


AMERICAN COLLEGE OF SURGEONS
Improving Quality
Higher Standards. Better Outcomes.

Commission on Cancer


A MULTIDISCIPLINARY PROGRAM OF THE AMERICAN COLLEGE OF SURGEONS

RQRS: From Idea to Reality



Andrew K. Stewart

GATRA
November 9, 2011



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NCDDB RQRS

Ensuring Quality of Care

Commission on Cancer

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Institute of Medicine Report of 1999



- Noted that the quality of cancer care varies in the United States.
- Recommended that:
 - Quality care measures be established.
 - These measures be monitored through repeated studies.
 - That benchmarks be established for quality improvement.
 - Reporting mechanisms or report cards be developed to promote improvement of care at the local level.

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NCDDB RQRS


Rapid Quality Reporting System (RQRS)

Commission on Cancer

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- Allow expedited data entry of a critical subset of items specifically relevant to anticipated standard of care treatments.
- Enable accredited cancer programs to report data on patients concurrently.
- Show cancer programs up-to-date concordance rates relative to the state, other similar programs, and all CoC accredited programs across the country.
- Provide the hospitals timely notification of treatment expectations.

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SCODD RQRS **RQRS: "Lively, Timely, Amazing"** 


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- **RQRS helps:**
 - Prevent patients from falling through the cracks
 - Ensures that data are correct and useful
 - Promotes the importance & skills of cancer registrars

▪ **"The registry, which is a non-revenue department, is being looked at in a different light since we can now present quality measures in a more current time frame"**

▪ **"Should be expanded to more sites"**


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SCODD RQRS **Getting the Cancer Program Ready?** 

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- **Set the expectations**
 - How long will your registry need to get concurrent with their abstracting?
 - How will the cancer program administration help the registry work towards active participation?
 - Work with the registry to set a timeline for expectations of RQRS participation
- **Decide if and when RQRS is right for your institution**


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SCODD RQRS **Getting Cancer Physicians Geared Up?** 

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- **Find a physician champion**
 - Use your Cancer Liaison Physician and Cancer Committee Chair
- **Show impact**
 - The alerts report, explain this as a tool to improve and coordinate health care
 - Show ability to track patient care
 - Give examples of uses of RQRS within cancer committee
- **RQRS is not just for the registry**
 - It is a part of the entire cancer program
 - Increased visibility of the registry within the cancer program


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SCODD RQRS **Data Abstraction Best Practices** 

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- **Work with your patient navigators to get adjuvant treatment information on your patients**
- **Make a schedule.**
- **Use the alerts to send out treatment letters.**


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SCODD RQRS **Data Submission Best Practices** 

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- **Submit each month along with state submission**
- **Submit after reviewing RQRS Monthly Alerts Report**
- **Work with your vendor to make the process as easy as possible.**
- **Resubmit all RQRS eligible case each month, don't select out any cases.**


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SCODD RQRS **Beta Test Lessons Learned** 

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- **Reorganization of registry staff may be required or attempted for optimal work flow**
- **After explaining the RQRS project to staff physicians and out of system providers to communicate the necessary data needs for timely monitoring of outcome measures and treatment, they become more responsive to registry's treatment information requests.**
- **One size does not fit all**
- **It may take 6-9 months to develop a system to use RQRS effectively within your program.**
- **"Don't give up, it takes time."**

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NCDB RQRS **How Do You Get Here?**  A MULTIDISCIPLINARY PROGRAM OF THE AMERICAN COLLEGE OF SURGEONS


- Have an assigned staff member to maintain the RQRS process, from start to finish. It can be time consuming.
- Allow time for registry to catch up to concurrent reporting (maybe start before enrolling in RQRS)
- Use the nurse navigator as a resource to get updates on patient treatment.
- **Keep with it!** “At first it seems difficult to participate in RQRS but after you develop a routine and establish guidelines for your staff it actually is a wonderful tool.”

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NCDB RQRS **RQRS Case Selection**  A MULTIDISCIPLINARY PROGRAM OF THE AMERICAN COLLEGE OF SURGEONS

- **Date of diagnosis >= 01/01/2008**
- **Primary site of diagnosis (ICD-O-3):**
 - C18.0-C18.9 (colon)
 - C20.9 (rectum)
 - C50.0-C50.9 (breast)

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NCDB RQRS **Data reporting**  A MULTIDISCIPLINARY PROGRAM OF THE AMERICAN COLLEGE OF SURGEONS

- **Data elements and transmission standards adhere to NAACCR Uniform Data Standards for cancer registries.**
- **Create a data transmission as you would for a “regular” NCDB Call For Data submission**
 - Use RQRS case Selection
 - Use NCDB, RQRS and Clinical Checks EDITS sets to check the content of your transmission file (optional).

