

Just ASK Study: Your Questions Answered

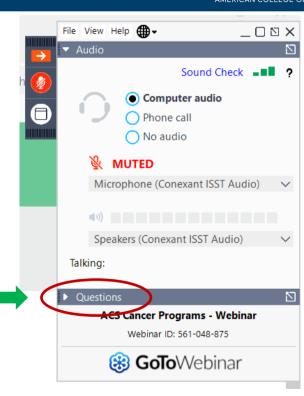
April 1, 2022



Webinar Logistics



- All participants are muted during the webinar
- Questions including technical issues you may be experiencing – should be submitted through the question pane
- Questions will be answered as time permits; additional questions and answers will be posted on the website
- Please complete the post-webinar evaluation you will receive via email





Introducing Our Moderator





Timothy Mullett, MD, MBA, FACS
Thoracic Surgery, University of Kentucky
Markey Cancer Center, Kentucky
Chair, Commission on Cancer
Kentucky



Introducing Our Panelists





Laurie Kirstein MD, FACS

Attending Breast Surgeon

Memorial Sloan Kettering Cancer Center

Associate Professor

Cornell University Medical College

New Jersey



Erin DeKoster Reuter

Accreditation Senior Manager, Cancer Programs

American College of Surgeons, Illinois



Lisa Allison, BSN, RN, MS
Independent Oncology Consultant
Colorado



Agenda



- Just ASK Study Context
- REDcap
- Accreditation Compliance Overview
- Review of FAQ and Answers From The First Webinar



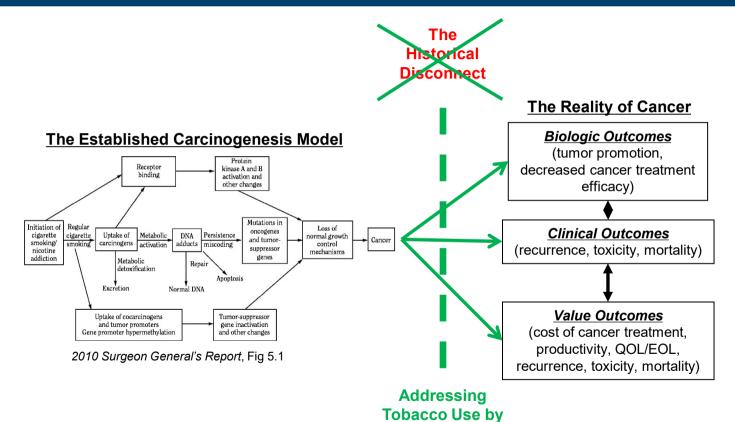


Just ASK Study Context Timothy Mullett, MD, MBA, FACS



Smoking and the Continuum of Cancer Care





Cancer Patients

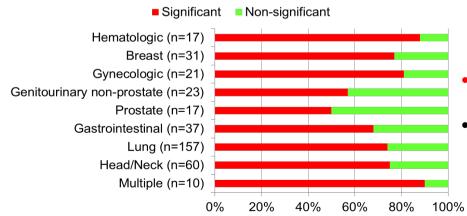


Why is Addressing Smoking Important for Cancer Treatment?



2014 SGR: >400 studies, 500K patients 1990-2012

Effect	Associations	Median RR
Overall Mortality (159 studies)	87%	Current: 1.51 Former: 1.22
Cancer Mortality (58 studies	79%	Current: 1.61 Former: 1.03



Overall Mortality Among 129 studies, 2013-17

- Smoking at diagnosis with 61% increased risk
- Smoking at follow-up with 113% increased risk

Financial Effects of Smoking at Diagnosis

 Smoking after diagnosis adds ~\$3.4 billion in cancer treatment costs annually (2019 estimates)

Benefits of Smoking Cessation

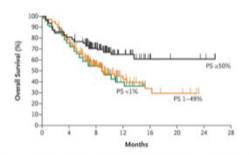
- Smoking cessation AFTER diagnosis associated with 45% median reduction in mortality
- Smoking cessation AT ANY TIME reduces non-cancer mortality (heart disease, pulmonary disease, etc.)

