



National
Cancer
Registry
Ireland

2023 ANNUAL REPORT

The National Cancer Registry

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The National Cancer Registry was established by the Minister for Health in 1991. It has been collecting comprehensive cancer information for the population of the Republic of Ireland since 1994. This information is used in research into the causes of cancer, in education and information programmes, and in the planning and management of cancer services to deliver the best cancer care to the whole population.

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Foreword from our Chairman



"The National Cancer Registry is the independent, expert and trusted source of cancer data and trends in Ireland".

Dr Jerome Coffey
Chairman

I am delighted to present the foreword for the National Cancer Registry's Annual Report and Accounts for the year ending December 31, 2023, which provides a comprehensive overview of our activities and achievements during that year and the first half of 2024.

The National Cancer Registry is the independent, expert and trusted source of cancer data and trends in Ireland with its mission to collect, analyse and disseminate comprehensive information to improve cancer outcomes in Ireland. During 2023, we have continued to progress and innovate to fulfil this mission aimed at making a meaningful impact on the lives of those affected by cancer.

On behalf of the Board, I extend my appreciation to Prof. Deirdre Murray, Director of the National Cancer Registry, and her team for their commendable work in driving the Registry forward amidst ongoing changes and developments. During 2023, the National Cancer Registry developed its new Strategic Plan, building on progress to date and setting out ambitious goals for 2024-2026. This plan seeks to further expand the significant work of the Registry, with stakeholder engagement and feedback serving as key inputs. Ongoing connections with our stakeholders will be integral to the successful delivery of this plan.

I would also like to congratulate Prof. Murray on her appointment to the Steering Committee of the European Network of Cancer Registries (ENCR). The ENCR promotes collaboration between cancer registries which facilitates data driven insights for all of Europe. Prof. Murray's involvement will further strengthen our ties with European partners as the ENCR continues its work towards improving the quality of data collection, including data standardisation and training.

This year, we welcomed Mr. Niall Murphy to the Board in January, followed by the appointment of Ms. Cathy Enright in early 2024, filling the remaining Board vacancy.

I wish to thank all my fellow Board members for their contributions to and ongoing support of the work of the National Cancer Registry.

This is my final foreword to the Registry's Annual Report and Accounts. Having chaired the Board since 2017 I have decided to step down to focus on clinical and other work. It has been an honour to work with the organisation and support its development during this time and I am confident that it will continue to contribute significantly to policy, service development and research over the next three decades.

A handwritten signature in dark ink, appearing to read 'J. Coffey'.

Message from our Director



"By fostering a culture of transparency, communication, and shared decision-making, we have strengthened our commitment to driving meaningful impact in cancer registration and research over the next three years."

Prof Deirdre Murray
Director

As we reflect on the achievements and progress made by the National Cancer Registry in 2023, I am pleased to share with you the impactful initiatives and advancements that have shaped our organisation's journey. Throughout the year, we have embraced new challenges, implemented innovative strategies, and collaborated with international partners to enhance our capabilities in cancer data collection and analysis. The dedication and resilience of our team have been instrumental in driving positive change and positioning the NCRI as a leader in cancer registration and research. I am proud to present the following highlights of our accomplishments and milestones from the past year.

In 2023, the National Cancer Registry embarked on several new initiatives to enhance our operations. A comprehensive review of data collection processes at the NCRI led to a re-evaluation of the role of our cancer data registrars, recognising the shift to a more remote working environment. The Cancer Registration department successfully implemented a change management program, and I am pleased to see the dedication and adaptability displayed by our staff in embracing these new ways of working.

Our collaboration with BENCHISTA, an international effort to benchmark childhood cancer by stage, was a significant milestone for the NCRI. By incorporating the Toronto Staging Guidelines for childhood cancers into our database, we are contributing to a better understanding of childhood cancer survival rates across different countries.

Furthermore, as part of our commitment to continuous improvement, the NCRI has joined the National Screening Service's project to collect HL7 messaging from publicly funded laboratories. We are working towards establishing HL7 electronic extracts at Cork University Hospital and Galway University Hospital laboratories in the first instance, aligning with our goal of enhancing data sharing and interoperability in the healthcare sector.

The development of the National Cancer Registry's new 3-year strategy for 2024-2026 was a collaborative effort that engaged all stakeholders in shaping the future direction of our organisation. Through extensive consultations and feedback sessions, we gathered valuable insights and perspectives from our partners, staff, healthcare professionals, researchers, and community members. This inclusive approach ensured that our strategic priorities and objectives are aligned with the needs and aspirations of those we serve. By fostering a culture of transparency, communication, and shared decision-making, we have strengthened our commitment to driving meaningful impact in cancer registration and research over the next three years.

I would like to express my gratitude to our Chairman, Board members, and Advisory Council for their invaluable support and dedication to advancing the mission of the National Cancer Registry.

Deirdre Murray

About NCRI

1. Establishment

The National Cancer Registry Board (the “**Board**”) was established by Statutory Instrument 19 of 1991, “The National Cancer Registry Board (Establishment) Order, 1991” (the “**Order**”) under the Health (Corporate Bodies) Act, 1961. The Board discharges all of its statutory responsibilities through the National Cancer Registry (“**NCRI**”). The Order was amended three times:

1. in 1996 by S.I. No. 293/1996 (the National Cancer Registry Board (Establishment) Order, 1991 (Amendment) Order 1996);
2. in 2009 by the Health (Miscellaneous Provisions) Act 2009; and
3. in 2011 by S.I. No. 418/2011 (the Finance (Transfer of Departmental Administration and Ministerial Functions) Order 2011).

2. Statutory Functions

The statutory functions of the Board, as set out in the Order, are to:

1. identify, collect, classify, record, store and analyse information relating to the incidence and prevalence of cancer and related tumours in Ireland;
2. collect, classify, record and store information in relation to each newly diagnosed individual cancer patient and in relation to each tumour which occurs;
3. promote and facilitate the use of the data thus collected in approved research projects and in the planning and management of services;
4. publish an annual report based on the activities of the Registry; and
5. furnish advice, information and assistance in relation to any aspect of such service to the Minister for Health.

3. The National Cancer Registry Board

The Board is a statutory body established in 1991 under the Order as an agency of the Department of Health and Children (as it was at the time).

The Board has a full membership of seven who are appointed by the Minister for Health. The Board members as at 31 December 2023 were:

- Dr. Jerome Coffey (Chair)
- Dr. Robert O’Connor
- Ms. Mary Bourke
- Prof. Mark Lawler
- Ms. Ellen Farrell
- Mr. Niall Murphy

Ms. Cathy Enright was appointed to the Board on 11 January 2024.

NCRI Overview

Who are we, and what do we do?

The National Cancer Registry of Ireland (NCRI) works on behalf of the Department of Health and collects information from all hospitals in Ireland on the number of persons diagnosed with cancer and the types of cancer they have. NCRI also follows up the numbers dying from their cancer or from other causes. All patient personal and private information are removed before summary cancer statistics are prepared and made available to the public and health professionals through our annual cancer report and other reports on our website.

How are the numbers reported?

Collecting and checking all of this information is performed by a combination of manual and electronic processes. Our staff collect cancer diagnosis information and then use an agreed system of coding (The International Classification of Diseases) to group the cancers into different types. After a process of collating diverse information from Irish hospitals and validation for accuracy, the annual cancer report is published following analysis of de-identified data.

How many people were diagnosed with cancer?

