



# Achieving Quality Oncology Practice Initiative Certification Through Quality Improvement

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The public and healthcare payers are increasingly looking to specialty designations and certifications to determine the quality of cancer centers. The Quality Oncology Practice Initiative (QOPI®) Certification Program is one way for cancer centers to demonstrate commitment to high-quality patient care. Achieving QOPI certification for the author's cancer center was driven by a nurse-led quality improvement initiative. The result was an official designation that reflects the mission, vision, and philosophy of the organization.

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Health care as an industry is more competitive today than ever before. Organizations across the United States are taking steps to demonstrate that they deserve the public's trust, loyalty, and healthcare dollars. One way for hospital systems to show that they are as good as or better than competitors is to achieve official recognition through specialty certifications and designations. This article describes the experience of the University of California, San Diego, Moores Cancer Center, a National Cancer Institute–designated comprehensive cancer center, in achieving certification through the American Society of Clinical Oncology (ASCO) Quality Oncology Performance Initiative (QOPI®) Certification Program. The cancer center used an interdisciplinary approach and followed the Plan-Do-Study-Act (PDSA) improvement model (Shewhart, 1986) to realize a consistent method for implementing and sustaining change.

## Benchmarking Performance in Outpatient Oncology

Benchmarking structure, processes, and outcomes between organizations is a

foundational process in healthcare quality assurance. Comparing performance with like organizations lends perspective to data and forms the basis for demonstrating quality for the public in the competitive healthcare market. The QOPI program began awarding certification to outpatient oncology practices in 2010. For more information about certification, visit <http://qopi.asco.org/FAQ>. Practices become eligible for certification by participating in QOPI, a voluntary program that facilitates benchmarking performance against specific quality metrics in comparison with practices across the United States.

Once a practice is eligible for certification, additional performance measures are applied (ASCO, 2012). Those measures are derived from the ASCO/Oncology Nursing Society Chemotherapy Administration Safety Standards (Jacobson et al., 2012). The QOPI Certification Program uses 17 selected standards within the eight practice areas of staffing, treatment planning and chart documentation, informed consent, chemotherapy orders, drug preparation, chemotherapy administration, patient monitoring and assessment, and preparedness for emergency situations (ASCO, 2012). Embedded within each of

the 17 selected standards are 65 detailed elements to be addressed. Beginning in 2013, new standards for oral chemotherapy and patient education will be added to the certification criteria (ASCO, 2012).

## Nurse-Driven Interdisciplinary Initiative

The author's comprehensive cancer center has an interdisciplinary quality subcommittee that reports directly to the organization's cancer committee. The quality subcommittee tracks the cancer center's performance via a dashboard to follow quality metrics for medical-surgical teams, spearheads the facility's participation in QOPI, and directs quality improvement derived from ongoing data collection. The quality subcommittee also identifies certification opportunities related to oncology services. The committee is chaired by a surgical oncologist on faculty and includes medical and radiation oncologists, an oncology clinical nurse specialist, a clinical nurse educator, administrative nurses, a healthcare quality analyst, and administrators.

Because of the role of nurses as direct care providers, expert consultants, educators, managers, and administrators, the initiative to achieve QOPI certification was largely driven by nurses in all aspects of quality improvement from writing policy to programming electronic documentation. Frontline nurse managers emerged as the linchpins for the team, and the success of the initiative was largely attributed to their ability to link strategic planning with operational action. Active involvement of direct patient care nurses is essential to successful practice change, and the role of the frontline nurse manager should not be underestimated (Wilson, 2011). Managers