2014 Surgeon General's Report 2020 Surgeon General's Report GW Warren, C3I Spring Meeting 2021

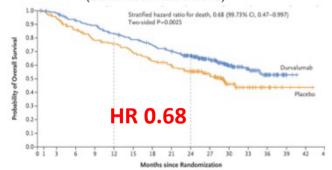


How Does this Compare with Other Practice Change?

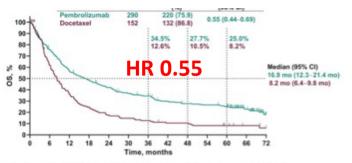




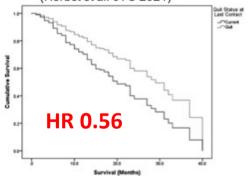
Overall Survival with Pembro by PD-L1 status, Keynote-001 (Garon et al. NEJM 2015)



Overall Survival with Duvalumab, Pacific Trial (Antonia et al. NEJM 2018)



Overall Survival with Pembro, PD-L1 >50 Keynote-010 (Herbst et al. JTO 2021)



Smoking Cessation added to first line NSCLC treatment (Dobson-Amato et al. JTO 2015)

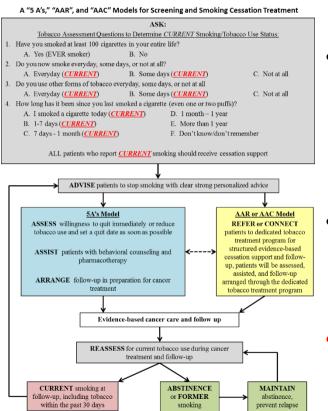


How Can We Begin to Address Smoking?



Deficiencies in Care

- Most institutions don't incorporate smoking into cancer care
- Most oncologists don't assist patients
- Most patients don't receive help
- Most patients continue to smoke after diagnosis



Evidence-Based Care

- The 5A's Model
 - Ask
 - Advise
 - Assess
 - Assist
 - Arrange
- The 3A's/AAR/AAC Model
 - Ask
 - Advise
 - Assist, Refer, or Connect
- Start by <u>JUST ASKing</u> all new patients about smoking

Warren and Simmons. Ch. 33
DeVita *Principles and Practice of Oncology* 11th ed. 2018



Purpose: JUST ASK All New Patients About Smoking



<u>ASK</u>

- Ask all new patients about smoking
- Identify current smoking

The purpose of this PDSA is to improve ASKing for all new cancer patients

Advising or Assisting is encouraged, but WILL NOT be measured

ADVISE

- Continued smoking negatively affects cancer treatment
- Smoking cessation can improve survival

ASSIST, REFER, or CONNECT

- Clinicians can assist patients with quitting: counseling and medication
- Refer/Connect: institutional, community, or quitlines (1-800-QUIT-NOW)







Lisa Allison, BSN, RN, MS





Just ASK Quality Improvement Project & Clinical Study

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The goal of this PDSA to increase and improve the integration of smoking assessment as a standard of care. Participation will require completion of three questionnaires to track progress during the project. This opportunity is being provided to all currently accredited Commission on Cancer (CoC) and National Accreditation Program for Breast Centers (NAPBC) programs, as well as those that have applied for CoC or NAPBC accreditation.

Please submit questions to acscancerprograms@facs.org.

Just ASK Project and Clinical Study 🕹

Just ASK Frequently Asked Questions 🕹

Compliance Checklist 🕹

Access REDCap Questionnaire

. . . then access the questionnaire.

Review FIRST . . .







Instrument name

Facility Information

Follow Up Facility Information

Background

Smoking Assessment & Smoking Cessation Practices

Implementation Barriers

Implementation Strategies

Intervention Implementation

Organizational Readiness & Priority

Clinical Data JustASK Reporting Metrics

Comments







Introduction

The Tobacco Cessation JustASK PDSA is an optional quality improvement project for eligible Commission on Cancer (CoC) or National Accreditation Program for Breast Centers (NAPBC) Programs.

