

2017

Elmhurst Memorial Hospital Cancer Committee  
CANCER PROGRAM OUTCOMES REPORT

The National Cancer Database (NCDB), a joint program of the Commission on Cancer (CoC) of the American College of Surgeons (ACoS) and the American Cancer Society (ACS), is a nationwide oncology outcomes database for more than 1,500 CoC accredited cancer programs in the United States and Puerto Rico. Approximately 70 percent of all newly diagnosed cancer cases in the United States are captured at the institutional level and reported to the NCDB. The NCDB, begun in 1989, now contains approximately 34 million records from hospital cancer registries across the United States. Data on all types of cancer are tracked and analyzed. This data is used to explore trends in cancer care, to create regional and state benchmarks for participating hospitals, and to serve as the basis for quality improvement.

The Cancer Program at Elmhurst Memorial Hospital has been accredited by the Commission on Cancer since 1968 and has participated in the National Cancer Data Base since its inception in 1989. The Cancer Program of Elmhurst Memorial Hospital, under the direction of the Hospital Cancer Committee, uses the NCDB as a quality monitoring and improvement tool. Tumor types, staging and outcomes are compared to state, regional, and national data to monitor our performance in specific treatment areas and outcomes.

**The NCDB provides comparative information annually to hospitals to assess adherence to specific standard of care therapies for major types of cancer. This data is provided through the Cancer Program Practice Profile Reports (CP3R). This reporting tool provides individual hospitals a means to promote continuous practice improvement to improve quality of patient care at the local level and also permits hospitals to compare their care for these patients relative to that of other providers. The aim is to empower clinicians and administrators to work cooperatively and collaboratively to identify problems in practice and delivery and to implement best practices that will diminish disparities in care across CoC-accredited cancer programs.**

**This outcomes report will address Elmhurst Hospital's results with that seen state-wide, by hospital program accreditation type, and nationally for the CoC Accountability and Quality Improvement Measures for the top three type of cancers diagnosed annually at Elmhurst Memorial Hospital which are breast, lung, and colorectal cancers.**



A QUALITY PROGRAM  
of the AMERICAN COLLEGE  
OF SURGEONS

ACCOUNTABILITY  
MEASURES

**High level of evidence supports the measure, including multiple randomized control trials. These measures can be used for such purposes as public reporting, payment incentive programs, and the selection of providers by consumers, health plans, or purchasers.**

PRIMARY SITE	QUALITY MEASURE	QUALITY MEASURE DESCRIPTION	Expected Estimated Performance Rate (EPR)	EMH* Rate	IL* Rate	CCCP* Rate	Natl* Rate
BREAST	BCSRT	Radiation is administered within one year (365 days) of diagnosis for women under the age of 70 receiving breast conservation surgery for breast cancer	90%	100%	93%	90.7%	90.8%
BREAST	HT	Tamoxifen or third generation aromatase inhibitor is recommended or administered within 1 year (365 days) of diagnosis for women with AJCC T1c or stage IB-III hormone receptor positive breast cancer	90%	98.1%	93.5%	90.8%	91.1%
BREAST	MASTRT	Radiation therapy is recommended or administered following any mastectomy within 1 year (365 days) of diagnosis of breast cancer for women with $\geq 4$ positive regional lymph nodes	90%	91.7%	90.4%	85.7%	85.7%
BREAST	MAC	Combination chemotherapy is recommended or administered within 4 months (120 days) of diagnosis for women under 70 with AJCC T1cN0, or stage IB - III hormone receptor negative breast cancer	n/a	100%	92.9%	92.7%	92.6%
COLON	ACT	Adjuvant chemotherapy is recommended or administered with 4 months (120 days) of diagnosis for patients under the age of 80 with AJCC stage III (lymph node positive) colon cancer	n/a	100%	91%	87.8%	87.2%

\*EMH: Elmhurst Memorial Hospital

\*IL: All Commission on Cancer Accredited Cancer Programs in Illinois

\*CCCP: All Commission on Cancer Accredited Community Comprehensive Cancer Programs (EMH is a CCCP)

\*Natl: All Commission on Cancer Accredited Cancer Programs Nationwide

**Most of these accountability measures are assigned an Expected Estimated Performance Rate (EPR) by the Commission on Cancer. This EPR must be met annually by individual programs. If the EPR is not met, the hospital Cancer Committee must develop a corrective action plan in order to improve performance. Elmhurst Memorial Hospital exceeded the EPR for all measures as shown above.**

*Rates from the Commission on Cancer National Cancer Data Base CP3R Measures released October 23, 2017 for cases diagnosed in 2015*

**QUALITY  
IMPROVEMENT  
MEASURES**

**Evidence from experimental studies, not randomized control trials supports the measure. These are intended for internal monitoring of performance within an organization.**

PRIMARY SITE	QUALITY MEASURE	QUALITY MEASURE DESCRIPTION	Expected Estimated Performance Rate (EPR)	EMH* Rate	IL* Rate	CCCP* Rate	Natl* Rate
BREAST	nBx	Image or palpation-guided needle biopsy to the primary site is performed to establish diagnosis of breast cancer	80%	100%	91.4%	90.5%	90.3%
COLON	12RLN	At least 12 regional lymph nodes are removed and pathologically examined for resected colon cancer	85%	100%	93.1%	91.8%	91.9%
LUNG	LCT	Systemic chemotherapy is administered within 4 months to day preoperatively or day of surgery to 6 months postoperatively, or it is recommended for surgically resected cases with pathologic lymph node-positive (pN1) and (pN2) NSCLC	85%	100%	90.9%	87.8%	88.9%
LUNG	LNoSurg	Surgery is not the first course of treatment for cN2,M0 lung cases	85%	100%	91.9%	92.3%	91.8%
RECTUM	RECRCT	Preoperative chemo and radiation are administered for clinical AJCC T3N0, T4N0, or Stage III; or postoperative chemo and radiation are administered within 180 days of diagnosis for clinical AJCC T1-2N0 with pathologic AJCC T3N0, T4N0, or Stage III; or treatment is recommended; for patients under the age of 80 receiving resection for rectal cancer	85%	100%	88.8%	85.9%	86.3%

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**All of these quality improvement measures are assigned an Expected Estimated Performance Rate (EPR) by the Commission on Cancer. This EPR must be met annually by individual programs. If the EPR is not met, the hospital Cancer Committee must develop a corrective action plan in order to improve performance. Elmhurst Memorial Hospital exceeded the EPR for all measures as shown above.**

*Rates from the Commission on Cancer National Cancer Data Base CP3R Measures released October 23, 2017 cases diagnosed in 2015*