Corso di Aggiornamento AIRTUM per operatori dei Registri Tumori
I tumori dell'encefalo e del SNC, i marker tumorali, i casi clinici e i registri tumori
Camerino (MC), 9-11 settembre 2013

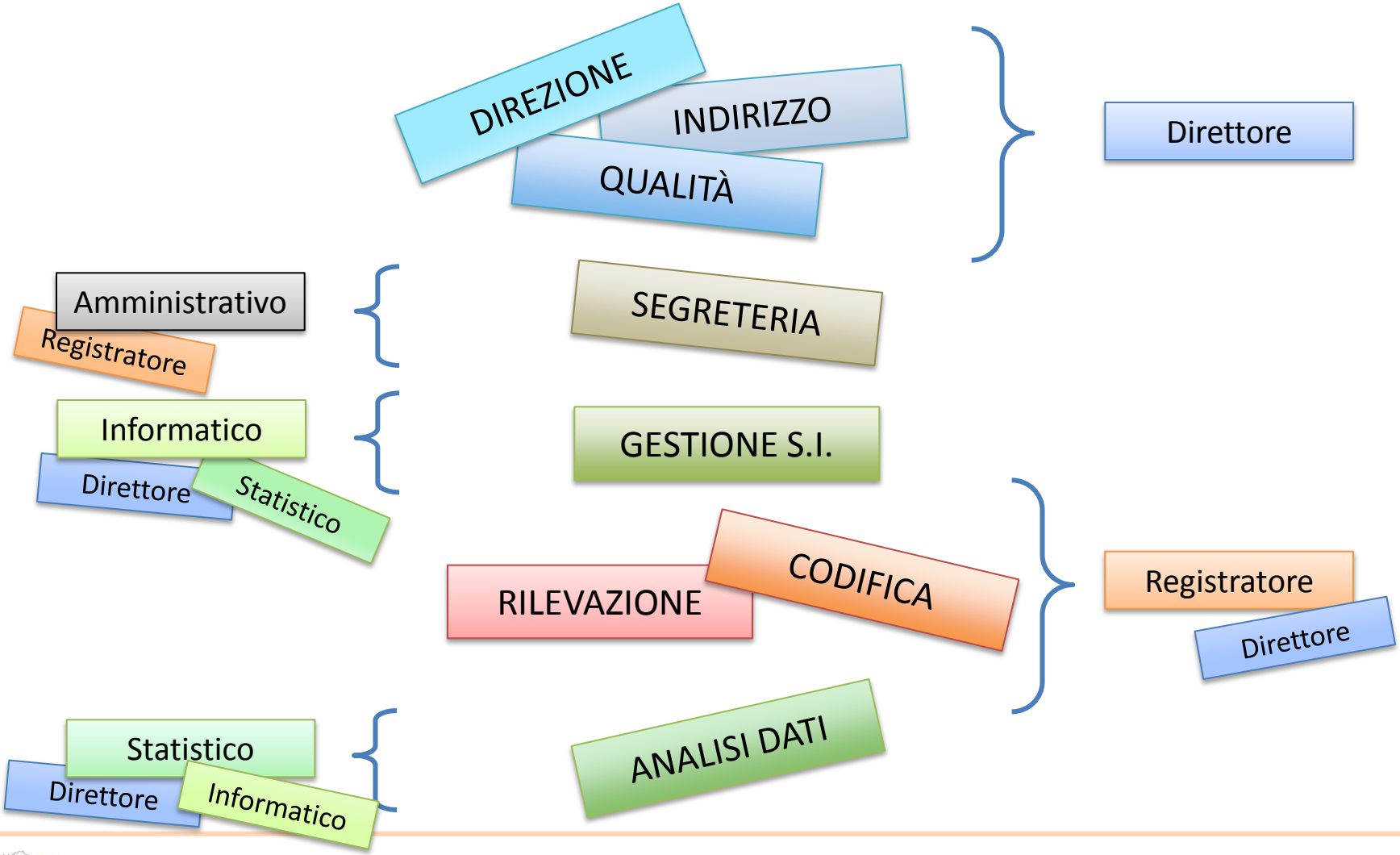
Elementi per la definizione e il dimensionamento del personale dei registri tumori

