**Standardization and Registry Development Steering Committee**

**Team Charter**

**Objective:** In partnership with the Board of Directors, the Steering Committee leads the overall planning, implementation, and monitoring of all tasks for the Standardization and Registry Development Priority Area.

**Steering Committee Roles and Responsibilities (applies to all Steering Committees)**:

* Plan and set overall direction for priority area; lead and develop its priority area network; and, ensure that major goals and timelines are achieved through use of workgroups and task forces.
* Facilitate innovative problem-solving and open communication across multidisciplinary members and groups; encourage relationship building across network; and, serve as sounding board for new ideas and opportunities for growth.
* Monitor progress, which may include tracking timelines and creating and implementing evaluation procedures; assess need for changes to SMP priority area; and, report regularly to the Board and annually to members.
* Evaluate existing work groups/committees and their respective activities in relation to the goals/objectives of the Standardization and Registry Development Priority Area; determine how new and existing activities will be integrated into a cohesive plan; and, make final recommendations to the Board for approval.

**Standardization and Registry Development Steering Committee Roles and Responsibilities:**

* Explore and implement strategies that will prepare central registries to adapt rapidly and successfully to technologically-driven changes in cancer surveillance, including advances in information systems and technology and the national adoption of electronic health records.
* Explore and implement strategies to maintain consensus standards and best practices for cancer surveillance activities and address central registry needs for semantic interoperability and enhancements to database management systems and data transmission processes.

**Membership:**

* **NAACCR** members with substantial experience in the priority area are encouraged to serve as Steering Committee Members through an open call for applications. Applications will be reviewed and Members will be appointed by the Chair(s). Steering Committee Members may also be appointed at the discretion of the Chair(s).
* Members are asked to serve a two-year term with an option to serve an additional two year term. For the first appointments only, terms may alternate between 1 and 2 years to assure committee transition.
* All members except for Board Liaison and NAACCR staff will be entitled to vote.

## Meetings: Once per month or as required.

**Report:**

### The Steering Committee Chair and Board Liaisons will be responsible for keeping the Board of Directors informed concerning priorities, progress, and evaluation of priority area matters. The group will complete annual report requirements for the membership prior to the Annual Conference.

| **S&RD Work Plan July 1, 2019 – June 30, 2020** | | |
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| **NAACCR SMP Goal 1: PREPARE FOR THE CANCER SURVEILLANCE SYSTEM OF THE FUTURE – A SYSTEM THAT IS MORE TIMELY, RESPONSIVE, AND ADAPTABLE TO CHANGE.** | | |
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| **Objectives** | **Work Groups /Advisory Groups** | **Work group activities** |
| 1.  Analyze how cancer surveillance systems will interface with electronic  health data and continue to assess semantic interoperability issues. | 1. Physician Reporting WG | * Identify existing software and/or develop software requirements and tools needed for central registries to implement electronic physician reporting. * Develop guideline documents to assist central registries in addressing issues related to physician reporting. * Develop education and communication tools for central registries. * Establish communications with vendors to address technical issues related to EHR event reports. * Provide a forum for central registries to learn, share experiences, challenges, and best practices. |
| 2. Engage and remain current with national/international efforts regarding electronic health records and other IT technologies. | 1. Cancer Informatics Advisory Group | * Restructure workgroup and rebrand as the Cancer Informatics Advisory Group.   + Change leadership structure to identify a permanent chair or co-chairs   + Develop a structured monthly meeting plan with agenda   + Identify and recruit new members as needed * Advise and alert S&RD Steering Committee to upcoming initiatives that may impact registry operations and development. |
|  | 2. EHR Reporting and Volume II Harmonization Task Force | * Make recommendations to the standard setting organization that is the source of the standard for existing data elements and/or NAACCR for new data elements.   + Evaluate the need to revise/add data elements based on current medical practice.   + Complete the feasibility analysis form, as needed. * Propose revisions to Volume II data element descriptions and rationales to use general terms. |
|  | 3. Data Security Work Group | * Share best practices for data security * Define and publish reference security protocols * Keep Standards Volume III, Chapter 6 up to date; assess extracting Chapter 6 to a separate document. * Identify and develop software tools to facilitate the safekeeping of data. |
| 3. Provide the documentation, tools, and training that enables the NAACCR community to transition from the fixed-width data exchange standard to the NAACCR XML data exchange standards | 1. XML Work Group | * Ensure vendors have tools needed to develop XML message * Provide training to NAACCR community |
| 4. Conduct quarterly follow-up 2018 Readiness Surveys to determine how central registries are progressing in their ability to accept and process 2018 cases. | 1. S&RD | * Update and prepare quarterly survey questions * Review survey results and prepare informational updates to the NAACCR Board, the Mid-Level Tactical WG, and with Board approval, the NAACCR membership |

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| **NAACCR SMP Goal 2: PROVIDE CONSENSUS STANDARDS AND BEST PRACTICES FOR COLLECTING AND PROCESSING CANCER AND PATIENT INFORMATION.** | | |
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| **Objectives** | **Work Groups /Advisory Groups** | **Work group activities** |
| 1. Maintain consensus-based standards volumes and implementation guidelines. | 1. Uniform Data Standards Work Group | * Review new data items approved by the Mid-Level Tactical Group. |
|  | 2. Site Specific Data Item Task Force | * Review and evaluate proposed prognostic factors and biomarkers. |
|  | 3. EDITS Work Group | * Develop the NAACCR Edits Metafile. |
|  | 4. EDITS Impact Work Group | * Consider re-establishment of the work group as a sub-group of the EDITS WG. |
|  | 5. ICD-O-3 Implementation Guidelines Work Group | * Review additions and changes to ICD-O-3 and provide recommendations for implementation to the Mid-Level Tactical Group. |
|  | 6. Implementation Guidelines Task Force | * Develop a document providing an overview of the changes in cancer surveillance reporting standards that the various stakeholders will need to consider for the respective data changes for a given year. |
|  | 7. Volume V Revision Task Force | * Review and update NAACCR Standards, Volume V, version 4.0 to include additional guidance for reporting original pathology report information with biomarker and molecular laboratory test data. |
| 2. Develop methods to simplify the death clearance process to improve efficiency and reduce cost. | ON HOLD |  |
| 3. Facilitate automation of record consolidation by developing general principles and consolidation guidelines | 1. S&RD | * Highlight existing NAACCR Data Item Consolidation Manual * Assess if NAACCR can provide SEER/NPCR work group leads with assistance in their auto-consolidation development efforts |
| 4. Provide guidelines to central registries that will improve the timeliness of cancer reporting | ON HOLD pending final report from the NAACCR/NACDD operations/timeliness project. |  |
| 5. Collaborate with the Research and Data Use Steering Committee to develop best practices for inter-state de-duplication | 1. TBD | * Provide central registry operational input to the RDU regarding inter-state de-duplication best practices. |
| 6. Develop best practices regarding NDI linkage for use by all states | 1. TBD | * Collaborate with the RDU to develop best practices regarding NDI linkage for use by all central registries. |

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| **NAACCR SMP Goal 3: EXPLORE INNOVATIVE USES OF CANCER REGISTRIES BY IDENTIFYING EMERGING INITIATIVES AND NEW ROLES THAT BRING VALUE-ADDED BENEFITS TO CANCER SURVEILLANCE, RESEARCH AND CANCER CONTROL** | | |
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| **Objectives** | **Work Groups /Advisory Groups** | **Work group activities** |
| 1. Identify new strategies to assess and monitor cancer survivorship. | ON HOLD |  |
| 2. Monitor advances in cancer surveillance, control and research to identify potential roles for cancer registries | ON HOLD |  |