# 2019 Cancer Center of Excellence Annual Report

## Table of Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cancer Center of Excellence Award Program Overview</td>
<td>3</td>
</tr>
<tr>
<td>Application Cycle</td>
<td>4</td>
</tr>
<tr>
<td>Application and Review Process</td>
<td>4</td>
</tr>
<tr>
<td>Attachment 1</td>
<td>6</td>
</tr>
</tbody>
</table>
Cancer Center of Excellence Award Program Overview

The designation of a hospital, treatment center, or other organization as a Cancer Center of Excellence is intended to recognize organizations that demonstrate excellence in patient-centered coordinated care for persons undergoing cancer treatment and therapy in Florida. The goals of the Cancer Center of Excellence Award (Section 381.925, Florida Statutes) are to encourage excellence in cancer care in Florida, attract and retain the best cancer care professionals to the state, and help Florida organizations be recognized nationally as a preferred destination for quality cancer care. Before each application cycle, the Florida Department of Health (Department) contacts research and treatment facilities across the state via email to provide information about the award and the requirements.

By December 15th of each year, the Department reports the following information to the President of the Senate and the Speaker of the House of Representatives, as required by Florida Statute:

- The number of applications received,
- The number of award recipients by application cycle,
- A list of award recipients, and
- Recommendations to strengthen the program.

The Joint Committee, which is a committee with members from the Florida Cancer Control and Research Advisory Council and the Florida Biomedical Research Advisory Council, is required to meet every three years. The Joint Committee met in the Fall of 2019 developed the following program recommendations:

- There was discussion on modifying the initial application for designation. Revisions were made to the performance measures in 2016. The committee voted to keep the existing language. Further modifications would not be consistent with the intent of the legislation of a Cancer Center of Excellence.

- While there have been no new applications in three years, the Joint Committee recommended increased marketing of the designation would be best. Financial incentives could result in new applications. Finding nonfinancial incentives will be important. Increased collaboration opportunities with existing Cancer Centers of Excellence may be a beneficial outcome for new applications.
The Joint Committee developed re-designation criteria for existing Cancer Centers of Excellence. The Committee recommends utilizing National Cancer Institute criteria for documenting active research studies and ongoing training of research staff. This is consistent with the Centers documenting evidence of maintaining active involvement in clinical research. The re-designation performance measures are found as Attachment 1.

Application Cycles

2019

The Department conducted two application cycles in the Spring and Fall of 2019. In the Spring there were no applications. Based on recent inquiries, in the Fall there may be interest.

The only applications that have been received for the designation were from the re-designation process in 2017. At that time, all four Cancer Centers of Excellence received re-designation. The following received the re-designation:

- H. Lee Moffitt Cancer Center and Research Institute
- Mayo Clinic Florida
- University of Miami Sylvester Comprehensive Cancer Center
- University of Florida Health Cancer Center, which includes Shands Hospital and Proton Therapy Institute, and Orlando Health’s Orlando Regional Medical Center

Application and Review Process

Organizations seeking designation as a Cancer Center of Excellence submit an application and then undergo a review process approved by the Joint Committee. The application and review process involves the following steps:

- Organizations submit applications during one of the two application cycles offered each year.
- Staff review applications to confirm information is sufficient for evaluators. Then, evaluators determine whether the organization meets performance measures.
- A team of five independent evaluators review written materials. Evaluators are vetted and determined to be free from conflicts of interest.
- Organizations may be asked to submit revised applications with additional information.
- If a site visit is recommended during the review process, two evaluators will participate in the site visit.
- Applicants are provided a draft evaluation report, including observations made during the site visit, if applicable, and respond with corrections and improvement plans.
• Each member of the evaluation team reviews the draft evaluation report, the organization's response if applicable, and reports to the State Surgeon General those applicants that achieved or exceeded performance measures and met all requirements of the rating system approved by the Joint Committee.

