

Example 3: Nominee 19	Open-Ended Response
<p>The CLP should play an essential role in upholding the Commission on Cancer Standards. Please explain in 250 words or less how your CLP has helped educate your program's Cancer Committee members about these standards, and their role if any, in meeting the standards</p>	<p>Nominee 19 was first introduced to the Cancer Committee early 2013 when she participated in Standard 4.6 (assessing evaluation and treatment planning). Within a year, she assumed a permanent role on the Committee as alternate liaison (2014-2015) and primary CLP (2016-current). She fills in as interim/alternate chairperson when needed. Her commitment to the Committee and to the CLP role are evident in her attendance records despite her busy surgical schedule. She stays current with standards by participating in CLP meetings and webinars on topics she feels are relevant to the Committee and brings information back to the Committee. The most recent include: • CLP Meeting: 4/17/2024 • CoC Standard 5.8 Lung Nodes: 12/7/2023 • CLP Meeting: 10/17/2023 • Technical standards for breast surgeons: 9/12/2023 She embodies the definition of "Liaison," one who facilitates a close working relationship between people or organizations. She currently invests a lot of time as a physician champion for the synoptic operative standards, not just for our hospital but our healthcare system. She worked EPIC/IT to create a documentation workflow and was the first to utilize the system to identify/address barriers before other physicians started utilizing it. She educated other physicians at lung conference, colorectal conference, and one-on-one meetings how to document. She developed a visual reminder and partnered with team members to create/post them in key areas where surgeons would see them. She recommended that the Committee monitor the synoptic operative standards monthly, and that physicians not meeting compliance be contacted individually to assess for barriers.</p>
<p>An outstanding CLP possesses a clear understanding of the National Cancer Database (NCDB) reporting tools and uses them effectively to assess program performance. Please explain in 250 words or less how your CLP does this.</p>	<p>Nominee 19 learned quickly how to read/digest data from reporting tools (RCRS, CQIP, NCDB completeness report) and effectively present the data to the Committee. Prior to presenting to the Committee, she prepares by reviewing all the data (100+ slides) and tipsheets to understand the data sources. When reporting to the Committee, she engages the group in meaningful dialogue on how to interpret/use the data for our program, considering data points like case volume increase/decrease, outmigration, mortality rate, and days to treatment. She solicits feedback from the Committee to understand what they would like to see from NCDB or to follow-up on concerns. For example, a Committee member questioned the number of deaths reported in the lung survival slides and chairperson agreed the data was a little confusing. At the following meeting, Nominee 19 responded to their concerns, clarifying that the survival rates for breast, lung, and colon cancer were unadjusted, which meant survival data could be any related issue not just cancer. She works with the tumor registry to ensure all data is complete and that the Committee is updated on new measures being released. She provides explanation when data has not been updated (ex: registry still waiting on treatment report from medical oncology so they can enter treatment information for cases missing treatment). Her updates to the Committee about reporting tools are thorough and include important recommendations on prioritization of review efforts so that our estimated performance rates reported in CQIP reflect the most current information available.</p>
<p>CLPs are tasked with leading Quality Improvement (QI) initiatives at their cancer programs. Please explain in 250 words or less how your CLP is a leader in this area and works with the cancer teams and program leadership to implement QI initiatives.</p>	<p>Nominee 19 is an active contributor to our program's QI initiatives. She collaborates with the Committee to use data, such as the NCDB, to identify gaps in care or potential problem areas. She is easy to approach, which allows Committee members (physicians and non-physicians) to feel comfortable speaking up during meetings to propose improvement ideas. Some of these ideas are directly related to her role as a breast surgeon (ex: assessing/monitoring lymphedema), while other ideas are not. Regardless of her familiarity with the topic, she meets with the QI coordinator regularly to discuss QI initiatives from project start to completion and is familiar with the PDSA model that our organization uses. During these meetings, she shows a genuine interest in learning and understanding key concepts about the quality-related problems being solved through the QI initiatives. Once she understands the problem, she asks clarifying questions and/or offer suggestions to strengthen the initiative. As the QI initiative is wrapping up, she reviews the metrics to familiarize herself with the outcomes of all QI initiatives so she can support the QI team with answering questions during presentations to the Committee or at the Oncology Annual Report Presentation. Additionally, she is quick to complete tasks like submitting a signed CLP letter of support as required for some QI initiatives.</p>
