A SHOWCASE OF ACHIEVEMENT

ACCC’s 2012 Innovator Award Recipients Lead the Way to Transformational Change

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GE Healthcare

ACCC
Association of Community Cancer Centers
The Association of Community Cancer Centers (ACCC) is pleased to announce the recipients of the 2012 ACCC Innovator Awards, sponsored by GE Healthcare. The award honors ACCC member programs that have exhibited forward-thinking strategic planning and developed pioneering programs and replicable models.

The 11 ACCC Innovator Award winners represent diverse regions of the country, cancer programs of all sizes, and institutions with varying levels of resources. They all share the commitment to enhance cancer care in the community, empower their staff and their patients, and promote transformational change.

Both ACCC and GE Healthcare will highlight these innovative programs to oncology care providers as well as to the broader healthcare community across the country. The commitment to helping clinicians improve care for patients with cancer is shared by ACCC and GE. GE Healthcare’s sponsorship of the ACCC Innovator Awards helps catalyze cancer innovation in the community setting.

ACCC 2012 Innovator Award recipients will be recognized at the ACCC 29th National Oncology Conference in San Antonio, Texas, October 3–6, 2012. These innovators will share their creative solutions and outstanding programs with meeting attendees.

Congratulations to each of these innovators, and thanks for inspiring us with your bold ideas!

George Kovach, MD
President, Association of Community Cancer Centers

**GE Healthcare** offers a wide portfolio for oncology and a strategy that combines cellular research, medical imaging, laboratory diagnostics, biopharmaceutical manufacturing technologies, and information technology. These innovative technologies help the oncology community increase their understanding of the causes and progression of cancer and can help physicians make more personalized cancer treatment and management decisions. Recently, GE launched a global healthymagination commitment to help deliver better care to 10 million patients by 2020 through $1 billion in dedicated R&D investment aimed at accelerating cancer treatment progress through innovation.

Since 1974, the **Association of Community Cancer Centers (ACCC)** has served as the leading national multidisciplinary organization that sets the standard for quality care for patients with cancer. ACCC is dedicated to promoting professional learning opportunities and to providing a forum for members to network and enhance their skills in the business, clinical, and management aspects of care for the cancer community. More than 17,000 cancer care professionals from approximately 900 hospitals and more than 1,200 private practices are affiliated with ACCC. Our unique membership includes all members of the cancer care team: medical and radiation oncologists, surgeons, cancer program administrators and medical directors, pharmacists, oncology nurses, oncology social workers, and cancer program data managers. For more information, visit ACCC’s website at [www.accc-cancer.org](http://www.accc-cancer.org). Follow us on Facebook, Twitter, and on ACCC’s blog at [www.acccbuzz.wordpress.com](http://www.acccbuzz.wordpress.com).
Akron General Medical Center
McDowell Cancer Center
Akron, Ohio

Bridging the Psychosocial and Financial Needs of Oncology Patients

Akron General Medical Center, McDowell Cancer Center, is recognized for its unique patient navigation program, which reduced psychosocial distress, secured $1.35 million in direct financial assistance to patients that would otherwise not have been available, and reduced institutional bad debt. The program recognizes that patients with cancer should be treated holistically and distress should be identified and managed.

Through this structured distress management program, a component of patient navigation, all patients complete the National Comprehensive Cancer Network (NCCN) Distress Thermometer, and a reimbursement specialist conducts a benefits investigation prior to initial therapy. Data are used to identify needs and connect patients with applicable supportive resources. The oncology social worker completes a comprehensive psychosocial assessment with those patients having more complex needs. Subsequently, patients are assigned a case complexity rating to help monitor those needing additional ongoing follow-up. Patients complete the NCCN Distress Thermometer a second time during their last scheduled visit to receive chemotherapy. Data are then entered into database and used to evaluate self-indicated stressors and to monitor the case complexity rating of each patient. This information is used for current and longitudinal research, to assist with program development, and for measuring program effectiveness.