• The State Surgeon General notifies the Governor regarding providers that are eligible to receive designation as a Cancer Center of Excellence.
Cancer Center of Excellence Award
Re-Designation Manual
Application Performance Measures

Florida HEALTH
Background

The designation of a hospital, treatment center, or other organization as a Cancer Center of Excellence is intended to recognize organizations that demonstrate excellence in patient-centered coordinated care for persons undergoing cancer treatment and therapy in Florida. The goals of the Cancer Center of Excellence program is to encourage excellence in cancer care in Florida and attract and retain the best cancer care professionals to the state. Further, the designation seeks to increase national recognition of Florida organizations by the National Cancer Institute.

The designation of a Cancer Center of Excellence is based on a systems approach to improving the quality of cancer care. The system is composed of three Areas: the health care organization, health care team members, and patients and family members. Each of these areas contributes to the success of the system.

Cancer Centers of Excellence are to be reevaluated every three years. The performance measures were updated in September 2019 by the Joint Committee, as required in 381.925, FS. The Joint Committee is comprised of members from the Biomedical Research Advisory Council and the Florida Cancer Control and Research Advisory Council. This manual is specifically designed for the recertification of organizations who have attained the designation of a Florida Cancer Center of Excellence.

Re-Designation

The intent of the re-designation process is to verify the same level of exemplary performance since the original designation. The process is an audit comparing the original application and an evaluation of practice at the time of the reapplication.

The Department of Health will conduct one, re-designation application in the Fall of 2020. The following steps outline the re-designation process:

- An application will be completed and submitted to Research@flhealth.gov.
- Department staff will review applications for completeness and provide written questions to the applicant organization within 15 days of receipt of application.
- An administrative review will be completed by the Department.
- Applications will be forwarded to peer reviewers after conflict of interest is determined.
- If the Department or a peer reviewer requests additional information, the organization has 15 days to respond. The additional information will be incorporated by the Department for consideration.
- Based on the peer review, findings will be forwarded to the State Surgeon General or designee who makes a recommendation to the Governor.
- Upon decision of the Governor, the organization is notified of a decision to continue the designation of Cancer Center of Excellence, or whether additional time is needed for the applicant organization to make program improvements.
Timeline

<table>
<thead>
<tr>
<th>Event</th>
<th>Dates</th>
</tr>
</thead>
<tbody>
<tr>
<td>Application Period</td>
<td>6/1 – 8/3/2020, 5:00 PM ET</td>
</tr>
<tr>
<td>Application Review</td>
<td></td>
</tr>
<tr>
<td>• Administrative Review by Department</td>
<td>8/4 – 10/30/2020</td>
</tr>
<tr>
<td>• Peer Review</td>
<td></td>
</tr>
<tr>
<td>Note: During this timeframe, you may be contacted for additional information.</td>
<td></td>
</tr>
<tr>
<td>Recommendations are provided to State Surgeon General</td>
<td>11/15/2020</td>
</tr>
<tr>
<td>State Surgeon General provides recommendations to Governor and determination completed</td>
<td>On or around 12/1/2020</td>
</tr>
</tbody>
</table>

Overview of Performance Measures

The standards in each area are performance-based, using objective criteria and measurable outcomes to evaluate whether a standard is met. The focus is on outcomes that improve patient care. Health care organizations have flexibility in taking different approaches to meeting the standard, as long as the organization meets rigorous high standards and provides improved outcomes for patients. The performance measures are applicable to cancer care across a range of settings, such as community hospitals, academic health centers, and other organizations.

Area I: Organization Performance Measures

This set of measures evaluates responsibilities of the organization, such as maintaining licensure, and providing necessary leadership support to develop and maintain an organizational culture that evaluates and continuously makes improvements to improve care.

Organizational Overview – Please complete the following summary table. No supporting documentation is required unless requested.

