


**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



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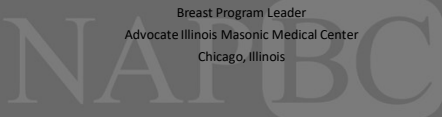
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## Pilot Site Visit Experience

Celeste G. Cruz MD FACS  
Breast Program Leader  
Advocate Illinois Masonic Medical Center  
Chicago, Illinois

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### Disclosures

- Nothing to Disclose



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### Pilot Site Preparation

- Initiate
- Plan
- Execute
- Control
- Closure



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### Preparation

- Discussion regarding participation in Pilot Site Visit. (Fall 2022)
- Identify:
  - important stakeholders within our Breast Program Leadership and Breast care team.
  - Standards sent to respective departments: Surgery, Medical, radiation oncology, radiology, pathology, & RN staff.
- Notify Stakeholders of selection 12/14/22.
- Meeting with individual departments regarding identifiable changes prior to year end.
- Setting and identifying goals.

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### Goals & Objectives

NAPBC Subcommittee

- Subcommittee was created. Composed of:
  - Breast Program Director
  - Breast Cancer Nurse Navigator
  - RN leader
  - Registry Data Analyst
- Institutional Support
  - Quality Coordinator
  - Executive Director of Oncology Services



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### Setting & Identifying goals

- Protocol review and creation.
- Review system processes within our program.
  - Identify gaps & areas of improvement.
- Documentation
- Responsibility.
- Timeline



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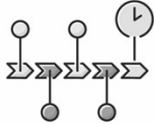
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### Execution

- Creation of a project schedule.
- Review and Report
  - Updates regarding implementation throughout the year thru BPL
- Measurable outcomes



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### Review

- Standards and the patient experience.
  - Some of our current practices helped make the transition easier:
    - Multidisciplinary clinic.
    - Continuous community outreach & Education.
    - Psychosocial support
    - Survivorship: (PT, women's integrative health).
  - Develop & Improve
    - High Risk Clinic.
    - EMR build.
    - Research.

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## Review

- Questions
  - Demonstrating cultural competence.
  - Demonstrating 7.1 Quality Measures
  - How much information to include: Standard 2.3 BCT & standard 8.1 Education, prevention & Early Detection.

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## Review

- Overall, the standards allowed us to look at our current practice patterns and make any appropriate adjustments to make our program even more cohesive.
  - Internal review of our data as well as documentation processes.



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## Pilot Site Visit

- In person visit:
  - Enough time to get a sense of our program and what we have to offer.
  - Ability to demonstrate the scope of our practice and the community we serve.
  - Meet the comprehensive team as well as demonstrate our institutions support of our program.
  - Clarification of any further questions regarding documentation.
  - Ability to provide feedback regarding the new standards which we see reflected on the current modifications.
  - Excellent suggestions to continue to elevate the level of care at our institution.

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### Key Takeaways

- The new guidelines highlight the patient experience and an individualized care approach.
- Value of navigation and appropriate resources.
- Importance of standard protocol which is dynamic and meets the needs of the patient and upholds the standard of care.
- Thoughtfulness surrounding quality breast cancer care for the individual as well as the community.
- Increased education surrounding prevention and assessment of risk factors.

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## Thank You

# NAPBC

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