DEMONSTRATE YOUR COMMITMENT TO QUALITY BREAST CARE

Achieve Accreditation by the National Accreditation Program for Breast Centers

NATIONAL ACCREDITATION PROGRAM FOR BREAST CENTERS

A QUALITY PROGRAM of the AMERICAN COLLEGE OF SURGEONS

AMERICAN COLLEGE OF SURGEONS
Inspiring Quality: Highest Standards, Better Outcomes
When your breast center achieves accreditation by the National Accreditation Program for Breast Centers, you can be assured that it is held to the highest standards of care for patients with diseases of the breast.

The National Accreditation Program for Breast Centers (NAPBC) is comprised of professional organizations dedicated to improving the quality of care for patients with diseases of the breast. This mission is pursued through standard-setting, scientific validation, and patient and professional education.

The NAPBC board is comprised of leadership from many medical disciplines and upholds nationally recognized quality performance measures for breast cancer treatment.
The NAPBC includes the following member organizations:

- American Board of Surgery
- American Cancer Society
- American College of Radiology, Commission on Breast Imaging
- American College of Radiology Imaging Network
- American College of Surgeons
- American Institute of Radiologic Pathology
- American Society of Breast Surgeons
- American Society of Clinical Oncology
- American Society of Plastic Surgeons
- American Society for Radiation Oncology
- Association of Cancer Executives
- Association of Oncology Social Work
- College of American Pathologists
- National Cancer Registrars Association
- National Consortium of Breast Centers
- National Society of Genetic Counselors
- Oncology Nursing Society
- Society of Breast Imaging
- Society of Surgical Oncology
Benefits of NAPBC Accreditation

- A model for organizing and managing a breast center to ensure multidisciplinary, integrated, and comprehensive breast care services
- Internal and external assessment of breast center performance based on recognized standards to demonstrate a commitment to quality care
- Recognition as having met performance measures for high-quality breast care established by national health care organizations
- National recognition and public promotion
What Does Being NAPBC Accredited Mean?

Breast centers applying for NAPBC accreditation must undergo a rigorous evaluation and review of performance and compliance with the NAPBC standards.

To maintain accreditation, centers must undergo an on-site review every three (3) years.

What NAPBC Does for You

Provides the information you need to develop and operate a high-quality breast center.
Eligibility Requirements for NAPBC Accreditation

In order to achieve NAPBC accreditation, the applying breast center must provide Breast Center Components and be able to meet the three Critical Standards (next page).

Breast Center Components

1. **IMAGING**
   1) Screening mammography (digital or analog)
   2) Diagnostic mammography (additional views beyond screening mammography and workup of a clinical abnormality)
   3) Ultrasound
   4) Breast MRI

2. **NEEDLE BIOPSY (CORE PREFERRED)**
   1) Needle biopsy – palpation guided
   2) Image guided – stereotactic
   3) Image guided – ultrasound
   4) Image guided – MRI

3. **PATHOLOGY**
   1) Report completeness/CAP protocols
   2) Radiology-pathology correlation
   3) Prognostic and predictive indicators
   4) Gene studies (if available)

4. **INTERDISCIPLINARY CONFERENCE**
   1) History and findings
   2) Imaging studies
   3) Pathology
   4) Pre- and posttreatment interdisciplinary discussion

5. **PATIENT NAVIGATION**
   1) Facilitates navigation through system for the patient

6. **GENETIC EVALUATION AND MANAGEMENT**
   1) Genetic risk assessment
   2) Genetic counseling
   3) Genetic testing

7. **SURGICAL CARE**
   1) Surgical correlation with imaging/concordance
   2) Preoperative planning after biopsy for surgical care
   3) Breast surgery: lumpectomy or mastectomy
   4) Lymph node surgery: sentinel node/auxiliary dissection
   5) Post initial surgical correlation/treatment planning

8. **PLASTIC SURGERY CONSULTATION/TREATMENT**
   1) Tissue expander/Implants
   2) TRAM/tatissimus flaps
   3) DIEP flap/free flaps (if available)

9. **NURSING**
   1) Nurses with specialized knowledge and skills in diseases of the breast

10. **MEDICAL ONCOLOGY CONSULTATION/TREATMENT**
    1) Hormone therapy
    2) Chemotherapy
    3) Biologics
    4) Chemoprevention