Please read the following instructions thoroughly.

Visit the Project Web Page for complete details, a checklist of requirements for participation, frequently asked questions, and the PDSA document prior to initiating the questionnaire. Participation will meet specific CoC Standards OR NAPBC Standards. You are required to make your selection when completing the initial questionnaire.

All sections noted in the PDSA Appendix 3 are required elements of the three questionnaire periods. Please review these with your teams and gather the requested data prior to beginning the questionnaire.

If at any time you exit the questionnaire using the "Save & Return Later" function, please note your Return Code and submit an email for a Return Link. This is <u>required</u> for you log back in to complete the questionnaire.

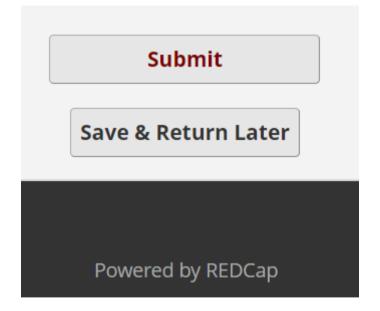
When the questionnaire is completed, be sure to download and save the PDF of your responses. This documentation may be required as part of the Pre-Review Questionnaire (PRQ) for your next site visit.

No Facility or Center identifying information will be published by the American College of Surgeons at the completion of this PDSA.















Your survey responses were saved! You have chosen to stop the survey for now and return at a later time to complete it. To return to this survey, you will need both the survey link and your return code. See the instructions below. 1.) Return Code A return code is *required* in order to continue the survey where you left off. Please write down the value listed below. Return Code KEKI 'Return Code' needed to return × * The return code will NOT Copy or write down the Return Code below. Without it, you will 2.) Survey link for returning not be able to return and continue this survey. Once you have You may bookmark this providing your email the code, click Close and follow the other instructions on this address below. For secu t receive the email soon page. afterward, please check Return Code: KEKNWF3K Enter email addres * Your email address will no Close Or if you wish, you may continue with this survey again now. Continue Survey Now





Your survey responses were saved! You have chosen to stop the survey for now and return at a later time to complete it. To return to this survey, you will need both the survey link and your return code. See the instructions below. 1.) Return Code A return code is *required* in order to continue the survey where you left off. Please write down the value listed below. Return Code KEKI 'Return Code' needed to return × * The return code will NOT Copy or write down the Return Code below. Without it, you will 2.) Survey link for returning not be able to return and continue this survey. Once you have You may bookmark this providing your email the code, click Close and follow the other instructions on this address below. For secu t receive the email soon page. afterward, please check Return Code: KEKNWF3K Enter email addres * Your email address will no Close Or if you wish, you may continue with this survey again now. Continue Survey Now





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1.) Return Code

A return code is *required* in order to continue the survey where you left off. Please write down the value listed below.

Return Code KEKNWF3K

2.) Survey link for returning

You may bookmark this page to return to the survey, OR you can have the survey link emailed to you by providing your email address below. For security purposes, **the return code will NOT be included in the email**. If you do not receive the email soon afterward, please check your Junk Email folder.





Or if you wish, you may continue with this survey again now.

Continue Survey Now



^{*} The return code will NOT be included in the email below.



For a new link and code, please email:

TO: ACScancerprograms@facs.org

FROM: [your email]

Subject: JustASK link [FIN] [Program Name]







Date of Completion of Form * must provide value	Today M-D-Y
Primary Contact Name * must provide value	
Primary Contact Email This is the email address which will be associated with your questionnaire responses. Future questionnaires will be accessed with this email. * must provide value	
Primary Contact Phone * must provide value	123 456 7890