- On average, 41,767 cancers or related tumours were diagnosed each year during 2019-2021.
- The figure most often quoted in international comparisons ('all invasive cancer, excluding NMSC') averaged 24,424 cases (13,075 males and 11,349 females) diagnosed annually during 2019-2021, or 58% of all registered tumours.
- Invasive cancers (including NMSC) averaged 34,335 cases per year during 2019-2021.
- 24% (almost 1 in 4) were non-melanoma skin cancers (NMSC).
- Approximately 18% (almost 1 in 5) of these were non-invasive neoplasms (in situ carcinomas, tumours of uncertain behaviour and benign brain and CNS tumours).

How many people die of cancer?

- Of all deaths occurring in 2021 in Ireland, 28% (more than 1 in 4) were attributable to cancer. Another 27% and 9% were attributable to diseases of the cardiovascular and respiratory systems respectively.
- On average during 2019-2021 there were 9,621 deaths per year from invasive cancer (5,184 in males, 4,436 in females), or 9,874 deaths per year across all tumour types.



National
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Excellent data insights for better cancer outcomes

Our Activities



Collect

We collect, classify, record & store information on all new cancer cases in Ireland



Analyse

We monitor and analyse trends and outcomes in different cancer types



Publish

We publish an annual report on cancer statistics and regularly produce publications on trends & projections



Disseminate

We promote & facilitate the use of the data we collect in research & in the planning & management of cancer services

Our Vision, Mission & Values



OUR VISION

Excellent data insights for better cancer outcomes



OUR MISSION

To collect, analyse and disseminate comprehensive information to improve cancer outcomes



RESPECT

We treat everyone with dignity of respect



TRUST

We honour our commitments



COLLABORATION

We work collaboratively with all our stakeholders



ENTHUSIASM

We are passionate about and take great pride in our work



QUALITY

We are committed to continuous quality improvement



CONFIDENTIALITY

We treat all our patient information with the highest level of data security

Strategic Objectives

01

Capture a comprehensive picture of the patient cancer journey.

**02**

Be the independent, expert and trusted source of cancer data and trends.

**03**

Enhance research capabilities and develop vibrant and collaborative research networks in Ireland and internationally.

**04**

Be at the forefront of informing health information regulation and in the deployment of Digital Health Initiatives.

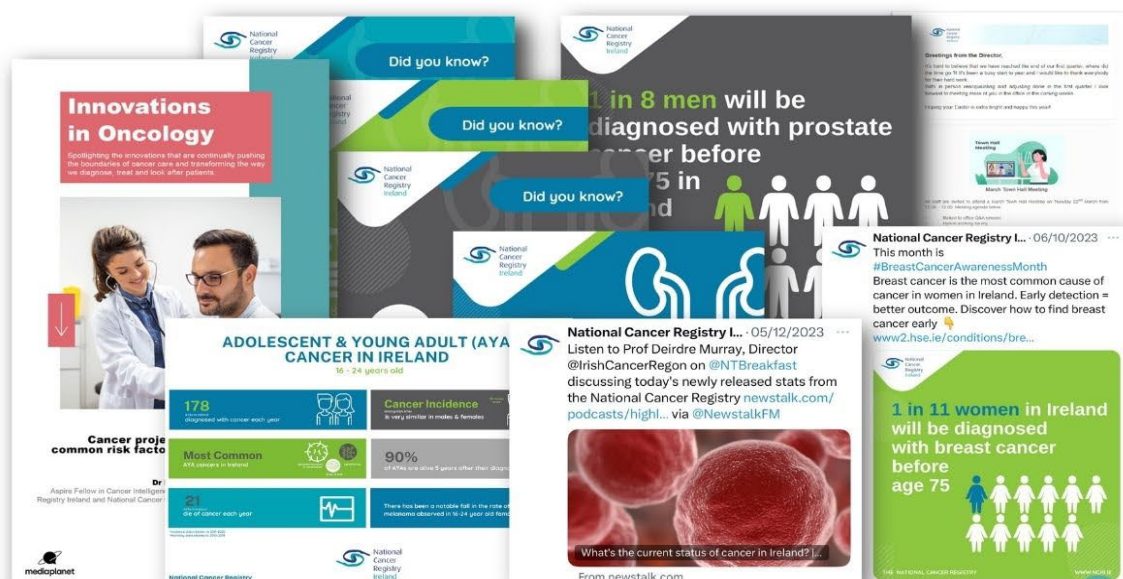
**05**

Enhance organisational capabilities through investment and strengthened governance.



Snapshot of 2023

2023 media & stakeholder engagement



2023 awards



2023 in numbers

55,500

Tumours registered

30,000

Invasive tumours registered

35 

Sources from which we receive data electronically

94%

% of tumours registered electronically

94%

% of invasive tumours registered electronically

107 

Locations from which we collect data



7



Scientific papers published
(NCRI co-authors)

211



Data requests processed

4

Reports published

98

Media articles that quoted NCRI data

16 

Infographics published

13

Press releases and news articles published

9

Oral and poster presentations

22

Parliamentary questions answered

211,000

Page views on www.ncri.ie

11



Staff newsletters sent



3



Major awards received

9

New staff appointments

54



Employees

2 

Staff retired

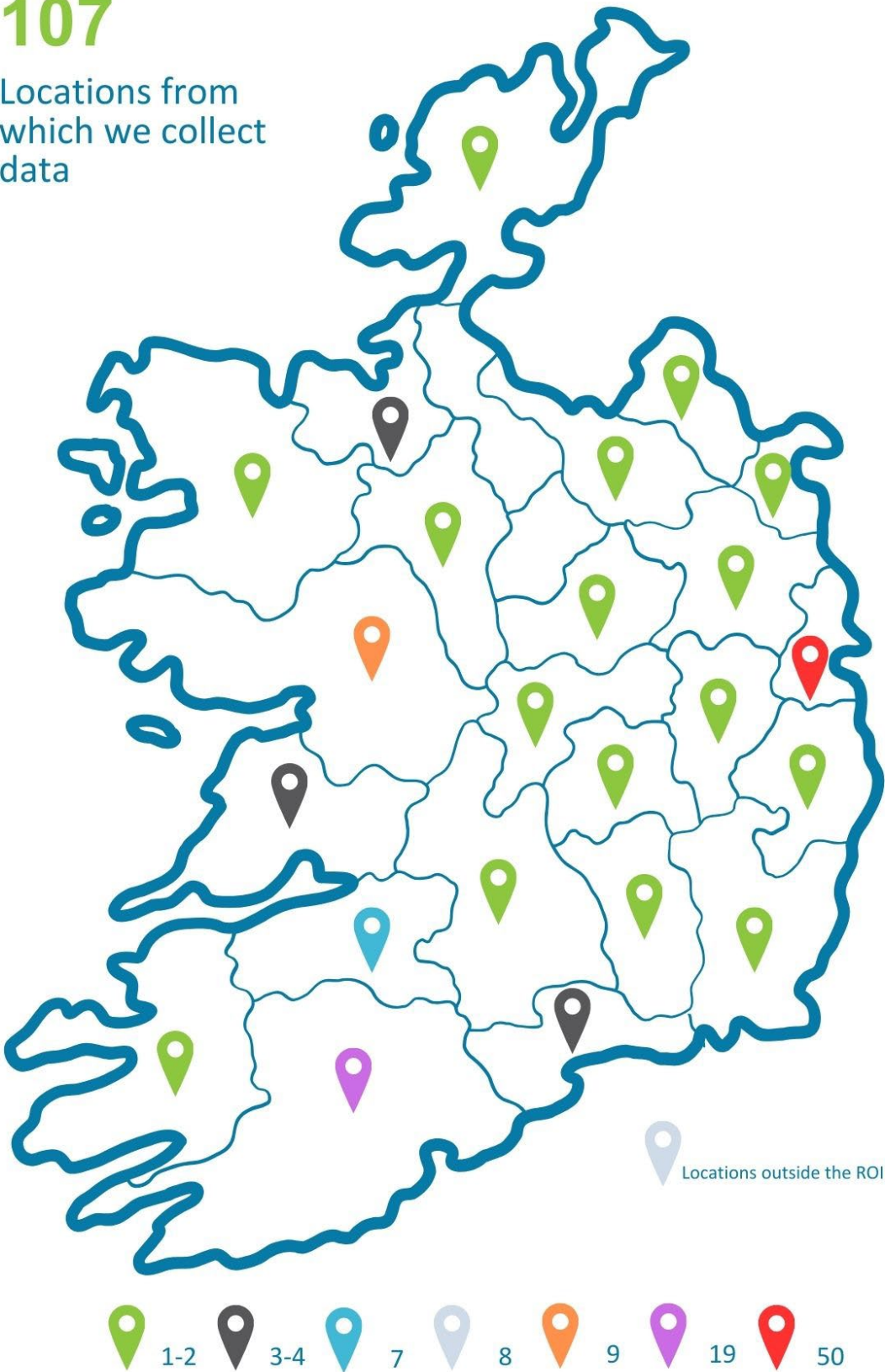
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Retired staff receiving pensions



