

Cancer Center of Excellence Award
Re-Designation Manual
Application Performance Measures



Approved November 2024

Background

The designation of a hospital, treatment center, or other organization as a Cancer Center of Excellence is intended to recognize organizations that demonstrate excellence in patient-centered coordinated care for persons undergoing cancer treatment and therapy in Florida. The goals of the Cancer Center of Excellence program are to encourage excellence in cancer care in Florida and attract and retain the best cancer care professionals to the state. Further, the designation seeks to increase national recognition of Florida organizations by the National Cancer Institute.

The designation of a Cancer Center of Excellence is based on a systems approach to improving the quality of cancer care. The system is composed of three areas: the healthcare organization, healthcare team members, and patients and family members. Each of these areas contributes to the success of the system.

Cancer Centers of Excellence are to be reevaluated every three years. The performance measures were updated in November 2024 by the Joint Committee, as required in Section 381.925, FS. The Joint Committee is comprised of members from the Biomedical Research Advisory Council and the Florida Cancer Control and Research Advisory Council. This manual is specifically designed for the recertification of organizations that have attained the designation of a Florida Cancer Center of Excellence.

Re-Designation

The intent of the re-designation process is to verify the same level of exemplary performance since the original designation. The process is an audit comparing the original application and an evaluation of practice at the time of the reapplication.

According to Florida Statute, the Department of Health (the Department) will conduct two evaluation cycles per year and will establish application deadlines for each evaluation cycle. **Applications must be received by the Department by 5:00 p.m. EST on February 14, 2025, in order to be considered during an application cycle.** The following steps outline the re-designation process:

- An application will be completed and submitted to a designated OneDrive folder for each Center of Excellence.
- Department staff will review applications for completeness and provide written questions to the applicant organization within 15 days of receipt of application.
- An administrative review will be completed by the Department.
- Applications will be forwarded to peer reviewers after conflict of interest is determined.
- If the Department or a peer reviewer requests additional information, the organization has 15 days to respond. The additional information will be incorporated by the Department for consideration.
- Based on the peer review, findings will be forwarded to the State Surgeon General or designee who makes a recommendation to the Governor.
- Upon decision of the Governor, the organization is notified of a decision to continue the designation of Cancer Center of Excellence, or whether additional time is needed for the applicant organization to make program improvements.

Overview of Performance Measures

The standards in each area are performance-based, using objective criteria and measurable outcomes to evaluate whether a standard is met. The focus is on outcomes that improve patient care. Healthcare organizations have flexibility in taking different approaches to meeting the standard, so long as the organization meets rigorous high standards and provides improved outcomes for patients. The performance measures are applicable to cancer care across a range of settings, such as community hospitals, academic health centers, and other organizations.

Area I: Organization Performance Measures

This set of measures evaluates the responsibilities of the organization, such as maintaining licensure, and providing necessary leadership support to develop and maintain an organizational culture that evaluates and continuously makes improvements to improve care.

Organizational Overview – Please complete the following summary table. No supporting documentation is required unless requested.

Does your organization continue to maintain a license in good standing in Florida?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does your organization continue to maintain accreditation by the Commission on Cancer of the American College of Surgeons?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does your organization continue to actively and substantially participate in at least one regional cancer control collaborative that is operating pursuant to the Florida Comprehensive Cancer Control Program’s cooperative agreement with the Centers for Disease Control and Prevention’s National Comprehensive Cancer Control Program?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does your organization continue to have an accredited Institutional Review Board and related Protocol Review and Monitoring System to ensure the highest ethical standards for human subjects’ research?	<input type="checkbox"/> Yes <input type="checkbox"/> No

If the answer is ‘No’ to any of the above, please explain why the answer is ‘No.’

I.1 Summarize activities over the last three years of your organization’s participation with one or more regional cancer control collaboratives that are operating pursuant to the Florida Comprehensive Cancer Control Program’s cooperative agreement with the Centers for Disease Control and Prevention’s National Comprehensive Cancer Control Program. (**Limited to two pages.**)

I.2 To demonstrate excellence in and dissemination of scientifically rigorous cancer research, provide a list of peer-reviewed publications from the organization’s investigators over the last three years that have made a state, national, or international impact on cancer prevention, early detection, treatment, policy or particularly illustrate programmatic excellence in cancer control. This information should be provided in the format of a table and must include PubMed Central (PMC) identification numbers. (**No page limit.**)

List peer-reviewed publications for the last three years using the following sample.

