NDRS
NATIONAL DISEASE REGISTRATION SERVICE

NHS England

Systemic Anti Cancer Therapy (SACT) data set

Implementation Guide

Data Alliance Partnership Board

The Data Alliance Partnership Board (DAPB), which holds delegated authority from the Secretary of State for Health and Social Care, has approved a change to an existing information standard for publication under section 250 of the Health and Social Care Act 2012.

Assurance that this information standard meets the requirements of the Act and is appropriate for the use specified in the specification document has been provided by the Data Governance, Assurance and Testing (DGAT) team and endorsed by the Data Assurance Board (DAB).

This information standard comprises the following documents:

- requirements specification
- change specification
- implementation guide
- information standard notice

An Information Standards Notice (DAPB1533 Amd 20/2025) has been issued as a notification of use and implementation timescales. Please read this alongside the documents for the standard.

The controlled copies of these documents can be found on the Standards and collections - NHS England. Any copies held outside of that area, in whatever format (e.g. paper, email attachment), are considered to have passed out of control and should be checked for currency and validity.

Date of publication: 29 July 2025

About the NDRS

The National Disease Registration Service (NDRS) is part of NHS England. Its purpose is to collect, collate and analyse data on patients with cancer, congenital anomalies, and rare diseases. It provides robust surveillance to monitor and detect changes in health and disease in the population. NDRS is a vital resource that helps researchers, healthcare professionals and policy makers make decisions about NHS services and the treatments people receive.

The NDRS includes:

- the National Cancer Registration and Analysis Service (NCRAS) and
- the National Congenital Anomaly and Rare Disease Registration Service (NCARDRS)

Healthcare professionals, researchers and policy makers use data to better understand population health and disease. The data is provided by patients and collected by the NHS as part of their care and support. The NDRS uses the data to help:

- understand cancer, rare diseases, and congenital anomalies
- improve diagnosis
- plan NHS services
- improve treatment
- evaluate policy
- improve genetic counselling

NDRS
NATIONAL DISEASE REGISTRATION SERVICE

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Contents

Amendment history

Version(s)	Date	Amendment History
SACT v4.0	20 March 2025	Draft sent to SACT team for review
SACT v4.0	13 May 2025	Final edited version for publication

Executive Summary

The purpose of this document is to provide guidance intended to support providers of oncology cancer services and developers (both in-house and commercial system suppliers), to prepare for the implementation of the Systemic Anti Cancer Therapy (SACT) data set v4.0 from April 2026.

All documents (or links to them) can be found on either the National Disease Registration Service (NDRS) SACT pages or the NHS England website unless otherwise stated. These provide assurances that the proposed approach meets the business requirements identified in the requirements specification for DAPB1533 Amd20/2025 have been adequately researched and can be delivered.

This is an update to an existing information standard DCB1533 Amd 80/2018 and is required to ensure that the data still meets the business objectives, scope, and content of the standard and continues to be clinically accurate and relevant.

To maintain the clinical accuracy, it is important to regularly review SACT with clinical experts from the oncology community across the NHS, including analysts within the NDRS and NHS England.

Implementation approach

The implementation of SACT is managed by the NDRS directly with its data providers. The principal approach is to work in partnership with clinicians and their information, management, and clinical teams to implement the standard successfully.

Trusts should contact their local NDRS office or regional data liaison manager to discuss any issues regarding the standard itself. If you are unsure who your local NDRS Liaison Manager, these can be found on the NDRS website using this link.

The impact of the standard will vary, depending on the configuration of hospitals and services and the existing and planned implementation of electronic prescribing or other clinical electronic systems.

The contents of this implementation guide and the new technical guidance documents should be made available to all staff groups involved in responding to the standard including:

- medical and nursing
- pharmacy
- information
- Management staff
- IT (including system suppliers of third-party systems)

It is not intended that the amendment of the standard would have any direct impact on the delivery of patient care. However, the above groups, which are involved in the local implementation of the information standard in their work area, should develop a strategy to fully meet its requirements by the end of the implementation period.

If you are a new provider of SACT, as well as reading this implementation guide, please contact your NDRS regional data liaison manager, who will be able to support you though this process, including testing of new reporting systems.

New and existing users may also wish to read the SACT technical Guide v4.0, which provides additional support on the implementation of the changes within the data set and standard.

Please note that over time versions may change, therefore, it is recommended to check that you are always referencing the latest issues of any document. The SACT webpage on the NDRS website and the NHS England's information standards website, will host the latest versions of these documents.

Summary of changes

This revision allowed the data set to be clinically reviewed, validated, and updated by experts in all fields of adult, haematological and paediatric oncology, cancer audits, Royal Colleges, as well as experts within the NDRS registration and analytical teams, and provides a clinically sound set of data to be collected from 2026 onwards.

