

ACS NAPBC National Accreditation Program for Breast Centers
American College of Surgeons

Optimal Resources for Breast Care 2024: Improving Standards; Improving Quality

NAPBC Workshop
February 22, 2024
Austin, TX

NAPBC

1

Challenging Definitions

Paul Jeffers
Manager, Standards Development, ACS Cancer Programs
American College of Surgeons
Chicago, IL

ACS NAPBC National Accreditation Program for Breast Centers
American College of Surgeons

NAPBC

2

ACS NAPBC National Accreditation Program for Breast Centers
American College of Surgeons

Disclosures

- Nothing to Disclose

NAPBC

3

ACS NAPBC National Accreditation Program for Blood Centers
National Center for Blood Safety

Challenging Definitions

- Culturally Appropriate Shared Decision Making
- Pre/Post-Treatment Functional Assessment

© American College of Surgeons 2023. Content may not be reproduced or transmitted without the written permission of the American College of Surgeons.

4

ACS NAPBC National Accreditation Program for Blood Centers
National Center for Blood Safety

Culturally Appropriate Shared Decision Making

- Public comment period and NAPBC Pilot Site Visit Program raised questions regarding definitions, implementation, and compliance evaluation
- Revised edition of the 2024 Standards (December 2023) was heavily focused on addressing these concerns

© American College of Surgeons 2023. Content may not be reproduced or transmitted without the written permission of the American College of Surgeons.

5

ACS NAPBC National Accreditation Program for Blood Centers
National Center for Blood Safety

Culturally Appropriate Shared Decision Making

Feedback:

- Compliance requirements not clearly defined
 - Identifying barriers to care
- Definition was too limited
 - Almost exclusively emphasized cultural considerations
- Documenting compliance in the patient medical record would be difficult and burdensome
 - Particularly without specific applicability to the patient

© American College of Surgeons 2023. Content may not be reproduced or transmitted without the written permission of the American College of Surgeons.

6

ACS NAPBC National Accreditation Program for Breast Centers

Updates to Address Feedback

- Culturally Appropriate Shared Decision Making
 - Changed to **Individualized Shared Decision Making (ISDM)**
- 1. Significantly revised definition
 - Greater consideration/inclusion for unique patient factors and circumstances
- 2. Requirement for documentation in the medical record removed
- 3. Compliance documented through annual BPLC review
- 4. Resources and Examples for ISDM added to the Standards Appendix

© American College of Surgeons 2023. Content may not be reproduced or transmitted without the written permission of the American College of Surgeons.

7

ACS NAPBC National Accreditation Program for Breast Centers

Defining ISDM

- Culturally Appropriate Shared Decision Making
 - Changed to **Individualized Shared Decision Making**
- 1. Significantly revised definition
 - ISDM is a structured, collaborative approach to healthcare decision-making that moves beyond the traditional model of informed consent by engaging the patient, their family, and healthcare providers
 - Involvement of healthcare providers to emphasize a collaborative approach and an active role in the process
 - Involvement of family to acknowledge the broader impact of the diagnosis, and their common role as short/long-term caregivers who participate in the decision-making process

© American College of Surgeons 2023. Content may not be reproduced or transmitted without the written permission of the American College of Surgeons.

8

ACS NAPBC National Accreditation Program for Breast Centers

Defining ISDM

- Culturally Appropriate Shared Decision Making
 - Changed to **Individualized Shared Decision Making**
- 1. Significantly revised definition
 - ...consideration for the patient’s circumstances, values, preferences, and culture and decisions are based on the best available evidence
 - Definition expanded beyond “cultural” considerations to emphasize the entire personhood of the patient
 - Intended to encourage open and engaging discussion

© American College of Surgeons 2023. Content may not be reproduced or transmitted without the written permission of the American College of Surgeons.

9

ACS NAPBC National Accreditation Program for Breast Centers

Documenting ISDM

- Culturally Appropriate Shared Decision Making
 - Changed to **Individualized Shared Decision Making (ISDM)**
- 2. Requirement for documentation in the medical record removed
 - Rating compliance through chart review requires documentation in the medical record for each patient, including those with no relevant considerations
 - Increased documentation workload for providers, when the conversation itself adds the most value

© American College of Surgeons 2023. Content may not be reproduced or transmitted without the written permission of the American College of Surgeons.

10

ACS NAPBC National Accreditation Program for Breast Centers

Documenting ISDM

- Culturally Appropriate Shared Decision Making
 - Changed to **Individualized Shared Decision Making (ISDM)**
- 3. Compliance documented through annual BPLC review
 - **Affected Standards**
 - **Standard 5.6** – Evaluation and Treatment Planning
 - **Standard 5.9** – Surgical Care
 - **Standard 5.10** – Reconstructive Surgery
 - **Standard 5.11** – Medical Oncology
 - **Standard 5.12** – Radiation Oncology

© American College of Surgeons 2023. Content may not be reproduced or transmitted without the written permission of the American College of Surgeons.

11

ACS NAPBC National Accreditation Program for Breast Centers

Documenting ISDM

- Culturally Appropriate Shared Decision Making
 - Changed to **Individualized Shared Decision Making (ISDM)**
- 3. Compliance documented through annual BPLC review
 - **Each calendar year, the BPLC must review and assess implementation of individualized shared decision making**
 - **BPLC meeting minutes documenting the required annual review**
 - Natural starting point for a new requirement in the standards
 - Greater flexibility, more opportunities to demonstrate compliance
 - Acknowledges staff training and process changes may be necessary
 - Annual review to document progress and identify barriers

© American College of Surgeons 2023. Content may not be reproduced or transmitted without the written permission of the American College of Surgeons.