Anne Arundel Medical Center
Geaton and JoAnn DeCesaris Cancer Institute
Annapolis, Maryland

Rapid Access Chest and Lung Assessment Program

Anne Arundel Medical Center’s Geaton and JoAnn DeCesaris Cancer Institute is recognized for its innovative coordinated, multidisciplinary approach for patients with abnormal chest findings, which leads to expedited referrals and better management.

Often in the community setting, patients found to have abnormal chest imaging, especially pulmonary nodules, are followed by their primary care providers who may be left to manage complex pulmonary findings on their own. In the Rapid Access Chest and Lung Assessment Program, providers in the community, as well as those within the hospital and the emergency department, can contact the program coordinator about any patient with any abnormal chest finding. A patient’s imaging is reviewed by a multidisciplinary team that includes a pulmonologist, thoracic surgeon, thoracic radiologist, and nurse navigator. The average wait from abnormal findings by imaging to evaluation is one to two days. Patients and referring providers appreciate the timely feedback and expedited management.
Dorcy Cancer Center at St. Mary-Corwin Medical Center is recognized for its Cancer Assessment Resource Education Survivorship (CARES) program, which addresses the unique quality-of-life issues faced by patients with head and neck cancers, including difficulties with communication and swallowing, tooth decay, weight loss, and lymphedema.

The diagnosis of cancer associated with the head and neck presents unique challenges for the patient that may significantly affect the quality of life. The CARES program provides a comprehensive approach to assist patients during radiation to minimize the side effects. The multidisciplinary team includes nurse care managers, a dental hygienist, physical therapist, speech therapist, nutritionist, psychiatric clinical nurse specialist, radiation therapist, and palliative care team that assess each patient before radiotherapy and continue to support the patient into survivorship. The program has increased the number of specialty services for cancer patients under one roof, decreased the number of breaks in radiation treatments, and provided opportunities for collaboration among disciplines to better meet patient needs.

Fox Chase Cancer Center is recognized for its new approaches to maximize patient flow and reduce inpatient hospital length of stay. Two multidisciplinary teams worked in tandem to consolidate manual systems, implement bed management software, address multiple operational process improvements, and reduce inpatient hospital length of stay. The program promoted an accountable culture through employee engagement in project work and outcome measurement.

At Fox Chase Cancer Center an Integration Team studied numerous evidence-based and best practices to enhance efficiency of admission, discharge, and teaching processes; appropriate and timely bed placement; staff communication; data collection; and patient flow. Implemented strategies included: 1) a formal process for daily bed/staffing huddles to discuss pending admissions, discharges, transfers, and staffing levels; 2) length-of-stay reduction projects addressing outlier cases; 3) electronic processes for admission requests and discharge notification; and 4) development of performance dashboards. Variance analysis tracking tools enabled the institution to become more data-driven in its approach to managing patient flow, reducing hospital length of stay, and improving bed availability for cancer patients.
OhioHealth Grant Medical Center, Grant Cancer Care, is recognized for its unique screening outreach program: ConvenientCare Mammography. By working closely with area employers, the program is able to provide women who work in the downtown community the opportunity to have their screening mammogram over the lunch hour. Women are transported by shuttle to the Breast Health Center from their place of employment. This novel outreach approach alleviates the hassle of driving within a congested city and offers front-door service to patients who come for a mammogram. In 2011 this program provided mammograms to nearly 500 women in the downtown Columbus area.

The program is innovatively designed to pre-register each patient via phone and/or email before the appointment. Upon arrival, there is virtually no wait time. This program places a strong emphasis on the timeliness of cancer diagnosis. Patients with abnormal mammograms can be scheduled for a diagnostic appointment within 24 hours. In some cases, women who have participated on the ConvenientCare Mammography shuttle have had their diagnostic appointment the same day as their screening. Women who participate gain peace of mind knowing that their mammogram will be read by a radiologist within hours or even minutes.

What Is the ACCC Innovator Award?

