Optimal Resources for Cancer Care
2020 Standards Webinars
General Information

Effective January 1, 2020

Review all information in the manual

• Address changes to Accreditation process
• New terms defined in glossary
• Specifications by category
Access the 2020 Standards and Resources page for more information on the standards and upcoming activities

https://www.facs.org/quality-programs/cancer/coc/standards/2020
Facilities and Equipment Resources
Section 3 Rationale

• The cancer program maintains and/or provides
  • Appropriate facilities
  • Necessary equipment
3.1 – Facility Accreditation

- Facility Accreditation
  - Licensed by the state if required by state law
    OR
  - Accredited or licensed by a recognized federal, state, or local authority appropriate to facility type
3.1 – Facility Accreditation

- **Pre-Review Questionnaire (PRQ) documentation:**
  - Certificate or licensure
    - State
    - Accrediting Organization for health care facility
3.2 – Evaluation and Treatment Services

- The program provides **diagnostic imaging services**, **radiation oncology services**, and **systemic therapy services** on-site or by referral.

- Quality assurance practices are in place for the required services available on-site. Quality assurance is demonstrated by accreditation and/or policies and procedures following recognized guidelines.
### 3.2 – Evaluation and Treatment Services

- **Accrediting organizations include, but are not limited to:**
  - American College of Radiology (ACR)
  - American Society for Radiation Oncology (ASTRO)
  - American College of Radiation Oncology (ACRO)

- **Applicable guidelines include, but are not limited to:**
  - Oncology Nursing Society (ONS)
  - American Society for Clinical Oncology (ASCO)
  - American Society of Health-System Pharmacists (ASHP)
  - The United States Pharmacopeia (USP)
  - National Comprehensive Cancer Network (NCCN)
3.2 – Evaluation and Treatment Services

• How does this apply to radiology and radiation oncology services and equipment?

• How does this apply to systemic therapy?
  
  • Answer to both questions depends on the method for meeting the standard – accreditation or policies and procedures

• How do we address services provided off-site (by referral)?
3.2 – Evaluation and Treatment Services

• **Pre-Review Questionnaire (PRQ) documentation:**
  • **Policies and procedures** covering quality assurance practices for (all):
    • Diagnostic imaging services
    • Radiation oncology services
    • Systemic therapy services
  AND/OR
  • **Certificate(s) of accreditation**