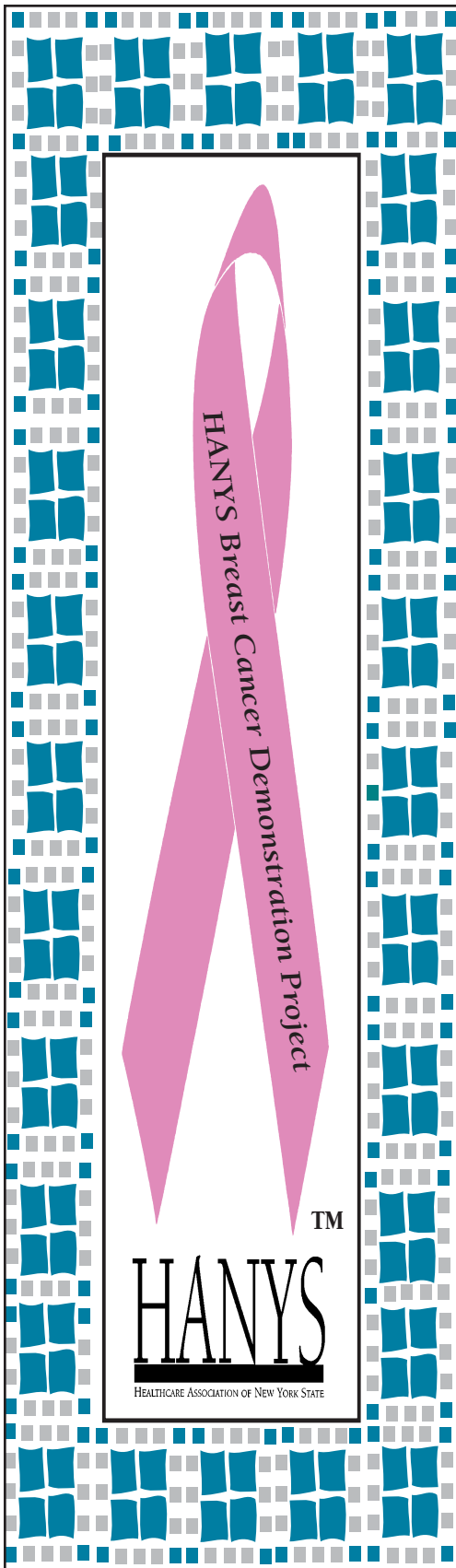


November 2003



## Information Technology Can Help Improve the Quality of Breast Cancer Care

Ensuring patient safety and preventing medical errors depends on concise communications and multiple interactions between health care providers. Emerging information technologies may offer tangible solutions for addressing some of the quality issues within hospitals and health care systems and offer opportunities for improving operational efficiencies and supporting patient satisfaction.

Using information technology to improve provider access to pertinent, needed information throughout the continuum of care and linking individualized clinical information with computer-based decision support systems are key steps in promoting safe and effective health care delivery.<sup>1</sup> Provider institutions are applying technology developments to breast cancer care so that interdisciplinary teams and agencies communicate fully and efficiently to better manage care.

Judy Kneece, R.N., O.C.N., breast health consultant, explains that “breast cancer requires the most diagnostic x-rays, the most diagnostic biopsies, the most chemotherapy treatments, the most radiation therapy treatments, and the most hormonal therapies of any cancer.”<sup>2</sup> The need for seamless and organized information systems is essential for quality screening, diagnosing, and treatment of breast cancer.

To facilitate “getting the right information to the right place at the right time,” the Agency for Healthcare Research and Quality (AHRQ) has supported numerous studies exploring computer technologies to acquire patient care data and promote efficiency in the communication of information related to patient care management.<sup>3</sup> As a result of three decades of such research, prototypes for a variety of computer-based tools specific to health care delivery have been developed including:

- health care information systems;
- decision support tools;
- computerized medical records; and
- medical information standards.

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<sup>1</sup> Bates, D. W., Gawande, A.A., Improving Safety with Information Technology, *New England Journal of Medicine*, 348:25, 2526-2534, June 19, 2003.

<sup>2</sup> Kneece, J., Dreher, C., A Comprehensive Center for the Diagnosis and Treatment of Breast Cancer, *Administrative Radiology*, (2): 32-4, 38-9, February 14, 1995.

<sup>3</sup> Fitzmaurice, J.M., Adams, K., Eisenberg, J.M., Three Decades of Research on Computer Applications in Health Care: Medical Informatics Support at the Agency for Health Care Quality and Research, *Journal of Medical Informatics Association*, 9(2) 144-60, March-April 2002.

