulated for this important paper.

BCCA RESEARCH

Committee member, Assoc Prof Tarik Sammour, is pleased to report that the BCCA Research Committee has now finalised the terms of reference and is in the later stages of establishing a workflow which will enable more efficient review and approval of research applications.

Assoc Prof Tarik Sammour is joined on the BCCA Research Committee by members Ms Angela Brennan and Dr Farhad Salimi, current fellow member Mr Vignesh Narasimhan, and chair Prof Sandy Heriot. The Committee was established last year 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 purpose.

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 the CSSANZ and with external parties.

BCCA strongly encourages research for the benefit of all patients with bowel cancer. To access the rapidly growing list of published papers, click [here](#). Requests for data access can now be completed online, simply click [here](#) and follow the prompts.



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NEWS

2021 brought with it a new year, a new focus and new vision for the BCCA. Earlier this year, the Operation Committee held their first meeting for 2021 with a busy agenda for the months ahead.

- The 2021 Annual Report is currently underway which is expected to be delivered in May 2021, serving as a foundation for improving reporting and analysis capabilities.
- 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.
- BCCA is pleased to report the addition of [Australian National Death Index Data](#) to the database. The project has been many months in the making, with ethics now approved thanks to the work of project manager Hayat Dagher. This represents the first addition of baseline administrative datasets to the BCCA with more planned. Researchers can now examine the registry with the ability to link to long term death index data for the whole BCCA cohort. If you have a research question that requires long term survival data, [apply here](#). We expect linkage to be finalised in the next few weeks.
- The Research Sub-committee has now established clear governance guidelines. The committee meets regularly to discuss research applications and requests for data. This process will significantly improve turnaround time for research applications. The applications and their progress can now be tracked on the BCCA website bowelcanceraudit.com where a complete list of approved, published or presented projects can be found.
- A review of a survey undertaken by BCCA participants in 2020 was undertaken (the results can be found [here](#)), indicating a consensus on several changes to the database. These changes will be prioritised and implemented in discussion with the Steering Committee.
- All contributions to BCCA across Australia and New Zealand are now recognised towards the RACS Continuing Professional Development (CPD) program, further assisting surgeons towards maintaining surgical standards with consideration of the regulatory authority requirements.
- Continuing its collaboration with Monash Registries, the BCCA receives ongoing database, analyst and reporting support with plans for expanding the research platform.
- Road mapping the future of the BCCA, a strategic five-year plan is being developed with relation to governance and sourcing sustainable funding.



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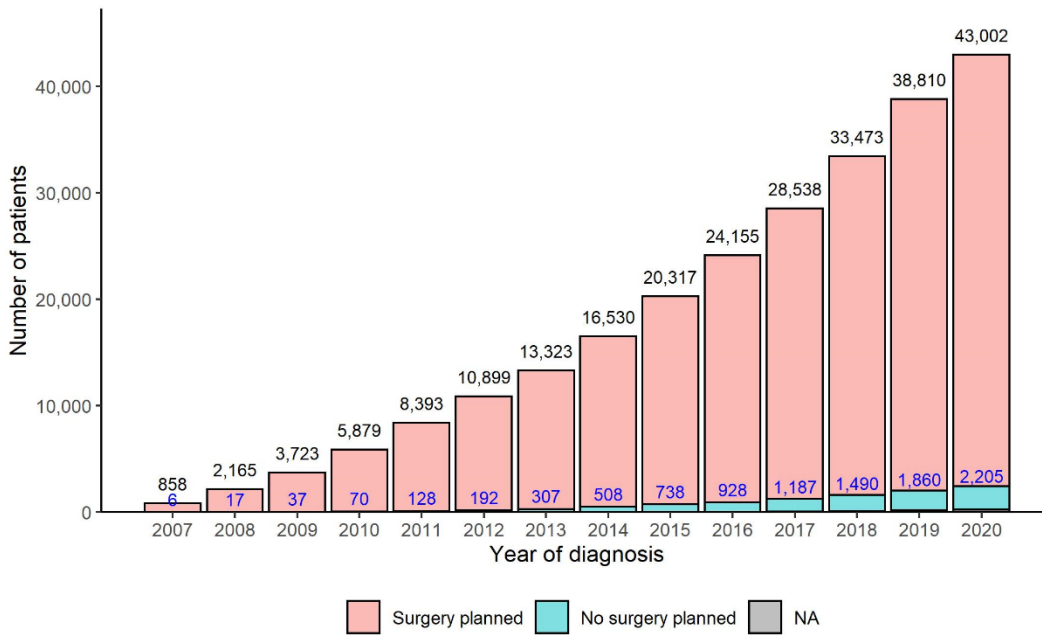
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ANNUAL REPORT

FROM THE AUDIT

Cumulative participation of colorectal cancer patients with the BCCA registry over time



Proportion of Australia and New Zealand colorectal cancer incidents captured by the BCCA registry over time