107

Locations from which we collect data



Corporate Statement

1. Performance Delivery & Oversight

In accordance with the Code of Practice for the Governance of State Bodies 2016 (the “**Code of Practice**”), the NCRI has written oversight and performance delivery agreements for 2023-2024 with the Department of Health, which clearly define the respective roles and responsibilities of the Department and the NCRI and the terms of this relationship. The Agreements also set out the arrangements for the effective governance, funding and general administration of the NCRI in accordance with the Code of Practice. No derogations or exceptions from the Code of Practice have been agreed with the Department of Health.

In line with the requirements of the Code of Practice, an appropriate assessment of the principal risks of the NCRI was carried out including a description of these risks and associated mitigation strategies and controls.

2. Expenditure

The NCRI fully complied with the Public Spending Code throughout 2023.

3. Diversity & Inclusion

Equality, Diversity and Inclusion (ED&I) was an organisational priority in 2023, reflected in all our culture, actions and behaviours.

In May 2023 the NCRI Diversity and Inclusion Policy was created and rolled out to all staff. This policy sits alongside the NCRI Equal Opportunities Policy. To support the roll out of this policy NCRI Senior Management team attended a training workshop entitled “Inclusive Leadership” organised by the Irish Centre for Diversity. This training aimed to ensure that all the actions, communications, and engagements within the NCRI are conducted with accessibility, transparency and without bias.

Of the 9 roles recruited in 2023, 2 were offered to males and 7 to females. We reported to the National Disability Authority in Q1 of 2023 that 6.5% of our workforce had declared a disability in the preceding 12 months. We ensure that all of our people are treated fairly, receiving the same salary, terms and conditions and equal access to personal and career development, recruitment opportunities and flexible working arrangements. We launched our Interim Blended Working Policy in Q3 of 2022. After a further review and staff consultation in 2023, this Policy was updated and is now embedded on a permanent footing within the organisation.

NCRI offers a range of policies and practices that support our people in reaching their potential while maintaining balance and wellbeing. We have been accredited the IBEC KeepWell Mark for our commitment to employee wellbeing. We have also been recognised as a Great Place to Work in 2023. In a company-wide engagement survey the NCRI scored well on all questions around diversity and inclusion.

In conjunction with the National Disability Association, our corporate website was audited in relation to the EU Web Accessibility Directive and all audit recommendations were implemented to ensure on-going compliance.

Overall, we believe that by embracing diversity and fostering an inclusive environment we can enhance our effectiveness and create a workforce where everyone feels they belong.

As at 31 December 2023, the Board had six members: four male board members (67%) and two female board members (33%), with one position vacant. The Board therefore did not meet the Government target of a minimum of 40% representation of each gender in the membership of State Boards in 2023.

The Minister appointed one new female member to the Board on 11 January 2024, which brought the gender balance on the Board to 57% male and 43% female, thereby meeting the Government gender representation target.

4. Public Sector Equality & Human Rights

Section 42 of the Irish Human Rights and Equality Commission Act 2014 requires a public body, in the performance of its functions, to have regard to the need to eliminate discrimination, promote equality of opportunity and treatment of its staff and the persons to whom it provides services, and protect the human rights of its members, staff and the persons to whom it provides services.

The NCRI's strategic objective of enhancing its organisational capabilities through investment and strengthened governance ensures its compliance with its public sector duty under the Act.

5. Energy Consumption

In November 2021, the Government launched the Climate Action Plan. The Plan commits Ireland to a legally binding target of net-zero greenhouse gas (GHG) emissions no later than 2050, and to an absolute reduction of 51% in GHG emissions by 2030, (against a 2016-2018 baseline).

The oversight and monitoring of our Climate Action Strategy is a priority for the Board and Senior Management Team of the NCRI. To ensure the inclusion, integration, and realisation of the climate action goals of the NCRI, key roles have been established throughout the organisation.

NCRI Consumption & Compliance

The main energy users at the National Cancer Registry are air conditioning and heating. Other uses include lighting, office equipment and catering. All of these are powered by electricity and there is no consumption of gas or fossil fuels for any purpose. It is not possible to apportion electricity consumption between these various uses, as they come off the same supply. In 2023, the National Cancer Registry consumed 63.85 MWh of energy, all electrical.

NCRI complied with Circular 01/2020: Procedures for Offsetting the Emissions Associated with Official Air Travel remitting €102.53 in relation to 2.114 tonnes of CO₂ applicable for 2023 (€34.74 re 0.8466 tonnes of CO₂ in 2022).

Key Areas Progressed in 2023

- Development of NCRI Climate Action Roadmap
- In December 2023, we replaced all lightbulbs in our office from traditional fluorescent tube to LED tube. This is anticipated to yield a significant reduction in energy usage and the initial investment is expected to be recouped through cost savings within 2-3 years.

6. Official Languages Act 2003 (as amended)

The NCRI continues its work in fulfilling its obligations under the Official Languages Act 2003 (as amended).



National
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National Cancer Registry Board

Financial Statements

For the Year Ended 31st December 2023

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Information

Board

The Board consists of a chairperson and six ordinary members, all of whom are appointed by the Minister for Health. The members of the Board were appointed for varying periods - the table below details the appointment dates for current members:

Name	Role	First Appointment	Reappointment	Resignation	Tenure Expires
Dr Jerome Coffey	Chairperson	13/06/2017	15/02/2021		14/02/2025
Mr Eamonn Morris	Board Member	12/04/2019	05/04/2022	21/04/2023	
Dr Robert O'Connor	Board Member	12/04/2019	05/04/2022		04/04/2026
Prof Mark Lawler	Board Member	15/07/2021			14/07/2025
Ms Mary Bourke	Board Member	15/07/2021			14/07/2025
Ms Ellen Farrell	Board Member	04/05/2022			03/05/2026
Mr Niall Murphy	Board member	16/01/2023			15/01/2027
Ms Cathy Enright	Board Member	11/01/2024			10/01/2028

Business Address

Building 6800, Cork Airport Business Park,
Kinsale Road, Cork. T12 CDF7

Bankers

Allied Irish Banks plc, 66 South Mall, Cork.

Auditor

Comptroller and Auditor General, 3A Mayor Street Upper, Dublin.

