# **QUALITY MATTERS**

An NQMC update: October 2019

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## **NQMC Projects**

### **Amendment to Decision Tool**

As reported in the January edition of Quality Matters, the NQMC agreed at its August 2018 meeting that:

- The Decision Tool be amended to calculate outcomes based on performance against all NAS Measures.
- The NQMC establish a Decision Log which clearly identifies the reasons underpinning diversions from the Decision Tool outcome.

These changes require minor (non-material) amendments to the National Accreditation

Handbook and the BSA004 Data Report Form and BSA101 Survey Report Form.

These changes are currently being finalised following input from Program Managers. The updated forms and documents will be made available in mid November.

# Performance Report - Live Trial

As reported in the June 2019 Quality Matters, a live trial of the Performance Report is underway. The Performance Report seeks to improve efficiency in the accreditation system by replacing the existing six accreditation forms with one cumulative online reporting facility.

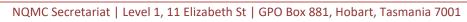
The NQMC agreed that the Secretariat make the draft Performance Report and supporting Excel tools being used in the trial available upon request to Services who wish to compare the draft format with the current forms.

# **National Performance Benchmarking Program**

The National Quality Improvement Forum (NQIF) is intended to bring together key participants in the benchmarking program to discuss performance and facilitate networking opportunities.

At the August 2019 NQMC meeting it was agreed that the structure of the NQIF should involve a focus on a selection of NAS Measures and ideally be attended by at least three persons per jurisdiction. It was agreed to align the NQIF with the BSA Conference which is to be held in Canberra in August 2020 to facilitate participation and assist in mitigating the cost of jurisdictional attendance.

The Single-service jurisdiction Program
Manager position on the NPBP Working Group
is vacant and nominations were closed on 7
October 2019.



The current Radiologist Proxy has tendered her resignation and nominations are being sought and are due by 14 October 2019.

# **BSA National Surveyor Update**

By Ms Joan Burns

#### **National Surveyor Review**

As the new National Surveyor, I would firstly like to pay tribute to my predecessor, Judy Dahlke for her work in laying such a solid foundation for this role. This was recognised in the external report on the National Surveyor role. Happy retirement Judy, and well-deserved!

I am grateful for the colleagueship and support offered to me by so many people since commencing in this role. It has been a great pleasure to meet so many key stakeholders during the course of conducting Surveys and attending essential meetings such as those of the National Quality Management Committee and the Program Managers Group. The sense of common purpose and dedication to deliver quality and excellence is palpable and speaks to the strength and maturity of the BreastScreen Australia program.

To lead an Accreditation Team survey in a peer-review accreditation program is a real privilege. As the National Surveyor, I witness the mutual respect, collegiality and exchange of ideas and approaches that occurs during a Survey. These exchanges are in themselves, valuable sources of quality improvement and ongoing education – for both the Service and the Surveyors. It is the real strength of the peer-review approach and I encourage all Service staff to take advantage of the expertise of the Accreditation Team whilst they are visiting your Service. They will ask you plenty of questions and learn from you! So ask some in return and enjoy the benefit of their experience and expertise.

What has struck me most of all at every level in the program is the absolute focus on 'the woman', the clients of the BSA Program. The engagement of clients in making the provision of screening and assessment services less threatening and as comfortable as possible is particularly evident at the Service level – from music to artwork to specially designed garments – all creative and innovative ways of involving clients and the community, for the benefit of those women who entrust their care to the Service. And all incredibly effective and positive ways of engaging strongly with the local community.

I look forward to working with you all, in particular, our dedicated Surveyors who are the source of strength and rigour of the peer-review approach to accreditation.

Please feel free to contact me on any matter regarding accreditation.

My contact details are:

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#### **National Survey Plan**

- Surveys scheduled in the the National Survey Plan 2016-2019 are now completed; with the last of these to be considered at NQMC's November 2019 meeting.
- The National Survey Plan 2020-2023 is now underway.
- The Survey Quality Improvement Plan continues to be implemented with further revision of protocols and components.
- Recruitment and training of Surveyors is currently on hold pending the Department of Health's response to the external BSA Accreditation Evaluation Report.

# Non-target Cohort NAS Measures Update

The AIHW released the updated Data Dictionary on 29 April 2019, meaning the new and revised NAS Measures for non-target cohort NAS Measures are now in effect.

To allow for modifications to BreastScreen Service/SCU systems to support the changes, the non-target cohort NAS must be implemented by the 26 April 2020.

Service/SCUs can submit data for the new and revised NAS Measures to the NQMC.

# Cancer Australia Position Statement

Cancer Australia has developed a new evidence-based Position Statement to provide guidance on the use of fine needle aspiration (FNA) and core biopsy in the BreastScreen Australia program. This Position Statement sets out evidence-based recommendations and consensus-based recommendations regarding the use of FNA and core biopsy in the BreastScreen Australia program. Accurate biopsy information is essential as women with screen-detected lesions and their health professionals make decisions on their management options using this information. The NQMC is pleased that its feedback to Cancer Australia on its Draft Position Statement has resulted in significant strengthening of the Statement.

