# The QUILS Index© QUality Implementation of Lung Cancer Screening

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#### **Translating the NLST (and NELSON)**



Implementation Science
seeks to understand the
barriers and facilitators
that influence successful
implementation of
effective interventions.

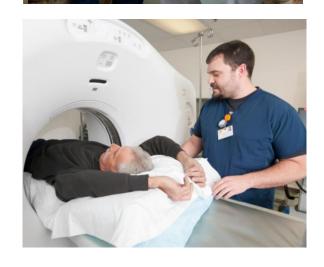
is needed to facilitate
high quality lung cancer
screening program
development.

### Prevention and Early Detection (PD) What does the study plan to do?

- Integrate recommendations from evidence based guidelines to promote high quality lung cancer screening in Kentucky
- Apply specific implementation strategies (i.e., resources, training, feedback) to facilitate adoption and implementation of high quality lung cancer screening programs in diverse healthcare settings
- Evaluate outcomes of lung cancer screening using implementation science







## Quality Implementation of Lung Cancer Screening: The QUILS Index<sup>©</sup>



#### 1) Screening Eligibility and Algorithm

- 1) Screening Eligibility Policy
- 2) Screening Frequency and Duration Policy

#### 2) Clinical Radiology Operations

- 1) LDCT Performance
- 2) Lung Nodule Identification
- 3) Structured Results Reporting
- 4) Lung Nodule Management Algorithm

#### 3) Interdisciplinary Team Operations

- 1) Interdisciplinary Clinical Team
- 2) Team Review of Radiologic Results

#### 4) Lung Cancer Prevention Efforts

- 1) Tobacco Treatment Interventions
- 2) Tobacco Treatment Targets
- 3) Secondhand Smoke Prevention Education
- 4) Radon Prevention Education

#### 5) Patient Education, Counseling and Support

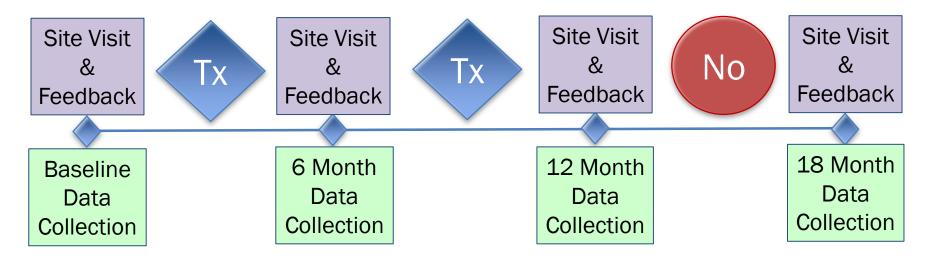
- 1) Shared Decision Making
- Engagement and Retention Methods

#### 6) Community Outreach

- 1) Responsible Marketing/Outreach
- 2) Provider Outreach

## Kentucky LEADS Collaborative Prevention & Early Detection Study Schematic





#### **Data Sources for Evaluation**

- 1) Team Member Interviews (Structured and Semi-Structured)
- 2) Program Surveys (Standardized IS Instruments)
- 3) Program Database Extraction (Enhanced Common Database)

#### Results (Ongoing)

- Number of sites open
  - 8 sites with active accrual
  - TV Commercials, provided by LCA, beginning airing by 18MAY
- Number of participants enrolled (LCSP Members)
   37 study subjects
- Number of patients reported in AspenLUNG database
   Over 250 patient data reporting
- Access to Study Resource Portal
   More than 50 participants pursuing education/resources
- Preparing for QUILS feedback score and recommendations
  - Developing structured reports to sites
    - Links to the Study Resource Portal
    - Recommendations for improvement
    - First Reports will be in Late June

#### **Conclusions**

- Very long process
- Trial (finally) launched in December
- Preliminary/baseline results next year

#### **Thank You**

- Bristol-Myers Squibb Foundation
- National Cancer Institute
- Kentucky Lung Cancer Research Program
- University of Kentucky Markey Cancer Center