What smoking cessation resources are currently available for your patients? * must provide value	 □ Treatment in clinic by physician or clinic staff □ Smoking cessation program embedded in the cancer center □ Smoking cessation program through a local hospital resource □ Referral to other local facility-based smoking cessation program □ Referral to other community-based smoking cessation program □ Unknown or Not available
Does your facility have a system for screening all newly diagnosed cancer patients for smoking history and current use? * must provide value	○ Yes ○ No ○ Unknown
Do you have a smoking cessation specialist or counselor embedded in your cancer care setting who is available to see patients who report they are currently smoking?	○ Yes○ No○ Unknownreset







Agree	Somewhat Agree	Neither Agree nor Disagree	Somewhat Disagree	Disagree
0	0	0	0	0

Almost Always	Usually	Sometimes	Occasionally	Rarely or Never
0	0	0	0	0







Annual new patient volume (analytic cases from last complete year) * must provide value		
Analytic case volume last complete year	○ 2020	
Please use analytic case volume from 2021 unless it is not complete. If not complete, use case volume from 2020.	O 2020	reset
* must provide value	If unknown, please contact your Tumor Registry or Program Administrator.	, 050







Annual new patient volume (analytic cases from last complete year) * must provide value		
Analytic case volume last complete year Please use analytic case volume from 2021 unless it is not complete. If not complete, use case volume from 2020. * must provide value	20202021If unknown, please contact your Tumor Registry or Program Administrator.	reset
During this assessment period, how many <u>newly diagnor</u> patients were seen in your program?	<u>sed</u>	

If none, enter '0'.



* must provide value





During this assessment period, how many <u>newly diagnosed</u> patients were seen in your program?

* must provide value

During this assessment period, how many <u>newly diagnosed</u> patients were ASKed about smoking history and current use in your program?

* must provide value

During this assessment period, how many <u>newly diagnosed</u> patients reported that they were currently smoking?

* must provide value

During this assessment period, how many <u>newly diagnosed</u> patients were provided with smoking cessation resources, or referred to a smoking cessation specialist?

* must provide value





From: redcap@facs.org

To: me



	Clinical Data JustASK Reporting	Metrics Page 4		
	Please complete each field in this questionnaire.			
	Be sure to keep your unique login details associated with the equestionnaire.	email you enter in the Primary Contact section of this		
	At the end of each page, please select "Complete" from the dr	opdown menu.		
	Upon completion of the questionnaire, you will be able to download a PDF of your completed responses. Please download this page, and keep it with your records for your Pre-Review Questionnaire (PRQ) in preparation for y			
	Questions should be directed to ACScancerprograms@facs.org	ı		
1)	Please select the data period for which you are reporting.	⊗ Baseline Time Period: January 1-December 31, 202		
	Baseline Time Period: January 1-December 31, 2021 (Due April 15, 2022)			
	Mid-Year Time Period: January 1-June 30, 2022 (Due September 1, 2022)			
	Post-Intervention Time Period: July 1-December 31, 2022 (Due February 1, 2023)			
	Note: All three time periods must be completed in order to receive credit towards the selected Standards. Please review the PDSA information on the website for complete information.			
2)	During this assessment period, how many newly diagnosed patients were seen in your program?	123 (If none, enter '0'.)		
3)	During this assessment period, how many newly diagnosed patients were ASKed about smoking history and current use in your program?	123 (If none, enter '0'.)		
4)	During this assessment period, how many newly diagnosed patients reported that they were currently smoking?	123 (If none, enter '0'.)		
5)	During this assessment period, how many newly diagnosed patients were provided with smoking cessation resources, or referred to a smoking cessation specialist?	123 (If none, enter '0'.)		
6)	During this assessment period, how many TOTAL patients were seen in your program?	123		
7)	During this assessment period, how many TOTAL patients were ASKed about smoking history and current use in your program?	123 (If none, enter '0'.)		







First Questionnaire Due

Data from Newly Diagnosed population in 2021; Analytic case load from most recent complete year



Participant Distribution
List

REDCap Link on the project web page will no longer be available



Second Questionnaire Due

Complete using data from Jan 1-Jun 30, 2022.



Final Questionnaire Due

Complete using data from Jul 1-Dec 31, 2022.