Peer Reviewed Publications			
Date	Journal	Title of Publication	PubMed Central (PMC) ID

List the top five creative or novel publications by year using the following sample:

Top Five Creative or Novel Peer-Reviewed Publications by Year		
Year 1 (Date, Training title. brief description, credentials)	Year 2 (Date, Training title. brief description, credentials)	Year 3 (Date, Training title. brief description, credentials)

Additional materials to demonstrate the impact of peer-reviewed publications on cancer prevention, early detection, treatment include the following:

- A metric that measures the impact and productivity of a scientist or scholar such as the Hirsch index (h-index)
- A metric used by Google Scholar to measure the number of a researcher's publications that have at least 10 citations such as the i10index

Area II: Healthcare Professionals and Clinical Researchers

Physicians, nurses, and other health care professionals must follow evidence-based practice for cancer prevention, early detection, and control, participate in quality improvement activities, and adaptively implement revisions to practice for improving outcomes. Additionally, training is essential for building a strong infrastructure of clinicians and clinician-scientists capable of providing high quality care for cancer patients in Florida.

- II.1 Provide a list of training and career development activities for cancer-related healthcare professions. Include a list of training programs, a brief description of the program, the type of trainee (i.e., medical student, resident, fellow, nursing student, nurse, public health, social work, etc.), and the number of trainees participating by year over the last three years. Provide information in a table format similar to the examples below.

Cancer-Related Healthcare Training			
Date	Training Title	Brief Description of Program	Trainee Credentials

Total Number of Trainees Participating Each Year	
Year 1	
Year 2	
Year 3	

List the top five creative or novel training topics by year using the following sample:

Top Five Creative or Novel Training Topics By Year		
Year 1 (Date, Training title, brief description, credentials)	Year 2 (Date, Training title, brief description, credentials)	Year 3 (Date, Training title, brief description, credentials)

II.2 Provide a written description for the following measures, describing any significant changes, enhancements, or new activities related to providing multidisciplinary care, with a focus on your organization’s health care professionals. **(Limited to five pages.)** The summary should include updates on the following:

- a. Dissemination of evidence-based findings to healthcare delivery systems and state and community agencies within the Center’s catchment area (e.g., community outreach and engagement activities)
- b. Tumor Boards and treatment plan review
- c. Highlight the clinical trials that your organization is conducting that exemplify cancer research. Indicate research accruals to clinical trial. Include demographic information on research participants. Submit information in Cancer Center Support Grant (CCSG) DT3 and DT4 tables. Follow this link to guidance on table formatting. [NCI - Cancer Center Support Grant Data Guide](#)
- d. Outcomes data, including areas of program enhancement involving patient safety and quality assurance standards must be easily accessible on the organization’s website. (Provide organization’s link to online location).

Area III: Patients and Family Members

High-quality organizations have processes in place to evaluate and incorporate improvements to assist patients. High quality professionals are successful in supporting and encouraging patients. Patients are engaged as members of the care team.

Provide a written description for each of the following measures. **(Limited to five pages.)**

Summarize new and ongoing activities that address the following:

- III.1 Does the applicant follow specific quality standards such as the American Society of Clinical Oncology Model (ASCO Certified), Enhancing Oncology Model (EOM), the American Society of Clinical Oncology Model (ASCO Certified), Quality Oncology Practice Initiative (QOPI) certification, or other quality standards? The applicant must provide a summary of the quality standard model(s) in practice including the term of accreditation and how the institution is incorporating standards into care. The application should also highlight efforts to remain compliant with standards.
- III.2 Educating cancer patients and their caregivers about treatment plans, supportive care, and survivorship plans. Of particular interest are innovative methodologies unique to the Center that provide this education and maintenance of education before, during, and after treatment.
- III.3 Improving the patient's understanding of their cancer. This may include, but is not limited to, genetic counseling.
- III.4 A. Summarize activities that increase patient participation in follow-up appointments for positive cancer screening tests, cancer treatments, and survivor care visits. B. Summarize innovative methodologies unique to the Center that ensure patient follow-up.

Thank you for continuing your commitment to the Cancer Center of Excellence Award designation. For technical assistance and questions, send emails to Research@flhealth.gov.