

Frequently Asked Questions on the 2020 Optimal Resources for Cancer Care Standards Chapter 3: Facilities and Equipment Resources

Standard 3.1: Facility Accreditation

Does the cancer committee need to review the licensure certificate or facility accreditation in the meeting and document this in the minutes? Or do we just need to upload the certificate in the Pre-Review Questionnaire (PRQ)?

You will just need to upload the certificate in the PRQ.

Is Joint Commission accreditation acceptable?

Yes. The Joint Commission accreditation is an acceptable option for this standard.

Standard 3.2: Evaluation and Treatment Services

What type of documentation is needed to demonstrate medical oncology quality?

Certificate(s) of accreditation or a policy and procedure that follows recognized guidelines is the documentation that must be submitted for compliance.

What does CoC count as quality assurance of a program we are referring to?

Documentation of quality assurance practices are only required for those services provided on-site. Quality assurance is demonstrated by accreditation by the organizations listed in the standard or by policy and procedure that follow recognized guidelines.

Does radiation oncology have to be accredited by the three listed entities or can a letter of attestation for inhouse quality assurance suffice?

If radiation oncology is not accredited by the outside entities, then you are to demonstrate quality assurance by a policy and procedure that follows recognized guidelines. A letter of attestation alone does not meet compliance.

Do we need policies and procedures and accreditation or one or the other?

The intent of this standard is that your program provides diagnostic imaging services, radiation oncology services, and systemic therapy services onsite or by referral. If you offer them onsite, you are required to provide evidence of quality assurance practices. Quality assurance is demonstrated by accreditation by the accrediting organizations listed in the standard or by policy and procedure that follow recognized guidelines. The policies and procedures can be in one cumulative document but should outline the services provided and their quality assurance practices.