(A) Policy Statement

The Cancer Committee will complete a Quality Enhancement study. This study examines 2 improvements that directly affect cancer patient care.

(B) Purpose of Policy

Implementation of improvements demonstrates the University of Toledo Medical Center’s (UTMC) continuous commitment to providing high quality cancer care. Through the documentation of the study and its results, UTMC can establish a foundation to compare and enhance patient outcomes.

(C) Scope

This policy applies to all health information management employees. Mainly used by the cancer registry department in conjunction with the cancer committee.

(D) Procedure

1. The Cancer Committee establishes the criteria which will be studied and evaluated for actions implemented.
2. Findings from the outcome(s) of the Quality Report (refer to Policy 3364-105-410) can be used as the basis for the Quality Enhancement study upon approval from the Cancer Committee.
3. Sources for improvement include:
   a. Actions based on analysis of study
   b. Actions to address undesirable performance
   c. Changes to improve acceptable performance
   d. Additional programs or services addressing patient needs or staff concerns
4. A physician member will be appointed by the Cancer Committee to coordinate the study.
5. All areas of the Cancer Program will assist in the Quality Enhancement study.
6. The Cancer Registry will submit any required information from the registry database.
7. Two improvements (actions) must be implemented that directly affect cancer patient care.
8. The actions must then be observed. The Cancer Committee-appointed physician will review and summarize the data and the completed study is then presented to the Cancer Committee for approval.
9. The Quality Enhancement study will be sent to the Medical Staff Quality Assessment Committee for approval.
It is the responsibility of the reader to verify with the responsible agent that this is the most current version of the policy.