

National Healthcare Agreement: PI 12-Bowel cancer screening rates, 2011 QS

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Identifying and definitional attributes

Metadata item type:	Data Quality Statement
METEOR identifier:	447975
Registration status:	Health , Superseded 04/12/2012

Data quality

Data quality statement summary:

- The suspension of the NBCSP due to a fault in the FOBT kit, and the subsequent remediation process, greatly affected the COAG participation rates for 2009 and should be taken into account when comparing to previous or future COAG data for this indicator. Participation rates were lower when measured against the estimated resident population because fewer people had an opportunity to participate as a result of:
 - the suspension of the NBCSP between 2 May 2009 and 9 November 2009 during which no invitations to screen were issued;
 - replacement kits were sent out in November and December 2009 to people who had previously been invited to participate; and
 - participation rates in 2009 only include kits returned by 30 December 2009.
- Remoteness and socioeconomic status are based on postcode of residential address at the time of screening.
- Indigenous status is self-reported by participating individuals. However, high non-response by participants means this data item currently does not give meaningful results.
- Lack of inclusion of people screened outside the NBCSP will result in an underestimate of the population screening rates in the target ages.
- Some data cells have been suppressed for confidentiality and reliability reasons (for example, the denominator is very small).

Institutional environment:

The NBCSP is a joint program of the Australian Government and State and Territory governments. The target ages are 50, 55 and 65 years.

The NBCSP is monitored annually. Results are compiled and reported at the national level by the AIHW in an annual National bowel cancer screening program monitoring report.

NBCSP data depend on the return of data forms from participants, general practitioners, colonoscopists and pathologists to the NBCSP register. The register is maintained by Medicare Australia. Data from the register are provided to the AIHW six monthly as unit record data.

Timeliness:

Data available for the 2011 COAG Reform Council report is based on the calendar period 1 January 2009 to 31 December 2009.

Accessibility:

The NBCSP annual reports are available via the AIHW website where they can be downloaded free of charge.

Interpretability:

While numbers of people screened are easy to interpret, the NBCSP screening pathway may be confusing to some users. Information on the NBCSP is available in all AIHW NBCSP monitoring reports, for example, National bowel cancer screening program monitoring report 2009.

Relevance:

This indicator is interim. It is important to note that additional bowel cancer screening is undertaken outside of the NBCSP. Data on people screened outside the program are not routinely collected; therefore, the level of underestimation of overall bowel cancer screening is unknown.

The NBCSP screens three specific ages (those aged 50, 55 and 65 years are invited to screen) and no single-age 2009 estimated population data are available for disaggregations such as socioeconomic status or remoteness. Therefore, these denominators are estimated based on 2009 5-year ERPs and use the proportion of each age in its respective age groups as documented in the 2006 Census of population and housing for the Australian population.

A postal area (POA) to SLA to remoteness concordance and a POA to SLA to socioeconomic status concordance are used to allocate persons screened to remoteness and socioeconomic status categories based on their postcode or residence. Concordances are based on the 2006 Census and postcodes, boundaries and socioeconomic status and remoteness regions may have changed over time, creating inaccuracies. Where postcodes are not available in these concordances, the person's participation data are excluded from the relevant disaggregation reported.

Socioeconomic status rankings are calculated by SLA using a population based method at the Australia-wide level. These ranked socioeconomic status SLAs are then allocated to their relevant jurisdiction, meaning quintiles should contain similar socioeconomic groups across states and territories.

Some data cells have been suppressed for confidentiality and reliability reasons (for example, the denominator is very small).

Accuracy:

Self-reporting of Indigenous status within the program is poor, with around 35 per cent of participants not responding to this question in 2009. Thus, participation rates based on Indigenous status are considered too unreliable to be included.

The need to apply concordances to numerators and denominators introduces an unavoidable level of inaccuracy. As COAG denominator populations for disaggregation by socioeconomic status and remoteness are based on SLA, the numerator counts for this indicator also need to be based on SLA. Since the allocation of persons screened is based on their postcode or residence, this required the generation of a POA to SLA to remoteness concordance and a POA to SLA to socioeconomic status concordance. However, postcode data are limiting. These concordances are based on 2006 boundaries and classifications, while the current data for this indicator are for 2009. Overall, many postcodes may not have valid SLA-based socioeconomic status or remoteness concordance data available, and many may have changed classification group since 2006 and be giving inaccurate information now. Data for participants whose postcode is not available in the socioeconomic status or remoteness concordance are excluded from the relevant disaggregation reported.

Persons are counted only once in the one-year reporting period 1 January 2009 to 31 December 2009, even if they were screened more than once during this period. No cell suppression was required for the data presented.

Coherence: Similar data are published annually in NBCSP monitoring reports prepared by the AIHW. The most recent of these reports is National bowel cancer screening program monitoring report 2009 data supplement 2010. In the NBCSP reports screening rates are presented as a proportion of the number of invitations to participate in a given time. In this indicator screening rates are presented as a proportion of the ERP for people aged 50, 55 and 65. In addition both numerators and denominators used for NBCSP monitoring reports exclude those people who opt off, or suspend participation from the program. This indicator does not exclude these people from either numerator or denominator. Lastly, NBCSP monitoring reports base a person's participation date as the date they were sent their kit, while this report bases participation by the date they returned their completed kit for testing, which may not be the same year as they were sent the kit. Consequently, results of this indicator will vary from Program participation presented in annual NBCSP reports and the results should not be compared.

The NBCSP was suspended between May 2009 and November 2009 and no invitations were sent out in this time period. This has greatly affected the COAG participation rates for 2009 and should be taken into account when comparing to previous or future COAG data for this indicator.

Source and reference attributes

Submitting organisation: Australian Institute of Health and Welfare

Relational attributes

Related metadata references: Supersedes [National Healthcare Agreement: P12-Bowel cancer screening rates, 2010 QS](#)

[Health](#), Superseded 08/06/2011

Has been superseded by [National Healthcare Agreement: PI 12-Bowel cancer screening rates, 2012 QS](#)

[Health](#), Retired 14/01/2015

Indicators linked to this Data Quality statement: [National Healthcare Agreement: PI 12-Bowel cancer screening rates, 2011](#)

[Health](#), Superseded 30/10/2011