Accreditation Guidelines for an Integrated Network Cancer Program (INCP) or National Cancer Institute-Designated Network Cancer Program (NCIN)

Eligibility for Network Applicants
To apply for network accreditation when at least one program is CoC accredited, the following conditions must be met:

• Meet the definition of an INCP or NCIN.
• All sites are owned by a single entity.
• All deficiencies from the last CoC site visit must be resolved.
• Accreditation fees due to the American College of Surgeons must be current.

To apply for network accreditation when no programs have a current CoC-accredited program, the following conditions must be met:

• Meet the definition of an INCP or NCIN.
• All sites are owned by a single entity.
• Each non-accredited site must “Apply for Accreditation” to have a FIN assigned.
• Each site must have completed at least one year of abstracted data.
• Each site must have completed at least one year of patient follow-up from the most current year of completed cases.

Scheduling a Network Site Visit

• A new network’s initial site visit must be scheduled approximately 6 months after completing one year of cancer program activity as the network.
• Accredited networks that apply to add an existing CoC-accredited cancer program will retain their next established network site visit dates.
• An accredited network due for site visit that applies to add a non-accredited cancer program will have a site visit after completing one calendar year of cancer program activity after the addition of the new program to the network. (e.g., if your network added a site on July 1, 2023, your site visit will be Q1 or Q2 2025).

Site Visit Outcomes

o Initial site visits for INCPs or NCIN may result in three outcomes:
  ▪ **Accredited**: Assigned when there are zero noncompliant ratings during the site visit process. The INCP/NCIN will be shown on the Find an Accredited Program website and a certificate of accreditation is provided.
  ▪ **Not Accredited-Corrective Action Required**: Assigned when a new INCP/NCIN receives one or two noncompliant ratings during the site visit process. The INCP/NCIN does not show up on the Find an Accredited Program website, and is given one year to resolve the noncompliant standards.
  ▪ **Not Accredited**: Assigned when a new INCP/NCIN receives three or more noncompliant ratings during the site visit process. The INCP/NCIN no longer
has access to the Quality Portal or the National Cancer Database (NCDB) and does not appear on the Find an Accredited Program website. The INCP/NCIN may reapply as an initial applicant program after one calendar year of compliance with all applicable standards.

- An initial site visit for INCP/NCIN that results in an Accreditation Status of Not Accredited-Corrective Action Required or Not Accredited will impact all individual sites within the network, including those that were previously accredited.
- Please review the full definitions for all Accreditation Awards in the Optimal Resources for Cancer Care (2020 Standards).

INCP/NCIN Requirements

Sites planning to apply for a network designation must be able to demonstrate compliance with the INCP/NCIN-specific requirements as outlined in the Optimal Resources for Cancer Care (2020 Standards) from the effective date. (Defined as January 1 of the year network began).

A high-level overview of requirements for networks include:

- A network representative is required to provide a descriptive document that addresses the organizational structure of the network including the sites within the network, processes that facilitate integration among the sites, and the distribution of cancer services across the network and its sites. This must include:
  - The organizational structure of the network, including all sites within the network.
  - The distribution of cancer services across the network and its sites
  - Processes that facilitate integration, coordination, and collaboration across the sites in the network.

- All network requirements are met as defined in the Specifications by Category in the Optimal Resources for Cancer Care (2020 Standards). Select requirements are summarized, with applicable standards identified in parentheses, as follows:
  - All required policies and procedures as part of select standards demonstrate how activities and services are coordinated and managed across the network or at the individual site level.
  - A unified cancer committee is assembled that oversees compliance with the standards across all network sites and includes representatives from each individual site within the network. NCIN sites are exempt from this requirement because the intent is met through activities meeting grant requirements. (Standard 2.1)
  - A network cancer committee membership has additional requirements. (Standard 2.1)
  - Two CLPs are appointed, representing all sites within the network. (Standard 2.2)
  - Cancer conference coverage is coordinated across all sites in the network. NCIN sites are exempt from this standard requirement because the intent is met through activities meeting the grant requirements. (Standard 2.5)
  - Data is submitted to the National Cancer Database (NCDB) through the Rapid Cancer Reporting System (RCRS) by the accredited individual sites within the network. Prior to the initial network site visit, the accredited sites within the network will retain their access to QPort and RCRS so submissions to RCRS continue uninterrupted. (Standard 6.4)
o Patient follow-up is evaluated at the individual site level. (Standard 6.5)
o Performance expectations for quality measures are met at the individual sites within the network. (Standard 7.1)
o Two quality improvement initiatives are required each year; one that includes all sites within the network and one that is relevant to one or more sites within the network. (Standard 7.3)
o Two cancer program goals are required each year; one network-wide goal that impacts coordination of care across the network, and one that is relevant to one or more sites within the network. (Standard 7.4)
o Addressing Barriers to Care, Cancer Prevention, and Cancer Screening Events are addressed based on the demographic and geographic areas of each program within the network. These can be identified network-wide and addressed by each site or different barriers may be selected depending on the needs of the individual sites. (Standards 8.1, 8.2, and 8.3)
o Clinical research accrual percentages are met collectively across the network sites. Within the network, an individual patient can only be counted once. (Standard 9.1)