PARTE 1 - *Inquadramento*

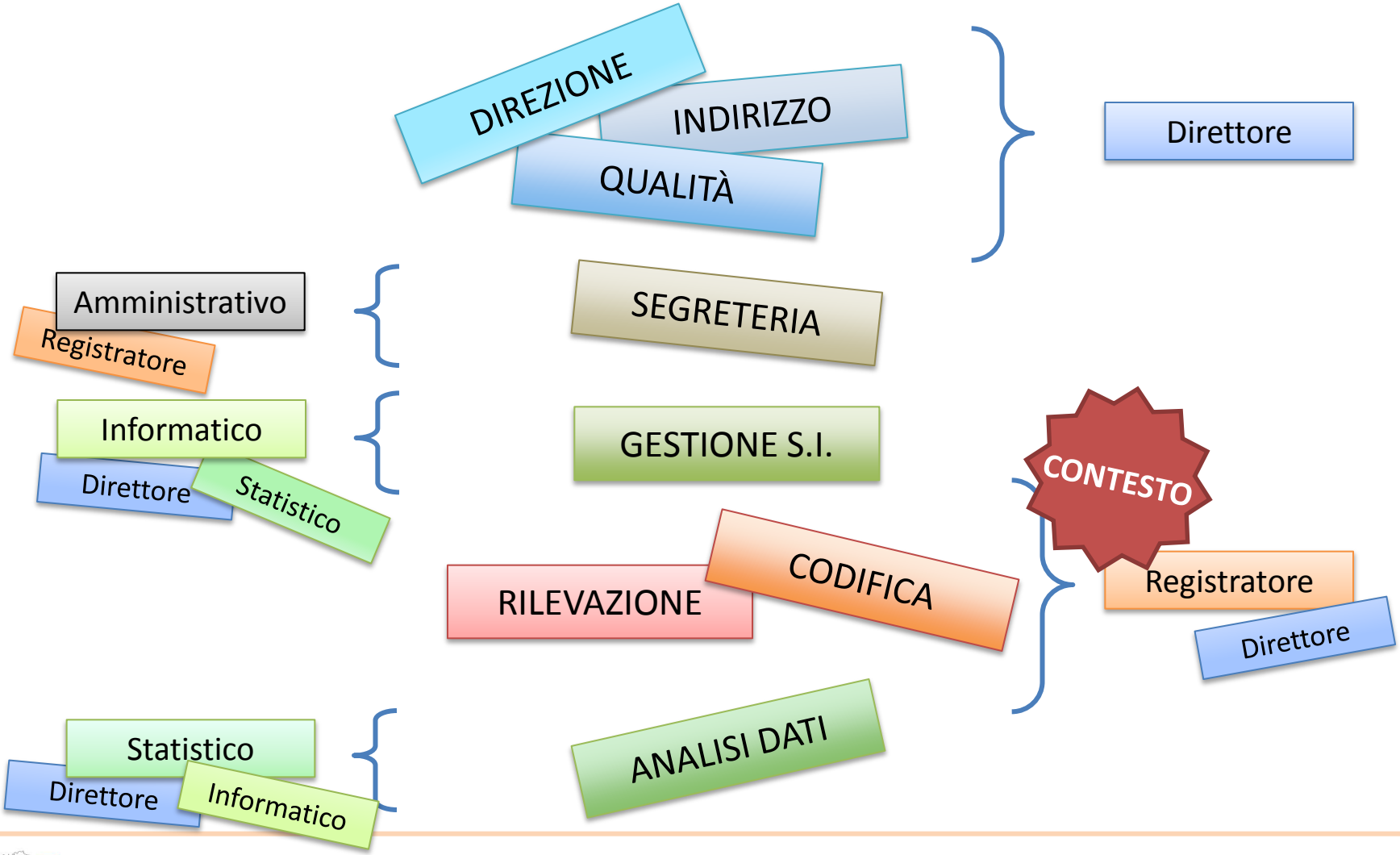
Antonio Russo[1], Ivan Rashid[2]
[1]Osservatorio Epidemiologico e Registri Specializzati - ASL Milano 1
[2]Registro Tumori Puglia - UO Statistica ed Epidemiologia – IRCCS Oncologico, Bari

Le mansioni all'interno di un RT (1)

Le mansioni all'interno di un RT (2)