Cancer Australia is seeking endorsement of the final Position Statement before 31 October 2019 from key stakeholders including:

- BSA NQMC
- BSA Program Managers
- SCoS
- relevant medical colleges and peak bodies: RANZCR, BreastSurgANZ, ASBP, RCPA, BCNA

The final Position Statement is expected to be published on the Cancer Australia website by the end of 2019. A link will be placed on <a href="https://www.cancerscreening.gov.au">www.cancerscreening.gov.au</a>.

# **Quality Improvement Initiatives**

This section highlights innovative quality improvement initiatives identified by the NQMC as part of their accreditation assessments.

#### **BSV Monash Service Quality Improvement**

The key activities the Monash BreastScreen undertakes to sustain compliance in cancer detection are:

- Mentoring and training new readers
- Use of independent senior third readers selected on basis of reader performance data including third read clearance rates.
   Readers never third read their own cases.
- The most recent prior bilateral (non-BreastScreen) mammogram, particularly for Round One clients, is obtained for comparison prior to reading.
- Where recalled women indicate to nursing staff prior to their assessment appointment that they have previous breast imaging not previously reviewed, these images are obtained and 'fresh reads' are performed prior to assessment. This results in about 50% of these clients being cleared and not needing to attend assessment.
- Majority of Radiologists rostered through assessment clinic.
- Quarterly review and distribution of Radiologist Performance stats
- Review of one-reader detected cancers usually an individual activity with a formal sign off process, but some cases reviewed at radiologist meeting
- As review of one-reader cancers may be 6-12 months after reading, there is a monthly feedback system where onereader cancers are fed back to readers at the end of each month based on core biopsy histopathology. There is a formal sign-off process for monthly reader cancer reviews.
- Review of performance on individual funnel plots (2 years of data) as per NAS Appendix H.
- MDM review of needle biopsy cases from assessment with Images and outcomes

- available in PACS for those who can't attend
- Radiology Review meetings are held 3-4 times per year. Topics focused on minimising recall, academic information and new BSV/BSA policies rather than subtle recall cases.
- Review of all cancer detection parameters at quarterly Service Quality Committee meetings.
- Review of personal interval cancers by each radiologist, and review of selected cases by the whole group. There is a formal sign-off required on completion of this activity.
- Ad-hoc reported interval cases are reviewed by a senior radiologist at the time and immediate feedback given to readers if required.

#### **False Positive Reporting**

# Supporting Services in Clinical Reviews of Adverse Events Relating to Needle Biopsies

By Prof Gelareh Farshid and National Surveyor Ms Joan Burns.

Adverse events associated with needle biopsies in breast cancer screening are uncommon. As such, few BSA services will have significant recent experience to draw upon when faced with these challenging events.

False positive cancer diagnoses in women who are ultimately found to have non-malignant processes are distressing for all concerned. The BSA accreditation system requires that all such events be investigated in a timely fashion, to evaluate their root causes.

As part of its commitment to continuous quality improvement, the NQMC has convened a Biopsy Quality Assurance Initiative (BQAI) Subcommittee to provide clinical advice and support for the monitoring, review and quality improvement in issues relating to needle biopsies of screen detected breast lesions.

The Subcommittee is comprised of medical specialists in pathology, surgery and radiology and includes a consumer representative and Program Manager.

Cases of possible false positive biopsies reported to the NQMC by services in their ADRs and accreditation applications will be referred by the NQMC to the BQAI Subcommittee for clinical evaluation and expert advice to the NQMC.

The BQAI will maintain ongoing clinical oversight in relation to adverse incidents involving biopsies. The collated and deidentified information accrued as part of the BQAI's reviews will also be utilised for the purposes of education and quality improvement.

As a first step in assisting services in documenting these adverse events, a proforma and associated flow chart have been developed by the BQAI Subcommittee. Services are encouraged to use these documents to identify correctly cases of false positive cancer diagnoses and to capture consistently and comprehensively the context and relevant information required for their internal review and external reporting.

It is proposed that Services will continue to report and manage adverse events in accordance with their local clinical governance framework. The NQMC expects that reports of incidents of false positive cancer diagnoses will address the headings included in this proforma.

Through capturing, analysing and sharing this de-identified information, it is anticipated that BSA Services will benefit from each other's experience and improve the quality of the experience of women that undergo needle biopsy at BSA services.

The NQMC will now seek input from Program Managers on the implementation of the proposed false positive reporting process.

## **National Data Advisory**

The NQMC notes that the National Data Advisory (NDA), which is in establishment, is currently unfunded. The NQMC has agreed that the establishment of the NDA be put on hold until after the outcomes of the evaluation of the revised BSA accreditation system are finalised so that necessary funding can be sought.

# **Quality Matters - October 2019**

Current nominees for the NDA have been informed of this decision by the NQMC Secretariat.

#### Forms reminder

The NQMC Secretariat frequently receives reports of issues with the BSA accreditation forms that are resolved by simply ensuring that the Service/SCU is using the current version of the form.

Services and SCUs are reminded that all BSA documents and forms are available in their latest version on the Cancer Screening website. The most failsafe method to ensure you are using the correct version is to always download the required form each time it is needed, rather than refer to older saved copies.

# BreastScreen Australia research and other activities

A summary of current BreastScreen Australia research and other projects managed by the Commonwealth Department of Health is available on the Cancer Screening website. This summary is updated periodically.