Appealing the Accreditation Award

To appeal an accreditation award or standard deficiency listed in the initial Accredited Cancer Program Performance Report:

- Go to Appeals page by clicking on the ‘Appeals’ link located on the survey SAR menu in CoC Datalinks.
- Appeals should be received by the CoC within 30 CALENDAR DAYS of receipt of access to the initial Performance Report.
- Additional documents are not accepted on the appeals page.
- Appeals will only be accepted through the Appeals link located in Datalinks.
- Appeals must be based directly on documentation or information that has already been submitted for survey and entered into the Survey Application Record (SAR).
- Appeals are processed monthly through the Program Review Subcommittee (PRS). Depending on when the appeal is submitted, it may not reach PRS until the next monthly meeting.
- Documentation demonstrating resolution or action plans will not be reviewed or processed as part of the appeal.
- Programs that receive a ‘non-accreditation’ status from survey cannot submit appeals since there is no access to Datalinks. Instead, these programs are to contact the Program Coordinator, at Accreditation@facs.org, within two weeks of receiving the Performance Report to schedule a conference call with the Cancer Programs Senior Manager. (Please review the CoC Survey Results email communication for further information.)

Guidelines for Appeals:

- If the cancer program disagrees with the interpretation for the deficiency or non-commendation rating and the supporting documentation is uploaded in the SAR at the time of survey, the appeal is eligible.
- If the supporting documentation was uploaded to the SAR at the time of the survey and was overlooked by the CoC, the appeal is eligible.
- If documentation or information to support the deficient standard was not in the SAR at the time of survey or within the 3 days post survey, the standard is not eligible for appeal.
- Cancer committee minutes, pathology reports, other supporting documentation that have been amended post-survey are not eligible for appeal.
- Any documentation submitted that has not been reviewed by the Cancer Committee during the survey cycle is not eligible for appeal.

The verdict of appeals will be sent by an automated e-mail notification directly to the cancer program’s contact staff (chair, liaison, administrator, and registrar) to communicate an updated Performance Report. The updated Performance Report can be accessed through the CoC Datalinks Activity Menu.
Note: Do not submit deficiency resolution documentation with appeals to the CoC as these are two different processes. Deficiency resolution documentation should not be uploaded until after the appeal response has been received by the cancer program.

2019 Survey Commendation Standards and OAA Criteria:
1.9, 1.11, 1.12, 2.1, 2.2, 5.2, and 5.6

NOTE: 30 days after receiving your initial Performance Report, (Appeal time period), the report is final. There will be no further request for changes to Commendation standards accepted after that time period.

HIPAA and Protected Health Information
In concordance with the HIPAA guidelines, the Commission on Cancer cannot accept documentation that includes patient identifying information (protected health information [PHI]). Receipt of PHI violates the Business Associate Agreement between the American College of Surgeons and the CoC-accredited cancer program.

This applies to documentation submitted for survey, appeals, and/or deficiency resolutions. Documents that may include PHI, but are not limited to: accession lists, suspense reports, pathology reports, collected data for studies. Special care should be taken to ensure that all PHI is removed before documentation is uploaded to the SAR.

In compliance with the American College of Surgeons HIPAA Privacy and Security Policy, appropriate supervisory and managerial staff of the American College of Surgeons will be notified when documentation that includes PHI has been received. The American College of Surgeons Privacy Official will make a determination about a notification to the CoC-accredited cancer program and disposition of the documentation that includes PHI.

Programs will be required to remove or block the patient information and resubmit the documentation as soon as possible after receiving notification from the American College of Surgeons Privacy Official.

Revised September 2018