## **CRStar Insights**

**New Accreditation and Quality Measure Reports** 

New Accreditation and Quality Measure reports are available in CRStar. These new reports show not only Performance Rates for each measure, but also provide patient lists indicating whether a patient was concordant or non-concordant for the measure selected.

## **Accreditation and Quality Measures Reports**

Users can find these new reports under Enhanced Reporting, by selecting the Accreditation Reports Tab.

4	Quality Measu	res
DASHBOARD	Hospital:	
ABSTRACT MANAGEMENT	Begin Date:	mm/dd/yyyy
FOLLOW UP MANAGEMENT	End Date:	mm/dd/yyyy Breast - Radiation with Conservation Surgery (BCSRT)
ENHANCED REPORTING	Evoludo Sha	Breast - Chemo (MAC)
Select a Population	Include Pat	ent List
Registry Mgmt Reports	Send Report To	Breast - Radiation with Mastectomy (MASTRT) Breast - Surgery (BCSdx)
Admin	Excel	Breast - Needle Biopsy (nBx)
Accreditation Reports		🗌 Colon - Chemo (ACT)
Comparison Reports		Colon - Lymph Nodes (C12RLN)
Adhoc Reports		Gastric - Lymph Nodes (G16KLN)
Miscellaneous Reports		Head and Neck - Radiation (HadjRT)
Data Exports		🗌 Lung - Chemo (LCT)
Reporting Utilities		Lung - No Surgery (LNoSurg)
SYSTEM ADMINISTRATION		Rectum - Radiation and Chemo (RECRTCT)
SYSTEM MANAGEMENT		Rectum - Resection (RCRM)
REPORTING		

Users can select to run these measures on all hospitals by leaving the Hospital field blank, a single hospital by selecting a single hospital, or a group of hospitals by selecting multiple hospitals in the dropdown (see example on the next page).

Quality Measures											
Hospital:			<b>v</b>								
Begin Date:	mm/dd/yyyy	Hos	pital Lookup	×							
End Date:	mm/dd/yyyy		Hosp Nbr	Hosp Name							
Exclude Sh	ared Cases										
Send Report To	p;		01	ERS 2024 HOSPITAL erslist01							
C Excel			02	ERS 2023 ST ELSEWHERE							
Screen			03	ERS 2023 SUNSHINE HOSPITAL							
			04	ERS 2023 Who Knew Hospital							

Note: If the Hospital field is blank, users can select the Exclude Shared Cases button to count a primary only one time for the patient in the denominator.

Users will then need to enter a Begin Date and End Date.

Users can specify a single measure, multiple measures, or all measures required by a specific standard by clicking either CoC, NAPBC, or NAPRC.

The user can then select to Send Report to Screen or Excel.

Quality Meas	sures		
Hospital:	01,02,03	~	
Begin Date:	01/01/2022		Coc 🗌 NAPBC 🗌 NAPRC
End Date:	12/31/2023		Breast - Radiation with Conservation Surgery (BCSRT)
			Breast - Chemo (MAC)
Z ta alta da Da			Breast - Hormone (HT)
Include Pa	attent List		Breast - Radiation with Mastectomy (MASTRT)
	0:		Breast - Surgery (BCSdx)
Screen			Breast - Needle Biopsy (nBx)
			🗹 Colon - Chemo (ACT)
			Colon - Lymph Nodes (C12RLN)
			Gastric - Lymph Nodes (G16RLN)
			Gastric - Chemo (GCTRT)
			Head and Neck - Radiation (HadjRT)
			🗹 Lung - Chemo (LCT)
			Lung - No Surgery (LNoSurg)
			🗹 Melanoma - Adjuvant Therapy (MadjRx)
			Rectum - Radiation and Chemo (RECRTCT)
			Rectum - Resection (RCRM)

Sending the report to screen will show the table of selected measures and performance rates. Specific measures can be selected to view the patient list.

Quality Measures																	
Quality Measures																	
	Site			te	Measure	Standa	rd	Requi	red	Current							
							CoC 7.1, NA	PBC	90%	;	84.2% (16/19)						
				Breast		BCSRT	CoC 7.1, NA	PBC	90%	;	70.0% (98/140)						
						ACT	CoC 7.1		85%	;	100% (16/16)						
				Colon		C12RLN	CoC 7.1		80%	;	94.6% (53/56)						
				Gastric		G16RLN	CoC 7.1		80%	;	100% (4/4)						
				hud	Neck	HadjRT	CoC				45.5% (5/11)						
						LCT	CoC 7.1		85%	;	60.0% (9/15)						
						MadjRx	CoC		85%	;	75.0% (9/12)						
						RCRM	CoC, NAPRO	:	85%	;	100% (8/8)						
				Rect		RECRTCT	CoC 7.1, NA	PRC	85%	;	75.0% (6/8)						
						RECRTO	CT Patient Li	st									
Acc Number	First Name	Last Name	Site	Sequence	Histology	Dx Date	1st Contact	Class	Age	Sex	Concordant	Last Contact	Pt Status	сТ	cN	сM	cGroup
01202201040	TAMMIE	RECTUM	C209	00	81403	02/03/2022	09/16/2022	21	53	2	Yes	11/18/2022	1	cT3	cN2a	cM0	3B
03202200338	RONNIE	RECTUM	C209	00	80003	06/14/2022	07/11/2022	21	64	1	Yes	02/05/2023	1	cT3	cN2	cM0	3B
01202202186	ELIZABETH	RECTUM	C209	00	81403	04/25/2022	08/23/2022	21	65	2	Yes	02/09/2023	1	cT3	cN0	cM0	3B
03202200341	WHITFIELD	RECTUM	C209	00	81403	06/20/2022	06/30/2022	21	52	1	Yes	12/02/2022	1	cT3	cN0	cM0	2A
01202202201	GREGORY	RECTUM	C209	00	81403	02/01/2022	11/16/2022	21	55	1	Yes	12/02/2022	1	cT3	cN1	cM0	3B
01202201455	ROBERT	RECTUM	C209	00	81403	05/11/2022	05/11/2022	14	67	1	Yes	11/03/2022	1	cT3	cN0	cM0	2A