Wherever possible, duplication across the data sets has now been removed and full explanations of how to collect these data within the new structure are provided within the user guides of the data set.

This updated version of the data set includes new data-items, re-alignment of data structure, amendments and contains corrections, for example where there were errors in previous versions and updates where clinical practice has changed from SACT data set v3.0.

Throughout the data set there are now a series of choices which will make collecting and reporting data easier to understand and will be supported by the new technical document.

In addition, there are some key new sections to link potentially orphaned data items throughout the data set.

The proposed changes can be divided into the five key areas:

- deleted data items
- new data items
- data items with amended attributes
- moved data items
- schema specification changes

Note:

- in some cases, the same data item is used in different sections of the data set, in these circumstances they are only counted once

The following are the major changes to SACT v4.0:

Key Change	Numbers
Deleted Data Items	11
New Data Items	27
Data Items with Amended Attributes	11
Moved Data Items	5
Schema Specification Change	7

In v4.0, there are an additional 16 data items overall, compared with v3.0 and of them, 4 are compulsory due to the change in the way date and consultant codes are now

recorded. In addition, most of the other increases were to ensure that 'Regimen', 'Cycle' and 'Dose Modification' as well as 'Cycle Delay' were correctly structured and recorded.

Status of documents

This Implementation Guide should be read in conjunction with the following documents, websites are imbedded within each bullet point header below:

NHS England - DAPB1533 SACT:

- requirements specification
- change specification
- implementation guide
- data set v4.0
- technical guidance
- information standard notice

NDRS - SACT webpage:

- SACT v4.0 user guide

These documents are intended to support providers and developers who wish to identify and plan changes to their systems.

Clinical Safety and Data Protection

The primary purpose of the standard is for secondary uses only and will therefore have no direct impact on Clinical Safety and as such is not in scope of DCB0129 and DCB0160. Consequently, a Clinical Safety Case Report is not required to support the standard.

Full Information Governance, Clinical Safety and Data Protection information, along with the Data Provision Notice (DPN), National Disease Registries Directions 2021 and General Data Protection Regulations (GDPR) as explained in full within the Specification document.

Mapping local data to the SACT information standard

There is no requirement to modify local clinical practices or data recording, however local system managers will be required to map local nomenclature and data formats to that defined in the SACT information standard before transmission.

Provider organisations are encouraged to review the content of the standard and make primary data recording consistent with the standard. This would benefit their services in terms of safety and efficiency.

An example of this is the standardisation of the SACT cycle number (now a mandatory data item in v4.0). This is particularly relevant where patient management is transferred during treatment.

Definitions within the SACT data set

Within the SACT data set, it is important that field naming is consistent within hospital systems and the definitions of these fields are unambiguous and applied by all providers.

Field naming and definitions have been aligned with and approved by the NHS Data Model and Dictionary service, to removed burden and confusion across NHS defined data sets and to allow for better interoperability of data flows.

Implementation process

The following documents have all been published by either the NDRS or NHS England, and there are hyperlinks to each website in the 'status of documents' section above.

The following is a sequence of steps, set out to help you understand the implementation process and support you in asking the right questions and engaging the right people within your organisation.

It is important to read all the steps first as depending on your current readiness, if you are a new user/system supplier and creating a new electronic prescribing or cancer information system for the first time, you may require a different implementation approach, which could be different to the published order below:

Step 1: Read all available documentation

All documentation will be available to download from the 29 July 2025 and will provide an implementation period of 8 months (please refer to table in Step 3). See Standards and Collections for all documentation.

Information Standards Notice (ISN)

This is the official notification of the Information Standard, published by the DAPB. It provides an outline of the approved standard and timeframe for compliance.

Compliance with Information Standard Notices (ISNs) are part of the NHS Contract (section 28.2.2) and will normally be included in contracts between NHS Providers and their system providers.

SACT Specification

This provides information about all the requirements and conformance, new and existing users must comply with, including information about:

- the data set and processes
- clinical and information governance
- technical architecture

Change Specification

This provides a summary of the changes to the data sets since the last version.

Note:

- this may not be needed for new users or system suppliers, creating a new system from scratch, however the information provided within other documentation is vital.

Data Set and User Guide (SACT v4.0)

These provide the detailed information and explanation about the data items in the data set, including definitions, formats and values which can be recorded. These are divided by the data set sections and will clearly explain what will need to be submitted.

The SACT data set should be reviewed by all users, to understand the requirements of current version. For new users, this is especially important, as the change request document will only give details of items which have changed since the previous versions.

The data set workbook has many worksheets (or tabs) at the bottom of the document. All changes are highlighted in the relevant sections and a detailed 'change log' tab, outlines every change to every data item, with a new line for each change (where there are more than one).

