

Please check one

*Certified Participant*

first-time certification     re-certification

*Certified Quality Breast Center*

first-time certification     re-certification

*Certified Quality Breast Center of Excellence*

first-time certification     re-certification

## Step 1 – Contact Information

### DATA ENTRY PERSON INFORMATION:

Quality ID # \_\_\_\_\_

Name (First, Last, Credentials) \_\_\_\_\_

Title \_\_\_\_\_

Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

Name of Breast Center \_\_\_\_\_

Address Line 1 \_\_\_\_\_

Address Line 2 \_\_\_\_\_

City, State, Zip \_\_\_\_\_

### OVERSIGHT PERSON INFORMATION (MUST BE DIFFERENT THAN ABOVE):

Name (First, Last, Credentials) \_\_\_\_\_

Title \_\_\_\_\_

Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

The Participant’s Medical Director or Manager has agreed that all raw data to be compiled for submission to the NCBC National Quality Measures for Breast Centers™ Program is true and accurate according to facility records; that the raw data will be compiled for submission according to the directions identified in the measure of NCBC National Quality Measures for Breast Centers™ Program for which compiled data is being submitted; that the compiled data submitted for each measure in which the Participant participates is true and accurate; to all conditions and terms as set forth and contained in the End User License Agreement as it appears on the NCBC web site; and to maintain raw and compiled data (records) used in providing responses to the National Quality Measures for Breast Centers™ for future on-site review for a period of five (5) years.

\_\_\_\_\_  
Data Entry Person’s Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Oversight Person’s Signature

\_\_\_\_\_  
Date



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## Step 2 – Update Profile Information

### #4 Volume of Patients Served – Imaging

Most current year that this data will represent \_\_\_\_\_

Number of Screening Mammograms \_\_\_\_\_ Number of Diagnostic Mammograms \_\_\_\_\_

### #5 Volume of Patients Served – Breast Cancer

Most current year that this data will represent \_\_\_\_\_

Number of new breast cancer patients treated or diagnosed in that year \_\_\_\_\_

## Step 3 - Check List

**These are the steps required to attain certification. Please review and check steps your center has completed.**

### Certified Participation in the NQMBC™ Program

- Supplied data for required percentage of the measures for which their quality breast center type should be able to measure performance. (Certified Participant submits 40%; Certified Quality Breast Center submits 75%; Certified Quality Breast Center of Excellence submits 90% of the measures for their profile type.)
- These two consecutive data collection periods being audited for certification must be within the last three years. (A data period is a six-month range during which time data is collected according to the parameters of the indicator).
- Agree to maintain data used to answer NQMBC questions for a minimum of three years. This data may be used in random audits to confirm valid responses.
- Agree to a random audit of the submitted data for review by the NQMBC. The NQMBC will, at their discretion, choose question(s) in a specific time period to be audited. The facility must agree to submit de-identified data used to confirm correct procedures were used to answer this question within three weeks. Audits will not occur frequently and will be used to confirm valid answers to quality measures.
- In addition to completing required number of the measures, the facility must have performed above the 25th percentile on required number of the measures for which their quality breast center type should be able to measure performance during the two consecutive data collection periods being examined for certification. (Certified Quality Breast Center must perform above the 25<sup>th</sup> percentile on 75% of the 75% of the measures submitted; Certified Quality Breast Center of Excellence must perform above the 25<sup>th</sup> percentile on 90% of the 90% of the measures submitted.)
- Must complete the application and return it to the NCBC office.

## Step 4 – Submission Information

**Identify the two consecutive data collection periods that fall within the last three years whose data is to be reviewed:**

Data Period 1 \_\_\_\_\_

Data Period 2 \_\_\_\_\_

A center may wish to measure performance in all or any selection of indicators. To become eligible for certification, centers will be required to respond to indicators appropriate for their breast center type. This is determined by the profile that your center completed in Phase I.



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## Measure Requirements for Certification

Certified Participant	Screening		Diagnostic		Clinical		Treatment Comprehensive	
	1		2		9		14	
	Submit	meet 25th %tile	Submit	meet 25th %tile	Submit	meet 25th %tile	Submit	meet 25th %tile
Certified Quality Breast Center	2	1	4	3	17	12	26	20
Certified Quality Breast Center of Excellence	2	2	5	5	20	18	32	28

- 1) Only in your profile list column, put a check in the square for the measures your center has submitted data.
- 2) Measures 7, 9, 10, 11, 12, 13, 16a, 16b require the number of days, modules, or percentages to be entered.

