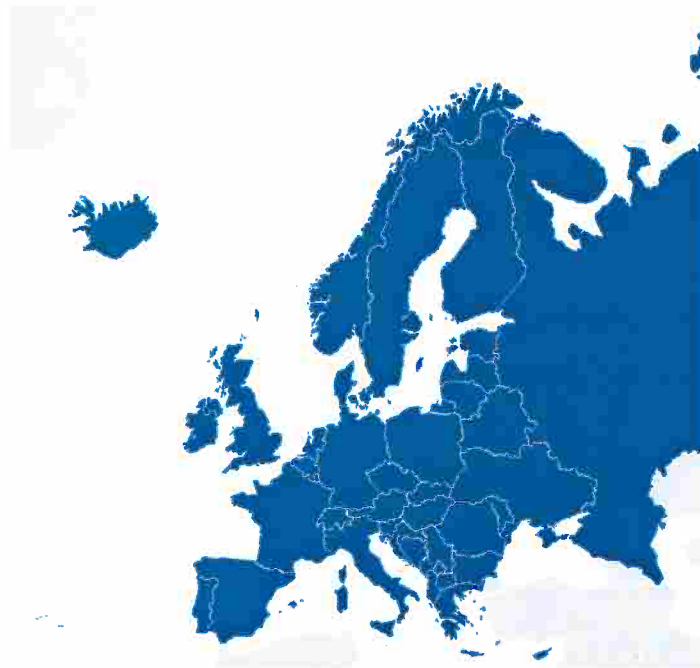


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Abstract title: Defining Evidence-Based Clinical Oncologic Cares Quality Indicators

Abstract number: 30

Abstract:

BACKGROUND Using clinical indicators for quality assessment represents a fundamental approach to document the quality of the care delivered. The implementation of process of care measures implies the development of quality indicators (QI) rigorously constructed. **METHODS** The QI development process implies a planning phase, which means organizing a selected working group (WG); a development phase, where QI are prioritized on an evidence-based scientific source and selected on a Delphi-process base by the WG; a validation phase, where QI are validated by a panel of recognized experts; a data collection phase, where the data regarding the studied population are collected.

RESULTS We are performing the pilot population-based prospective "QC3" study, which is defining QI for clinical oncologic cares about colorectal, prostate, ovary, endometrial and lung cancers. Following the cited method, the initial colorectal cancer (CRC) IQ (n=149) underwent to the WG's revision and the selection (n=149) underwent Delphi process, which selected 89 QI, finally validated by the international AB (n=74). **CONCLUSIONS** QI are mandatory not only for the clinicians, but also for the stakeholders all around and for the patients. This underlines that the QI should be defined, developed and tested with scientific evidence-based rigor in a careful and transparent manner.

Dr. Andrea Bordoni ¹, **Dr. Alessandra Spitale** ¹, **Prof Dr Luca Mazzucchelli** ², **Dr. Valentina Bianchi Galdi** ¹

¹ Ticino Cancer Registry, Locarno, Switzerland ² Cantonal Institute of Pathology, Locarno, Switzerland