



CCDR Committee Updates

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Community Oncology Committee
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CCDR to lead to evidence-based practice change

Attributes of CCDR

Saliency to patients and clinicians

Clinician collaboration in design and conduct of studies

Use of standardized measures of health care quality

Examination of causal pathways and active ingredients of practice change

Incorporation of diverse settings and samples

Evidence-based practice change: clinically important and sustained modification of the structures and processes of cancer care delivery to improve clinical outcomes, enhance patient experiences, and optimize value

NCORP Study Pipeline- Protocols

- **Testing decision aids to improve prostate cancer decisions for minority men (PI: Tilburt)**
 - NCORP CCDR cluster randomized trial within urology practices to test the comparative effectiveness of in-visit vs. out-of-visit vs. both decision aids on patient knowledge, quality of life outcomes, and treatment utilization
 - Status: R01 funded, approved NCORP CCDR, currently undergoing protocol development; available June 2016

Awaiting Activation

- **Comparative effectiveness of post treatment surveillance frequencies and strategies for prostate cancer survivors** (funded by PCORI: Chen)
 - Status: Protocol development
- **Rivaroxaban versus Low-Molecular Weight Heparin or Coumadin for Treatment of Venous Thromboemboli (VTEs) in Cancer Patients** (funded by PCORI: Schrag)
 - Status: Protocol development
- **Comparison of Operative to Medical Endocrine Therapy for Low Risk DCIS: COMET Trial** (funded by PCORI: Hwang, Partridge, Thompson)
 - Status: Protocol development



NCORP Study Pipeline- Concepts

- **Access to and Value of Treatment Innovation in Blood Cancers** (funded by LLSF: Conti)
 - To examine awareness and **communication** of out of pocket costs of cancer treatment, influence of drug **costs** on treatment decisions and **value** of innovation from physicians' and patients' perspectives
 - Status: Awaiting IRB approval for preparatory site activation
 - Pilot sites: Iowa Oncology Research Association, Metro-Minnesota, Montefiore, University of New Mexico, Geisinger (TBD)
- **Improving surgical care and outcomes in Older cancer Patients Through Implementation of an efficient pre-Surgical toolkit (OPTI-Surg) (PIs: Finlayson/Chang)**
 - Cluster randomized trial to measure the impact of a targeted **pre-surgical** frailty package intervention (OPTI-Surg) on practice-level rates of postoperative return-to-baseline and morbidity through a cluster randomized trial
 - Status: Positive early discussion with NCI, concept submission planned Summer 2016

Potential Challenges

- Need for preliminary data to develop CCDR studies
- Need to identify and partner clinicians at front line with health services researchers
- Limited funding through NCORP-CCDR; extramural funding may be required for secondary aims
- No central IRB for pilot studies

Utilization of Landscape Survey Data

- Identify NCORP sites affiliated with Alliance Research Base
- Recruit appropriate sites for specific research questions and patient populations
- Calculate sample sizes, assess study feasibility
- Data retrieved and analyses through Alliance Stats and Data Center (Mayo)

Study-Specific Use

Protocol Development

Testing decision aids to improve prostate cancer decisions for minority men

- M/U sites with >1 GU service:
 - Plus safety net status (n=32)
 - Plus >25% Medicaid/ uninsured (n=35)
 - Plus either safety net status OR >25% Medicaid/uninsured (n=55)
 - Plus safety net status AND >25% Medicaid or uninsured) (n=12)
- Excluded children's hospitals

Concept Development

Improving surgical care and outcomes in Older cancer Patients Through Implementation of an efficient pre-Surgical toolkit (*OPTI-Surg*)

- Patients of patients >65 years and at least 1 surgical oncology specialist (n=38)
- % Medicare
- Details on survivorship care plans, patient navigation, multidisciplinary care

CCDR Pilot Project Awards

- Purpose: to generate preliminary data that will lead to the development of an Alliance CCDR study for submission to the NCORP network
- Deadline June 17th, 2016
- \$150,000 per award
- Submit a Statement of Interest to Amanda Francescatti (afrancescatti@facs.org)

ALLIANCE CCCR Research Priorities

Patient/Caregiver Communication

- Engagement
- Decision Support

Clinical Care Coordination

- Survivorship Care Plans
- Multidisciplinary Care Coordination

Cost and Value of Care

- Cost and Value of Care
- Financial Toxicity
- Treatment Effectiveness

Health Care Systems

- Systems/Organization
- Leveraging IT

Quality of Care

- Improving Surgical Care
- Reducing Health Disparities

Precision Medicine

Other Opportunities

- Comparative effectiveness of post treatment surveillance frequencies and strategies for prostate cancer survivors (PI: Chen)
 - Aims: Compare patient-centered outcomes (including survival, procedures/tests, treatments and morbidity) and patient-reported outcomes in prostate cancer survivors followed with alternative surveillance frequencies
 - PCORI funded
 - CoC/NCDB Collaboration
 - Seeking pilot study sites

Acknowledgements

- Alliance representation on NCI NCORP CCDR Committees
 - CCDR Coordinating Committee (Jan Buckner, Co-Chair; George J Chang; Bruce Rapkin; Lucy Gansauer; Jennifer Griggs; Judith Hopkins; Matthew Hudson)
 - CCDR Steering Committee (Ethan Basch; Caprice Greenberg; Amylou Dueck)
 - Metrics of Participation Working Group (George J Chang, Chair; Alan Lyss; Lucy Gansauer; Bruce Rapkin)
 - IT Infrastructure Working Group (Jeff Sloan)
- CCDR Committee Executive Leadership
 - George J Chang, Stephen Edge, Heather Neuman, Ethan Basch, Caprice Greenberg, Deborah Schrag

Questions?

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