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## **The Electronic Medical Record (EMR)**

As part of a federal Department of Health and Human Services (HHS) effort to encourage the development and adoption of electronic medical records (EMR), the Institute of Medicine (IOM) of the National Academy of Sciences recently released a report outlining eight core capabilities that the EMR should be able to accomplish to support safety, quality, and efficiency in care delivery. These core functions serve as an industry standard for software developers and include:

- physician access to patient information (i.e., diagnoses, allergies, laboratory results, and medications);
- access to new and past test results among providers in multiple care settings;
- computer order entry;
- computerized decision support systems to prevent drug interactions and improve compliance with best practices;
- secure electronic communication among providers and patients;
- patient access to health records, disease management tools, and health information resources;
- computerized administration processes, such as scheduling systems; and
- standards-based electronic data storage and reporting for patient safety and disease surveillance efforts.<sup>4</sup>

## **Improving Breast Cancer Care with the EMR**

For patients with chronic disease, particularly breast cancer, disease management is complex, requiring the timely integration of specialized knowledge, skills, and decision making across multiple disciplines. A primary care physician, radiologist, surgeon, pathologist, oncologist, radiation oncologist, and reconstructive surgeon may all be involved. In developing a comprehensive treatment plan for managing breast disease, timely access to information from each discipline is crucial, as each physician's decision often relies on information from another discipline and affects other decisions.<sup>5</sup>

Through the paperless computerized system, providers may access a more comprehensive view of the breast cancer patient at any given point in time, which enhances their ability to effectively provide follow-up care and emergency services and to manage off-hour patient care needs. Access to evidence-based reference information (online protocols) and computerized tracking mechanisms that flag potentially adverse events, such as allergies and drug interactions, can contribute to patient safety.<sup>6</sup>

## **Mammography: Improving the Process**

Many facilities use computerized mammography tracking and reporting systems for managing the complex informational tasks associated with mammography screening and breast-related procedures. Software packages are available that feature

patient tracking, mammography reporting, outcome monitoring, and workflow management. Facilities find specialized mammography software packages can be of great help as they work to comply with the Mammography Quality Standards Act and Health Insurance Portability and Accountability Act (HIPAA) requirements. Examples of workflow areas where technology solutions can streamline operations are:

- scheduling;
- coding and billing;
- resource management;
- specialized functions such as expedited data entry; and
- automatic generation of patient reports, result letters, and follow-up reminders.

Currently, there are several software companies offering mammography information management systems to meet the needs of mammography departments, breast centers, and multi-site enterprises. The Healthcare Association of New York State Breast Cancer Demonstration Project™ (HANYS BCDP™) MAP: *Mammography Advantage Pathway Resource Kit*© includes a selection of vendor comparisons.

## **Successes with IT and Breast Cancer Care**

According to a recent survey of 287 hospital-based information technology professionals published in March 2003, over half of the respondents indicated that enterprise-wide sharing of clinical data would remain a priority issue in the next few years.<sup>8</sup>

At Dana-Farber Cancer Institute, an innovative IT system connects the cancer care facility electronically with several regional hospitals in a joint venture network, enabling the organization to provide seamless, coordinated care for cancer patients. Karen Pollard, R.N., C.S., F.N.P., at the Dana-Farber/Brigham and Women's Cancer Center, reports that within this system,

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**“Providing reliable, efficient, individualized care requires a degree of mastery of data and coordination that will be achievable only with the increased use of information technology.”<sup>7</sup>**

~ Improving Safety with Information Technology

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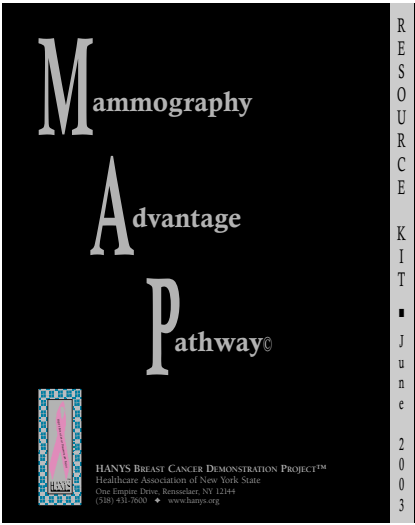
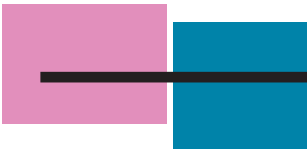
<sup>4</sup> iHealthBeat: California Health Foundation. *IOM issues EMR Guidance*. Internet publication. August 1, 2003; ihealthbeat.org.

<sup>5</sup> Kneese, op. cit. p. 32-4, 38-9.

<sup>6</sup> Briggs, B., *Electronic Records: Protection on the Road to Patient Safety*, *Health Data Management*, Vol. 11, Issue 5, p. 34-8,40, May 2003.

<sup>7</sup> Bates, D.W., Gawande, A.A., *Improving Safety with Information Technology*, *New England Journal of Medicine*, 348:25,2536-2534, (p.2533), June 19, 2003

<sup>8</sup> Versel, N., *Survey: Hospital CIOs see connectivity, safety as top IT issues*. Electronic source: www.modernphysician.com, March 17, 2003.



## Using the MAP Resource Kit<sup>®</sup> to Strengthen Breast Health Services

While mammography and other new technologies have improved the outcome for image-detected cancers,<sup>1</sup> mammography centers frequently struggle with inadequate reimbursement and efficiency challenges as well as the management responsibility

that comes with providing mammography services to the community. Beginning with self-assessment and ending with a focused and individualized plan, facilities can work to become more financially stable and offer quality and efficient mammography services with improved patient satisfaction.