Established in 2011, the annual ACCC Innovator Awards, sponsored by GE Healthcare, honor exceptional cancer programs that exhibit forward-thinking strategic planning and have developed pioneering programs and replicable models. Innovator Award recipients have included small community cancer centers, large comprehensive cancer programs, and academic medical centers. Each has developed unique tools and processes that improve quality of care and the patient experience.

ACCC Cancer Program Members are encouraged to apply for an Innovator Award. An independent panel made up of members of the multidisciplinary cancer care team reviews and rates each application numerically based on identified criteria. While many well-qualified programs apply each year, only a select number are chosen to receive an Innovator Award.

Each ACCC Innovator Award recipient is recognized within Oncology Issues, on ACCC’s website, and at the ACCC National Oncology Conference, where each program shares its achievements with meeting attendees. ACCC and GE Healthcare highlight these innovative programs to oncology care providers as well as to the broader healthcare community across the country.

Videos of the award winners are available at www.youtube.com/user/ACCCvision. For more information go to www.accc-cancer.org/innovator.
Institute is recognized for its model supportive care clinic, which was developed in collaboration with the National Cancer Institute Community Cancer Centers Program (NCCCP). This multidisciplinary supportive oncology clinic improved access to early palliative care in patients with advanced cancer. The unique aspect of this clinic is the involvement of a pharmacist who works side by side with the nurse practitioner to implement medication therapy management and medication reconciliation.

Within the clinic at each of four cancer treatment centers across southern Idaho, a multidisciplinary team of nurse practitioners, pharmacist, dietitian, social worker, chaplain, and integrative medicine specialist conducts an in-depth, two- to three-hour assessment of new patients. The team is able to develop early relationships with patients and screen them for current or anticipated nutritional, psychosocial, or spiritual needs. The benefits of a dedicated pharmacist who works with the nurse practitioner include better coordination among multiple prescribers and lowered risk for unintended drug interactions, therapeutic duplications, and unintended adverse effects.

Southwest Cancer Center, UMC Health System, is recognized for its innovative approach to process improvement drawing upon patient experiences and staff empowerment.

At the Southwest Cancer Center, a committee of key employees, former patients, and family members gathers monthly to investigate various ways to improve the overall patient experience. Unique patient perspectives offer invaluable insight on processes that work very well and those that need improvement. Another committee of volunteer employees meets monthly to review internal rewards and recognition initiatives, teamwork, and morale as well as key departmental deliverables, including patient wait time, patient comfort, and other operational aspects. This employee-led committee plays a critical role in continually elevating employee retention and patient loyalty.
How to Develop a Breast Cancer Program Across a Large Health System

Collectively, this group of cancer programs in the Allina Health System is recognized for its team approach to multidisciplinary breast cancer care, which focuses on patient experience, quality of care, physician engagement, performance improvement, and cost efficiencies.

The Allina Health Breast Program Committee is the driving force in the establishment of the momentum and commitment of this approach to breast cancer care, which has the full support of Allina Health and includes a robust data collection system. The Breast Program Committee guides clinical program development through system integration and strives to ensure that patients receive consistently exceptional breast care across the Allina Health System and across the continuum of care. The committee achieves its goals with a team of multispecialty physicians, management, and support staff. A major focus has been to bring specialty physicians together and to develop best-practice consensus guidelines. Areas included are: 1) consistent intraoperative orientation of lumpectomies, with margin criteria for re-excision of both invasive and in situ carcinomas; 2) consensus guidelines for ordering PET scans during the surveillance period of breast cancer care; 3) system-wide guidelines for identifying patients with possible hereditary breast or ovarian cancer syndromes for genetic counseling; and 4) standardization of pathology reporting and handling of specimens. The committee is committed to measuring adherence to guidelines and providing feedback to physicians.
Learn how each of the 2012 ACCC Innovator Award recipients created unique models and pioneering strategies.

Transform your vision of what a cancer program can be.

Create Change.
ACCC 29TH NATIONAL ONCOLOGY CONFERENCE
October 3–6, 2012
Grand Hyatt San Antonio  *  San Antonio, Texas
Details at www.accc-cancer.org/oncologyconference

For more information, go to www.accc-cancer.org/innovator.