

Influencing Quality Reporting

Using the Rapid Quality Reporting System in a community network

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BACKGROUND: Value-based cancer care warrants an exploration of ways that nurses can influence quality for patients with cancer, particularly in the community setting, where the majority of patients with cancer are treated.

OBJECTIVES: The purpose is to explore how community cancer centers met and sustained key quality breast cancer care indicators through implementation of the National Cancer Institute Community Cancer Centers Program Rapid Quality Reporting System (RQRS) and patient navigation projects.

METHODS: The authors identified and interviewed staff at three sites that achieved significant increases in concordance with three breast cancer outcome measures: adherence to chemotherapy, radiation, and hormone therapy.

FINDINGS: Three main themes emerged through analysis: awareness of measures, importance of navigator, and team approach. The use of the RQRS in a community setting, coupled with the deployment of nurse navigators, is one way to influence adherence to breast outcome measures.

KEYWORDS

quality measures; nurse navigator; community cancer center

DIGITAL OBJECT IDENTIFIER

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A MAJORITY OF PATIENTS WITH CANCER RECEIVE THEIR CARE in community settings (Erikson, Salsberg, Forte, Bruinooge, & Goldstein, 2007), and those treated in settings outside of academic medical centers may have unique challenges with adherence to complex treatment regimens, including issues related to variable access to care. Timeliness of care has been associated with improved survival in patients with breast cancer (Smith, Ziogas, & Anton-Culver, 2013), making it important for community cancer centers to address patient barriers and promote adherence to treatment.

The National Cancer Database (NCDB) is a clinical surveillance tool and comparative resource for Commission on Cancer (CoC)-accredited hospitals, jointly sponsored by the American College of Surgeons and the American Cancer Society. Within the NCDB is the Rapid Quality Reporting System (RQRS), which provides participating centers with the ability to monitor quality cancer measures in real time to set quality improvement benchmarks (Raval, Bilimoria, Stewart, Bentrem, & Ko, 2009).

Funded from 2007–2014, the National Cancer Institute Community Cancer Centers Program (NCCCP) focused on enhancing the quality of cancer care and reducing cancer health disparities within a network of hospital-based community cancer centers (Kaluzny & O'Brien, 2015; Siegel et al., 2015). Key NCCCP pilot projects include implementation of the RQRS to assess quality cancer care within NCCCP sites related to timeliness, effectiveness, and efficiency while exploring potential disparities in cancer care delivery (Halpern et al., 2013; Spain et al., 2017), as well as the use of patient navigators to facilitate coordination of care across the cancer continuum (Swanson et al., 2011). These two projects (the implementation of RQRS and the use of patient navigators) represented effective strategies for the network of hospital-based community cancer centers (herein referred to as NCCCP sites) to improve quality of cancer care through adherence to evidence-based treatment guidelines and to address patient barriers among diverse patient populations (Robinson-White, Conroy, Slavish, & Rosenzweig, 2010; Stewart, McNamara, Gay, Banasiak, & Winchester, 2011).

In 2008, the NCCCP began participation in the CoC RQRS pilot project, allowing sites to access dashboards that displayed their concordance with three breast cancer measures (see Table 1). As a quality reporting