### Financial Processes

The Financial Resources Tools section of the *MAP Resource Kit* can help hospitals and health systems strengthen the finances of their breast health centers. The first step to improvement is to understand the current situation. From the moment the patient enters the system, there is opportunity for errors to affect the entire process of billing and reimbursement. Incorrect coding, for example, can substantially affect the financial standing of a breast health center. The *MAP Resource Kit*<sup>®</sup> includes samples of imaging and procedure encounter forms for adaptation and use by facilities. It offers common breast cancer screening, detection, and treatment coding guidelines and tips, which can be very useful in maximizing fiscal health. The *Kit* also includes fee schedules that detail the unadjusted Medicare fee and the 50<sup>th</sup>, 75<sup>th</sup>, and 90<sup>th</sup> national percentiles, allowing health care teams to compare a facility's performance with other facilities across the nation.

Implementation of a clearly defined, accountable process is critical to the financial viability of a breast health program. By collaborating with the finance team, outpatient registration personnel, and others in the hospital, managers, physicians, and technologists can enhance the financial performance of their breast health centers. The *MAP Resource Kit* helps guide this collaboration and communication.

### Service and Patient Satisfaction

Consumers continue to make decisions about where they seek health care. Patient satisfaction and feedback can provide credible direction to identify issues, determine solutions, and implement action plans. The *MAP Resource Kit*<sup>®</sup> includes samples of patient satisfaction surveys that may be used to identify problematic service areas and provide useful data for change and improvements.

### Obtaining the MAP Resource Kit

The *MAP Resource Kit* may be downloaded from HANY'S Web site by logging on to [www.hanys.org](http://www.hanys.org) and then selecting "Breast Cancer Project," and "Resource Kits."

**TO LEARN MORE**, contact Molly Poletto, Project Director ([mpoletto@hanys.org](mailto:mpoletto@hanys.org)), HANY'S Breast Cancer Demonstration Project<sup>™</sup>, or call (518) 431-7661.

In conjunction with Oncology Solutions, Inc., HANY'S BCDP<sup>™</sup> developed the *MAP: Mammography Advantage Pathway Resource Kit*<sup>®</sup> to help hospitals assess the strengths of their mammography services and identify challenges that can be addressed through utilization of the performance improvement strategy templates.

The *Kit* was designed to help hospitals incorporate change toward a more standard approach to service, clinical, and financial processes. The *MAP Resource Kit* provides the background and resources needed to frame change based on a solid foundation of information and data. Three indicators—financial, clinical, and service—were used in the development of the *Kit*. Understanding that a variety of health care system structures exist that result in distinctive challenges, the *Kit* provides a range of regulations, benchmarks, and suggestions.

### Facility Self-Assessment

The *MAP Resource Kit*'s Self-Assessment Tool helps health care teams assess mammography services from the point of screening to the point of definitive diagnosis. The tool measures financial, clinical, and service efficiencies. When implementing strategies for internal benchmarking and measuring success of mammography services, comparisons must be tailored with consideration to diverse settings and structural relationships. This may be accomplished through facility-specific assessments that allow for exploration of which outcomes and measures are appropriate for meeting a facility's needs, provider requirements, and optimizing outcomes for patients and the community. The *MAP Resource Kit*'s Self-Assessment Tool can help hospitals identify methods to capture costs,

<sup>1</sup> Fine, R., Boyd, B., Kolb, G., Consensus, *Advance for Imaging and Oncology Administrators*, January 2002.



## Achieving Service Excellence with GetWellNetwork™

Hospital governing boards and health care executives are passionate about enriching the patient experience at their facilities and achieving service excellence at the bedside. To help them, HANYS Services, Inc. now offers GetWellNetwork™, a dynamic, interactive, bedside software service.



**GetWellNetwork**  
HEALING THROUGH CONNECTIVITY

Patients access GetWellNetwork™ using a handheld remote or wireless keyboard that operates through the television set in their hospital room. They can use the service to:

- give hospital administrators and caregivers instant feedback about their care;
- fill out patient satisfaction surveys;
- access personalized patient education and information on pharmaceuticals; and
- e-mail their friends and families, “surf” the Web, and watch movies-on-demand.

GetWellNetwork™ prompts patients about their level of pain at carefully scheduled intervals; educates them on care pathways; and guides them through their daily itineraries, providing alerts regarding important events in the care cycle.

Developed by Washington, D.C.-based GetWellNetwork, Inc., the service enables hospital administrators to collect valuable patient feedback and satisfaction scores in real time; improve the online interaction between physicians, nurses, and patients at the bedside; generate new revenue, and establish their facilities as leaders in the innovative use of bedside technology.

Administrators access these benefits through the software’s Web-based Management Console™. The Management Console allows administrators to respond instantly to complaints or patient service issues, monitor operational work-

flow including discharge and transport procedures, and quickly publish hospital information for patients throughout the facility. In addition, administrators can use the system to proactively meet Joint Commission on Accreditation of Healthcare Organizations patient education standards.

GetWellNetwork™ enables physicians, nurses, and clinicians to deliver personalized patient education on demand, direct patient issues to appropriate parties throughout the facility, monitor patient pain management, and manage staff efficiency and performance.

