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| Subject: <b>Oncology Services Quality Improvement</b> | Policy No.: [REDACTED]                              |
| Section: [REDACTED]                                   | Effective Date: [REDACTED]<br>Initiator: [REDACTED] |
| Approved By: [REDACTED]                               | Replaces Policy No.: [REDACTED]                     |
| Signature: _____                                      | Issue Date: [REDACTED]                              |
| Date: [REDACTED]                                      |   |

## **Policy**

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1. A continuous quality improvement (CQI) plan for the oncology service line will be developed annually by the multidisciplinary cancer committee to improve patient care, promote healthy communities, and reduce the cost of care.
2. A multidisciplinary cancer committee will provide oversight for the overall CQI goals, activities, and action plans.
3. The multidisciplinary cancer committee shall implement components of quality assurance standards, including the following.
  - a. Assign responsibility to an individual and/or the multidisciplinary cancer committee for the individual components of the program.
  - b. Identify the scope of patient care offered, including clinical services, hours of operation, credentials of staff, and description of treatment and follow-up.
  - c. State the quality indicators in quantitative terms.
  - d. Collect data and evaluate outcomes systematically and on a schedule.
  - e. Take corrective steps to resolve the problem(s) and improve care.
  - f. Evaluate the results of actions taken by measuring the target and the percentage of change achieved.

## **Scope**

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CQI is designed to enhance the quality of care, monitor quality, determine effectiveness, and measure the appropriateness of services. All sectors in health care at the federal, state, and local levels have come together under the accord of the Affordable Care Act to collaborate on the National Quality Strategy's triple aims for achieving quality by improving the patient experience, promoting healthy people and populations, and reducing the cost of care. The National Quality Strategy is an independent body that designed a national quality initiative with three aims and six priorities: safe care, patient-centered care, communication and care coordination, effective prevention and treatment of illness, best practices for healthy living, and affordable care. Together the triple aims and the six priorities make up the national framework for quality improvement and measurement activities within which the oncology service line operates.

The practices of quality assessment, care monitoring, accountability, and improvement of care have been applied in the field of oncology by leading organizations. The American Society of Clinical Oncology (ASCO) launched its Quality Oncology Practice Initiative (QOPI®)

campaign to improve the process of care in oncology practices. The Oncology Nursing Society and ASCO have collaborated on the development of standards for safe chemotherapy administration. The American College of Surgeons Commission on Cancer includes standards pertaining to the quality of patient care as part of its accreditation process for cancer programs. At a minimum, these standards require institutions to implement two patient care improvement activities and conduct an annual study of patient outcomes to determine whether the treatment of patients with cancer follows evidence-based national guidelines. The National Comprehensive Cancer Network has developed a complete set of national, consensus-based clinical guidelines to assist multidisciplinary cancer teams in improving the quality of care (see [www.nccn.org](http://www.nccn.org)). The guidelines are developed using evidence-based clinical data to ensure that all patients receive preventive, diagnostic, treatment, and supportive services that drive optimal outcomes.

## **Guidelines (Procedures)**

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### **Performance Improvement Plan**

1. Describe the scope of Performance Improvement activities for the oncology service line, including the vision, mission, philosophy, types of services to be provided, size and location of the facility, and the geographic base.
2. Identify the organizational title that has the authority and responsibility for Performance Improvement activities, coordination, and data collection.
3. Identify the description of clinical staff by title, profession, qualifications, and staffing assignments.
4. State the current fiscal or calendar year's Performance Improvement goals and objectives in terms of percentage targets or benchmarks for the oncology program.
5. Outline the scope and list of activities, including structure, process, and outcome initiatives, that are in progress to achieve or meet the current year's Performance Improvement goals and objectives (e.g., Six Sigma, Lean A3 Problem Solving Method).
6. Describe the process for data analysis, including frequency of reporting and a list of departments and committees with whom the data will be shared across the service line.
7. Develop action plans and safety tools based on the documented outcomes.
  - a. Identify workflow improvements.
  - b. Develop protocols, checklists, educational materials, and new processes.
8. Define how satellite or off-site locations will be part of the development and the ongoing Performance Improvement plan.

