

# Initial Application

Standard 5.8 Lung NODES Quality Improvement Collaborative

Application Form

Please complete the survey below. Survey is to be completed by February 29, 2024.

Any questions please e-mail cancerqi@facs.org

Thank you!

1) First name

\_\_\_\_\_

2) Last name

\_\_\_\_\_

3) Organization/Hospital

\_\_\_\_\_

4) Role of person completing application

\_\_\_\_\_

5) City

\_\_\_\_\_

6) State

\_\_\_\_\_

7) E-Mail Address

\_\_\_\_\_

8) Phone Number

\_\_\_\_\_

9) What is your FIN/Company ID?

\_\_\_\_\_

10) What is your CoC category designation?

- Academic Comprehensive Cancer Program
- Community Cancer Program
- Comprehensive Community Cancer Program
- Free Standing Cancer Center Program
- Hospital Associate Cancer Program
- Integrated Network Cancer Program
- NCI-Designated Comprehensive Cancer Center Program
- NCI-Designated Network Cancer Program
- Pediatric Cancer Program
- Veterans Affairs Cancer Program

11) If your program is INCP/NCIN, enter your FIN for your NETWORK accreditation. If not INCP/NCIN, please leave blank and move to the next question.

\_\_\_\_\_

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- 12) In the past year, what is the estimated number of curative intent lung resections your program performed?
- 0  
 1-2  
 3-10  
 11-25  
 26-50  
 51-99  
 100-150  
 > 150
- 
- 13) To the best of your knowledge, what is your program's current compliance rating with Standard 5.8?
- Compliant  
 Non-compliant  
 Our program has not received a compliance rating yet
- 
- 14) If applicable, which year did you receive your site visit and compliance rating?
- 2022  
 2023  
 Our program has not received a compliance rating yet
- 
- 15) Team: This project requires a Core QI team. Will you be able to fill the following roles? (Note, one person may fill more than one role, but we strongly recommend at least 3 individuals on the core team). Fill out names for at least 2.
- Yes  
 No
- 
- 16) • Physician champion: serves as a conduit between leadership and frontline staff  
• Clinician project leader: supports the day to day activities of the QI project  
• Surgeon: grounds the team in the day-to-day processes of the surgical team  
• Pathologist: grounds the team in the day-to-day processes of the pathology team  
• Certified Oncology Data Specialist/Data analyst/data support: a dedicated person to collect, analyze, and submit data  
• Operating room staff member: supports the day-to-day processes of the operating room team
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- 17) Once enrolled in this project, we will require signatures of support from your physician champion and cancer committee chair to express support for your participation in this QI Collaborative. Will you be able to provide this?
- Yes  
 No  
 Unsure
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- 18) Being a part of a learning collaborative requires active and meaningful participation, including sharing successes and challenges with others enrolled in this collaborative. While information about participation in this collaborative will not be shared with those outside of the collaborative, participants are encouraged to participate in webinars via chat or connect with one another in small group calls. Are you and your team willing to be active participants?
- Yes  
 No  
 Unsure
- 
- 19) This project requires you to review and submit data reporting the compliance rates for Standard 5.8. Is this something you or someone at your organization can extract from the electronic health record, operative or pathology reports, or through some other mechanism?
- Yes  
 No  
 Unsure

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20) Why do you want to participate in this collaboration and what is your program hoping to gain from participation? (maximum 150 words)

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