1	Imaging Timeliness of Care – Time Between Screening Mammogram and Diagnostic Imaging©						
2	Mammography Call Back Rate©						
3	Surgical Timeliness of Care – Time Between First Diagnostic Imaging Study and Open Surgical Biopsy/Excision (no needle biopsy performed) ©						
4	Imaging Timeliness of Care – Time Between First Diagnostic Imaging and First Needle/Core Biopsy©						
5	Surgical Timeliness of Care – Time Between First Positive Needle Biopsy and Initial Breast Cancer Surgery©						
6	Needle/Core Biopsy Rate©						
7	Pathology Timeliness of Care - Time Between Needle Initial Breast Biopsy (excluding open surgical) and Pathology Results© Effective as of January 1st, 2017 <b>Benchmark: In Days</b> <b>Compliance Achieved: 3 Outstanding: 2</b>				Enter # of days	Enter # of days	
8	Pathology Timeliness of Care –Time Between Open (incisional/excisional) Initial Breast Biopsy and Pathology Results©						
9	Pathology Timeliness of Care – Time Between Initial Breast Cancer Surgery and Pathology Results© <b>Benchmark: In Days</b> <b>Compliance Achieved: 5 Outstanding: 3</b>				Enter # of days	Enter # of days	
10	Pathology Report Completeness - Tumor Size© <b>Benchmark: Percent</b> <b>Compliance Achieved: 94% Outstanding: 100%</b>				Enter percent	Enter percent	
11	Pathology Report Completeness - Margin Analysis© <b>Benchmark: In Margins Identified and Measured</b> <b>Compliance Achieved: 94% Outstanding: 100%</b>				Enter percent	Enter percent	
12	Pathology Report Completeness - Margins Identified© <b>Benchmark: Margins Identified</b> <b>Compliance Achieved: 6 Outstanding: 6</b>				Enter Margins	Enter Margins	
13	Pathology Report Completeness - Lymph Node Analysis© <b>Benchmark: Percent Complete Exam on Report</b> <b>Compliance Achieved: 88% Outstanding: 100%</b>				Enter percent	Enter percent	



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		Clinical	Treatment Comprehensive
14	Pathology Report Completeness - Specimen Sampling Adequacy©		
15	Five Year Stage Specific Survival Rate©		
16a	Pathology Report Completeness - ER AND PR Receptor Measurement for Invasive Disease© Benchmark: Percent Reporting Compliance Achieved: 100% Outstanding: 100%	Enter percent	Enter percent
16b	Pathology Report Completeness - ER Receptor Measurement for Insitu Disease© Benchmark: Percent Reporting Compliance Achieved: 100% Outstanding: 100%	Enter percent	Enter percent
17	Surgical Care - Sentinel Node Biopsy©		
18	Patient Satisfaction Survey - Use©		
19	Patient Satisfaction - Survey Development©		
20	Patient Satisfaction Survey Response Rate©		
21	Patient Satisfaction Survey Measure - Shared Decision Making for Choice of Surgical Option for Breast Surgery©		
22	Patient Satisfaction Survey Measure - Cosmetic Results Following Breast Reconstruction©		
23a	Breast Conservation Surgery - Overall Rate (actual patients) ©		
23b	Breast Conservation Surgery Rate for Eligible Patients (potential eligible candidates) ©		
24a	Chemotherapy Use - Rate for Stage II and III ER Negative and PR Negative Breast Cancer (actual)©		
24b	Chemotherapy Use - Rate for Stage II and III ER Negative and PR Negative Breast Cancer (potential) ©		
25a	Post-Lumpectomy Radiation - Rate for Invasive Breast Cancer (actual) ©		
25b	Post-Lumpectomy Radiation - Rate for Invasive Breast Cancer (potential) ©		
26a	Adjuvant Endocrine Therapy - Rate for Invasive Breast Cancer (actual) ©		
26b	Adjuvant Endocrine Therapy - Rate for Invasive Breast Cancer (potential) ©		
27	Radiation Therapy – Break in Treatment ©		
28	Reconstructive Breast Surgery- Myocutaneous Tissue (Flap) Complication Rate©		
29	Adjuvant or Neoadjuvant Chemotherapy- Complications Resulting in Inpatient Hospitalization Rate©		
30	Ambulatory Breast Cancer Surgery-Unplanned Overnight Stay Rate©		
31	Breast Conservation Surgery - Re-Excision Rate©		

Please return to the NCBC Office via email.