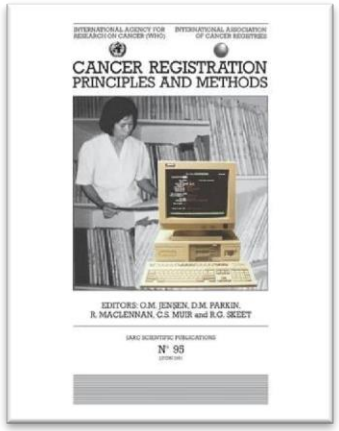
Le mansioni all'interno di un RT (3)



IARC

International Agency for Research on Cancer

World Health Organization



Jensen et al (1991)

Chapter 4. Planning a cancer registry

O. M. Jensen and S. Whelan

Personnel

Numbers

Each system thus involves differing requirements in the number and type of registry personnel, and it may be very difficult to generalize. Nonetheless, in a survey of 61 cancer registries which supplied data for Volume IV of the monograph series Cancer Incidence in Five Continents, it was found that one staff member was necessary for each 1000 or so new cases occurring annually in the population covered by the registry (Menck & Parkin, 1986).

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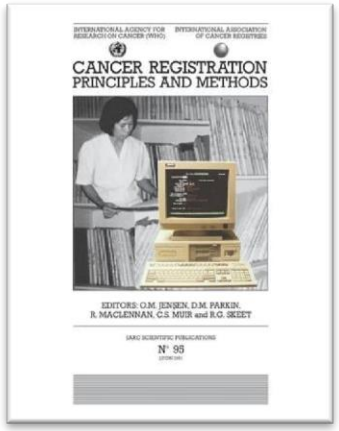

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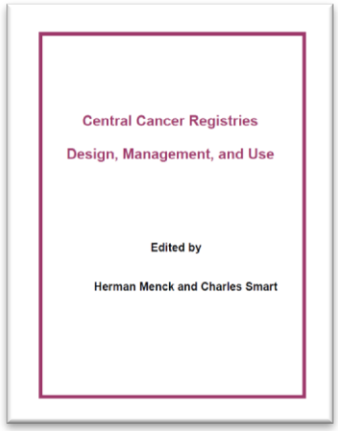
Stima alternativa:
1 unità di personale ogni **200-250.000 casi**

AACCR

American Association of Central Cancer Registries



Wenck et al (1994)

Registry	Total personnel	Population million	Annual cases
Connecticut	30.00	3.3	15,300
Florida	21.30	12,0	52,000
Maryland	15.00	4.5	28,000
New York	24.65	17.9	83,000
Pennsylvania	16.50	12.0	57,000
New Jersey	44.20	7,5	37,000
North Carolina	7.00	6.5	18,500

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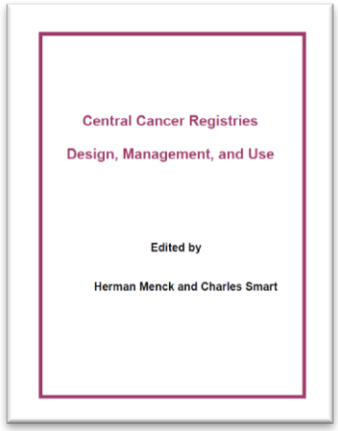
American Association of Central Cancer Registries



Cases/staff
510
2,441
1,866
3,367
3,454
837
2,642

Registry	Total personnel	Population million	Annual cases
Connecticut	30.00	3.3	15,300
Florida	21.30	12,0	52,000
Maryland	15.00	4.5	28,000
New York	24.65	17.9	83,000
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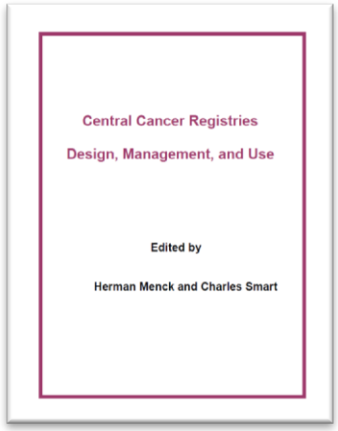