Baseline Time Period: January 1-December 31, 2021 (Due April 15, 2022)

Mid-Year Time Period: January 1-June 30, 2022 (Due September 1, 2022)

Post-Intervention Time Period: July 1-December 31, 2022 (Due February 1, 2023)







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Please submit questions to acscancerprograms@facs.org.

Just ASK Project and Clinical Study &

Just ASK Frequently Asked Questions &

Compliance Checklist 🚣

Access REDCap Questionnaire







Just ASK Accreditation Compliance Overview Erin Reuter



Accreditation Credit



CoC

- Standard 7.3: Quality Improvement Initiative
- Standard 8.2: Cancer Prevention Event
- Standard 9.1: Clinical Research Study

NAPBC

- Standard 3.2: Clinical Trial Accrual
- Standard 4.1: Education, Prevention, and Early Detection
- Partial credit for Standard 6.1: Quality and Outcomes (must do a center-specific study)

Can be used for CoC or NAPBC <u>but not both</u>
Once chosen, cannot be changed

Can be used to resolve a deficiency from a 2020/2021 or 2022 site visit



Required Documentation



Documents required to receive accreditation credit:

- Must complete 3 questionnaires & download pdf for submission in the PRQ at the time of the site visit
- Document required discussions in the BPLC/Cancer Committee minutes
- Complete Clinical Research Templates for CoC 9.1 and NAPBC 3.2 with any research accruals

Excluding clinical research, templates do not need to be filled out for Just ASK if participating in this project (must fill out for other years in the accreditation cycle).







A QUALITY PROGRAM of the AMERICAN COLLEGE OF SURGEONS

AMERICAN COLLEGE OF SURGEONS

A QUALITY PROGRAM

Just ASK PDSA & Clinical Research Study Compliance Checklist

This is intended to provide participants with a checklist of tasks and timelines to ensure all components of the PDSA are completed for credit toward the selected standard.

- Select program for which participation will be applied for Accreditation (you may ONLY select one):
 - Commission on Cancer (CoC)
 - National Accreditation Program for Breast Centers (NAPBC)
- Review PDSA, FAQs, and other tools available on the project web page.
- Participate in Webinar 1 2/16/2022 (optional)
- Complete the REDCap Questionnaire #1 Due April 15, 2022. Download and save PDF of completed questionnaire with Accreditation files for Pre-Review Questionnaire (PRQ) and site visit documents.

Note: This questionnaire measures baseline and current state information for your program. Use data from most recent complete calendar year. If you do not have 2021 data complete, use 2020

- Select at least one Just ASK Intervention and implement at your program by July 1, 2022. Keep notes and records of your intervention(s) and processes with Accreditation files for Pre-Review Questionnaire (PRQ) and site visit documents.
- Discuss with Cancer Committee or Breast Program Leadership Committee and include in meeting minutes.
- Participate in Webinar 2 (optional). Date and time TBD.
- Complete the REDCap Questionnaire #2 Due September 1, 2022. Download and save PDF of completed questionnaire with Accreditation files for Pre-Review Questionnaire (PRQ) and site visit documents.

Metrics reported in this questionnaire period are from January 1 - June 30, 2022.

- Participate in Webinar 3 (optional). Date and time TBD.
- Complete the REDCap Questionnaire #3 Due February 1, 2023. Download and save PDF of completed questionnaire with Accreditation files for PRQ and site visit documents.
- Report to Cancer Committee or Breast Program Leadership Committee and include in meeting minutes.

Metrics reported in this questionnaire period are from July 1 - December 31, 2022.

Please visit the project web page for complete details, FAQs, the REDCap link and other information.