### **Related Policies (if any)**

Nursing—Chemotherapy Competency

Nursing—Chemotherapy Prescribing Requirements

Nursing—Management of No-Show Patients

Safety and Pharmacy—Patient Identification Prior to Provision of Care

## **Applicable Forms (if any)**

Chemotherapy Administration Checklist

## **Bibliography**

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- Advisory Board Company. (2013). *Cancer quality dashboards: Metrics, definitions, and benchmarks spanning the cancer care continuum* (Oncology Roundtable White Paper Brochure 26462). Retrieved from <http://www.advisory.com/research/oncology-roundtable/studies/2013/cancer-quality-dashboards>
- American College of Surgeons Commission on Cancer. (2012). *Cancer program standards 2012: Ensuring patient-centered care* [v.1.2.1, released January 2014]. Retrieved from <http://www.facs.org/cancer/coc/programstandards2012.html>
- Centers for Medicare and Medicaid Services. (2012, March). *National impact assessment of Medicare quality measures* (Prepared by Health Services Advisory Group, Inc., CMS Measures Management Innovation Project: HHSMS-500-2011-AZ10C). Retrieved from <http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/QualityMeasures/Downloads/NationalImpactAssessmentofQualityMeasuresFINAL.PDF>
- DeStefano, M.S. (2010). Quality management and improvement. In M.S. DeStefano (Consul Ed.), *Oncology services administration: Forms, checklists and guidelines* (Suppl. 14). Frederick, MD: Aspen Publishers.
- DeStefano, M.S. (2011). Quality management and improvement. In M.S. DeStefano (Consul Ed.), *Oncology services administration: Forms, checklists and guidelines* (Suppl. 15). Frederick, MD: Aspen Publishers.
- Dumasia, L., Harris, E., & Drellichman, A. (2006). Quality performance with the implementation of standard chemotherapy order forms. *Journal of Oncology Practice*, 2, 104–107. [doi:10.1200/JOP.2.3.104](https://doi.org/10.1200/JOP.2.3.104)
- Gilmore, T.R., Schulmeister, L., & Jacobson, J.O. (2013). Quality Oncology Practice Initiative Certification Program: Measuring implementation of chemotherapy administration safety standards in the outpatient oncology setting (Erratum published May 2013, *Journal of Oncology Practice*, Vol. 9, p. 174, [doi:10.1200/JOP.2013.001113](https://doi.org/10.1200/JOP.2013.001113)). *Journal of Oncology Practice*, 9(Suppl. 2), 14S–18S. [doi:10.1200/JOP.2013.000886](https://doi.org/10.1200/JOP.2013.000886)
- HealthPartners. (2012). Ambulatory patient safety toolkit: A resource for clinicians and staff provided by HealthPartners Ambulatory Safety Program 2012. Retrieved from [http://www.healthpartners.com/ucm/groups/public/@hp/@public/documents/documents/vgn\\_pdf\\_56420.pdf](http://www.healthpartners.com/ucm/groups/public/@hp/@public/documents/documents/vgn_pdf_56420.pdf)
- Institute for Healthcare Improvement. (n.d.). IHI Triple Aim Initiative. Retrieved from <http://www.ihi.org/offering/Initiatives/TripleAim/Pages/default.aspx>
- Institute of Medicine. (2001, March). *Crossing the quality chasm: A new health system for the 21st century*. Retrieved from <http://www.nap.edu/books/0309072808/html>
- Jacobson, J.O. (2009). Quality Oncology Practice Initiative turns seven. *Journal of Oncology Practice*, 5, 268. [doi:10.1200/JOP.091055](https://doi.org/10.1200/JOP.091055)
- Jacobson, J.O. (2012). Counterpoint: Sowing the seeds of standardized care to reap better patient outcomes. *Journal of Oncology Practice*, 8, 236–238. [doi:10.1200/JOP.2012.000607](https://doi.org/10.1200/JOP.2012.000607)
- Joint Commission. (2010a, June 9). Health care staffing services performance improvement plan [Slide presentation]. Retrieved from [http://www.jointcommission.org/slides\\_from\\_june\\_9\\_2010\\_performance\\_improvement\\_plan](http://www.jointcommission.org/slides_from_june_9_2010_performance_improvement_plan)
- Joint Commission. (2010b, June 9). Health care staffing services performance improvement plan example. Retrieved from <http://www.jointcommission.org/assets/1/6/PerformanceImprovementPlanExample060910.pdf>
- McNiff, K.K., Bonelli, K.R., & Jacobson, J.O. (2009). Quality Oncology Practice Initiative Certification Program: Overview, measure scoring methodology, and site assessment standards. *Journal of Oncology Practice*, 5, 270–276. [doi:10.1200/JOP.091045](https://doi.org/10.1200/JOP.091045)
- National Quality Forum. (2011, January 11). *Measure Prioritization Advisory Committee report: Measure development and endorsement agenda*. Retrieved from [http://www.qualityforum.org/Publications/2011/01/Measure\\_Prioritization\\_Advisory\\_Committee\\_Report.aspx](http://www.qualityforum.org/Publications/2011/01/Measure_Prioritization_Advisory_Committee_Report.aspx)
- Neuss, M.N., Polovich, M., McNiff, K., Esper, P., Gilmore, T.R., LeFebvre, K.B., ... Jacobson, J.O. (2013). 2013 updated American Society of Clinical Oncology/Oncology Nursing Society chemotherapy administration safety standards including standards for the safe administration and management of oral chemotherapy. *Oncology Nursing Forum*, 40, 225–233. [doi:10.1188/13.ONF.40-03AP2](https://doi.org/10.1188/13.ONF.40-03AP2)
- U.S. Department of Health and Human Services. (2012, April). *2012 annual progress report to Congress: National Strategy for Quality Improvement in Health Care* (Corrected August 2012). Retrieved from <http://www.ahrq.gov/workingforquality/nqs/nqs2012annlrpt.pdf>

Walters, R. (2013, September). *Quality measurement: Feast and famine*. Presentation given at the Texas Society of Clinical Oncology, Houston, TX. Retrieved from [http://www.accc-cancer.org/ossn\\_network/tx/presentations/TxSCO-Fall2013-Walters.pdf](http://www.accc-cancer.org/ossn_network/tx/presentations/TxSCO-Fall2013-Walters.pdf)

| Date       | Revision Required            |                             | Responsible Staff Name and Title |
|------------|------------------------------|-----------------------------|----------------------------------|
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| [REDACTED] | Yes <input type="checkbox"/> | No <input type="checkbox"/> | [REDACTED]                       |

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