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## Spring Cleaning

by Christian Downs, JD, MHA

A little Madness in the Spring  
Is wholesome even for the King.  
—Emily Dickinson

We are all familiar with the term “spring cleaning.” Personally, I find the idea of spring cleaning much more palatable than a “New Year’s resolution.” Spring cleaning you do once, its over, and you move on. (Resolutions have this annoying tendency of hanging around all year.) Spring cleaning is also an opportunity. In the spring of my first year of marriage, my wife announced we were going to do some spring cleaning. After we were done, *one* of us looked around with a sense of accomplishment. My bachelor furniture, pictures, and fork (no “s”) were gone. (There is a difference between opportunity and outcome.)

With spring right around the corner, now is the time to look around your cancer program or practice and think about doing some “spring cleaning.” Start by answering a few simple questions: what is that one project you really wanted to start? Is there a project you want to wrap up? When did you last take time to do some high level thinking about your program or practice?

In order to help shake off some of the winter doldrums and get your thought processes going, page through this *Oncology Issues* for some ideas.

In Dawn Holcombe’s piece about pay for performance in the physician office setting, you’ll find some practical tips for developing your own standards, participating in P4P and quality care demonstration projects, and implementing a system for collecting, measuring, and assigning value to quality care data. Pay for performance is also an issue for hospital-based cancer programs.

Dr. Macdonald and Dr. Wolcott’s article talks about some of the unique challenges pay for performance has for the oncology community. Even better, they outline a ‘Phase 1’ P4P program for hospital-based cancer programs that would be an excellent “spring cleaning” activity.



Also in this issue of the journal: an update on drug pedigree issues. Now that a number of states and the federal government are adopting legislation calling for electronic pedigrees for pharmaceuticals, it’s time to get your providers and programs up to speed on this issue. In his article, Rolando

de Cardenas goes over what every oncology practice needs to know about these drug pedigree systems.

And the ideas should not stop with this issue of ACCC’s journal. Visit ACCC’s website at [www.accc-cancer.org](http://www.accc-cancer.org). It is updated frequently with articles, news, and practical information for the oncology community. Finally, for ideas from your contemporaries, participate on ACCC’s Listserv. Just go to the Members Only section of ACCC’s website and look for the Listserv button.

Hopefully you were able to attend ACCC’s Annual Meeting in Baltimore in March. The expert presentations offered some innovative ideas for new projects around your hospital or practice. If not, plan to attend ACCC’s Fall Economics Meeting in Dallas, Tex., Oct. 2-6, 2007.

Some of the ideas you’ll find through these resources are major spring cleaning opportunities, while others only require a little Windex. So throw open the windows, grab a bucket and sponge, and bring in some fresh ideas and resources to your program or practice. You, your staff, and your patients will be amazed at what a little spring cleaning can do. 🧹