



## Results of the 1999 ACCC Strategic Planning Survey

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## Results of the 1999 ACCC Strategic Planning Survey

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**M**embers of the Association of Community Cancer Centers say their membership in the Association is valuable and worthwhile, according to the results of a 1999 ACCC membership survey. Specifically, respondents said ACCC's health policy advocacy efforts, its publications, national meetings, and networking opportunities have served them or their organization well.

As part of a formal, committed effort to gauge the needs and concerns of the ACCC membership, the Association mailed its Strategic Planning Survey to 7,100 members in June 1999. Approximately 808 surveys were completed and returned for an overall response rate of 11 percent, an increase of slightly more than 4 percent from 1998.

### WHO ARE ACCC MEMBERS?

The composition of the membership continues to reflect the interdisciplinary nature of the oncology team. The administrative and medical specialties lead all categories. A total of 33 percent of respondents said they are administrators of oncology programs, institutional chief executives, or chief financial officers. Taken together, medical oncologists/hematologists, radiation or surgical oncologists, and oncology program medical directors make up about 27 percent of members responding. Oncology social workers, cancer registrars, and pharmacists account for 18 percent of respondents. Oncology nurses make up about 6 percent of members responding, and oncology practice managers, 5 percent. Nutritionists, data analysts, health policy representatives, family therapists, cancer educators, and mental

health counselors are also ACCC members.

The organizations in which these professionals practice vary across the membership. Members belonging to multi-hospital systems make up 35 percent of respondents, while 34 percent work at single hospitals or institutions. Physician practice representation is at 16 percent of respondents, down from last year's 29 percent. However, this constituency is expected to grow as a result of an ACCC initiative to expand membership opportunities for physician group practices. Just 4 percent of respondents are at university hospital cancer centers. "Other" organizational structures identified as members by the survey include regional health systems and managed care organizations.

### WHY JOIN ACCC?

Members rank ACCC's role as a leader in health policy/advocacy as the number one benefit of membership, followed closely by ACCC's publications. Networking opportunities and the content of national meetings are also perceived as worthwhile benefits.

The findings show that 560 respondents (69 percent) said ACCC's publications have provided a valuable resource to their organization, while 368 (46 percent) indicated that ACCC's health policy/advocacy efforts have also proven to be of great value.

The survey asked members to rate the professional value of their ACCC membership on a scale of 1 (low) to 5 (high). Of the 780 members who responded to this question, the majority (332, or 43 percent) rated the value of their membership a 4 (above average) on the scale. The mean value was 3.68, up from 3.58 last year.

When asked how ACCC can provide more value to its members, respondents offered a variety of suggestions. Here are just a few: conduct salary and productivity measures for oncology professionals; develop state chapters where none now exist; encourage regional activities to promote interaction of members within geographic regions; and set up a hotline for member questions and direct them to appropriate people for advice. Respondents also suggested that ACCC: improve and ensure access to the web site; hold leadership development meetings; encourage new program development; and publish "how to" programs listing identified benchmark standards.

Several respondents also commented that ACCC is doing "a great job" overall, is "a wonderful resource," and pointed out that "its value increases" continuously.

### BROWSING ACCC'S WEB SITE

Although the information age is upon us, just 32 percent of respondents have logged on to ACCC's web site (up considerably from last year's 18 percent). Also noteworthy is that 80 percent of ACCC member institutions report having their own web site.

Members were asked what information they were seeking from ACCC's web site. Once on the site, 46 percent of browsers were looking for policy information; 45 percent, for ACCC publications; 38 percent, for meeting information; and 19 percent, for membership information.

In the category of "Other," members reported browsing (the largest category); checking guidelines and standards; looking for links and possible sites to visit; and looking for information about billing, clinical pathways, clinical

trials, drug/protocol, the legislative status of oncology-related medical issues, patient care, and reimbursement. Other users of the site were searching for employment opportunities.

### **PUBLICATIONS**

Members were asked how often they use ACCC's publications—never, sometimes, or frequently. *Oncology Issues* is the most frequently used publication, with 98 percent responding they use it sometimes or frequently. The *Standards for Cancer Programs* is second, with 89 percent; and *Oncology Patient Management Guidelines* is third, with 87 percent of respondents indicating that they use these publications sometimes or frequently. Among the other publications that are distributed to members, *Oncology Drug Information* is used sometimes or frequently 79 percent of the time, and the *Compendia-Based Drug Bulletin* is used sometimes or frequently by 72 percent of respondents. Lastly, 77 percent and 63 percent of responding members, respectively, use *Community Cancer Centers in the United States* and *Cancer DRGs* sometimes or frequently.

### **MEMBERSHIP CONCERNS**

ACCC program members are enterprising and forward looking within the oncology community. The top five topics members want to see ACCC address in its meetings and publications for 2000 are:

- emerging treatment technologies (58 percent of respondents)
- developing and implementing practice guidelines and standards (57 percent)
- coding and reimbursement issues (55 percent)
- cancer program marketing (46 percent)

■ developing the relationship between cancer programs and physicians (45 percent).

Respondents also indicated concerns across the spectrum of cancer care. Not surprisingly, government policy issues, corporate policy and structuring, and fiscal issues were frequently mentioned. Prevention of cancer received the same number of mentions as the government, corporate, and financial topics.

Government regulatory actions, health policy issues (including Medicare), and legislative initiatives were raised as concerns at the national level. Executive survival after restructuring of programs and diminishing revenues was also cited as concerns. Interest was expressed in exploring innovative strategies to manage and turn around the downward reimbursement trend and learning

to better monitor actual costs.

Ethics was mentioned as a general issue in oncology care and also as an area needing exploration in regard to end-of-life care. Accreditation was mentioned both generally and as a request for assistance from ACCC in preparing for the approval of the American College of Surgeons.

Respondents were also asked which areas ACCC should address through its advocacy and policy initiatives in 2000. Clinical trials coverage legislation received the highest response, 62 percent of survey respondents. National legislative and regulatory issues received a response rate of 56 percent, and state reimbursement issues, 51 percent. Several respondents urged ACCC to advocate for continuing education in alternative cancer treatments. ■

## **Hot Off The Presses**

*A Comparative Report on Key Cancer DRGs* is now available. This is the thirteenth in a series of Cancer DRG reports sponsored by ACCC. The database used for this cancer DRG analysis was collected in the fall of 1999 from ACCC members, based on their financial experience with cancer-related DRGs. All ACCC member institutions were surveyed and requested to submit data on costs, charges, and reimbursements for 72 cancer-related DRGs for all patients discharged from their institutions over a 12-month period.

The 126 reporting hospitals recorded a total of 150,708 cancer-related discharges. They accessioned a total of 125,384 new analytic cancer cases during the 12-month reporting period.

Reimbursements were significantly down from last year. However, the majority of cancer-related DRGs remain profitable. These numbers may point to hospitals' success in managing their cancer programs via clinical pathways, streamlined services, and system-wide information sharing. Many cancer program administrators now have a much more accurate and complete handle on program costs and are more readily able to distinguish profitable services from unprofitable ones.

ACCC member institutions have been mailed their copy of *Cancer DRGs*. Additional copies are available for purchase at \$225 per copy for members/\$250 for nonmembers, which includes postage and handling.