Users can also choose to "Include Patient List", which will display a list of the patients in the denominator for the measure, and also note whether the cases is concordant with the standard.

Sending the report to Excel will provide the list of patients for each measure on separate tabs.

	A	В	С	D	E	F	G	H		J	K	L	M	N	0	Р	
1	April 25, 2024		Quality Measu	re Report													
2																	
3	Site	Measure	Standard	Required	Current												
4	Rectum	RECRTCT	CoC 7.1, NAPRC	85%	75.0%	6/8											
5																	
6	Accession Number	First Name	Last Name	Site	Seq	Histology	Dx Date	1st Contact	Class	Age	Sex	Concordant	Last Contact	Pt Status	сТ	cN	сM
7	01202201040	TAMMIE	RECTUM	C209	00	81403	02/03/2022	09/16/2022	21	53	2	Yes	11/18/2022	1	cT3	cN2a	cM0
8	03202200338	RONNIE	RECTUM	C209	00	80003	06/14/2022	07/11/2022	21	64	1	Yes	02/05/2023	1	cT3	cN2	cM0
9	01202202186	ELIZABETH	RECTUM	C209	00	81403	04/25/2022	08/23/2022	21	65	2	Yes	02/09/2023	1	cT3	cN0	cM0
10	03202200341	WHITFIELD	RECTUM	C209	00	81403	06/20/2022	06/30/2022	21	52	1	Yes	12/02/2022	1	cT3	cN0	cM0
11	01202202201	GREGORY	RECTUM	C209	00	81403	02/01/2022	11/16/2022	21	55	1	Yes	12/02/2022	1	cT3	cN1	cM0
12	01202201455	ROBERT	RECTUM	C209	00	81403	05/11/2022	05/11/2022	14	67	1	Yes	11/03/2022	1	cT3	cN0	cM0
13	03202200283	VALERIE	RECTUM	C209	00	81403	04/18/2022	05/16/2022	21	33	2	No	12/26/2022	1	cT3	cN1b	cM0
14	01202200516	ERIC	RECTUM	C209	00	81403	02/22/2022	03/16/2022	21	51	1	No	07/27/2022	1	cT1	cN0	cM0
15																	
	< > MAC	BCSRT A	T C12RLN G1	6RLN Had	IRT LCT	MadiRx	RCRM	RECRTCT	+	: .	_	_					•
		1					1							-			



Once a Quality Measure report has been run, a selected population for each measure will be available as a population label for use in additional reporting as needed.

Populatio	Population Labels											
Search:	Search All											
Hospital Code	Population Label	Request Date 斗	Requested By	Nbr Cases								
01,02,03	01,02,03-jonathan-BCSRT Denominator	04/26/2024	ERS	140								
01,02,03	01,02,03-jonathan-BCSRT Numerator	04/26/2024	ERS	98								
01,02,03	01,02,03-jonathan-MAC Denominator	04/26/2024	ERS	19								
01,02,03	01,02,03-jonathan-MAC Numerator	04/26/2024	ERS	16								
01,02,03	01,02,03-jonathan-ACT Denominator	04/26/2024	ERS	16								
01,02,03	01,02,03-jonathan-ACT Numerator	04/26/2024	ERS	16								
01,02,03	01,02,03-jonathan-RLN Denominator	04/26/2024	ERS	56								
01,02,03	01,02,03-jonathan-RLN Numerator	04/26/2024	ERS	53								
01,02,03	01,02,03-jonathan-RECRTCT Denominator	04/26/2024	ERS	8								
01,02,03	01,02,03-jonathan-RECRTCT Numerator	04/26/2024	ERS	6								
01,02,03	01,02,03-jonathan-G15RLN Denominator	04/26/2024	ERS	4								
01,02,03	01,02,03-jonathan-G15RLN Numerator	04/26/2024	ERS	4								
01,02,03	01,02,03-jonathan-LCT Denominator	04/26/2024	ERS	15								
01,02,03	01,02,03-jonathan-LCT Numerator	04/26/2024	ERS	9								
01,02,03	01,02,03-jonathan-HadjRT Denominator	04/26/2024	ERS	11								
01,02,03	01,02,03-jonathan-HadjRT Numerator	04/26/2024	ERS	5								

## Support Available at www.mycrstar.com