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FAQs & Best Practices

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Rapid Quality Reporting System

Access on CoC Link via Navigation
 Home Quality
 Program Quality
 Report Feedback, Better Outcomes

Forms
 RQRs online documentation
 RQRs Navigation Basics
 ACE Reporting Quality

Forum

FORUMS

• [Login through CoC database to post new content in the forum.](#)

Forum	Topics	Posts	Last post
EAO			
Rapidly Documenting	0	0	N/A
RQRs impact on patient care	0	0	N/A
Data Submission	1	1	By Bruce McNamee 1 week 4 days ago
Performance Status	1	1	By Braden 2 weeks 2 days ago
Metrics & Case Lists	0	0	N/A
Comparison Reports	0	0	N/A
Best Practices			
Rapidly Documenting	0	0	N/A
RQRs impact on patient care	0	0	N/A
Data Submission	0	0	N/A
Performance Status	0	0	N/A
Metrics & Case Lists	1	1	By Bruce McNamee 1 week 4 days ago
Comparison Reports	0	0	N/A
General Discussion	0	0	N/A

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My Account

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Rapid Quality Reporting System

Access on CoC Link via Navigation
 Home Quality
 Program Quality
 Report Feedback, Better Outcomes

CoC Member Information

Year	Category	Case Count	Required RQRs Status	Date	Auth	Case Reason	Priority	Last Update
2011	Breast	95	Lead Submission	08/02/2011	CPA	Andrew Stewart	✓	18-SEP-2011
2011	Colon	11	RQRs Enrollment	08/02/2011	CCC	Bruce Smith	✓	18-SEP-2011
2011	Rectum	4	Lead Submission	08/02/2011	HRP	James R. Brinkman	✓	18-SEP-2011
2010	Breast	361	Lead Comparison	11/04/2011	CLP	Shari Tate	✓	18-SEP-2011
2010	Colon	82			CLP	Wendy L. Brien	✓	18-SEP-2011
2010	Rectum	37						
2009	Breast	388						
2009	Colon	109						
2009	Rectum	40						
2008	Breast	168						
2008	Colon	93						
2008	Rectum	37						

View Processed Status

CoC Hospital

My hospital in the above image, select a POC for the CoC for 10/01/11 and click submit.

Submit Data

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Use RQRs in Daily Operations

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- Promote evidenced-based cancer care at the local level
 - Utilize alert systems to discuss forthcoming treatment plans
 - Assure that there is a process in place to foster this care.
 - Identify demographic variables that may impact on care.

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SCCD B RQRS **Changes in Registry Operations**  A MULTIDISCIPLINARY PROGRAM OF THE AMERICAN COLLEGE OF SURGEONS


- Reorganization of registry staff may be required or attempted for optimal work flow
- Steps to active RQRS participation:
 - 1) Start uploading RQRS cases with a 5-6 month backlog
 - 2) Get to understand the data fields, report options and alerts system
 - 3) Work with your vendor to make the submission process as smooth as possible.
 - 4) Move to more concurrent abstracting.

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SCCD B RQRS **Jumping the Hurdles**  A MULTIDISCIPLINARY PROGRAM OF THE AMERICAN COLLEGE OF SURGEONS

- Get to know your physicians
 - Some Beta test participants stated they set up specific days each month to go to outside physician offices
- Resource allocation for electronic medical records
- Abstract RQRS disease sites first
- Reduce the need to repeatedly go into the same case by using the RQRS Notes

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SCCD B RQRS **Use the RQRS Monthly Alerts Reports**  A MULTIDISCIPLINARY PROGRAM OF THE AMERICAN COLLEGE OF SURGEONS

Breast

Radiation therapy administered within 2 year (240 days) of diagnosis for women under age 70 receiving breast conserving surgery for breast cancer.

8 Patients were diagnosed over 360 days ago. RQRS has no record of receipt of radiation therapy. According to this measure treatment is now past due.