Solicitors

RDJ LLP, 85 S Mall, Centre, Cork, T12 TP8D

Governance Statement and Board Members' Report

1. Governance

The Board of the National Cancer Registry was established under the National Cancer Registry Board Establishment (Order) 1991. The functions of the Board are set out in section 4 of this Act. The Board is accountable to the Minister for Health and is responsible for ensuring good governance and performs this task by setting strategic objectives and targets and taking strategic decisions on all key business issues. The regular day-to-day management, control and direction of the National Cancer Registry are the responsibility of the Director and the senior management team. The Director and the senior management team must follow the broad strategic direction set by the Board and must ensure that all Board members have a clear understanding of the key activities and decisions related to the entity, and of any significant risks likely to arise. The Director acts as a direct liaison between the Board and management of the National Cancer Registry.

2. Board Responsibilities

The work and responsibilities of the Board are set out in the Board Induction Policy, which also contain the matters specifically reserved for Board decision. Standing items considered by the Board include:

- declaration of interests,
- reports from committees,
- financial reports/management accounts,
- performance reports, and
- reserved matters.

Section 21 of the National Cancer Registry Board Establishment (Order) 1991 requires the Board of the National Cancer Registry to keep, in such form as may be approved by the Minister for Health with consent of the Minister for Public Expenditure and Reform, all proper and usual accounts of money received and expended by it. In preparing these financial statements, the Board of the National Cancer Registry is required to:

- select suitable accounting policies and apply them consistently,
- make judgements and estimates that are reasonable and prudent,
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that it will continue in operation, and
- state whether applicable accounting standards have been followed, subject to any material departures disclosed and explained in the financial statements.

The Board is responsible for keeping adequate accounting records which disclose, with reasonable accuracy at any time, its financial position and enables it to ensure that the financial statements comply with Section 21 of the National Cancer Registry Board Establishment (Order) 1991. The maintenance and integrity of the corporate and financial information on the National Cancer Registry's website is the responsibility of the Board.

The Board is responsible for approving the annual plan and budget. Evaluation of the Registry's performance by reference to the annual plan and budget is carried out on an ongoing basis.

The Board is also responsible for safeguarding its assets and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities. Except for the non-compliance with the requirements of FRS102 in relation to retirement benefit entitlements, the Board considers that the financial statements of the National Cancer Registry give a true and fair view of the financial performance and the financial position of the National Cancer Registry as at 31 December 2023.

3. Audit & Risk Committee

The Audit and Risk Committee comprises three Board members and one independent member. The role of the Audit and Risk Committee (ARC) is to support the Board in relation to its responsibilities for issues of risk, control and governance and associated assurance. The ARC is independent from the financial management of the Registry. The ARC ensures that the internal control systems including audit activities are monitored actively and independently. The ARC report to the Board after each meeting includes their appraisal of risk management systems. The ARC presents its opinion on the adequacy of internal control systems to the Board annually.

The members of the Audit and Risk Committee during 2023 were: Mr. Eamonn Morris (Chairperson – resigned on 21/04/2023), Ms. Ellen Farrell (appointed as Chairperson on 28/06/2023) Ms. Mary Bourke, Mr. Niall Murphy (appointed to ARC on 28/06/2023) and Mr. Cormac McSweeney (external member).

There were four meetings of the ARC in 2023.

4. Schedule of Attendance and Fees

A schedule of attendance at the Board and Committee meetings for 2023 is set out below. No fees are paid to Board members for meetings.

Name	Board	ARC
No of Meetings	7	4
Dr Jerome Coffey	7	N/A
Dr Robert O'Connor	6	N/A
Prof Mark Lawler	5	N/A
Mr Eamonn Morris (retired)	1	1
Ms Ellen Farrell	7	4
Ms Mary Bourke	6	4
Mr Niall Murphy	6	2

5. Disclosures Required by Code of Practice for the Governance of State Bodies (2016)

The Board is responsible for ensuring that the National Cancer Registry has complied with the requirements of the Code of Practice for the Governance of State Bodies 2016. The following disclosures are required by the Code:

a. Employee Short-Term Benefits Breakdown

Employees' short-term benefits in excess of €60,000 are detailed in note 4 to the financial statements.

b. Consultancy Costs

Consultancy costs as detailed in note 13 of the financial statements include the cost of external advice to management and excludes outsourced 'business-as-usual' functions.

c. Legal Costs and Settlements

There was €0 (€23,528 in 2022) in expenditure in the reporting period in relation to legal costs, settlements and conciliation and arbitration proceedings relating to contracts with third parties. This does not include expenditure incurred in relation to general legal advice received by the National Cancer Registry which is disclosed in Consultancy Costs above.

d. Hospitality Expenditure

No expenditure was incurred on Board, Staff, or client hospitality by the National Cancer Registry in 2023.

e. Travel and Subsistence Expenditure

The Income & Expenditure and Retained Revenue Reserves Statement includes the following Travel and subsistence expenditure:

	Domestic	International	Total
Employees	€21,166	€21,417	€42,583
Board	€541	€0	€541
	€21,707	€21,417	€43,124

6. Statement of Compliance

The Board has adopted the Code of Practice for the Governance of State Bodies (2016) and has put procedures in place to ensure compliance with the Code. The National Cancer Registry Board was in compliance with the Code of Practice for the Governance of State Bodies for 2023.

On behalf of the Board



.....
Dr Jerome Coffey
Chairperson

Date: 19 June 2024



.....
Ellen Farrell
Board Member

Date: 19 June 2024

Statement on Internal Control for the year ended 31st December 2023

1. Scope of Responsibility

On behalf of the National Cancer Registry Ireland (NCRI), I acknowledge the Board's responsibility for ensuring that an effective system of internal control is maintained and operated. This responsibility takes account of the requirements of the Code of Practice for the Governance of State Bodies (2016).

2. Purpose of the System of Internal Control

The system of internal control is designed to manage risk to a tolerable level rather than to eliminate it. The system can therefore only provide reasonable, and not absolute, assurance that assets are safeguarded, transactions authorised and properly recorded, and that material errors or irregularities are either prevented or detected in a timely way.

The system of internal control, which accords with guidance issued by the Department of Public Expenditure, National Development Plan Delivery and Reform has been in place in the NCRI for the year ended 31 December 2023 and up to the date of approval of the financial statements.

3. Capacity to Handle Risk

The NCRI has an Audit and Risk Committee (ARC) comprising three Board members and one external member, with financial and audit expertise. The Committee met four times in 2023.

The National Cancer Registry has an established outsourced internal audit function which is adequately resourced and conducts a programme of work agreed with the ARC.

A risk management policy and procedure has been approved by the Board, which sets out NCRI's risk appetite, the risk management processes in place, and the roles and responsibilities of staff in relation to risk. The policy has been issued to all staff who are expected to work within the NCRI's risk management policies, to alert management on emerging risks and control weaknesses and assume responsibility for risks and controls within their own area of work.

4. Risk and Control Framework

NCRI has implemented a risk management system which identifies and reports key risks and the management actions being taken to address and, to the extent possible, to mitigate those risks.

A risk register is in place which identifies the key risks facing the NCRI and these have been identified, evaluated, and graded according to their significance. The risks are regularly reviewed, as appropriate, by various levels within the organisation including management, the ARC, and the Board. These assessments are used to plan and allocate resources to ensure risks are managed to an acceptable level.

The risk register details the controls and actions needed to mitigate risks and responsibility for operation of controls assigned to specific staff. I confirm that a control environment containing the following elements is in place:

- procedures for all key business processes have been documented,
- financial responsibilities have been assigned at management level with corresponding accountability,
- there is an appropriate budgeting system with an annual budget which is kept under review by senior management,
- there are systems aimed at ensuring the security of the information and communication technology systems,
- there are systems in place to safeguard the assets.

