Surgical Oncology Program
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UPDATE ON CANCER SURGERY PERFORMANCE MEASURMENT

Background

In keeping with Cancer Care Ontario's overall goal of improving the organization, delivery and outcomes of cancer care in Ontario, the Surgical Oncology program had undertaken a program of performance measurement.

This involves the selection of evidence- and consensus-based indicators of quality of care for cancer surgery followed by analysis of Ontario data based on these indicators.

Where there are clear variations in appropriate care (either overuse or underuse of services) Cancer Care Ontario will issue recommendations to the Ministry of Health and Long Term Care, and work with its stakeholders to address those problems.

The Surgical Oncology program plans to develop indicators for surgery of breast, colorectal, head and neck, hepatopancreatobiliary, lung, ovarian and prostate cancer. Thus far indicators for breast and colorectal cancer have been produced.

Methods

Hospital CEOs and Regional Vice Presidents of Cancer Services were asked to nominate practicing clinicians who provide care to patients with cancer and had demonstrated leadership in quality improvement through research, administrative responsibilities or committee membership to serve as panel members. Each panel included a surgical and a methodologic co-chair, eight or nine surgeons, one medical oncologist, one radiation oncologist, a nurse, and a pathologist, for a total of 15 members.

A comprehensive literature search was conducted to identify possible quality indicators of breast and colorectal cancer surgery. These were formatted as questionnaires and distributed by regular mail.

Respondents were asked to rate the indicators according to perceived association with quality and patient outcomes, and suggest additional indicators. A summary report of questionnaire responses was circulated to panel members and discussed by teleconference. Acceptance, rejection, or the need for further consideration of each indicator was discussed.

Indicators requiring further consideration were formatted as a questionnaire and distributed to panel members. Responses were again discussed by panelists during a teleconference.

All indicators selected from the previous two rounds of rating and discussion were included in a third and final questionnaire. Panel members were asked to prioritize the indicators by choosing those that they perceived best measured the quality of surgery and the most meaningful level of measurement (regional/provincial, hospital, surgeon).

Results

The indicator selection process commenced in December 2002 and concluded in November 2003. For each of breast and colorectal cancer, 15 indicators were included in the final list of indicators considered by the panel members to be priority benchmarks by which to assess the quality of surgical care. The indicators selected represent all three levels of measurement and several phases of care, from diagnosis to follow-up.

The breast and colorectal cancer surgery indicators selected by the two panels can be viewed at www.cancercare.on.ca/planning_surgicalOncology.htm.

Next Steps

Indicators selected by the two panels will be further considered for the feasibility of data analysis – can they be measured in the short term with available administrative data, or, when data is lacking, as part of a research study involving data collection through abstraction from patient records, surveys or interviews.

Consideration must also be given to who should receive the data and in what format. Research on the use of performance data is conflicting – some studies demonstrate that it is most helpful to direct performance data to managers, where other studies show that physicians themselves are willing to alter their practice when provided with confidential comparative performance data. It is likely that a combination of these strategies may prove most effective.

You may distribute this Bulletin to others that are interested. If you have questions, or wish to be added/removed from our mailing list, please contact us: jennifer.mah@cancercare.on.ca, 416.971.5100 x1633.