12 Patients were diagnosed over 375 days ago. To remain concordant with this measure, patients must receive radiation therapy in less than 30 days.

10 Patients were diagnosed over 330 days ago. To remain concordant with this measure, patients must receive radiation therapy in less than 300 days.

Radiation therapy administered within 2 year (240 days) of diagnosis for women with AJCC T1-3N0M0, or Stage II-III breast cancer.

6 Patients were diagnosed over 360 days ago. RQRS has no record of hormone therapy consideration or administration for these patients. According to this measure treatment for these patients is now past due.

24 Patients were diagnosed over 270 days ago. To remain concordant with this measure there are less than 75 days remaining for these patients to consider or be administered hormone therapy.

20 Patients were diagnosed over 225 days ago. To remain concordant with this measure there are less than 150 days remaining for these patients to consider or be administered hormone therapy.

- Review monthly alerts reports on the first Monday of each month.
- Spend week reviewing cases with alerts to get updated treatment information.
- Make RQRS data submission 2nd or 3rd Monday of the month.
- Repeat with next report.

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Identify and Target Interventions?

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Radiation following BCS by Age: 2009

My Program
All Programs (National Statistics)

- Program has lower than national rates for beta test participants.
- Very low rates in younger women
- Can the cancer committee target an intervention towards these patients?

Receipt of radiation following breast conserving surgery (BCS/RT) and hormone therapy for hormone receptor positive breast cancer patients (HT).

Hormone Therapy for Breast Cancer: 2009

My Program
All Programs (National Statistics)

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Tools to ID the Media to Reach Your Market

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• RQRS provides *current* key demographics to target your marketing and identify best media outlets to use:

- Education
- Income
- Race/ethnicity
- Gender

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RQRS Benefits

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- Timely data and notifications
- Data reflects current practice
- Integration of the registry into multidisciplinary cancer conference.
- The registry is perceived as containing data that is more useful and meaningful because it is more timely.
- Improved treatment information completeness across all primary cancer sites.
- Improved patient outcomes
- Increased teamwork.
- Have complete data for other studies

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www.facs.org/cancer/ncdb/rqrs

RAPID QUALITY REPORTING SYSTEM (RQRS)

GETTING STARTED

Year-to-Date Performance Rates

RQRS Data Submission Steps

1. Log in to the RQRS system.
2. Review the data for accuracy and completeness.
3. Review the data for accuracy and completeness.
4. Review the data for accuracy and completeness.
5. Review the data for accuracy and completeness.
6. Review the data for accuracy and completeness.
7. Review the data for accuracy and completeness.
8. Review the data for accuracy and completeness.

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8. Review the data for accuracy and completeness.

Advice from Beta Test Registrar


“Do it! I think with the implementation of CP³R and then RQRS our workload has increased but so has the quality and completeness of our data. My advice to any cancer program considering enrolling is RQRS is to provide your cancer registry with adequate staff to do the job right”

- February 2011

Talk with Your β-Test Colleagues

- Phoebe Putney Memorial Hospital
- Athens Regional Medical Center
- Emory Midtown Hospital
- Emory University Hospital
- Northside Hospital
- Piedmont Hospital
- MCG Health, Inc.
- University Health Care System
- (a) • Southeast Georgia Health System-Brunswick
- The Medical Center
- Hamilton Medical Center
- (a) • DeKalb Medical Center
- (a) • Northeast Georgia Medical Center
- (a) • West GA - LaGrange
- Gwinnett Hospital System
- (a) • Medical Center of Central Georgia
- WellStar Health System, Inc
- Floyd Medical Center
- Redmond RMC
- (a) • Memorial Health
- St. Joseph's/Candler Health System
- Emory Eastside Medical Center
- Henry Medical Center
- (a) • John D. Archbold Memorial Hospital
- Tift Regional Medical Center
- South Georgia Medical Center


Time to Talk Expansion



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- **Breast:**
 - Radiation therapy is considered or administered within 1 year (365 days) of diagnosis for women undergoing mastectomy for breast cancer with ≥ 4 positive regional lymph nodes.
 - Needle Biopsy is performed prior to surgical treatment of breast cancer.
 - Breast Conservation rate for women with AJCC Stage 0, I, or II breast cancer.
- **GI:**
 - Esophagus & Gastric
- **Respiratory:**
 - Non-Small Cell Lung

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Thank you!!!

RQRS Beta Test Participants

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