Pop./staff
110,000
563,000
300,000
726,000
727,000
170,000
929,000

Registry	Total personnel	Population million	Annual cases
Connecticut	30.00	3.3	15,300
Florida	21.30	12,0	52,000
Maryland	15.00	4.5	28,000
New York	24.65	17.9	83,000
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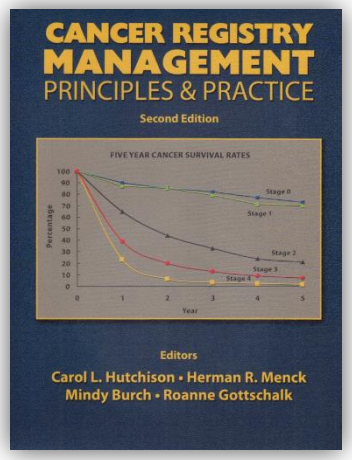
Wenck et al (1994)

NCRA



Hutchinson et al (2004)

CANCER REGISTRY PERSONNEL, OFFICE SPACE AND EQUIPMENT

B. M De Coe, S. W. Ward

ESTABLISHING THE CASELOAD

The national average are 40 minutes per abstract and 604 abstract per year, or approximately 4 abstract per working day

NCRA

Original Article

Workload and Time Management in Central Cancer Registries: Baseline Data and Implication for Registry Staffing

Chapman et al (2012)

Table 4. Annual Hours Spent in Workload Activities and Calculated FTE

	Mean hours	*Median hours*
Case finding, manual	939.1	312.0
Case finding, electronic	972.7	52.0
Abstracting, at hospital	679.1	0.0
Abstracting, at central registry	3,604.8	2,756.0
Follow-up, active	45.9	0.0
Follow-up, passive	331.9	104.0
Visual editing	2,881.4	1,560.0
Case consolidation, manual	1,505.7	780.0
Case consolidation, electronic	3,071.1	780.0
Resolving edit report	1,625.8	520.0
Resolving quality issues	1,546.6	520.0
Audits, case finding	1,222.8	1,080.0
Audit, re-abstracting	418.6	276.0
Database management	1,252.1	960.0
Training, registry staff	753.4	396.0
Training, reporting facility staff	563.4	266.5
Travel, operations	200.2	80.0
Travel, conferences	332.3	170.0
Death clearance, matching	209.3	140.0
Death clearance, follow-back	462.8	320.0
Total activities	22,618.8	16,710.2
	Mean FTE	***Median FTE***
Estimated FTE (total activities/2034)	12.4	9.2

FTE=full-time equivalent.

ENCR

ENCR
European Network
of Cancer Registries

Eurocourse D1.3 (2013)

Table 2a Registry personnel (Full Time Equivalent, FTE) for population-based and specialised cancer registries separately

	Population based CRs		Specialised CRs	
Number of Cancer Registries (CRs)	102		19	
	Mean (SD) %	Range %	Mean (SD) %	Range %
FTE per 1000 cancer cases				
Registrar	1.1 (2.1)	0-17	9.7 (14)	0.3-55
Programmer	0.4 (1.9)	0-17	5.7 (15)	0-62
Statistician/epidemiologist	0.5 (1.9)	0-16	7.8 (13)	0-48
Medical	0.4 (1.3)	0-11	1.6 (2.4)	0-9
Administration	0.2 (0.3)	0-2	3.3 (7.0)	0-27
Management	0.3 (1.0)	0-8	2.1 (2.9)	0-9
No data supplied (number of CRs)	25		2	

ENCR (2)

ENCR
European Network
of Cancer Registries

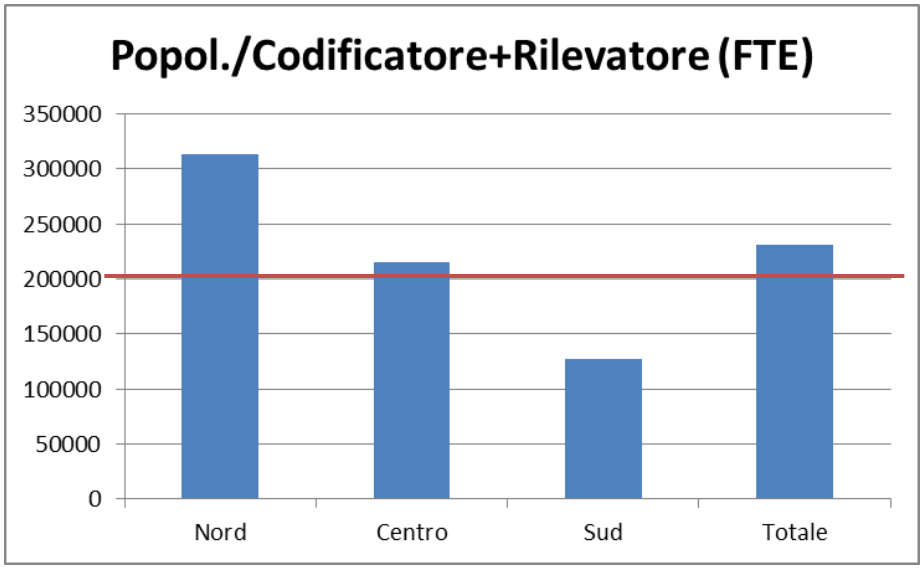
Eurocourse D1.3 (2013)

