

National Cancer Database Quality Measures

One responsibility of being an American College of Surgeons Commission on Cancer (CoC) accredited program is to report clinical data to the CoC to measure our performance against other accredited programs and to participate in studies of quality.

Here we report on five measures monitored by the CoC and reported as the Rapid Cancer Reporting System (RCRS). The percentage given provides *“an indication of the proportion of patients treated according to recognized standards of care.”* These five measures are accountability measures that track adherence to a standard of care which is based on clinical trial evidence. The CoC has also established benchmarks for each accredited program to meet on three of the measures.

The Rapid Cancer Reporting System (RCRS) is a quality data platform of the Commission on Cancer’s (CoC) National Cancer Database (NCDB). RCRS is a web-based data collection and reporting system that advances hospital-based quality improvement by providing measures of high quality, coordinated patient care.

For 2018, estimated performance rates for Sanford Cancer Center were above accredited Commission on Cancer programs nationally in all five CP3R measures.

MEASURE	MEASURE TYPE	SANFORD ESTIMATED PERFORMANCE RATES 2018	NATIONAL COC RATES 2018
BREAST			
BCSRT (NQF #219) Radiation therapy is administered within 1 year (365 days) of diagnosis for women under age 70 receiving breast conserving surgery for breast cancer.	Accountability Benchmark: 90%	100%	91.39%
MAC (NQF #0559) Combination chemotherapy is considered or administered within 4 months (120 days) of diagnosis for women under 70 with AJCC T1cN0M0, or stage IB - III hormone receptor negative breast cancer.	Accountability	100%	92.76%
HT (NQF #0220) Tamoxifen or third generation aromatase inhibitor is considered or administered within 1 year (365 days) of diagnosis for women with AJCC T1cN0M0, or stage IB - III hormone receptor positive breast cancer.	Accountability Benchmark: 90%	100%	90.11%
MASTRT Radiation therapy is considered or administered following any mastectomy within 1 year (365 days) of diagnosis of breast cancer for women with ≥ 4 positive regional lymph nodes.	Accountability Benchmark: 90%	100%	86.22%
COLON			
ACT (NQF #0223) Adjuvant chemotherapy is considered or administered within 4 months (120 days) of diagnosis for patients under the age of 80 with AJCC Stage III (lymph node positive) colon cancer.	Accountability	86.67%	85.40%

Discussion: At Sanford Cancer Center, we review every case that does not meet one of the Accountability Measures to understand the reasons behind the patient not meeting the measure and to identify opportunities for improving our systems and services for patients to continually improve adherence to measures, and ultimately outcomes.

For 2018, those patients that did not meet the identified measures include:

ACT (Accountability Measure): 2 of 14 patients did not meet this measure. One patient received adjuvant chemotherapy 16 days past the guideline of within 120 days of diagnosis. One patient had reassuring surgical outcomes, therefore chose observation instead of adjuvant chemotherapy.

MEASURE DEFINITION AND USE:

Accountability

High level of evidence supports the measure, including multiple randomized control trials. These measures can be used for such purposes as public reporting, payment incentive programs, and the selection of providers by consumers, health plans, or purchasers.