<p>Is your CLP involved in regional cancer-related activities? Examples would include participation in local cancer consortium activities, state advocacy and regional meetings in their specialty. If yes, please provide additional details in 250 words or less.</p>	<p>Nominee 19 participates in many cancer awareness and advocacy activities in partnership with the hospital, local businesses, and non-profit organizations like Cancer Support Community. She is a presenter for our organization's continuing education program: • Education on AJCC staging for breast cancer (multiple occasions) • Community lecture on "Managing Your Breast Health," co-presented with a radiologist about using imaging to guide breast cancer treatment and choosing surgical strategy based on cancer biology. This very successful event had 106 She is an expert panelist at community-facing events: • Breast Cancer Survivor Retreat (multiple occasions) • Cancer Support Community Spanish Nutrition Class • Advances in Medicine – spoke on genetic testing in the high risk patient • CHAIN SPECIALITY SHOP in CITY (Breast Cancer Awareness Month) – educated on the importance of a multidisciplinary approach to breast cancer care, followed by question & answer session • SCRUBS Day – educated on breast cancer from screening through diagnosis, utilizing newer imaging techniques, and surgical options for women diagnosed with breast cancer • Black History Month at Cancer Support Community – educated on breast cancer as it affects African American women</p>
<p>Please provide an example of how the nominee identifies and brings forward specific issues to the Cancer Committee that have resulted in changes that improved patient care (250 words or less).</p>	<p>Nominee 19 is listed as a contact for all STATE-Health accredited facilities as a physician champion for synoptic operative reports. Her involvement in getting surgeons' buy-in on these standards led to noticeable compliance improvement (ex: SLNBx baseline 2/2023 18% to sustained 100% for the past 7 months). She advocates for all appropriate individuals to be referred for genetic counseling. She educates others about the American Society of Breast Surgeons Consensus Guideline on Genetic Testing for Hereditary Breast Cancer which recommends testing should be made available to all patients with a personal history of breast cancer. Because of her passion in this area, our genetics clinic leadership team often requests her input for improvement opportunities. She collaborated with the tumor registry on a Breast Cancer Recurrence Study (Standard 4.7) which evaluated recurrence rates of 770 breast-conserving surgical cases and compared them to published recurrence rates. Recurrence rates were broken down into local/regional/distant recurrences. Study findings were posted on the hospital webpage for public reviewing (Standard 1.12). She participated in the assessment of evaluation and treatment planning (Standard 4.6) for post-mastectomy radiation patients. Her review compared hospital data to national guideline recommendations, showing that our patients undergoing mastectomy for breast cancer (tumor > 5cm or 4+ involved axillary lymph nodes) met guidelines for post-mastectomy radiation. She reviewed literature about post-mastectomy radiation for patients with a small burden of lymph node disease to compare our hospital to similar institutions (guidelines indicated radiation was to be considered but not obligatory in this population).</p>

<p>Please provide a specific example of how the nominee either fosters a strong relationship with the American Cancer Society or utilizes American Cancer Society resources in their work (250 words or less).</p>	<p>Our program has had a long-standing relationship with American Cancer Society (ACS) and an ACS representative sat on our Cancer Committee for decades. Recently (end of 2022), the ACS representative stopped attending meetings due to a change in ACS staffing. Despite this change, our program values their services and Nominee 19 continues to advocate for our partnership with ACS to ensure our patients can benefit from ACS programs such as the Hope Lodge and Road to Recovery. We often have patients travel 40+ miles to receive treatment at our hospital. We are fortunate to have been a recipient of the ACS Patient Transportation Grant for the past several years which has helped patients with gas cards, hospital parking validation, and cab vouchers. Our referrals to the Hope Lodge have increased since their grand opening. Over the years we have received many patient educational materials from ACS on topics including Cancer Facts for Women, Take Control of Your Health: Help Reduce Your Cancer Risk, Getting Started: Some Cancer Basics, When Smokers Quit: Benefits of Quitting, Caring for the Patient with Cancer at Home: A Guide for Patients and Families, Nutrition for the Person with Cancer During Treatment, and Screening Guidelines. The abundance of printed materials made available by ACS allows our program to offer our community evidence-based information across the care continuum, from prevention, initial diagnosis, during treatment, and survivorship.</p>
<p>Is there any other information you would like to add that demonstrates ways in which your program's CLP has excelled in the role?</p>	<p>Nominee 19 is highly regarded by her peers and colleagues and is being strongly considered as the successor of our current chairperson who is retiring this year. She embodies our STATE Health Promise "Individuals Caring For Individuals, Together" and Promise Principles of Reliable, Safe, Seamless, Efficient, Proactive, and Caring. She sets the bar high when it comes to patient care, challenging us consider ways to improve quality and patient experience. She recently brought 2 articles for discussion by our Committee ("Improving our communication with cancer patients and understanding the variety of their perspectives through the cancer journey" and "Aspects of gratitude in the cancer journey"). Her holistic approach to patient care is evident in comments from patients: • "Nominee 19 has taken real good care of me. Shes very compassionate and I connected with her immediately the 1st time meeting. I was extremely emotional she put me at ease." • "Nominee 19 is hands down one of the best surgeons. She is kind, supportive, and truly cares about her patients. I wish other doctors would learn from her with her bedside manners and skillset." • "Nominee 19 is the kindest doctor I have had! She cares so much and is so relational. She is thorough and up-to-date on her knowledge. I complete trust her. You are in great hands with Nominee 19!" • "Nominee 19 is the sweetest most caring doctor I've been to. She's exactly what you want- a wonderful physician with a great reputation and caring compassionate bedside manner to top it off!"</p>