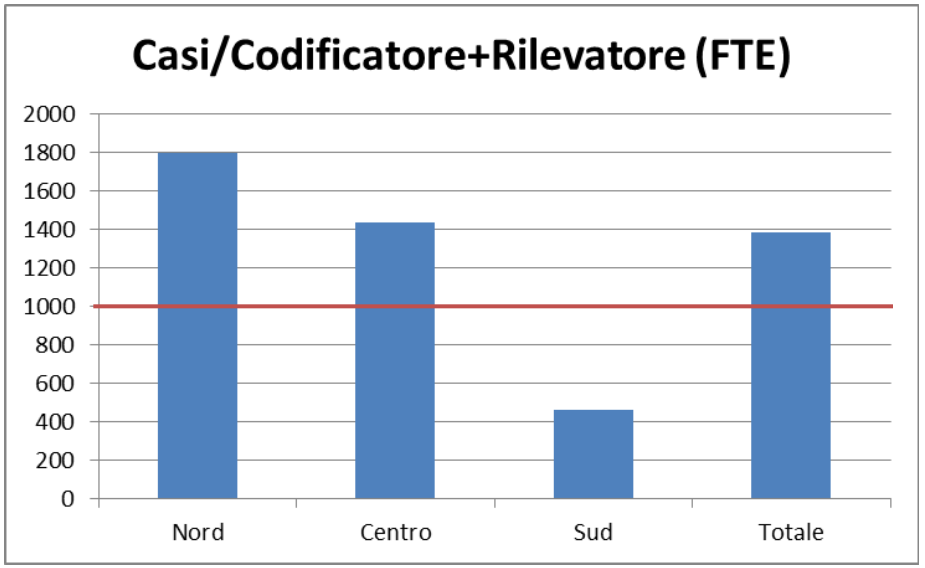
Table 2b Registry personnel (Full Time Equivalent, FTE) according to European sub-regions

Part of Europe*	I	II	III	IV	V
Number of Cancer Registries (CRs)	14	38	11	43	15
Average Population served (in millions)	4.8	3.5	4.3	1.0	6.7
FTE per 1000 cancer cases	mean	mean	mean	mean	mean
Registrar	1.1	1.9	5.9	3.3	1.4
Programmer	0.3	0.4	2.1	2.6	0.4
Statistician/epidemiologist	0.3	1.8	3.0	2.0	1.8
Medical	0.1	0.5	1.7	0.7	0.5
Administration	0.4	0.4	2.0	0.9	0.4
Management	0.1	0.5	1.4	0.7	0.7
No data supplied (number of CRs)	5	7	3	8	4

I) Nord (Scandinavia, Gran Bretagna, Olanda)
II) Centro (Francia, Belgio, Germania, …)
III) Sud-Est (Croazia, Grecia, Turchia, …)
IV) Sud-Ovest (Italia, Spagna, Portogallo,…)
V) Est (Polonia, Russia, Rep. Ceca, …)

Personale, pool di 24 registri (2011)





Conclusioni

- La progettazione e il dimensionamento del personale è un aspetto ancora poco esplorato
- Fanno eccezione i registri Nord-Americani che hanno esplorato più di tutti il concetto di carico di lavoro e di efficienza (il modello è però solo in parte confrontabile)

- Rimane come riferimento la proporzione (1986):

1 unità di personale ogni 1000 casi

Quando non è desumibile il numero casi è utilizzabile (meno appropriata):

1 unità di personale ogni 200.000 abitanti

ATTENZIONE: le stime riguardano la totalità dello staff (escluso il direttore)