Throughout 2023, in line with government policy, most of NCRI's staff operated to a blended working model of working from both home and office. NCRI has established systems and controls that facilitate dispersed and remote working. Potential security and control threats were monitored and addressed on an ongoing basis. NCRI has been able to continue its operations without disruption and with minimal changes to its risk and control processes.

5. Ongoing Monitoring and Review

Formal procedures have been established for monitoring control processes and control deficiencies are communicated to those responsible for taking corrective action, to management and to the Board, where relevant, in a timely way. I confirm that the following ongoing monitoring systems are in place:

- key risks and related controls have been identified and processes have been put in place to monitor the operation of those key controls and report any identified deficiencies,
- reporting arrangements have been established at all levels where responsibility for financial management has been assigned, and
- there are regular reviews by senior management of periodic and annual performance and financial reports which indicate performance against budgets/forecasts.

6. Procurement

I confirm that NCRI has procedures in place to ensure compliance with current procurement rules and guidelines and that during 2023 the NCRI complied with those procedures.

7. Review of effectiveness

I confirm that NCRI has procedures to monitor the effectiveness of its risk management and control procedures. NCRI's monitoring and review of the effectiveness of the system of internal control is informed by the work of the internal and external auditors, the ARC which oversees their work and senior management within NCRI who are responsible for the development and maintenance of the internal control framework.

I confirm that the Board conducted an annual review of the effectiveness of the internal controls for 2023.

8. Internal control issues

No weaknesses in internal control were identified in relation to 2023 that require disclosure in the financial statements.

Signed on behalf of the Board of the National Cancer Registry



.....
Dr Jerome Coffey
Chairperson

Date: 19 June 2024



Ard Reachtaire Cuntas agus Ciste Comptroller and Auditor General

Report for presentation to the Houses of the Oireachtas National Cancer Registry Board

Qualified opinion on the financial statements

I have audited the financial statements of the National Cancer Registry Board for the year ended 31 December 2023 as required under the provisions of section 5 of the Comptroller and Auditor General (Amendment) Act 1993. The financial statements have been prepared in accordance with Financial Reporting Standard (FRS) 102 — *The Financial Reporting Standard applicable in the UK and the Republic of Ireland* and comprise

- the statement of income and expenditure and retained revenue reserves
- the statement of financial position
- the statement of cash flows, and
- the related notes, including a summary of significant accounting policies.

In my opinion, except for the non-compliance with the requirements of FRS 102 in relation to retirement benefit entitlements referred to below, the financial statements give a true and fair view of the assets, liabilities and financial position of the National Cancer Registry Board at 31 December 2023 and of its income and expenditure for 2023 in accordance with FRS 102.

Basis for qualified opinion on financial statements

In compliance with the directions of the Minister for Health, the National Cancer Registry Board accounts for the costs of retirement benefit entitlements only as they become payable. This does not comply with FRS 102 which requires that the financial statements recognise the full cost of retirement benefit entitlements earned in the period and the accrued liability at the reporting date. The effect of the non-compliance on the National Cancer Registry Board's financial statements for 2023 has not been quantified.

I conducted my audit of the financial statements in accordance with the International Standards on Auditing (ISAs) as promulgated by the International Organisation of Supreme Audit Institutions. My responsibilities under those standards are described in the appendix to this report. I am independent of the National Cancer Registry Board and have fulfilled my other ethical responsibilities in accordance with the standards.

I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my opinion.

Report on information other than the financial statements, and on other matters

The National Cancer Registry Board has presented certain other information together with the financial statements. This comprises the annual report, the governance statement and Board members' report, and the statement on internal control. My responsibilities to report in relation to such information, and on certain other matters upon which I report by exception, are described in the appendix to this report.

I have nothing to report in that regard.

John Crean
For and on behalf of the Comptroller and Auditor
General

21 June 2024

Appendix to the report

Responsibilities of Board members

As detailed in the governance statement and Board members' report, the Board members are responsible for

- the preparation of annual financial statements in the form prescribed under section 21 of the National Cancer Registry Board (Establishment) Order 1991
- ensuring that the financial statements give a true and fair view in accordance with FRS 102
- ensuring the regularity of transactions
- assessing whether the use of the going concern basis of accounting is appropriate, and
- such internal control as they determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

Responsibilities of the Comptroller and Auditor General

I am required under section 5 of the Comptroller and Auditor General (Amendment) Act 1993 to audit the financial statements of the National Cancer Registry Board and to report thereon to the Houses of the Oireachtas.

My objective in carrying out the audit is to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement due to fraud or error. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with the ISAs will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with the ISAs, I exercise professional judgment and maintain professional scepticism throughout the audit. In doing so,

- I identify and assess the risks of material misstatement of the financial statements whether due to fraud or error; design and perform audit procedures responsive to those risks; and obtain audit evidence that is sufficient and appropriate to provide a basis for my opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- I obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the internal controls.
- I evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures.

- I conclude on the appropriateness of the use of the going concern basis of accounting and, based on the audit evidence obtained, on whether a material uncertainty exists related to events or conditions that may cast significant doubt on the National Cancer Registry Board's ability to continue as a going concern. If I conclude that a material uncertainty exists, I am required to draw attention in my report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify my opinion. My conclusions are based on the audit evidence obtained up to the date of my report. However, future events or conditions may cause the National Cancer Registry Board to cease to continue as a going concern.
- I evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

I communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that I identify during my audit.

I report by exception if, in my opinion,

- I have not received all the information and explanations I required for my audit, or
- the accounting records were not sufficient to permit the financial statements to be readily and properly audited, or
- the financial statements are not in agreement with the accounting records.

Information other than the financial statements

My opinion on the financial statements does not cover the other information presented with those statements, and I do not express any form of assurance conclusion thereon.

In connection with my audit of the financial statements, I am required under the ISAs to read the other information presented and, in doing so, consider whether the other information is materially inconsistent with the financial statements or with knowledge obtained during the audit, or if it otherwise appears to be materially misstated. If, based on the work I have performed, I conclude that there is a material misstatement of this other information, I am required to report that fact.

Reporting on other matters

My audit is conducted by reference to the special considerations which attach to State bodies in relation to their management and operation. I report if I identify material matters relating to the manner in which public business has been conducted.

I seek to obtain evidence about the regularity of financial transactions in the course of audit. I report if I identify any material instance where public money has not been applied for the purposes intended or where transactions did not conform to the authorities governing them.

Statement of Income and Expenditure and Retained Revenue Reserves

For the year ended 31st December 2023

	Notes	2023 €	2022 €
Income			
Department of Health	2	4,266,628	3,606,890
Retirement Benefit Contributions		95,519	85,846
Other Income	3	231,371	87,180
Total Income		<u>4,593,518</u>	<u>3,779,916</u>
Expenditure			
Staff Costs	4	3,510,223	2,954,322
Administration Expenses	5	955,947	829,052
Travel and Subsistence		43,124	11,711
Total Expenditure		<u>4,509,294</u>	<u>3,795,085</u>
Surplus for the year before appropriations		84,224	(15,169)
Transfer (to)/from capital account	9	(23,388)	59,548
Surplus for the year after appropriations		60,836	44,379
Balance brought forward at 1st January		209,460	165,081
Balance carried forward at 31st December		<u>270,296</u>	<u>209,460</u>

The Statement of Income and Expenditure Retained Revenue Reserves include all gains and losses recognised in the year.

The Statement of Cash Flows on page 26 and notes on pages 27 - 36 form part of these financial statements.

On behalf of the Board:



.....

Dr Jerome Coffey
Chairperson

Date: 19 June 2024



.....