CoC Specific Standards



Standard 8.2: An "event" is not necessary for credit. If one is performed, simply document the "event" as an intervention in REDcap

Does NOT count towards Standard 8.1: Barriers to Care

Networks:

- <u>Each</u> hospital within the network must complete and submit the REDCap.
 - The child and parent FIN is needed for each form
 - Ex: If there are 10 hospitals in the network, 10 REDCap forms must be completed & submitted
- The intervention must impact at least 20% of the total networks' analytic caseload



NAPBC Specific Questions



Programs may just submit breast specific cases

 If not feasible to separate out breast, then all analytic cases can apply, but they need to be consistent across all three questionnaires

This fulfills PART of Standard 6.1

- Programs still need to so a center-specific study to fulfill the standard
 - Just ASK + a specialty-specific QI (e.g. QOPI, TOPS) does not meet the standard
 - Just ASK + PROMPT does not meet the standard





Just ASK FAQs and Definitions Laurie Kirstein, MD, FACS





Will address the FAQs and clarify confusion All info available on our website

https://www.facs.org/qualityprograms/cancer/coc/pdsa-just-ask



Participants



Any CoC or NABPC site, including those that have applied for new accreditation status (Must have a FIN or Company ID assigned)

If you have a system already in place for ASK, this program can still be useful for advise and assistance. Still participate!



Case Definition



Combustible tobacco use (no vaping or marijuana)

Most validated research on the impact of combustible tobacco use and survival

Most EHRs have this datapoint (do you smoke)

May need to contact IT to have it "turned on"

Refer to "Resources and Intervention" section for assistance on how collect this information in your program





Newly diagnosed analytic cases

New to your institution, can be diagnosed or have previous treatment elsewhere (denominator)

NAPBC sites must include breast

Can start small but aim to be in hospital or network wide, e.g. start in a rad onc clinic



Primary Contact



Comfortable with the data and validation points for accuracy

Familiar with tobacco cessation practices

Be able to verify the data source, accuracy of tobacco use, and assessment rates being submitted at multiple time points

Ideally, should be an active member of the Cancer Committee or Breast Program Leadership Committee

NOTE: The questionnaire requires a primary and secondary contact, in the event that a primary contact leaves or is no longer available



Free data collection tool, completed online

Accessed through link with enrollment to study

Once logged in you get unique password to fill out baseline questionnaire, needed for subsequent questionnaires

Person filling out REDcap is the Primary Contact for the study



Questionnaire



3 in total, all very similar
Baseline, mid-point, end

PDF is available after completion to download for site visits

Not necessary to send it in All info online is directly uploaded.



Questionnaire



Questions 6 and 7 have been removed as they duplicated information

- 6) During this assessment period, how many TOTAL patients were seen in your program?
- 7) During the assessment period, how many total patients were ASKed about smoking history and current use in your program?



Research



No individual patient data collected or entered, all aggregate So - NO PHI, no enrollment %

No patient consent needed

Research is at the PROGRAM level

Programs track and report unique research patient enrollments in the PRQ and related templates for 2022

If minimum patient enrollment is not met in 2022, programs will NOT be considered deficient for 2022





ACS is providing an IRB exemption form for local IRB No patient data

Encourage programs to check with local IRB for compliance





April 15, 2022 – Deadline to fill out REDcap
July 1, 2022 – Intervention(s) should be started by this date

Baseline data – last full year, ideally 2021 but may be 2020

Not necessarily all found in registry. May need to
look elsewhere for this information

Mid-year data – January 1, 2022 – June 30, 2022





All of this information is available on our website under FAQs

https://www.facs.org/qualityprograms/cancer/coc/pdsa-just-ask



Questions







Upcoming Coming Conferences and Webinars



Conferences:

ACS Cancer Accreditation Programs: Continually Advancing Quality Cancer Care May 20-22, 2022

Denver, CO

Webinars:

What's Ahead for Cancer Quality Measures? Monday, April 11, 2022, at 12 PM CDT

Smoking Cessation: Ask, Advise, Assist Friday, April 29, 2022, at 12 pm CDT

CAnswer Forum LIVE – May 2022 Wednesday, May 11, 2022, at 12 PM CDT

https://www.facs.org/quality-programs/cancer/events



Thank you for joining the webinar today!



- Please help us improve the webinar by completing the evaluation.
- This webinar does not offer CE credits
- Webinar available through ACS learning management system at Learning.facs.org





In-Progress Activities

Please login or create an account to view your activities.