Technical Guide

The technical guide is essential for system suppliers or IT teams, where SACT is being built for the very first time or where changes are required to existing systems. This provides extended advice around reporting of complex data using comma-separated values (csv), as well as the process around submitting data files.

Step 2: Talk to your software provider/IT teams

If you have a commercial system, you will need to speak with your software provider to confirm the timescale for any necessary changes to the cancer management system, EPR or ePrescribing system you use. In most cases these changes will be part of your Service Level Agreement (SLA).

Similarly, Trusts must talk with their software provider, to agree dates for roll-out of their system and local updates. Based on previous experience, we have allowed a three-month window to allow for this.

If Trusts use an in-house system, they need to start discussions early to ensure all changes can be incorporated within the three phased timetable below. The revised data set SACT v4.0 is expected to be submitted using the following timetable:

Phase	Dates	Action
Phase 1 - Implementation Period	29 July 2025 to 31 March 2026	The development lead times of software suppliers and in-house developers to make changes to systems to reflect requirements and align with conformance criteria.

Phase 2 - Data Collection Period	01 April 2026 to 30 June 2026	Allows for a three-month period where data can be submitted in accordance with either: • SACT v3.0 or SACT v4.0
Phase 3 - Full Conformance	01 July 2026 onwards	Requires full conformance, using only SACT v4.0.

Step 3: Identify and discuss with stakeholders

It is essential to engage with those who are involved in recording, checking, submitting, and using the data in/or for your organisation. This will include (but is not restricted to) some or all the following (names may vary per organisation):

- clinician's and clinical teams (multi-disciplinary teams):
    - pharmacy staff
    - nursing staff
    - medical staff
- Cancer services manager:
    - cancer data manager
    - multidisciplinary team (MDT) coordinators
    - clerical staff
- informatics/IT departments
    - in-house developers
    - software suppliers
- cancer alliances
    - commissioners
- your local (NDRS) office
    - data liaison managers
    - data loaders

If you are developing an in-house system, you need to understand how the data are collected to improve existing collection systems. Where an off-the-shelf system is used, this is less important as the system supplier should have done this through client engagement or a service level agreement (SLA).

Step 4: Plan how you will implement change

Implementation of the updated version of the standard will be between 29 July 2025 to 31 March 2026 (8 months). Please refer to the table in step 2 for the phased Implementation to full conformance timeframe.

Between Apr to Jun 2026, either v3.0 or v4.0 of the data set can be submitted. From July 2026 only SACT v4.0 will be accepted. Not all the data will need to be submitted immediately, but you need to be sure you have considered all the issues.

Step 5: Check your current state of readiness

Review your systems (software):

- many of the new or amended data items in SACT will already be recorded electronically within your Trust or organisation
- check what changes are required to meet the amendments or new items

Review your processes:

- are there any changes to process required?
- are there additional training needs?
- is there additional clinical system access required?
- ensure you have clear mapping documents with your IT/system supplier

Review your data collection:

- new/amendments - there will be new and amended data which will be required to be collected differently
    - identify who will collect these data and at what stage in the pathway
- deletions/corrections - data has been grouped into more logical pathways or in some cases deleted to prevent duplication
    - identify where these data are and collect appropriately

Review your quality assurance (QA) and submission processes:

- it is essential that clinical teams are confident in the data being submitted for their patients
- review processes to ensure quality assurance of the data is performed before submission to NDRS, using the API portal
- if necessary, review audit tools with software suppliers to meet new requirements

Feedback on current submissions is available from the CancerStats2 portal. Access and registration are available to all authorised NHS staff, and it is recommended that each organisation has a clinical member responsible for reviewing their data submitted monthly to the NDRS (a clinical champion).

Data files are required to be submitted monthly, using the 2-month schedule, for example: submissions of September 2025 activity data (01-09-2025 to 30-09-2025) must be uploaded as follows:

- 1 to 30 November 2025
    - files containing September data MUST be uploaded to the portal and all errors on the file MUST be resolved
- by 15 December 2025
    - regimen mapping MUST be completed
    - this process can start at any point once the file has been uploaded

- by 31 December 2025
    - all regimen queries MUST be resolved, and the file MUST be submitted

Note:

- this upload schedule will continue to apply to all future months

Step 6: Put SACT on the agenda

Make sure that clinical colleagues are aware of SACT by raising it at any local or network meetings. This could include the Trust cancer board, cancer alliance meetings, or any other relevant clinical network or Trust events.

Step 7: Attend your regional roadshow

The NDRS are planning to run a series of roadshows (between January to February 2026), these may be in the form of a virtual Teams meeting.

Details will be communicated towards the end of 2025 via newsletters and NDRS will work with each Trust to arrange placements for these events.