The service includes an on-site concierge who coordinates and oversees all aspects of the technology’s operations within the hospital. This individual handles all non care-related patient requests and coordinates a timely response with the patient’s team to ensure quality customer service. This service gives hospital administrators a powerful and valuable tool to instantly improve service and care and enrich the overall patient experience.

GetWellNetwork™ has been implemented within some of the leading hospitals and health systems in the United States, including NewYork Presbyterian Morgan Stanley Children’s Hospital, Inova Health System, Sentara Health, and Yale New Haven Health System, helping distinguish these organizations as technology innovators and for their commitment to patient service excellence.

**TO LEARN MORE**, contact Jim Zadoorian, Vice President of Business Development, at (518) 431-7968 or at [jzadoori@hanys.org](mailto:jzadoori@hanys.org). Additional information is available at [www.ehanys.com/GetWellNetwork.cfm](http://www.ehanys.com/GetWellNetwork.cfm).

### JOHNS HOPKINS DETAILS RESPONSIBILITIES OF BREAST CENTER HEALTH CARE TEAM

#### Reprinted by permission of The Breast Center at Johns Hopkins University

Available online at [www.hopkinsmedicine.org/breastcenter/treatment/billofrights.html](http://www.hopkinsmedicine.org/breastcenter/treatment/billofrights.html), this document provides breast cancer patients with an overview of their rights and the role of the breast center.

- ◆ Each member of the breast center health care team needs to listen attentively to the patient’s questions and concerns and treat each seriously, as they are serious to the patient.
- ◆ The members of the breast center health care team need to provide the patient adequate time for the clinic visit, allowing time at the end of the examination for questions to be answered that might be of concern to

the patient. The patient should not feel rushed.

- ◆ Physicians and nurses need to explain all procedures, treatments, and plans in laymen’s terms for the patient to understand the treatment and be able to comply with it.
- ◆ Physicians and nurses need to be available to respond to questions that arise during times other than scheduled appointment times.
- ◆ Each member of the breast center team must treat patients with compassion and courtesy.
- ◆ Each member of the breast center team must recognize that each patient is unique and has special needs that must be assessed and addressed.

- ◆ The role of the breast center health care team is to promote patient empowerment. Therefore, at every clinic visit the opportunity must be taken to educate the patient.
- ◆ Each member of the breast center health care team should encourage the patient to actively participate in the decision making process about her care and promote patient empowerment.
- ◆ Each member of the breast center team must take the necessary steps to treat the whole patient—physically, psychologically, and spiritually. This may require utilizing resources from other areas as part of the care process for some patients.



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## Related Publications of Interest

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### *Information Technology*

#### **Choosing Clinical IT Tools that Matter for Physicians**

This article discusses the importance of respecting physicians' workflow and recognizing physician needs when seeking to adopt new information technology tools in health institutions. The author suggests physician acceptance and adoption of new clinical information tools may be enhanced by demonstrating specific benefit, such as information access in real time. Suggested first steps to adopting new technologies include identifying what needs to be changed, what is changeable, and what incentives exist for implementing change through adoption of technologies.

Chaiken, B. *Health Management Technology*, Volume 23(9) p. 20-23, September 2002.

#### **Networking Health: Prescriptions for the Internet**

This book, created by the Committee on Enhancing the Internet for Health Applications, reviews technical challenges, requirements, and implementation strategies for enhancing the use of the Internet by health care organizations. This book reviews utilization for health care delivery and payment, public health, health education, and biomedical research.

Computer Science and Telecommunications Board of the National Research Council, 2000 National Academies Press.

Available online by logging onto [nationalacademies.org/publications/#magazines](http://nationalacademies.org/publications/#magazines), selecting "search," and then entering the name of the publication in the box.

#### **Disease Management on the Web**

This article provides examples of how various types of organizations (a provider cooperative, a health plan, and a consulting firm) are using Web-based disease management tools to help

patients manage their health conditions. Incorporating Web-based tools with traditional telephone-based disease management systems is an approach that may offer greater flexibility and support for patients' health management needs. Network members have noted improved outcomes and patient satisfaction, as well as cost savings associated with improved management. Barriers to offering the use of Web-based disease management for patients include lack of reimbursement and insufficient access to broadband versus dial-up connections.

COR Health Internet Healthcare Strategies, [www.corhealth.com](http://www.corhealth.com), April 17, 2003.

#### **Diverse Communities, Common Concerns: Assessing Health Care Quality for Minority Americans—Findings from the Commonwealth Fund 2001 Health Care Quality Survey Report**

Based on survey data from 6,722 adults of various racial and ethnic backgrounds, this report details differences in patient care experiences among racial and ethnic groups, highlighting the multiple factors posing barriers to optimal care. The report highlights the significance of addressing three key factors in ensuring optimal care for minority populations: effective physician-patient communication, overcoming cultural and linguistic barriers, and access to affordable insurance.

Karen Scott Collins, Dora L. Hughes, Michelle M. Doty, Brett L. Ives, Jennifer N. Edwards, Katie Tenney, March 2002.

