

# Study Timeline

**Overall Project:** 6 years (Sep 2025 - Aug 2031)

**Planning Phase :** Years 1-2 (Sep 2025 - Aug 2027)

**\*Intervention Phase:** Years 3-6 (Sep 2027 - Aug 2031)

\*Site activation participation period

## Frequently Asked Questions

### Will participating cost our program anything?

No. There is no monetary cost to participate. Your site completes a quality assessment, receives educational resources, and a stipend as part of participation.

### What if we're not currently in the ACR-ELCDR?

No problem! The research team and ACR-ELCDR will provide full support to cover the cost of signing you up to submit data to the ACR-ELCDR.

### Can we withdraw if needed?

Yes. Participating is voluntary and you may withdraw at any time.

### Will our data be kept confidential?

Yes. All site data will be de-identified for research purposes and kept secure in a HIPAA-compliant manner.

### What happens when the study ends?

All sites receive an Implementation, Tailoring, and Sustainment Guidebook developed from this study.



## Who's Leading QUILS™-SUMMIT?

**Jamie L. Studts, PhD** - University of Colorado

**Timothy W. Mullett, MD** - University of Kentucky

**Jennifer R. Knight, DrPH** - University of Kentucky

### In Partnership With:

- American Cancer Society - National Lung Cancer Roundtable (ACS-NLCT)
- American College of Radiology - Lung Cancer Screening Registry (ACR-ELCDR)
- American College of Surgeons - Commission on Cancer (CoC)
- American Lung Association (ALA)
- LUNgevity Foundation

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## Interested in Learning More?

Scan this QR code



**Contact the QUILS™-SUMMIT Team**  
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# Facilitating Scale-Up and Sustainment of High-Quality Lung Cancer Screening Using the QUality Implementation of Lung Cancer Screening (QUILS™) System



# What is the QUILS™ - SUMMIT Study?

A national randomized trial designed to help lung cancer screening programs (LCSPs) optimize their delivery and outcomes.

## What is the QUILS™ System?

A comprehensive quality optimization system with four components. LCSPs will be randomized to receive one or more implementation strategies within the QUILS™ system. However, all participants will have access to the full set of implementation strategies at the end of the study.

### 1. QUILS™ Index

- Quantitative assessment of your program quality
- Evaluates 21 elements across 7 key domains

### 2. QUILS™ Resource Portal

- Online library of tools, trainings, and educational materials
- Available 24/7 for your team

### 3. QUILS™ Audit & Feedback

- Personalized report on your program's strengths
- Tailored recommendations for improvements
- Links to relevant resources

### 4. QUILS™ Practice Facilitation

- Individualized problem-solving support
- Structured using the iPRISM tool

## Key Questions

### Q. Is my LCS program eligible?

Your LCSP is eligible if by Fall 2027 you:

- ✓ Are located in the United States
- ✓ Have been operating for at least 12 months
- ✓ Have conducted at least 25 LDCT scans in the past year
- ✓ Have at least 2 team members
- ✓ Are willing to submit data to the ACR-ELCDR

### Q. What will my site need to do?

- Commit to 24-month active participation after enrollment
- Anticipate conducting at least 25 LDCT scans per year
- Complete four, 30-minute structured interviews over the two-year study implementation period
- Complete 30-minute online surveys at each time point: baseline, 6mos, 12mos, and 24mos
- Upload data to ACR-ELCDR

### Q. How will this impact our workflows?

We believe there will be minimal disruption:

- Study designed to fit real-world practice
- No mandated workflow changes required
- Tools and resources available at your own pace

## What are the Benefits of Participating?

### Resources & Knowledge

- ✓ Access to educational resources and expert guidance
- ✓ Access to evidence-based implementation strategies
- ✓ Networking with lung cancer screening experts
- ✓ Potential to receive audit and feedback from QUILS™
- ✓ Potential to receive practice facilitation from QUILS™

### Practical & Financial Support

- ✓ Quality assessment at no cost
- ✓ Sites receive 4 implementation stipends of \$4,000
- ✓ Support for ACR-ELCDR membership and data submission

### Quality & Performance

- ✓ Enhance ability to meet quality metrics and accreditation standards
- ✓ Enhances ability to meet quality metrics and CoC accreditation standards
- ✓ Potential to improve screening uptake

### Broader Impact

- ✓ Contribution to advancing lung cancer screening nationally