These workshops will cover:

- meeting the new team of data liaison managers at NDRS
- what's new in SACT v4.0
- clinical overview on reasons for change and benefits
- round-up from the Head of National Data Programmes

The following group of people are key to these meetings:

- cancer managers
- clinical leads
- information managers
- pharmacy managers
- nursing staff

If we can provide these meetings face-to-face, we will also attempt to get system suppliers available on the day to have break-out sessions. These meetings will also provide an opportunity for developers to see the standard in context and will cover both the organisational and technical aspects, as well as issues regarding process.

If the meetings are virtual 'Teams' meetings, they would only be expected to last about 2-hours but will be an opportunity for both central teams and clinical teams to find out more, discuss issues and ask questions. If we can provide these as a face-to-face meeting, then we would expect the meetings to last for a half day (including refreshments).

Step 8: Check for updates and newsletter sign-up

The NDRS website will continue to publish additional information and updates on the SACT webpages. These will include HTML versions of all documents as well as printable pdf versions too. This ensures we comply with strict new accessibility standards and makes our documentation accessible to all.

Editions of the SACT Newsletter will be published periodically to provide advice for users, of any updates or key milestones. If you would like to be added to the circulation list, please complete the form using this link.

End to End Testing

As with previous versions, it was not possible to complete end-to-end testing with system suppliers prior to the standard being issued. Extensive consultation will continue throughout 2025/26 with system suppliers and IT departments across the NHS in England to help and support development, implementation, and testing prior to 'Full Conformance' from 01 July 2026.

A series of meetings has been held with the major software suppliers and Trust IT departments to assess their readiness/compliance. It is expected that all organisations/suppliers provide a written report to their regional NDRS office by the end of December 2025, outlining their compliance readiness and timescales for deployment to their clients. This will be coordinated by the regional NDRS data liaison managers.

These reports will be assessed by the SACT Management Board at a meeting in January 2026.

A three-month phased implementation period for deployment of the new data set upgrades has been written into the implementation programme from 01 April 2026 to 30 June 2026. This will help with roll-out where, for instance, suppliers have multiple clients and when simultaneous upgrades are not possible.

The SACT Management Board can insert a stop/go on the implementation process, if there are serious concerns that implementation cannot be safely achieved. Should this occur, it will be widely communicated through:

- DAPB within NHS England
- NDRS data liaison managers
- newsletters

In this eventuality, Trusts will be able to revert to SACT v3.0, until the serious issue (which caused the stop/go process) is resolved, and an acceptable solution agreed.

Lessons Learned

Throughout the implementation process the SACT Senior Project Manager will monitor the roll-out and any lessons learnt will be documented and used to improve the next version.

Appendix A - Uniform Resource Locator (URL) Glossary

This section provides the full URL address, to help and support sight impaired users access all links throughout the document.

Page 1:

- Section 251 website - http://www.legislation.gov.uk/ukpga/2012/7/section/250
- NHSE standards and collections website - https://digital.nhs.uk/data-and-information/information-standards/information-standards-and-data-collections-including-extractions/publications-and-notifications/standards-and-collections
- national archives - http://www.nationalarchives.gov.uk/doc/open-government-licence/

Page 4:

- NDRS, SACT webpage - https://digital.nhs.uk/ndrs/data/data-sets/sact#downloads-and-guides
- ISN website - https://digital.nhs.uk/data-and-information/information-standards/governance/latest-activity/standards-and-collections/dcb1533-systemic-anti-cancer-therapy-data-set/

Page 5:

- Link to NDRS data liaison manager - https://digital.nhs.uk/ndrs/data/data-sets/cosd#help-and-feedback

Page 7 (Supporting documents):

- ISN publications - https://digital.nhs.uk/data-and-information/information-standards/information-standards-and-data-collections-including-extractions/publications-and-notifications/standards-and-collections/dcb1533-systemic-anti-cancer-therapy-data-set
- NDRS, SACT webpage - https://digital.nhs.uk/ndrs/data/data-sets/sact#downloads-and-guides
- NHSE clinical risk ISN page - https://digital.nhs.uk/data-and-information/information-standards/information-standards-and-data-collections-including-extractions/publications-and-notifications/standards-and-collections/dcb0129-clinical-risk-management-its-application-in-the-manufacture-of-health-it-systems

Page 9:

- ISN publications - https://digital.nhs.uk/data-and-information/information-standards/information-standards-and-data-collections-including-

extractions/publications-and-notifications/standards-and-collections/dcb1533-systemic-anti-cancer-therapy-data-set

Page 12:

- Cancerstats2 portal website - https://cancerstats.ndrs.nhs.uk/welcome

Page 14:

- SACT newsletter sign-up form - https://confirmsubscription.com/h/d/6929D36DD712CFFC