

November 18, 2016
9:00 AM to 11:00 AM



Conference call # (888) 670-3525
Conference code 5311418626

Joint Committee Cancer Center of Excellence
Meeting Minutes

Board Members Present:

C-CRAB

- Dr. Christopher Cogle
- Dr. Amy Smith
- Dr. Theresa Morrison
- Dr. Asher Chanan-Kahn
- Dr. Robert Cassell
- Laura Lenhart

BRAC

- Dr. Danny Armstrong
- Dr. Richard Nowakowski
- Dr. Abubakr Bajwa
- Dr. David Decker
- Ms. Allison Eng-Perez

Department of Health Staff:

- Philip Cavicchia, PhD, Director, Public Health Research Unit
- Bonnie Gaughan-Bailey, MPA, ASQ-CQIA, Administrator, Biomedical Research Section
- Will Crowley, MSP/MPA (Candidate), Biomedical Research Section
- Rotanya Bryan, MPA, IRB Specialist, Biomedical Research Section
- Kaitlyn Barningham, MPH (Candidate), Biomedical Research Section

A quorum was present. The meeting was called to order at 9:05 a.m. Board members received all pertinent meeting materials. Board members participated via conference call and could actively and equally participate in the discussion.

I. Introduction and Meeting Overview

Dr. Armstrong and Dr. Cogle provided an overview of the meeting agenda. The purpose of the meeting is for the Joint Committee to review and make revision recommendations to the performance measures, rating system, and rating standard for the Cancer Center of Excellence application process.

II. Summary of the Cancer Center of Excellence Award

Bonnie Gaughan-Bailey provided a brief summary of the Cancer Center of Excellence Award including application eligibility, application process, and past recipients. (Presentation is attached.)

Members discussed the barriers and challenges in applying for the Cancer Center of Excellence Award, particularly for non-academic organizations. Challenges include a lengthy application process, rigorous standards, significant research requirements, and lack of incentives.

Members agreed that the award needs to be made more accessible for community hospitals by revising the substantial research requirements and providing better communication.

III. Review of Overview of Performance Measures

Area I: Organization

I.1 The organization maintains a license in good standing in Florida which authorizes health care services to be provided.

I.2 The organization achieves and maintains accreditation by the Commission on Cancer of the American College of Surgeons.

I.3 The organization actively and substantially participates 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.

I.4. The organization demonstrates excellence in and dissemination of scientifically rigorous cancer research.

I.5 The organization integrates rigorous cancer training and education of biomedical researchers and health care professionals.

I.6 The organization provides enhanced cancer care coordination which, at a minimum, focuses on: coordination of care by cancer specialists and nursing and allied health professionals, psychosocial assessment and services, suitable and timely referrals and follow-up, providing accurate and complete information on treatment options, including clinical trials, which consider each person's needs, preferences, and resources, whether provided by that center or available through other health care organizations, participation in a comprehensive network of cancer specialists of multiple disciplines, which enables the patient to consult with a variety of experts to examine treatment alternatives, family services and support, aftercare and survivor services, patient and family satisfaction survey results, activities that address disparities in health outcomes related to race, ethnicity, language, disability, or other disparity-related factors.

I.7 The organization adopts and implements a continuous comprehensive quality indicator system, reports at a minimum annually on quality metrics and makes a summary of the evaluation available to prospective patients and family members.

I.8 When conducting cancer research the organization must have an accredited human research protection program and have research reviewed by an accredited Institutional Review Board to ensure the highest ethical standards

I.9 The organization enters into a research partnership with at least one other organization or a research network composed of Florida organizations, and participates in a network of Cancer Centers of Excellence when available.

Dr. Bajwa motioned to keep the language for Standard I.1–I.9 as written.

Dr. Nowakowski seconded the motion

Total votes for approval: (Total members voting: 10) Affirmative: 10 Negative: 0 Recusal: 0

Area II: Health care professionals and researchers

II.1 Physicians and all members of the care team provide accurate and complete information on treatment options, including clinical trials, which consider each person's needs, preferences, and resources, whether provided by that center or available through other health care organizations.

Dr. Nowakowski motioned to keep the language for Standard II.1 as written.

Dr. Decker seconded the motion

Total votes for approval: (Total members voting: 10) Affirmative: 10 Negative: 0 Recusal: 0

Area III: Patients and family members

III.1 The organization should provide ongoing opportunities for the patient to provide all the information to the health care team that is relevant to care and treatment decisions.

III.2 The organization should provide ongoing opportunities for the patient to communicate concerns and worries that might affect cancer treatment.

III.3 The organization should provide ongoing opportunities for the patient to improve their understanding of their cancer.

III.4 The organization should provide ongoing opportunities for the patient to keep follow up appointments to ensure continuity of care.

III.5 The organization should provide ongoing opportunities for the patient to include a friend or family member in the care process.

Ms. Eng-Perez motioned to keep the language for Standard III.1–III.5 as written.

