

St. Rita's Medical Center Lima, Ohio Policy and Procedure Manual	Initiation Date: 01/25/1999 Latest Revision Date: 03/16/2004
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SUBJECT: CANCER COMMITTEE MEETINGS Standard 2.2

PROCEDURE: The Cancer Committee is a standing committee of the Medical Staff. It is multidisciplinary and provides leadership to the Cancer Program. The Cancer Committee is responsible for goal setting, planning, initiating, implementing, evaluating and improving all cancer-related activities in the facility. The Cancer Committee meets quarterly during the months of February, May, August and November on the second Friday at 7:00 am and its composition is multidisciplinary. Special meetings of the Committee may be called as needed.

1. Physician membership must include, but is not limited to the following:
 - a. Diagnostic Radiologist
 - b. Pathologist
 - c. General Surgeon
 - d. Medical Oncologist
 - e. Radiation Oncologist
 - f. Cancer Liaison Physician
2. Non-Physician membership must include, but is not limited to the following:
 - a. Cancer Program Administrator
 - b. Oncology Nurse
 - c. Social Worker and/or Case Manager
 - d. Tumor Registrar
 - e. Performance Improvement Professional
 - f. Hospice Manager
 - g. Palliative Care Nurse Specialist
 - h. Clinical Research Nurse Coordinator
3. A member of the Cancer Committee is designated to coordinate one of each of the following four major areas of program activity:
 - a. Cancer Conference
 - b. Quality Control of Cancer Registry Data
 - c. Quality Improvement
 - d. Community Outreach (this role must be filled by the

Related Forms:

Originating Department

APPROVAL

Title	Signature	Approval Date	Approval Date	Approval Date
Chairman, Cancer Committee				
Manager, Allison Radiation Center and Cancer Registry				
Cancer Data Coordinator				
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Distribution:
Page 1 of 2

cancer liaison physician)

PROCEDURE: (Continued)

4. Coordinator roles and responsibilities include:
 - a. Contributing to the development of the annual goals and objectives of the Cancer Program.
 - b. Monitoring the activity of their assigned area of responsibility and reporting quarterly to the Cancer Committee.
 - c. Recommending appropriate corrective action if activity falls below the annual goal, requirements or expectations of their designated area.
5. The Cancer Committee develops and evaluates the annual goals and objectives for the clinical, community outreach, quality improvement and programmatic endeavors related to cancer care.
6. The Cancer Committee establishes the frequency, format and multidisciplinary attendance requirements for cancer conferences on an annual basis.
7. The Cancer Committee ensures that the required number of cases are discussed at the cancer conference on an annual basis and that a minimum of 75 percent of the cases discussed are presented prospectively.
8. The Cancer Committee monitors and evaluates the cancer conference frequency, multidisciplinary attendance, total case presentation, and prospective case presentation at least annually.
9. The Cancer Committee establishes and implements a quality control plan to evaluate the quality of cancer registry data and activity at least annually.
10. Each year, the Cancer Committee analyses patient outcomes and disseminates the results of the analysis. This will be accomplished by publishing an Annual Report that includes a cancer site analysis with survival analysis and comparison of our data to NCDB data.