12

ACS NAPBC National Accreditation Program for Breast Centers

Resources for ISDM

4. Resources and Examples for ISDM added to the Standards Appendix

- o Many NAPBC programs are approaching ISDM principles for the first time
- o Need for established resources
- o **Agency for Healthcare Research and Quality (AHRQ)**
 - Resources for starting a shared decision-making dialogue with patients
 - Implementation resources for shared decision making
 - Webinars on implementation and overcoming barriers to shared decision making
- o **Association of Community Cancer Centers (ACCC)**
 - Featured publication regarding methods for establishing patient engagement
- o **National Cancer Institute (NCI)**
 - Demographic and cultural considerations in cancer communication
 - Education and training in cancer communication

© American College of Surgeons 2023. Content may not be reproduced or transmitted without the written permission of the American College of Surgeons.

13

ACS NAPBC National Accreditation Program for Breast Centers

Pre/Post-Treatment Functional Assessment

- Pre/Post-treatment functional assessments were required for:
 - o Standard 5.9: Surgical Care
 - o Standard 5.10: Reconstructive Surgery
 - o Standard 5.11: Medical Oncology
 - o Standard 5.12: Radiation Oncology
- Public comment period and NAPBC Pilot Site Visit Program raised questions regarding implementation and compliance evaluation
- Revised edition of the 2024 Standards (December 2023) was heavily focused on addressing these concerns

© American College of Surgeons 2023. Content may not be reproduced or transmitted without the written permission of the American College of Surgeons.

14

ACS NAPBC National Accreditation Program for Breast Centers

Pre/Post-Treatment Functional Assessment

Feedback:

- Requiring a pre- and post-treatment functional assessment for all patients is often unnecessary
 - o Minimal benefit for patients with normal physical function and recovery
- Increases demand on providers/staff (resource allocation)
 - o Performing the assessment
 - o Including documentation in the medical record
- Insufficient guidance on requirements for the functional assessment

© American College of Surgeons 2023. Content may not be reproduced or transmitted without the written permission of the American College of Surgeons.

15

ACS NAPBC National Accreditation Program for Breast Centers

Updates to Address Feedback

- Pre/Post-Treatment Functional Assessment
 - Changed to **Pre-Treatment Functional Assessment**

1. Requirement for post-treatment assessment removed
2. Patients must only be considered for the pre-treatment assessment
 - Program has discretion regarding whether the assessment is necessary or beneficial to the patient
3. Dedicated section added to the Appendix of *Optimal Resources for Breast Care*
4. One protocol may be developed and implemented for all four standards

© American College of Surgeons 2023. Content may not be reproduced or transmitted without the written permission of the American College of Surgeons.

16

ACS NAPBC National Accreditation Program for Breast Centers

Updates to Address Feedback

- Purpose:
 - Establish pre-treatment baseline for physical function
 - Determine readiness for treatment
 - Pre-Treatment evaluation a patient's tolerance of the supine position with the affected arm raised over their head before starting radiation therapy
 - Identify patients who may benefit from referral to exercise, physical therapy, and/or lymphedema management
- Development:
 - NAPBC Programs have full discretion on developing their own functional assessment
 - Eastern Cooperative Oncology Group (ECOG) Performance Status/Karnofsky Scores are not sufficient alone
 - May be used as an initial screening step, but physical assessment of the patient is required

© American College of Surgeons 2023. Content may not be reproduced or transmitted without the written permission of the American College of Surgeons.

17

ACS NAPBC National Accreditation Program for Breast Centers

Updates to Address Feedback

- Pre/Post-Treatment Functional Assessment
 - Changed to **Pre-Treatment Functional Assessment**

1. Requirement for post-treatment assessment removed
 - **The NAPBC-accredited program must develop and implement a protocol for pre-treatment functional assessment and appropriate referrals to exercise, physical therapy, and/or lymphedema management**
 - Compliance is met with the implementation of the protocol
 - Not confirmed through medical record review

© American College of Surgeons 2023. Content may not be reproduced or transmitted without the written permission of the American College of Surgeons.

18

ACS NAPBC National Accreditation Program for Breast Centers

Updates to Address Feedback

- Pre/Post-Treatment Functional Assessment
 - Changed to **Pre-Treatment Functional Assessment**
- 2. Patients must only be considered for the pre-treatment assessment
 - Program has discretion regarding whether the assessment is necessary or beneficial to the patient
 - No requirement for documentation of consideration

© American College of Surgeons 2023. Content may not be reproduced or transmitted without the written permission of the American College of Surgeons.

19

ACS NAPBC National Accreditation Program for Breast Centers

Updates to Address Feedback

- Pre/Post-Treatment Functional Assessment
 - Changed to **Pre-Treatment Functional Assessment**
- 3. Dedicated section added to the Appendix of *Optimal Resources for Breast Care*
 - Assessment is intended to be easily administered by any qualified health care professional in a clinical setting
 - Example functional assessment:
 - Shoulder abduction test
 - Timed "Up and Go" test
 - CDC STEADI Initiative

© American College of Surgeons 2023. Content may not be reproduced or transmitted without the written permission of the American College of Surgeons.

20

ACS NAPBC National Accreditation Program for Breast Centers

Updates to Address Feedback

- Pre/Post-Treatment Functional Assessment
 - Changed to **Pre-Treatment Functional Assessment**
- 4. One protocol may be developed and implemented for all four standards
 - Standard 5.9: Surgical Care
 - Standard 5.10: Reconstructive Surgery
 - Standard 5.11: Medical Oncology
 - Standard 5.12: Radiation Oncology
 - NAPBC Program may also choose to develop separate protocols for one or more of these standards

© American College of Surgeons 2023. Content may not be reproduced or transmitted without the written permission of the American College of Surgeons.

21