Ellen Farrell
Board Member

Date: 19 June 2024

Statement of Financial Position
As at 31st December 2023

	Notes	2023 €	2022 €
Property Plant & Equipment	6	<u>210,370</u>	<u>187,260</u>
Current Assets			
Receivables and Prepayments	7	167,633	219,621
Cash and Cash Equivalents		<u>370,712</u>	<u>217,741</u>
Total Income		<u>538,345</u>	<u>437,362</u>
Current Liabilities			
Revenue & Payroll Deductions		99,779	89,046
Other Payables		37,033	33,247
Accruals		113,924	51,033
Grants received in advance	8	<u>17,312</u>	<u>54,576</u>
Total Expenditure		<u>268,048</u>	<u>227,902</u>
Net Current Assets		<u>270,297</u>	<u>209,460</u>
Total Net Assets		<u>480,667</u>	<u>396,720</u>
Representing:			
Capital Account		210,371	187,260
Retained Revenue Reserves		<u>270,296</u>	<u>209,460</u>
		<u>480,667</u>	<u>396,720</u>

The Statement of Cash Flows on page 26 and Notes on pages 27 – 36 form part of these financial statements.

On behalf of the Board:



.....
 Dr Jerome Coffey
 Chairperson

Date: 19 June 2024



.....
 Ellen Farrell
 Board Member

Date: 19 June 2024

Statement of Cash Flows
For the year ended 31st December 2023

	2023	2022
	€	€
Net Cash Flows from Operating Activities		
Excess Income Over Expenditure	60,836	44,379
Depreciation and Impairment of Fixed Assets	205,240	171,438
Transfer from / (to) Capital Account	23,388	(59,549)
(Increase) / Decrease in Receivables	51,989	(30,127)
Increase / (Decrease) in payables	40,146	(76,981)
Net Cash flow from Operating Activities	381,599	49,160
Cash Flows from Investing Activities		
Payments to acquire Property, Plant & Equipment	(228,628)	(111,889)
Net Cash Flows from Financing Activities	-	-
	(228,628)	(111,889)
Net Increase / (Decrease) in Cash and Cash Equivalents	152,971	(62,729)
Cash and cash equivalents at 1 January 2023	217,741	280,470
Cash and cash equivalents at 31 December 2023	370,712	217,741

Notes to the Financial Statements

For the year ended 31st December 2023

1. Accounting Policies

The basis of accounting and significant accounting policies adopted by the National Cancer Registry Board are set out below. They have all been applied consistently throughout the year and for the preceding year.

a) General Information

The National Cancer Registry Board (the Registry) was established by the Minister for Health in 1991 under S.I No 19/1991 – The National Cancer Registry Board (Establishment) Order, 1991. The Registry was set up to record information on all cancer cases occurring in Ireland and has been collecting such data since 1994.

The Registry is a Public Benefit Entity (PBE). Its functions were laid down in legislation in 1991, with an amendment in 1996 and are as follows:

- To identify, collect, classify, record, store and analyse information relating to the incidence and prevalence of cancer and related tumours in Ireland.
- To collect, classify, record and store information in relation to each newly diagnosed individual cancer patient and in relation to each tumour which occurs.
- To promote and facilitate the use of the data thus collected in approved research projects and in the planning and management of services.
- To publish an annual report based on the activities of the Registry.
- To furnish advice, information, and assistance in relation to any aspect of such service to the Minister.

b) Statement of Compliance

The financial statements of NCR for the year ended 31 December 2023 have been prepared in accordance with Financial Reporting Standard (FRS) 102 (the financial reporting standard applicable in the UK and Ireland) as promulgated by Chartered Accountants Ireland and modified by the directions of the Minister in relation to superannuation. In compliance with the directions of the Minister, the Board accounts for the costs of superannuation entitlements only as they become payable. [See Accounting Policy (i)].

This basis of accounting does not comply with Financial Reporting Standard 102 which requires such costs to be recognised in the year the entitlements are earned.

c) Basis of Preparation

The financial statements are prepared under the accruals method of accounting and under the historical cost convention in the form approved by the Minister for Health with the concurrence of the Minister for Public Expenditure and Reform, in accordance with Section 21 of National Cancer Registry (Establishment) Order 1991. The following accounting policies have been applied consistently in dealing with items which are considered material in relation to NCR's financial statements.

d) Revenue

Oireachtas Grants

Revenue Grants are recognised on a cash receipts basis. Capital grants are transferred to a Capital Account and amortised over the same period as the related fixed assets are depreciated.

e) Research Grants

Research grants are recognised in the period in which the corresponding expenditure is incurred and are accounted for as Other Income.

f) Property, Plant & Equipment

Property, plant, and equipment is stated at cost less accumulated depreciation, adjusted for any provision for impairment. Assets acquired receive a full 12 month's depreciation charge in the year of acquisition. Depreciation is provided on all property, plant, and equipment, other than freehold land and artwork, at rates estimated to write off the cost less the estimated residual value of each asset on a straight-line basis over their estimated useful lives, as follows:

- (i) Fixtures and Fittings: 20% per annum
- (ii) Office Equipment: 20% per annum
- (iii) Computer Hardware: 25% per annum
- (iv) Computer Software: 33% per annum

Residual value represents the estimated amount which would currently be obtained from disposal of an asset, after deducting estimated costs of disposal, if the asset were already of an age and in the condition expected at the end of its useful life.

If there is objective evidence of impairment of the value of an asset, an impairment loss is recognised in the Statement of Income and Expenditure and Retained Revenue Reserves in the year.

g) Operating Leases

Rental expenditure under operating leases is recognised in the Statement of Income and Expenditure and Retained Revenue Reserves over the life of the lease.

h) Employee Benefits

Short term benefits such as holiday pay are recognised as an expense in the year, and benefits that are accrued at year-end are included in the Other Payables figure in the Statement of Financial Position.

i) Retirement Benefits

By direction of the Minister no provision has been made in respect of accrued benefits payable in future years under the Nominated Health Agencies Superannuation Scheme and its Spouses and Children Scheme (NHASS) and the Single Public Sector Pension Scheme (SPSPS).

Contributions from employees who are members of the NHASS are credited to the Statement of Income and Expenditure and Retained Revenue Reserves when received. Retirement Benefit payments are charged to the Statement of Income and Expenditure and Retained Revenue Reserves when payable.

All new entrants to the public service with effect from 1 January 2013 are members of the SPSPS, where all employees' pension deductions are paid over to the Department of Public Expenditure, National Development Plan Delivery and Reform. Pension payments under the scheme are charged to the statement of income and expenditure and retained revenue reserves when paid.

j) Critical Accounting Judgements and Estimates

The preparation of the financial statements requires management to make judgements, estimates and assumptions that affect the amounts reported for assets and liabilities as at the reporting date and the amounts reported for revenues and expenses during the year. However, the nature of estimation means that actual outcomes could differ from those estimates. The following judgements have had the most significant effect on amounts recognised in the financial statements.

k) Capital Accounting

In accordance with the accounting standards prescribed by the Minister, expenditure on fixed asset additions is charged to the Revenue Income and Expenditure Account or the Capital Income and Expenditure Account, depending on whether the asset is financed by capital or revenue funding. Computer/ICT Equipment over €2,000 and other Equipment over €7,000 which are funded from Revenue will also be treated as a fixed asset.

l) Depreciation and Residual Values

The Directors have reviewed the asset lives and associated residual values of all fixed asset classes, and the useful economic life and residual values of fixtures and fittings and have concluded that asset lives, and residual values are appropriate.