- A single Pre-Review Questionnaire (PRQ) is completed for the network site visit.
- The site visit must include representatives from each site within the network.
- Prior to the initial network site visit,
  o **Individual sites that are CoC-accredited will:**
    - Retain accreditation status until the network site visit is performed.
    - Retain access to QPort and RCRS so submissions to RCRS continue uninterrupted.
  o **Individual sites that are not CoC-accredited** prior to the network site visit will:
    - Gain access to RCRS after becoming CoC-accredited as part of the network.
    - Begin monthly submission of cases to RCRS after accredited status is achieved with the network.
    - Participate in the next scheduled Call for Data as required by Standard 6.4.

Of note: Survival Reports, Hospital Comparison Benchmark Reports, and Cancer Quality Improvement Program (CQIP) Reports are updated annually and will become available for the new sites(s) only after the site’s participation in Call for Data and the subsequent annual update for these reports.

**Options for Additional Cancer Accreditations**

Participation in **The National Accreditation Program for Rectal Cancer (NAPRC)** and the secondary **Pediatric Cancer** accreditation occur at the individual hospital.

- A site that is part of a network may seek a NAPRC accreditation or a secondary pediatric accreditation. This is separate from the network accreditation.
- Each site accreditation must meet the accreditation program’s criteria and standards and apply for accreditation separately.
  - Information on the special considerations for NAPRC accreditation is found in the *Optimal Resources for Rectal Cancer Care (2020 Standards)*
Applying for INCP or NCIN Accreditation

Application
Entities interested in forming an INCP or NCIN must log in to QPort and access, complete, and submit the online application by August 31st. This includes identifying the name and contact information of the network and individual sites to be included in the network. When choosing a name for the newly formed network, it must be unique and not already in use by an individual hospital. It must be concise and reflective of the network. It cannot be a restatement of all the names of the sites involved in the network. Avoid complex or lengthy names. Network names are limited to 50 characters.

Business Associate/Data Use Agreement and Ownership Form
Within the application process is a requirement to complete a Business Associate/Data Use Agreement (BA/DUA). This is an online agreement that is signed and submitted electronically. A fully executed BA/DUA by ACS will be provided back to the network. Please contact BAA@facs.org directly to review and initiate the BA/DUA.
In addition to completion and submission of the BA/DUA, the network must complete the Network Ownership Confirmation Form and submit it to coc@facs.org as part of the application process.

The application requests the following information:

• Name and contact information of the network.
• Identification of sites that will be included in the network.
• Federal Employer Identification Numbers (FEIN) for each site in the network.
• Which sites in the network are currently CoC-accredited and which are not.
• Identification of network contacts, including the Cancer Committee Chair, Cancer Program Administrator, Cancer Registrar, Cancer Liaison Physician, as well as designating a billing contact who will receive the annual accreditation invoice. These roles can be selected from the existing sites that will comprise the network or new contacts can be listed.
• The network effective date (January 1 of a given year).

Application Processing

• Applications are processed within 30 days or as soon as practical thereafter.
• Once the application is reviewed and approved, the primary contact will receive an email from the CoC with the following:
  o The new INCP or NCIN Facility Identification Number (FIN) along with a list of sites within the network and their FINs.
  o Reference dates as applicable.
  o Approximate date of site visit.
  o Information to access the following areas in QPort:
    o Adding network contacts (cancer committee chair, additional cancer liaison
physician, cancer program administrator, cancer registrar, billing contact and other primary contacts at the network level).

- Adding contacts to an individual site within the network.
- Access to the Pre-Review Questionnaire (PRQ) to become familiar with the information that will be required in preparation for the network site visit.
- Access to resources to support the accreditation process.

- A single invoice, representing the cumulative accreditation fee for all sites in the network will also be sent to the Billing Contact. No refunds or credits will be issued for any funds previously paid by the individual sites.

Please submit questions to coc@facs.org.
Definitions

INCP or Network
An Integrated Network Cancer Program (INCP) is an entity that chooses to voluntarily select and participate in the Commission on Cancer (CoC) INCP category that offers integrated and comprehensive cancer care services and is overseen by a centralized governance structure/board and CEO.

All participating sites are independent, but the network is owned by a single entity (wholly owned, single owner) and the individual hospitals are working together on their CoC accreditation.

NCIN
A National Cancer Institute Designated Network Cancer Program (NCIN) is a group of hospitals working together on their CoC accreditation that hold a National Cancer Institute (NCI) peer-reviewed Cancer Center Support Grant. In an NCIN, all sites must be included within the NCI grant.

Facility Identification Number (FIN)
A specific number used by the Commission on Cancer (CoC) and the National Cancer Database (NCDB) to identify the facility earning CoC accreditation or reporting the cancer case to the NCDB. Each facility’s FIN is a unique and individual number.