

NAPBC Quality Portal (QPort) User Guide

This User Guide will assist you in navigating the American College of Surgeons (ACS) Quality Portal for NAPBC (NAPBC QPort). In this portal you will be able to access all information and activity needed for your site's NAPBC accreditation. If you have any questions after reviewing this document, please contact the ACS staff at NAPBC@facs.org.

Logging in

ACS QPort is accessible at: <https://qualityportal.facs.org/qport>

If you have an existing username and password with www.facs.org, either through a Quality Program (such as the CoC) or an ACS membership, your login username and password will be the **same**.

If you have forgotten your username and/or password or do not have a password, use the [Forgot Username/Password](#) link and enter your email address.

It is recommended that you use **Internet Explorer** (Version 10 or higher) or **Firefox**, as other browsers may not capture information correctly. Please turn off any Pop-up blockers installed on your browser, as they can prevent applications from loading.

Please note: If you are logged in to the ACS website at www.facs.org, be sure to log out of the website before logging in to the portal. Otherwise you will not be able to log in to the portal.

Once you have logged in, select the program you are working on. If you belong to multiple ACS Quality Programs or multiple sites, following the migration of all programs, everything will be available in the same portal. This includes management of accreditation with the National Accreditation Program for Rectal Centers (NAPRC) and the Commission on Cancer (CoC) (anticipated transition into QPort is 2021).

Navigating the Site

Test Site NAPBC Team Company Id: 17728 NAPBC	
Site Information	
Site Contacts	
Data Platform Contacts	
Site Profile	
Schedule Site Visit	
PRQ	
Site Visit History	
File Sharing	
Resources	

Site Information: View site address and main information.

Site Contacts: Contacts and authorized users at the site.

Data Platform Contacts: NAPBC programs will not use this section. It is used for other quality programs of the American College of Surgeons.

Site Profile: Information on the site to be used in reports.

Schedule Site Visit: Available only when it is time for a program to schedule their site visit.

PRQ: Link to the active Pre-Review Questionnaire (PRQ) for sites to complete for an upcoming site visit.

Site Visit History: History of most recent site visits including, dates, reviewers and accreditation reports.

File Sharing: Place to share documents with the ACS staff without emailing attachments.

Resources: Access files, documents, template, and additional resources to assist with maintaining accreditation throughout the three-year cycle.

Note: For initial applicants, before payment of the accreditation fee invoice and completion of all required legal agreements, only Site Information, Site Contacts, and Site Profile will be available.

Site Information

Site information
 Below is the site address and contact information. This information is used in displaying location information for your site on the American College of Surgeons website.
 If you need to update this information, contact the Genitrics Surgery Verification Program staff at genitricsurgery@facs.org.

Name: ACS Test Genetric Site
 Address: 633 North Saint Clair
 Street Address 2:
 Country: United States
 City: Chicago
 State: IL
 Zip: 60610
 Telephone: (Country Code Area Code Number) 1 312 321-3213 Ext:
 Fax: (Country Code Area Code Number)

Site information includes the basic site demographic information for your program. This information is pre-populated from the previous portal or the new program application.

This includes the program’s Name, Address, Federal Employer Identification Number (FEIN), and American Hospital Association (AHA) number. This information **cannot** be updated within the Quality Portal. To update any of this information please contact the ACS Quality Program Staff at NAPBC@facs.org.

Site Contacts

Site Contacts

Center contact management is the responsibility of the center authorized user(s), the NAPBC Central Office Staff is unable to make changes to your center contacts.

Required Center Contacts:

1. **Breast Program Director** - One (1) individual who has authority and accountability for the operation of the breast center.
2. **Primary Contact** - One (1) individual that is the main point of contact for breast center accreditation program.
 - responsible for adding, removing, and updating contact information (**only the primary contact can perform these functions**)
 - will receive all notifications related to the survey process
 - should be in a position to respond to all communications from the NAPBC
3. **Billing Contact** - One (1) individual that is authorized to receive the invoice for accreditation fees.

Pending Contacts - New contacts will be listed as "pending" until approved by NAPBC. Please allow two (2) to three (3) business days for processing of new user requests. Once confirmed, the new user will receive login instructions via email.

The NAPBC is not responsible for unauthorized release or sharing of login information and data by individuals authorized as Program Contacts.