Copies of the report are available by calling The Commonwealth Fund toll-free publications line at (888) 777-2744 and ordering publication number 523. The report is also available on the Commonwealth Fund's Web site at [www.cmwf.org](http://www.cmwf.org).

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## What's Helpful on the Web?

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### INFORMATION TECHNOLOGY

#### **Healthcare Information Management Systems Society (HIMSS)**

[www.himss.org](http://www.himss.org)

This comprehensive Web site covers various aspects of information technology relative to health care. Sections include health care IT news, technology briefs, IT industry issues, policy and standards, management, professional development, conferences, and a bookstore. The site contains an online learning

resource area offering brief informational sessions on health care technology topics and an area providing links to informational resources about the Health Insurance Portability and Accountability Act. The site also includes a HIMSS Solutions Toolkit® that enables users to search a database for information on vendors, products, and services by industry issue.

#### **The American Health Information Management Association**

[www.ahima.org](http://www.ahima.org)

The Web site of this professional association features information on the diverse roles of health information management professionals and their role in various aspects of the health care continuum. A consumer information section is included to help patients understand their rights in relation to their medical record.

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### **Integrated Advanced Information Management Systems (IAIMS) Consortium**

[www.cbmi.upmc.edu/iaims/consortium](http://www.cbmi.upmc.edu/iaims/consortium)

Affiliated with the American Medical Informatics Association, the IAIMS Consortium is a 34-member voluntary organization dedicated to innovative applications of communication technologies in health information management. The Consortium's Web site offers reports, publications, grant information, a listserv, and a feedback link to support collaboration in the development of integrated information environments for improving health care.

### **National Alliance for Health Information Technology**

[www.nahit.org](http://www.nahit.org)

The National Alliance for Health Information Technology is a diverse partnership of health care providers, information technology vendors, and national health and technology associations representing a broad spectrum of leaders with the capacity, resources, and commitment to create information technology standards in health care.

### **Association of American Medical Colleges (AAMC)**

[www.aamc.org/betterhealth](http://www.aamc.org/betterhealth)

AAMC is an association of medical schools, teaching hospitals, and academic societies dedicated to strengthening the quality of medical education and training, advancing research in health sciences, and integrating education into the provision of effective health care. AAMC conducts a wide range of programs and studies to support its mission of improving the nation's health through the advancement of medical schools and teaching hospitals.

Better Health 2010, a project exploring the use of information technology for improving health, is featured on this organization's Web site. The Better Health 2010 Report proposes recommendations designed to assist medical schools and teaching hospitals with making optimal use of information technology and the Internet to improve the health of their communities. The report also addresses challenges that health care organizations face within the advancing information technology environment.

## **WEB-BASED TOOLS—RESOURCES FOR PATIENTS**

### **The Partnership for Clear Health Communication**

[www.AskMe3.org](http://www.AskMe3.org)

The Partnership for Clear Health Communication, a new coalition of national organizations, developed the Ask Me 3 patient education program to promote communication between health care providers and patients to improve health outcomes. This Web site includes free downloadable information about the Ask Me 3 program. The resources include fact sheets and brochures for providers and patients (in English and Spanish), statistics and research on health literacy, materials to assist

with media outreach, and the National Medical Association *Cultural Competence Primer*, which helps health professionals gain awareness of the significance of cultural competence within the clinical practice framework. The *Primer* can be downloaded free from the AskMe3.org Web site.

### **Oncology Nursing Society Priority Symptom Management Project**

[www.cancersymptoms.org](http://www.cancersymptoms.org)

This online education resource was designed to help patients and caregivers learn more about six primary cancer symptoms: fatigue, pain, anorexia, cognitive dysfunction, depression, and neutropenia. Information about each symptom and strategies for symptom management is available. The site also includes a glossary and resources for more information. The Web site's contents are also available in Spanish.

## **WEB-BASED TOOLS FOR HEALTH CARE PROFESSIONALS**

### **United States National Library of Medicine (NLM)**

[www.nlm.nih.gov/nn.html](http://www.nlm.nih.gov/nn.html)

The National Library of Medicine site provides summaries and contact information on 37 NLM-funded projects that implement technologies to increase electronic health information access in communities. Innovative outreach projects include development of tools and training programs linking professionals in collaborative arrangements to increase access to health information sources and helping consumers gain access to relevant, needed health information. Many projects are designed to serve culturally diverse ethnic groups or target seniors, low literacy groups, chronic disease populations, or under-served populations such as the rural poor.

### **Partners in Information Access for the Public Health Workforce**

[www.phpartners.org](http://www.phpartners.org)

This Web site, the result of collaboration between U.S. government agencies, public health organizations, and health science libraries, offers numerous links to Centers for Disease Control and Prevention information and other national health statistics and data sets. The site provides health professionals links to Web-based tools, online learning opportunities, information on educational conferences and workshops, and grant opportunities related to information technologies.

It also contains the Healthy People HP2010 Information Access Project, which helps professionals find articles related to specific Healthy People 2010 objectives. The site allows for focused one-click searches of MEDLINE, the National Library of Medicine's premier bibliographic database. Several Healthy People 2010 focus areas may be searched for relevant articles via this tool.

