

Strategic Planning and Alliances Steering Committee
February 1, 2022

Attendance			
Members Present:	Jenna Mazreku Randi Rycroft (chair) Betsy Kohler	Iris Zachary Winnie Roshala	NAACCR Staff Present: Lori Havener
AGENDA ITEM	DISCUSSION		ACTION/FOLLOW-UP
1. Roll			
2. Review notes – Randi			<ul style="list-style-type: none"> Minutes were approved with corrected changes.
<p>3. Change Cancer Surveillance Data Model strategy – explore 2-tiered reporting – Randi</p> <p>One component of this is needing to define a minimum data set and have a better understanding of what might be available in what sources for fully electronic capture of these data items. Randi distributed to the group and presented a draft document of items that are critical as a starting point. Several NAACCR groups have discussed minimum data sets over the years, although nothing has been developed.</p> <ul style="list-style-type: none"> Why are we doing this? <ul style="list-style-type: none"> External pressure to have data sooner for use, which means real-time reporting. Real-time reporting not being realistic then the 12-month reporting option would be next, although our current reality is 24-month reporting. Randi felt the purpose was for incidence report which speaks to real-time and 12-month. Do we have different use cases for this minimal data set? Would the minimum data set benefit cancer control? Are we thinking of this for a rapid report only? Would we think about this differently if we assume this is the ONLY report we will get? Is there a distinction between “minimal” for a rapid report and “minimal’ in general? 	<ul style="list-style-type: none"> Have a hierarchy of what information covers other information to make the pieces fit. Reporting source is an important field, but need rules on how to fill it in. Layout real-time vs. 12-month vs 24-month reporting in a grid. Then the pros and cons can be looked at. Randi did not think this would make a registrar’s life easier just different. If you could get cases in real-time, it would be easier to identify screening failures. Iris suggested looking at current minimum data sets for other things. This would help us see the value and how the minimum data sets are used. Jenna suggested bringing CoC into the discussion to share their valuable information. <ul style="list-style-type: none"> Betsy shared that her and Randi sit on the Comprehensive Cancer Control National Partnership, and this would be a good place to ask. Talk to the community regarding what they want. 	<ul style="list-style-type: none"> Randi will synthesize the discussion, digest it and try to create some next steps. She will send this summary to the group. 	
4. Next Meeting	Lori will send out a poll for the week after March 1 st to schedule an alternate meeting time.		