2. Department of Health

	2023	2022
	€	€
Revenue Grant (Vote 38, Subhead B.1)	4,038,000	3,495,000
Capital Grant (Note 9)	228,628	111,890
	4,266,628	3,606,890

3. Other Income

	2023	2022
	€	€
Research Grants		
Covid Effects	59,507	54,035
HRB (CARG)	28,813	-
BCNI	40,923	-
Cancer Prevention (ICS)	-	5,787
Cerviva ICE	-	1,325
	129,243	61,147
Non-Research Grant		
National Screening Service (NSS)	102,128	26,033
	231,371	87,180

See Note 8 below for the related movements and balances.

4. Staff Costs

	2023	2022
<i>The average numbers of employees during the year were:</i>	Number	Number
Director	1	1
Administration	26	24
Cancer Data Registrar	24	19
	51	44
Whole time equivalent numbers at 31st December	50.86	42.72

4. Staff Costs (cont/d)	2023	2022
	€	€
Aggregate Employee Benefits		
Staff Short-term benefits	2,821,368	2,399,396
Termination benefits	-	-
Employer's contribution to social welfare	290,870	243,421
Retirement Benefit costs	397,985	235,091
Contracted Services	-	76,414
	<u>3,510,223</u>	<u>2,954,322</u>
Staff Short-term benefits		
Basic Pay	3,510,223	2,954,322
Overtime	-	-
Allowances	-	-
Total	<u>3,510,223</u>	<u>2,954,322</u>

Further information on key management personnel is included in note 12.

Employee Single Public Service Pension Scheme contributions paid over to the Department of Public Expenditure, National Development Plan Delivery and Reform in 2023 were €43,166. (2022 €28,934)

Note: For the purposes of this disclosure, short-term employee benefits in relation to services rendered during the reporting period include salary, overtime allowances and other payments made on behalf of the employee but exclude employer's PRSI.

Director's Remuneration (all short-term excl. Employers PRSI)	2023	2022
	€	€
Current Post Holder (started on 9/6/2021)	137,601	133,372
	<u>137,601</u>	<u>133,372</u>
Directors Expenses		
Current Post Holder	12,257	5,945
	<u>12,257</u>	<u>5,945</u>

Following an open recruitment process, the current Director assumed responsibility for the role in June 2021, under a secondment arrangement with the HSE for a period of five years. NCRI reimburse the HSE for the Director's Gross Pay and Employers PRSI costs. The current post holder did not receive any Performance Related Reward in 2023

Board Members Remuneration and Expenses

Board members do not receive fees. Travel and Subsistence Costs of €541 were incurred by Board members for attendance at Board meetings in 2023. Costs of €0 were incurred in 2022.

4. Staff Costs (cont/d)

No. of Employee's Breakdown by salary band at end December	2023	2022
Less than €60K	38	35
Between €60K - €70K	10	6
Between €70K - €80K	2	3
Between €80K - €90K	1	1
Between €90K - €100K	1	0
Between €100K - €110K	0	1
Between €110K-€120K	0	0
Between €120K-€130K	0	0
Between €130K-€140K	1	1
Total	53	47

5. Administration Expenses

	2023	2022
	€	€
Office Consumables	6,732	5,017
Courier and delivery charges	1,494	1,382
Books and periodicals	2,040	190
C&AG Audit fee	14,300	14,300
Other Audit fees	7,560	22,290
Recruitment	47,919	16,533
Training & Conference fees (ROI)	20,216	21,908
Training & Conference fees (Outside ROI)	4,250	-
Rent & service charges	202,924	175,293
Insurance	12,910	15,954
Building repairs & maintenance	2,689	-
Light and heat	25,563	28,316
Licences, Subscriptions & Support	212,031	188,632
Printing, postage and stationery	1,740	813
Telephone, fax and Internet	46,907	40,597
Legal and professional fees	89,829	85,648
Bank Charges	1,209	711
Sundry expenses	7,413	7,147
Cancer Benchmarking Project	30,900	18,431
Information Technology Consumables	12,081	14,452
Depreciation on computer equipment	205,240	171,438
Total Administration Expenses	955,947	829,052

6. Property, Plant and Equipment

	Computer Equipment €	Fixtures & Fittings €	Office Equipment €	Total €
Cost				
At 1st January 2023	1,727,137	304,663	27,545	2,059,345
Additions	228,628	-	-	228,628
Disposals	(339,090)	-	-	(339,090)
At 31st December 2023	1,616,675	304,663	27,545	1,948,883
Depreciation				
At 1st January 2023	1,539,877	304,663	27,545	1,872,085
Charge for the year	205,240	-	-	205,240
On Disposals	(338,812)	-	-	(338,812)
At 31st December 2023	1,406,305	304,663	27,545	1,738,513
Net Book Values				
At 31st December 2023	210,370	-	-	210,370
At 31st December 2022	187,260	-	-	187,260

Computer Equipment includes Computer Software with a net book value of €105,841 as at 31st Dec 2023 and €148,119 at 31st Dec 2022.

7. Receivables and Prepayments

	2023 €	2022 €
Receivables - Other	450	26,032
Prepayments	167,182	193,589
	167,632	219,621

8. Grants received in Advance / (Arrears) and Revenue Reserves

	Opening at 1st January €	Income Received /(Repaid) €	T/f to I&E A/C €	Closing at 31st December €
Project Donor				
HRB (CARG)	48,791	(19,978)	(28,813)	-
RCSI /ICS (Covid Effects)	5,785	42,064	(59,507)	(11,658)
BCNI	0	40,923	(40,923)	-
NSS	0	131,098	(102,128)	28,970
Total	54,576	194,107	(231,371)	17,312

Grant Donors are:

Health Research Board (HRB)	Irish Cancer Society (ICS)
Blood Cancer Network Ireland (BCNI)	National Screening Service (NSS)
National Screening Service (NSS)	Royal College of Surgeons in Ireland (RCSI)

The HRB (CARG) Project and BCNI Project were completed during 2023. The balance remaining on these projects' accounts, €28,813 and €40,923 respectively, matched expenditure that was written off in previous years. These balances have now been transferred to income as per Note 3 above.

9. Capital Account

	2023 €	2022 €
Balance at 1 January	187,260	246,808
Transfer to / (from) Income and Expenditure account		
Capital Grants Received from Department of Health (Vote 38 subhead L1)	228,628	111,890
Amount of amortisation in line with asset depreciation	(205,240)	(171,438)
Transfer to / (from) Income and Expenditure account	23,388	(59,548)
Write off Balance on Disposals	(278)	-
Balance at 31 December	210,371	187,260

10. Operating Lease Rentals

	2023	2022
	€	€
Lease Rentals Charged to Income and Expenditure	147,600	137,059
The Board has the following commitments under operating leases which expire:		
Within one year	139,330	147,600
Within two to five years	570,035	578,100
After five years	607,235	-

The Board carries out its business from a premises at Cork Airport Business Park, a new lease was entered into on 5th March 2018 which commenced on 1st December 2017 for a period of 10 years. In consideration of agreeing to extend the lease for an additional five years to 30th November 2032 NCRI became entitled to a rent free period of six (6) months commencing on 1 April 2024.

11. Additional Superannuation Contribution/Pension Related Deduction

In accordance with the Financial Emergency Measures in the Public Interest Act 2009, a pension related deduction for public servants became effective from 1 March 2009. This was replaced on 1st January 2019 by the Additional Superannuation Contribution (ASC). The deduction when collected is remitted monthly by the National Cancer Registry to the Department of Health. The total of the monthly payments remitted to the Department for the period for ASC from January to December 2023 was €77,157. The comparative amount for 2022 was €63,307.

12. Related Party Transactions**Key Management Personnel Compensation**

Key Management Personnel comprise the Board, Director, and the Senior Management Team.

The total short term remuneration benefits for 2023 were €668,254 (incl. Employers PRSI). The comparative figure for 2022 was €658,235 (incl. Employers PRSI).