Site Contacts

Show: entries Search:

Name	Site Role	Status	Additional Role
Asa Carter	NAPBC Contact	Active	
Avery Shouldis	NAPBC Contact	Active	
Carol Woody	NAPBC Contact	Active	
Carolyn Jones	NAPBC Contact	Active	

Site Contacts is where all users who have access to the Quality Portal can be seen along with their roles.

All user access to the Quality Portal is managed through the Site Contacts section within the Portal. Participating sites are required to manage their own contacts and are responsible for requesting access for new users and removing access. ACS staff cannot make changes to user access.

The NAPBC has four available roles:

- Breast Program Director
- NAPBC Contact (multiple contacts can be assigned this role)
- CEO/Dean
- Marketing Director

All roles, including Primary Contact, have been transferred from the previous portal. New programs must select a Primary Contact during the application process.

The Primary Contact is the only role that add or remove users or updates user contact information. A Billing Contact is also required.

Note: Adding a new user can take three to five (3-5) business days to process. Updates to user roles, contact information, and user removal is automatic. To update a user, click on their name. Make necessary changes, then click "Save" or "Remove Contact."

Site Profile

General Center Information

How would you describe your center?

Are additional locations included in your accreditation. If so, please provide location information (attachment)

Annual Caseload of Breast Patients

If your breast center is hospital based, please enter number of beds.

Is your center part of a health care system? Yes No

Name of Health System?

Are you affiliated with a hospital that has a cancer program approved by the Commission on Cancer of the American College of Surgeons? Yes No

If so, please provide your CoC Facility ID Number

Is there a separate facility cancer registry database? Yes No

Does your center have a breast cancer-specific database? Yes No

Does your database interface with the facility's cancer registry database? Yes No

Leadership and Staffing

What best describes the specialty of the individual designated as the Chair of your BPL?

Does your center have patient navigators? Yes No

How many patient navigators does your center have?

What is the specialty of your primary navigator?

The Site Profile includes information about the site that is not included in the Pre-Review Questionnaire (PRQ) for a specific site visit.

To update the Profile, scroll to the bottom of the page and click "Edit." Once all information is entered, click "Save."

The NAPBC Site Profile asks for the following information:

- **General Center Information:** Facility type, caseload, registry type, and additional locations of the site.
- **Leadership and Staffing:** Credentials and specialties of individuals participating in the Breast Program Leadership Committee (BPLC) and the Breast Center Team (BCT)
- **Breast Center Components:** Services that are provided, referred, or not available at the site.

Schedule Site Visit

Schedule Site Visit

Please provide at least 4 dates for your initial NAPBC site visit. The site visit must occur on a day when a Rectal Cancer Multidisciplinary Team meeting is held.

Visit Type: Program Selection:

Your site visit must occur between 10/1/2020 and 6/30/2021

Available

Select Dates Select Date Range

October, 2020

SU	MO	TU	WE	TH	FR	SA
27	28	29	30	1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

Add Date(s)

Available

Remove Selected Clear

Blackout

Select Dates Select Date Range

October, 2020

SU	MO	TU	WE	TH	FR	SA
27	28	29	30	1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

Add Date(s)

Blackout

Remove Selected Clear

Please provide any additional comment regarding the site visit. AV staff may contact you directly to assist you with your requests.

Site Visit scheduling occurs in this section. Programs must submit at least four dates within the date ranges allotted. The date range is displayed below the instructions and is based on each site's accreditation end date.

In preparation for upcoming site visits, sites can:

- Provide available site visit dates
 - Both individual dates and date ranges may be entered
- Provide unavailable site visit dates
 - Both individual dates and date ranges may be entered
- Submit additional site visit requests/comments.

If the program is not due or eligible for a site visit, then this section will not be available.

Pre-Review Questionnaire (PRQ)

In this section, sites can access any active PRQ. This includes PRQs that are available for an upcoming site visit or following a site visit that requires corrective action.

The table provides a link to the PRQ, the type of application, a link to assigned reviewer(s) once assigned, the site visit date once assigned, and the status of the PRQ.

PRQ Statuses:

- Open – Available for site to update and submit
- Submitted – Submitted by the site for review by ACS staff and the site reviewer

Pre-Review Questionnaire (PRQ)

Active PRQs are found below along with information relevant to a pending site visit. Please complete the PRQ at least 30 days before the confirmed site visit date.