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**Cancer Control PLANET (Plan, Link, Act, Network with Evidence-based Tools)**

<http://cancercontrolplanet.cancer.gov>

The National Cancer Institute (NCI), in partnership with the American Cancer Society and the Centers for Disease Control and Prevention (CDC), has developed a new Web site to provide links to evidence-based tools for cancer control planning, research, and clinical practice. The site aims to facilitate the integration of evidence-based research findings into practice and to help achieve shared goals of reducing cancer incidence and deaths from cancer and enhancing quality of life for cancer survivors. The site provides easy access to data and resources that can help planners, health educators, program staff, and researchers design, implement, and evaluate evidence-based cancer control programs. Regional contacts for partner organizations are listed.

**GENERAL BREAST CANCER INFORMATION  
WEB SITES**

**Susan G. Komen Breast Cancer Foundation Breast Cancer Information**

[www.komen.org/bci](http://www.komen.org/bci)

The Susan G. Komen Breast Cancer Foundation Web site contains basic facts about breast cancer from early detection to support; The ABC's of Breast Cancer (co-developed with Harvard Center for Cancer Prevention), which discusses risk factors, diagnosis, staging, treatment, after-treatment care, and breast cancer financial and insurance issues; and resources and references.

**Brigham and Women's Hospital Breast Disease: Guide to Prevention, Diagnosis, and Treatment**

[www.brighamandwomens.org/medical/handbookarticles/breast\\_frame.asp](http://www.brighamandwomens.org/medical/handbookarticles/breast_frame.asp)

These guidelines, published in 2000, contain screening recommendations, factors for determining risk, algorithms for screening, and information on nipple discharge, palpable mass, breast pain, and management recommendations.

**National Consortium of Breast Centers, Inc. (NCBC)**

[www.breastcare.org](http://www.breastcare.org)

This Web site highlights the NCBC organization, whose members include breast professionals and businesses that provide services for patients. NCBC focuses on the development, implementation, and expansion of breast center programs. The Web site has search directories for breast health facilities around the country, consultants to breast centers, and companies that offer breast health products and equipment to breast centers. Through newsletters, professional conferences, and its Web site, NCBC promotes the dissemination of information to professionals regarding breast health care, particularly advances in breast care techniques and patient options, to support the promotion of excellence in breast health care.

**International Cancer Research Portfolio (ICRP)**

[www.icrp.org](http://www.icrp.org)

ICRP offers a database of information on the cancer research awards of the cancer-funding organizations that comprise the Common Scientific Outline Partners. The ICRP Web site allows the public to view information about research supported by cancer funding organizations in the United States and the United Kingdom.

**CROSS-CULTURAL RESOURCES**

**U.S. Department of Health and Human Services: Office of Minority Health**

**National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health Care**

[www.omhrc.gov/inetpub/wwwroot/omh/programs/2pgprograms/cultural4.htm](http://www.omhrc.gov/inetpub/wwwroot/omh/programs/2pgprograms/cultural4.htm)

These national CLAS standards, published in March 2001, were developed for adoption or adaptation by health care stakeholder organizations and agencies. This 130-page document may be downloaded from the Web site.

**Let Everyone Participate—Access for People with Limited English Proficiency**

[www.lep.gov](http://www.lep.gov)

This Web site supports consistent implementation of federal regulations regarding language access. This site also acts as a clearinghouse, providing and linking to information, tools, and technical assistance regarding limited English proficiency and language services for federal agencies, recipients of federal funds, users of federal programs and federally assisted programs, and other stakeholders.

**Baylor University's Refugee Health—Immigrant Health**

[www3.baylor.edu/~Charles\\_Kemp/refugees.htm](http://www3.baylor.edu/~Charles_Kemp/refugees.htm)

This site has cross-cultural resources for promoting health and prevention, and includes cultural profiles of many groups, such as Bosnian, Cambodian/Khmer, Cuban, Ethiopian/Eritrean, Gypsy, Haitian, Indian/Asian, Iraqi, Korean, Kosovar, Kurdish, Laotian, Liberian, Hispanic, Nigerian, Somali, Sudanese, and Vietnamese.

**Breast Cancer Resource Directory of North Carolina**

<http://bcresources.med.unc.edu>

The online version of this resource directory includes a comprehensive resource section titled, *Ethnicity Specific Resources*, featuring information for African Americans, Hispanics, Native Americans, and Asians. Descriptions and links to numerous information and support organizations and resources for diverse populations are available on this site.