No remuneration is payable to the Board.

The NCR adopts procedures in accordance with the guidelines issued by the Department of Public Expenditure, National Development Plan Delivery and Reform covering the personal interests of board members. In the normal course of business, the NCR may approve grants or enter into contractual arrangements with entities in which NCR board members are employed or are otherwise interested. In cases of potential conflict of interest, Board members do not receive board documentation or otherwise participate in or attend discussions regarding these transactions. A register of disclosures is maintained.

No related party transactions were incurred in 2023.

13. External Consultants and Advisor Fees

Included in Legal and Professional fees (note 5), the following expenditure was incurred on external consultants.

	2023	2022
	€	€
Contract and legal commitments	-	7,187
Data Protection	745	-
Strategy	54,410	6,027
Consultancy Support	3,130	33,768
	<u>58,285</u>	<u>46,982</u>

14. Capital Commitments.

There are no capital commitments.

15. Events after the Reporting Date

Going concern - The National Cancer Registry Board considers that, as the entity provides a public service that is funded by moneys provided by the Exchequer, via its parent department the Department of Health, it is appropriate to prepare these financial statements on a going concern basis.

16. Approval of Financial Statements

The Board approved the financial statements on 19 June 2024.

Appendix A: Publications & Peer Reviewed Papers

1. Reports Published in 2023

1. Cancer Inequalities in Ireland by Deprivation, 2004-2018.
2. COVID-19 Impact on Cancer Incidence in Ireland in 2021: A Preliminary Analysis.
3. Childhood, Adolescent and Young Adult Cancer Trends Report.
4. Cancer in Ireland 1994-2021: Annual Statistical Report of the National Cancer Registry (2023).
5. Metastatic Breast Cancer in Ireland: A National Cancer Registry Analysis.

2. Peer-Reviewed Papers 2023

1. Cabasag CJ, Arnold M, Rutherford M, Ferlay J, Bardot A, Morgan E, Butler J, O'Connell DL, Nelson G, Høgdall C, Schnack T, Gavin A, Elwood M, Hanna L, Gourley C, De P, Saint-Jacques N, Mørch LS, Woods RR, Altman AD, Sykes P, Cohen PA, McNally O, Møller B, Walsh P, Morrison DS, Bray F, Soerjomataram I. Shifting incidence and survival of epithelial ovarian cancer (1995-2014): A SurvMark-2 study. *Int J Cancer*. **2023 May** 1;152(9):1763-1777. **Epub 2022 Dec 19.**
2. Conlon E, Fitzgerald C, Hintze J, Elhassan EAE, Sexton DJ, O'Leary E, O'Kelly P, O'Neill JO, Egan J, Houlihan DD, Murray D, McCormick PA, Morris PG, Raghallaigh SN, Little D, Conlon PJ, Moloney FJ, O'Neill JP. High frequency and mortality of head and neck malignancy in organ transplant recipients in Ireland - A national cohort study. *Am J Otolaryngol*. **2023 Jul-Aug**;44(4):103827. doi: 10.1016/j.amjoto.2023.103827. **Epub 2023 Mar 9.**
3. Doyle C, Brennan A, Wolinska A, Murphy L, O'Mahoney S, Blasco MC, Andrawis M, Beatty P, McFeely O, Tobin AM. Incidence of Merkel cell carcinoma in the Republic of Ireland (1994–2019). *Int J Dermatol*. <https://doi.org/10.1111/ijd.16661>. **Epub 2023 Mar 31.**
4. McFeely O, Walsh PM, Desmond R, Enright H, Costa Blasco M, Wolinska A, Murphy L, Andrawis M, Beatty P, Doyle C, Tobin AM, O'Gorman S, Molloy K. Incidence of cutaneous T-cell lymphoma in the Republic of Ireland between 1994 and 2019. *J Eur Acad Dermatol Venereol*. 2023 Sep 13. doi: 10.1111/jdv.19497. **Online ahead of print.**
5. O'Reilly S, Kathryn Carroll H, Murray D, Burke L, McCarthy T, O'Connor R, Kilty C, Lynch S, Feighan J, Cloherty M, Fitzpatrick P, Falvey K, Murphy V, Jane O'Leary M, Gregg S, Young L, McAuliffe E, Hegarty J, Gavin A, Lawler M, Kavanagh P, Spillane S, McWade T, Heffron M, Ryan K, Kelly P, Murphy A, Corrigan M, Redmond HP, Redmond P, Walsh PM, Tierney P, Zhang M, Bennett K, Mullooly M. Impact of the COVID-19 pandemic on cancer care in Ireland - Perspectives from a COVID-19 and Cancer Working Group. *J Cancer Policy*. 2023 Jun;36:100414. doi: 10.1016/j.jcipo.2023.100414. **Epub 2023 Feb 24.**

6. Sexton GP, Walsh P, Moriarty F, O'Neill JP. Age alone is not a barrier to concurrent Chemoradiotherapy for advanced head and neck Cancer. *Ann Otol Rhinol Laryngol*. **2023 Mar**;132(3):275-283. doi: 10.1177/00034894221086087. **Epub 2022 Apr 21**.
7. Sexton GP, Walsh P, Moriarty F, Lennon P, O'Neill JP. Survival in an era of organ preservation: an update on laryngeal cancer in Ireland. *Eur Arch Otorhinolaryngol*. **2023 Jun 16**. doi: 10.1007/s00405-023-08055-0. **Online ahead of print**.
8. Sexton GP, Walsh P, Moriarty F, Lennon P, O'Neill JP. Survival in an era of organ preservation: an update on laryngeal cancer in Ireland. *Eur Arch Otorhinolaryngol*. **2023 Jun**; 280(10): 4587–4595. doi: 10.1007/s00405-023-08055-0.
9. Demuru E, Rossi S, Ventura L, Dal Maso L, Guzzinati S, Katalinic A, Lamy S, Jooste V, Di Benedetto C, De Angelis R; **EUROCARE-6 Working Group**. Estimating complete cancer prevalence in Europe: validity of alternative vs standards completeness indexes. *Front Oncol*. 2023 Apr 24;13:1114701. doi: 10.3389/fonc.2023.1114701. eCollection 2023.
10. Girardi F, Matz M, Stiller C, You H, Marcos Gragera R, Valkov MY, Bulliard JL, De P, Morrison D, Wanner M, O'Brian DK, Saint-Jacques N, Coleman MP, Allemani C; **CONCORD Working Group**. Global survival trends for brain tumors, by histology: analysis of individual records for 556,237 adults diagnosed in 59 countries during 2000 – 2014 (CONCORD-3) Group. *Neuro Oncol*. 2023 Mar 14;25(3):580-592. doi: 10.1093/neuonc/noac217.
11. Matz M, Valkov M, Škerija M, Luttman S, Caldarella A, Coleman MP, Allemani C; **CONCORD Working Group**. Worldwide trends in esophageal cancer survival, by sub-site, morphology, and sex: an analysis of 696,974 adults diagnosed in 60 countries during 2000 – 2014 (**CONCORD-3**) *Cancer Commun (Lond)*. 2023 Sep;43(9):963-980. doi: 10.1002/cac2.12457. Epub 2023 Jul 24.
12. Girardi F, Di Carlo V, Stiller C, Gatta G, Woods RR, Visser O, Lacour B, Tucker TC, Coleman MP, Allemani C; **CONCORD Working Group**. Global survival trends for brain tumors, by histology: Analysis of individual records for 67,776 children diagnosed in 61 countries during 2000 – 2014. *Neuro Oncol*. 2023 Mar 14;25(3):593-606. doi: 10.1093/neuonc/noac232.



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