Corrective Action PRQs are open when an institution needs to correct deficiencies found at the time of the site visit.

Show entries Search:

PRQ	Program Selection	Type	Reviewers	Site Visit Date	Status
PRQ	Standard	Renewal	Reviewers	8/10/2020	Open

Showing 1 to 1 of 1 entries Previous **1** Next

To open a PRQ, Click on the “PRQ” link. The PRQ can be completed in sections. Click “Save” to save any answer/upload and “Save and Next” to move to the next standard. The PRQ will be opened by the ACS staff prior to your site visit. The PRQ must be completed at least 30 days before the confirmed site visit date.

Standards can be navigated to by selecting the specific standard from the navigation list at the top of the PRQ.

Be sure to click “Save” or “Save and Next” prior to navigating out of the standard page or you will lose any responses you have entered.



Throughout the PRQ you will be asked to answer specific questions or to upload various documents. To upload documents:

- Click “Choose File” to choose a document from your computer
- Once you see the file name appear, click “Upload” to upload this document
- If you wish to remove an opened document, click “Remove” under the document name

Standard 5.11 : Multidisciplinary Team Post-Surgical Treatment Outcome Discussion

Do not provide any Protected Health Information (PHI)

*Upload policy and procedure used to monitor treatment completion status for each rectal cancer patient and that the patient is scheduled for presentation at an RC-MDT meeting following completion of definitive surgery. **

No file chosen

For programs with more than 100 rectal cancer patients per year, upload policy and procedure detailing criteria used to determine which patients are discussed at the RC-MDT for treatment outcome discussion.

No file chosen

When the PRQ is completed and all required documents are uploaded, attest to the accuracy of the PRQ and click “Submit.” **Please note the PRQ must be submitted to generate a summary PDF of the PRQ.**

PRQ Summary : Comments and Attestation

Please enter any comments regarding the PRQ (optional).

*I attest that the information in this application is accurate. **

Agree

Site Visit History

Previous site visit information, date, outcome, copy of the submitted PRQ, and the Accreditation Report are found in the Site Visit History section.

Please note, not all previous site visits may be available. If you need a previous report that is not available in this section, please contact ACS staff at NAPBC@facs.org.

Site Visit History

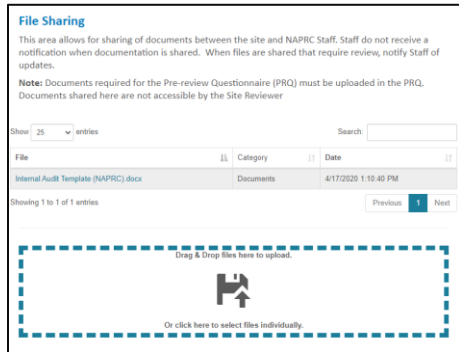
The table below shows the history of site visit outcomes for your site. Submitted PRQs and Performance Reports are available for download.

Show 25 entries Search:

Type	AV Status	Site Visit Date	Program Selection	Outcome	PRQ	Performance Report
No data available in table						

Showing 0 to 0 of 0 entries

File Sharing



Within the File Sharing section, the sites and ACS staff can share files that are not part of the site visit. By sharing these files within the ACS Quality Portal, documentation will not be housed within personal emails.

Note: If a site uploads a document, they must let the ACS staff know. There is no automatic notification of uploads at this time. Users also cannot delete files. If a file is uploaded or a file needs to be deleted, please notify ACS Staff at NAPBC@facs.org.

Resources

Resources developed by the NAPBC to assist in verification processing, meeting the standards, locations of documents, templates and other materials are available within the Resources section. This section is regularly updated.

<p>Center Resources</p> <ul style="list-style-type: none"> NAPBC Center Portal Instructions Standards Manual Changes/Clarifications to Standards Sample Survey Agenda Sample Breast Conference Treatment Grid Medical Record Review Process Satellite Definition & Survey Chart Review Information Survivorship Care Plan (SCP) Decision Matrix Lymphedema Screening and Treatment Recommendations Stage IV/Metastatic Breast Cancer Resources Radiation Therapy Quality Assurance Plan Manage Program Contact Instructions <p>Requests & Forms</p> <ul style="list-style-type: none"> Business Associate Agreement Survey Postponement Request Form Appeal Request Form Facility Name/Ownership Change Form Program Director Change Notification Form Voluntary Withdrawal Form
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