# News

FROM HANYS BCDP™ SITES

*Funding from the New York State Assembly Majority and the federal Centers for Disease Control and Prevention (CDC) Division of Cancer Prevention and Control supports HANYS BCDP™ participating hospitals' projects that help health care providers deliver exemplary care, enhance the quality of life for breast cancer patients, and decrease barriers to care and increase access for patients.*

## Benedictine Hospital

Benedictine Hospital in Kingston recognized National Cancer Survivor's Day in June by hosting a cruise on the Hudson River, where more than 100 survivors enjoyed food and music. Construction is underway on Benedictine's new Cancer Center, a \$10.5 million project that includes the purchase and renovation of a Cancer Support House adjacent to the hospital campus. Breast health navigators co-hosted "The Ultimate Drive," a July fundraising event for the Susan G. Komen Foundation, sponsored by BMW. Throughout the summer, breast health navigators and staff distributed information, promoted mammograms, and engaged communities at health fairs, churches, and community centers to advance breast cancer awareness. In August, breast health navigators collaborated with Catholic Charities on a mammography screening event for homeless women. "Mammos, Makeovers, Massages & More!" is the fall event targeted to a selected audience of low-income and minority women, and women over age 40. Benedictine has also scheduled fall educational and outreach events and a fund raising partnership with the American Cancer Society to hold a "walk-a-thon."

## New York Hospital Queens

The new Breast Center at New York Hospital Queens in Flushing opened in July, bringing the entire breast surgeon team to practice in the same building. The hospital has hired Dr. Susan Lee as a new associate and continues its outreach efforts to the community's culturally diverse populations, with targeted outreach to the Hispanic community. Educational events for the past summer included a presentation to a large community group at a synagogue and a program on breast cancer for operating room nurses. The hospital has hired a permanent, part-time staff coordinator for its Inreach Mammography Program, assuring continuation of the program. The Breast Center now offers the MammoSite® treatment for women with breast cancer who meet selection criteria and guidelines recently outlined by the federal Food and Drug Administration. The treatment consists of high-dose radiation therapy to the lumpectomy site for a period of five days, rather than six and a half weeks of radiation.

## Long Island College Hospital

Long Island College Hospital in Brooklyn has hired Dr. Aimée Shunney as the Coordinator of Health Education and Wellness Programs at the Othmer Cancer Center. A doctor of naturopathic medicine specializing in women's health and family medicine, Dr. Shunney oversees Long Island College Hospital's Navigator Program, provides educational sessions, and works in several areas including the design of a comprehensive, integrative teaching model for breast cancer screening and prevention. Classes have included nutrition for healthy living after cancer treatment, a Mother's Day art celebration, and sessions on women's sexuality and intimacy. Also underway are breast health navigator program initiatives to improve quality and efficiency of care through friendly and familiar faces, minimal waiting, quality answers, a hotline, one-on-one information provided at the mammography visit, and follow-up from outreach to screening and post-screening.

## North General Hospital

North General Hospital in New York City, in partnership with Memorial Sloan-Kettering Cancer Center, recently opened the Ralph Lauren Center for Cancer Care and Prevention, offering access to cancer care and screening services for medically under-served residents and the primarily minority population of Harlem. Dr. Harold Freeman, HANYS BCDP™ Advisory Board Chair, is medical director of the new center.

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## North Shore-Long Island Jewish Health System

North Shore-Long Island Jewish Health System's (NSLIJHS) monthly practice of a system-wide teleconferenced Breast Tumor Board has recently been accredited for Continuing Medical Education credits. Presentations geared toward enhancing participation of women in clinical trials have been introduced as a regular part of the Breast Tumor Board presentations. NSLIJHS has established a sixth site—Huntington Hospital—for the NSLIJHS Employee Mammography Inreach Project to educate employees about mammograms and make them available to employees. An annual fall conference for nursing and allied health professionals focused on new developments in breast cancer prevention and treatment. NSLIJHS has also organized a system-wide effort to participate in the American Cancer Society's "Making Strides Against Breast Cancer" Walk/Run at Jones Beach State Park and areas in the borough of Queens.

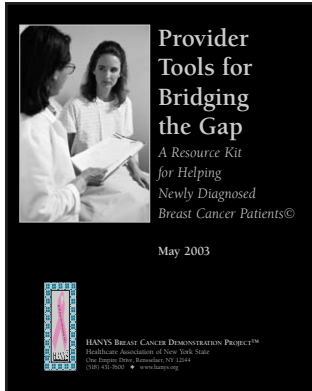
## Thompson Health

Thompson Health in Canandaigua recently implemented an Associate Mammography Inreach Program, contacting more than 1,200 female associates to inform them of current breast health practices, including screening. Promotion activities for the month of October included the 8th Annual Breast Cancer Awareness Open House. The open house featured the unveiling of the 2004 *Silhouettes of Hope and Courage*, which consisted of photographs and stories of four women in the community in honoring their courageous fight against breast cancer. Thompson Health is enhancing its Web site to include an online learning course, "Breast Cancer 101" and a book discussion section for books about breast cancer.

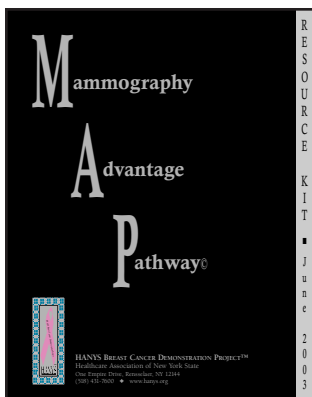
## Vassar Brothers Medical Center

Vassar Brothers Medical Center continues to work on outreach screening with *Sisters Network*, an organization that addresses the breast health needs of African American women. Vassar Brothers recently provided support for an awareness campaign held by the organization and a local fundraiser held by the *Sisters Network*. An occupational therapist, certified in lymphedema management, has been working with breast cancer patients to assist in managing this condition and recently attended a symposium on lymphedema management. A new therapeutic exercise program titled, "Focus on Healing Through Movement and Dance, The Lebed Method™®," is offered to breast cancer survivors. In October, Vassar Brothers held a "spa day," offering massage, facials, Reiki, yoga, and journaling for breast patients. In addition, the radiation therapy department at Vassar Brothers has instituted the MammoSite® treatment for women with breast cancer.