<table>
<thead>
<tr>
<th>Question</th>
<th>Choice</th>
<th>Choice</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Does your organization continue to maintain a license in good standing in Florida?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>2. Does your organization continue to maintain accreditation by the Commission on Cancer of the American College of Surgeons?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>3. Does your organization continue to actively and substantially participate in at least one regional cancer control collaborative that is operating pursuant to the Florida Comprehensive Cancer Control Program’s cooperative agreement with the Centers for Disease Control and Prevention’s National Comprehensive Cancer Control Program?</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>
4. Does your organization continue to have an accredited Institutional Review Board and related Protocol Review and Monitoring System to ensure the highest ethical standards for human subjects’ research? □ Yes □ No

If the answer is ‘No’ to any of the above, please explain why the answer is ‘No.’

I.1 Summarize activities over the last three years of your organization’s participation with one or more regional cancer control collaboratives that is operating pursuant to the Florida Comprehensive Cancer Control Program’s cooperative agreement with the Centers for Disease Control and Prevention’s National Comprehensive Cancer Control Program (limited to two pages).

I.2 To demonstrate excellence in and dissemination of scientifically rigorous cancer research, provide a selected list of peer-reviewed publications from the organization’s investigators over the last three years that have made a state, national, or international impact on cancer prevention, early detection, treatment, policy or particularly illustrate programmatic excellence in cancer control. This information should be provided in the format of a table, such as a Progress Report Publication List for National Cancer Institute (NCI) cancer center support grant renewal. PubMed Central (PMC) identification numbers should be provided when available. (No page limit.)

Area II: Healthcare Professionals and Clinical Researchers

Physicians, nurses and other health care professionals must follow evidence-based practice for cancer prevention, early detection and control, participate in quality improvement activities, and adaptively implement revisions to practice for improving outcomes. Additionally, training is essential for building a strong infrastructure of clinicians and clinician-scientists capable of providing high quality care for cancer patients in Florida.

II.1 Provide a list of training and career development activities for cancer-related healthcare professions. Include a list of training programs, a brief description of the program, the type of trainee (i.e., medical student, resident, fellow, nursing student, nurse, public health, social work, etc.), and the number of trainees participating by year over the last three years. Provide information in a table format similar to the examples below.

<table>
<thead>
<tr>
<th>Date</th>
<th>Training Title</th>
<th>Brief Description of Program</th>
<th>Trainee Credentials</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
II.2 Provide a written description for the following measures, describing any significant changes, enhancements or new activities related to providing multidisciplinary care, with a focus on your organization’s health care professionals (limited to five pages). The summary should include updates on the following:
   a. Dissemination of evidence-based findings to healthcare delivery systems and state and community agencies within the Center’s catchment area (e.g., community outreach and engagement activities)
   b. Tumor Boards and treatment plan review
   c. Highlight the clinical trials that your organization is conducting that exemplifies cancer research. Indicate research accruals to clinic trial. Include demographic information on research participants. Submit information in Cancer Center Support Grant (CCSG) DT3 and DT4 tables. Follow this link to guidance on table formatting. https://cancercenters.cancer.gov/Documents/CCSGDataGuide508C.pdf
   d. Availability of outcomes data on organization’s website. (Provide organization’s link to online location)

**Area III: Patients and Family Members**

High quality organizations have processes in place to evaluate and incorporate improvements to assist patients. High quality professionals are successful in supporting and encouraging patients. Patients are engaged as members of the care team. Provide a written description for each of the following measures (limited to five pages).

Summarize new and ongoing activities that address the following:

III.1 Educating cancer patients and their caregivers about treatment plans, supportive care and survivorship plans. Of particular interest are innovative methodologies unique to the Center that provide this education and maintenance of education before, during, and after treatment.

III.2 Improving the patient’s understanding of their cancer. This may include, but is not limited to, genetic counseling.

III.3 Activities that increase patient participation in follow-up appointments for positive cancer screening tests, cancer treatments, and survivor care visits. Of particular interest are innovative methodologies unique to the Center that ensure patient follow-up.
Thank you for continuing your commitment to the Cancer Center of Excellence Award designation. For technical assistance and questions, send emails to Research@flhealth.gov.