



**Breast Center Accreditation
Part Two - NQMBC uses Process Measures**

*Integrated Oncology Consulting Solutions
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Breast Center Accreditation

Part Two – NQMBC uses Process Measures

By Karen Gilden

While the National Accreditation program for Breast Centers (NAPBC) focuses on structure and program elements (see Part I of this article), the **National Quality Measures for Breast Centers™ (NQMBC)** emphasizes processes, performance, specific metrics, patient satisfaction across diagnostics and multiple treatment disciplines, and even outcomes –Five Year Stage Specific Survival Rate[®]. NQMBC identifies quality care measures, provides immediate access to blinded information submitted by other participants and allows breast centers to compare their performance with other centers across the United States.

NQMBC Open to Centers of All Sizes & Types

Developed by the National Consortium of Breast Centers, Inc. (NCBC), the NQMBC defines an eligible participant as “any facility providing breast healthcare to patients.” NCBC, the sponsoring organization, elaborates stating, “The definition of a breast center is a physical setting where breast healthcare services are provided. Breast healthcare services may be a part of the patient services offered or may be the *only* patient service offered at this site.” The organization further notes the NQMBC program is “committed to empowering breast centers of all types and sizes with the ability to measure and improve quality of care provided to breast cancer patients.”

What are Some NQMBC Quality Measurements?

The Quality Certification, available through the NQMBC, operates as an interactive internet model in which local breast center staff enter the institution’s (or practice’s) performance metrics across 30+ quality indicators. The National Consortium of Breast Centers’ staff (in consultation with broad representation from breast center leaders, clinical experts and staff) created performance measures derived from published literature, as well as expert opinions. After spending more than two years developing, piloting and refining these foundational elements, NCBC established a set of quality measures that span the continuum of breast cancer care from initial imaging (mammograms) through patient satisfaction (at various diagnostic and treatment points), to reconstructive breast surgery. The data set of process measures includes:

- Imaging Timeliness;
- Surgical Timeliness;
- Needle/Core Biopsy Rate;
- Pathology Report Completeness;
- Breast Conservation Surgery Rate;
- Sentinel Node Use;
- Patient Satisfaction Measures (including shared decision-making and cosmetic results post-reconstruction);
- Chemotherapy Use;
- Post-Lumpectomy Radiation; and
- Five Year Stage Specific Survival Rate[®], among other measures.

How Do Centers & Participants Compare their Data?

One important NQMBC element is a functional website where local center staff can enter their institution's data and immediately receive comparison data generated from all other responses on that particular measure. This enables clinical staff at the local breast center to compare performance metrics with those of other programs and centers with similar profiles. Multiple filters enable a center to compare itself to programs with similar patient volumes, geographic location, financial structure or other demographic characteristics. Staff can compare their center with all participating breast centers in aggregate, or they may view data across multiple years. Such local program trend data can be helpful for planning quality improvement initiatives, budgeting for program expansion or new staff, measuring local program growth (patient volume) and benchmarking quality of care delivery against the 400+ participating breast centers.

A new subset of the NQMBC program is fashioned for discipline-specific users. The NQMBC-Surgeon provides a comparison database of surgeon-specific quality measures. Participating in the NQMBC-Surgeon program, as an activity, satisfies the American Board of Surgery Part IV requirements for certification maintenance (MOC). Participation includes completing a minimum of three (3) and preferably all nine (9) Quality Measures to comply with American Board of Surgery guidelines. As new program officials note, these requirements are subject to change.

After six (6) years of active use, the NQMBC website is being revised and improved. Users should notice improved functionality when the revised website is re-introduced.

NQMBC Certification Levels

A participating breast center can earn NQMBC certification at three levels:

- Entry Level (Certified Participants and Participants)
- Quality Breast Centers
- Quality Breast Centers of Excellences

Moving forward from an entry level program to one of the quality certifications involves such actions as supplying local data for more than 40% of all applicable measurements, supplying serial data across multiple 6-month data collection periods and resubmitting certain data for re-certification.

There is no entrance or eligibility cost to participate in NQMBC, though organizations must verify that only accurate data will be submitted. De-identified audits of submitted data do occur. The organization explains the lack of entry fees is due to underwriting by sponsors. Sponsors include several tracking software companies, suppliers and manufacturers. Clearly, individual breast centers must budget for the cost of staff to collect required data, input that information, negotiate the software to view comparative quality data and produce hardcopy reports.

Motivation & Purposes for Pursuing Certification or Accreditation

Hospitals and clinicians are consistently interested in measuring their quality of care. These two articles (Part I and Part II) have highlighted two different approaches to breast center/program certification or accreditation. The NQMBC is web-based and focuses strongly on process data, offering individual centers comparison and benchmark metrics. The NAPBC provides accreditation based primarily on ensuring key structural elements are in place and involves an on-site survey. Whichever approach your breast center clinicians prefer, it is important to advance the accreditation/certification process as a

quality initiative, rather than as a marketing tactic. Claudia Z. Lee, President of C. Z. Lee & Associates, and breast cancer services pioneer, makes a point of advising potential breast centers to “do the right thing.” Here’s how Ms. Lee puts it:

*“My personal message is to advise that when you seek accreditations and certifications your institution’s **primary purpose** is to **improve the quality of your breast program** – the processes, the programs, and the outcomes. **Second in importance in seeking approvals, is an opportunity to bring together all the interested breast care providers for an interdisciplinary discussion** of the breast program’s strategies and priorities – which in turn, begins to align philosophies and goals. Only as a third, and substantially less important objective, should leaders seek accreditation for marketing (or volume-building) purposes. While this is an important result of achieving accreditation (and of great interest to many), it should be considered only a tertiary motive. After securing the first two priorities, marketing will be much easier.”*

Claudia Z. Lee, President
C. Z. Lee & Associates

Ms. Lee further recommends that breast centers seek both NAPBC accreditation and NQMBC certification as they are complementary, not redundant.

If you would like more information about the National Consortium of Breast Centers™ or their NQMBC quality certification, go to www.breastcare.org.