

Crisis or Opportunity?

hat will 2001 bring for the Association of Community Cancer Centers and our patients? In the dark of the night when I cannot sleep, I ponder this question and worry about the regulatory and legislative assaults on cancer care. In the light of day, however, my thoughts turn to the many opportunities we have to create a cancer care system focused on quality, innovation through research, appropriate reimbursement, and compassion for those we serve.

Earlier this year the Institute of Medicine (IOM) released its long-awaited blueprint for transforming the delivery of health care in America. Entitled "Crossing the Quality Chasm: A New Health System for the 21" Century," the report is highly critical of our health care system, which is "plagued with serious quality gaps." The report blames the flawed health care system on inefficiencies that do not reward innovation or the use of new technology. Shortcomings are noted in communication, the dissemination of medical research, payments for innovative care, and workforce preparation.

"Health care today harms too frequently and fails to deliver its potential benefits routinely," said Committee Chairman William Richardson, president and chief executive officer of the W.K. Kellogg Foundation. "We need to reinvent the system, and the committee is proposing nothing less than that."

The IOM report calls for hospitals, government, and insurers to make sweeping changes and work together in a nationwide effort to build a technologybased information infrastructure. According to IOM, technology must play a much more significant role in health care communication and delivery, and the health care delivery system itself must be safer, more effective, more patient centered, more efficient, and more equitable.

How can the cancer care delivery system "reinvent" itself?

The first step is for each of us to become politically active. We must all learn how to work with our local, state, and national elected officials in an effort to influence legislation related to cancer care. Recently, for example, 36 nurses and administrators attended the ACCC Policy Institute in Washington, D.C., where they learned how to become effective political advocates. The presenters concurred that when oncology nurses speak, legislators listen because nurses are on the front line everyday in patient care. Each of us as a health care professional has tremendous credibility, and our real world stories can create changes on Capitol Hill. United, our one voice becomes louder. Indeed, collaboration is a vital aspect of political advocacy. This year ACCC will continue to bring together cancer organizations to influence legislation that affects quality cancer care.

The second step in "reinventing" ourselves is to retain and recruit skilled caregivers. Nurses, radiation therapists, radiology technicians, and nursing assistants are important members of the cancer care team and are in short supply. We must develop and implement strategies to keep these needed caregivers at the bedside, and find ways to encourage young people to enter these professions. Over the next year ACCC will be working with the Oncology Nursing Society (ONS) to develop recruitment strategies and ways to support oncology nursing.

The third step is to promote clinical research. More cancer programs must participate in quality clinical research, since all cancer patients should have access to clinical trials. We must increase our efforts to make sure patient care costs for clinical trials are reimbursed by Medicare and other insurers.

Finally, our cancer programs must be able to implement new technology, including the latest in radiotherapy equipment, technology to prevent errors in drug administration, data management systems, and diagnostic systems. Of course with reduced margins and collapsing earnings, limited capital reserves for the renewal of equipment and facilities, and increasingly restricted reimbursement policies, hospitals and physicians face tremendous difficulties when they seek to purchase new equipment and launch new systems. That brings us full circle to the need to become more politically active.

I would like to challenge ACCC's membership to become more involved in improving our cancer care system. We have made significant strides, but we can do better. I am optimistic about the possibilities and the great opportunities for improving cancer care in the coming year!

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