# HANYS BCDP™ Advisory Board Products Completed in 2003



**Provider Tools for Bridging the Gap: A Resource Kit for Helping Newly Diagnosed Breast Cancer Patients©** contains strategies and resources to help health care providers and patients effectively and efficiently communicate critical information. The *Kit* provides a set of user-friendly tools offering information, resources, and links to enhance communication and develop collaborative partnerships toward shared decision-making and making informed choices.



**MAP: Mammography Advantage Pathway Resource Kit©** contains strategies and tools to help hospitals evaluate and optimize the quality of mammography services and the organizational and financial efficiency of services. The *MAP Resource Kit* includes a self-assessment tool designed to assess mammography services from the point of screening to definitive diagnosis, shares innovative models to enhance care to breast health patients, and offers guidance for the delivery of efficient, consistent, and cost-effective care.



**Benedictine Hospital** created a best practices strategy guide, **Breast Cancer Community Outreach to Vulnerable Populations**, in response to HANYS members' requests for tools that identify best practices and strategies to enhance breast health care services.



HANYS BCDP™ and the American Cancer Society have completed the translation of selected patient breast cancer education materials into multiple languages: Chinese, French, Haitian Creole, Hindi, Korean, Polish, Portuguese, Russian, and Spanish.

All products are accessible and downloadable from the HANYS BCDP™ Web site and have been distributed to HANYS members.



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the whole picture of a patient's care is accessible online to the multiple providers caring for that patient between locations. This decreases fragmentation and potential delays in care by improving communication, care coordination, and care planning. A patient's progress can be followed very closely with the EMR. For example, providers can:

- access scans and test results online;
- view patient care protocols online;
- view dictations online and notes from other doctors caring for patients;
- listen to a dictated report online;
- view reports of patient care delivered in the emergency room;
- view films online;
- view a complete medication profile online;
- write prescriptions and chemotherapy orders online;
- view electronic safeguards;
- access all information needed to coordinate pre-operative care (test results, history, updates);
- access reports not yet available in hard copy;
- view informed consent documents online; and
- communicate with each other.

All the information needed to provide the highest quality of care for patients, including optimal follow-up care, is accessible to providers throughout an online system.

## **Implementation: Good Planning and Patience**

According to the 2003 HIMSS (Healthcare Information and Management Systems Society) Patient Safety Study, barriers for implementing information technology in health care include financial barriers and physician reluctance.<sup>9</sup> An article in the *Health Information Technology* journal reports that clinician acceptance is key to successful implementation.<sup>10</sup> Research is needed to validate that increased efficiency and improved patient outcomes occur because of well-planned technology programming. A study by RAND Health is underway to determine the potential benefits of information technology on patient care and cost savings.<sup>11</sup>

In addition to the work of the IOM and AHRQ initiatives, numerous coalitions and professional societies have formed to advance the development, research, and utilization of information technologies, as well as to address persistent challenges with implementing IT in health care. With strategic planning, philosophical concerns about information technology are often dispelled as successful outcomes occur.

See "What's Helpful on the Web" in this issue for a sample of Internet resources for IT.

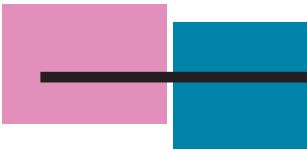
**TO LEARN MORE**, contact Molly Poleto, Project Director (mpoleto@hanys.org), or Diane Kopecki, Nurse Education Coordinator (dkopecki@hanys.org), HANYS Breast Cancer Demonstration Project™, or call (518) 431-7661.

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<sup>9</sup> HIMSS Patient Safety Study, HIMSS News online at [www.himss.org](http://www.himss.org), August 25, 2003.

<sup>10</sup> Chaiken, B., Choosing Clinical IT Tools that Matter for Physicians, *Health Information Technology*, 23 (9) 20-23, Sept. 2002.

<sup>11</sup> Study will examine benefits of health care IT, *Managed Care Weekly Digest*, August 22, 2003.



**HANYS BREAST CANCER DEMONSTRATION  
PROJECT™ STAFF**

*HANYS' Division of Quality and Research Initiatives  
One Empire Drive, Rensselaer, NY 12144  
(518) 431-7661*

**DR. HAROLD FREEMAN**  
*Advisory Board Chair*

**KATHLEEN CICCONE**  
*Principal Investigator*

**PAVANI RANGACHARI**  
*Policy and Research Analyst*

**MOLLY POLETO**  
*Project Director*

**DIANE KOPECKI**  
*Nurse Education Coordinator*

**LYNNE WILLIAMS**  
*Executive Assistant*