Dr. Nowakowski seconded the motion

Total votes for approval: (Total members voting: 10) Affirmative: 10 Negative: 0 Recusal: 0

IV. Review and Recommendations to Rating System and Rating Standard

Dr. Decker motioned to keep the language for the Rating System and timeline as written.

Dr. Nowakowski seconded the motion

Total votes for approval: (Total members voting: 10) Affirmative: 10 Negative: 0 Recusal: 0

V. Review of Performance Measures

Area I: Organization

I.1 (see above)

Dr. Decker motioned to keep the language for Standard I.1 as written.

Dr. Nowakowski seconded the motion

Total votes for approval: (Total members voting: 10) Affirmative: 10 Negative: 0 Recusal: 0

I.2 (see above)

Dr. Decker motioned to keep the language for Standard I.2 as written.

Teresa Morrison seconded the motion

Total votes for approval: (Total members voting: 10) Affirmative: 10 Negative: 0 Recusal: 0

I.3 (see above)

Dr. Nowakowski motioned to keep the language for Standard I.3 as written.

Dr. Decker seconded the motion

Total votes for approval: (Total members voting: 10) Affirmative: 10 Negative: 0 Recusal: 0

I.4 (see above)

Members discussed the Required Written Materials section being focused towards academic centers. Requirements may not be appropriate for community hospitals and other non-academic institutions to apply for the award. Members discussed definition of research excellence to include: *“Significant participation in clinical research, involved in research that national impact and reputation and one other area of research in the development phase.”*

Dr. Cogle motioned for the drafted language for Standard I.4 to be circulated and then reviewed. Ms. Eng-Perez seconded the motion.

Total votes for approval: (Total members voting: 10) Affirmative: 10 Negative: 0 Recusal: 0

I.5 (see above)

The members discussed to change language under Explanation to: *“The organization should demonstrate biomedical researcher training to support the transition of new investigators to independent investigators”* to replace *“through external peer reviewed scientific programs to support the transition of new investigators to independent investigators, nationally recognized programs such as K, R25 or similar career development awards.”*

The members discussed revising the Required Written Materials section to include: *“Documentation of institutional or extramural support that has been targeted toward career growth for early career investigators during the last three years.”*

Dr. Nowakowski motioned to change the language for Standard I.5 as written above.

Dr. Decker seconded the motion.

Total votes for approval: (Total members voting: 10) Affirmative: 10 Negative: 0 Recusal: 0

I.6 (see above)

Members discussed that upon reapplication for the award, work completed will need to be demonstrated by applicants.

Ms. Eng-Perez motioned to keep the language for Standard I.6 as written.
Dr. Bajwa seconded the motion.

Total votes for approval: (Total members voting: 10) Affirmative: 10 Negative: 0 Recusal: 0

I.7 (see above)

ISO 9000 Standards for Quality is the correct reference for CCE. (Background: *ISO 9000 helps you understand the different terms used in the ISO 9001 standard. The ISO 9001 standard is the actual document which contains the requirements you have to meet in order to become certified. ISO 9004 is a document which helps you understand how you can begin to use the QMS to improve your organization.*)

Ms. Eng-Perez motioned to keep the language for Standard I.7 as written.
Dr. Decker seconded the motion.

Total votes for approval: (Total members voting: 10) Affirmative: 10 Negative: 0 Recusal: 0

I.8 (see above)

Dr. Cogle motioned to keep the language for Standard I.8 as written.
Dr. Nowakowski seconded the motion.

Total votes for approval: (Total members voting: 10) Affirmative: 10 Negative: 0 Recusal: 0

I.9 (see above)

Dr. Cogle motioned to keep the language for Standard I.9 as written.
Dr. Nowakowski seconded the motion.

Total votes for approval: (Total members voting: 10) Affirmative: 10 Negative: 0 Recusal: 0

Area II: Health care professionals and researchers

II.1 (see above)

Dr. Nowakowski motioned to keep the language for Standard II.1 as written.
Ms. Eng-Perez seconded the motion.

Total votes for approval: (Total members voting: 10) Affirmative: 10 Negative: 0 Recusal: 0

Area III: Patients and Family Members

Ms. Eng-Perez motioned to keep the language for Standard III.1–III.5 as written.
Teresa Morrison seconded the motion.

Total votes for approval: (Total members voting: 10) Affirmative: 10 Negative: 0 Recusal: 0

VI. Future Considerations

Members discussed consideration of a global statutory change to permit a consortium of institutions, with a strong memorandum of agreement, to be considered for Cancer Center of Excellence designation.

Members discussed possible incentives which could help achieve long term contracts or follow-on funding. To further discussion on incentives, cost-benefit analysis must be considered.

Members discussed future incorporation of a feedback process for applicants who were not selected as a Cancer Center of Excellence. *(Note: Applicants do receive an interim report and final report with feedback.)*

VII. Next Steps

Revise language for Standard I.4 Required Written Materials to include components of research excellence. Revisions will be circulated and reviewed by members.

A Doodle Poll will be used to determine the next meeting date.

VIII. Public Comment

There was no public comment. The meeting concluded at 11:00 a.m.