11. **RADIATION ONCOLOGY CONSULTATION/TREATMENT**
    1) Whole breast irradiation with or without boost
    2) Regional nodal irradiation
    3) Partial breast irradiation treatment or protocols
    4) Palliative radiation for bone or systemic metastasis
    5) Stereotactic radiation for isolated or limited brain metastasis

12. **DATA MANAGEMENT**
    1) Data collection and submission

13. **RESEARCH**
    1) Cooperative trials
    2) Institutional original research (not part of national trials)
    3) Industry-sponsored trials

14. **EDUCATION, SUPPORT, AND REHABILITATION**
    1) Education (nurse) along continuum of care (pretreatment, during, posttreatment)
    2) Psychosocial Support
       a. Individual support
       b. Family support
       c. Support groups
    3) Symptom Management
    4) Physical Therapy (for example, lymphedema risk reduction practices and management, shoulder ROM)

15. **OUTREACH AND EDUCATION**
    1) Community education at large (including low-income/medically underserved)
    2) Patient education
    3) Physician education

16. **QUALITY IMPROVEMENT**
    1) Continuous quality improvement through annual studies

17. **SURVIVORSHIP PROGRAM**
    1) Follow-up surveillance
    2) Rehabilitation
    3) Health promotion/risk reduction

Critical Standards on next page
Eligibility Requirements for NAPBC Accreditation

(Continued)

1. Level of Responsibility and Accountability: Standard 1.1
   The organizational structure of the breast center gives the Breast Program Leader (BPL) responsibility and accountability for provided breast center services.

2. Interdisciplinary Breast Cancer Conference: Standard 1.2
   The Breast Program Leader (BPL) establishes, monitors, and evaluates the interdisciplinary breast cancer conference frequency, multidisciplinary and individual participant attendance, and prospective and total case presentation annually, including American Joint Committee on Cancer (AJCC) staging and discussion of nationally accepted guidelines.

3. Interdisciplinary Patient Management: Standard 2.1
   After a diagnosis of breast cancer, the patient management is conducted by an interdisciplinary team.

In order to achieve NAPBC accreditation, the applying breast center must provide Breast Center Components and be able to meet the three Critical Standards.
NAPBC by the Numbers

Your Breast Program Leadership is a reflection of your program.

Breast Program Leadership Composition

Breast Program Leader Specialty

NAPBC-accredited centers can identify the individual Breast Program Leader of their choice. There is no specialty requirement.

Additional charts on next page
The size of the breast center is determined by caseload. **No center is too small to achieve NAPBC accreditation.**

It takes most centers **less than a year** to prepare.
How to Achieve NAPBC Accreditation

1. **Review the NAPBC Standards Manual**
   Download or purchase the current version of the standards manual from napbc-breast.org.

2. **Conduct a Gap Analysis**
   Carefully review the Accreditation Process, Breast Center Components, and Standards as defined in the NAPBC Standards Manual and conduct a gap analysis of your breast center performance.

3. **Apply for Accreditation**
   Complete the NAPBC application for accreditation ([bit.ly/NAPBCAccredApplication](bit.ly/NAPBCAccredApplication)), and submit the signed BAA as required by HIPAA.

4. **Prepare for and Undergo a Survey**
   After successfully completing the steps above, the center’s application is accepted by NAPBC and released for survey.
What to Expect during the NAPBC Survey Process

1. Submit your application online.

2. An e-mail notification is sent to the center indicating an assigned surveyor.

3. The assigned surveyor will contact the center within 30 days of receiving the notification to schedule the on-site survey date.
   a) A survey must be scheduled within six months of being released for survey.

4. A Survey Application Record (SAR) is opened for the center.
   a) All SAR documentation must be completed 14 days prior to the on-site survey date.
   b) The surveyor reviews the SAR during the 14-day period prior to the on-site survey.

5. A site visit agenda is created by the breast center and the surveyor. This is confirmed at least 14 days prior to the on-site survey.

6. In the 14 days prior to the survey, the surveyor will contact the center and identify 20 medical records that need to be pulled for chart review during the on-site visit.

7. The surveyor visits the center. A typical survey takes six hours. The surveyor:
   a) Meets with key members of the Breast Program Leadership and Breast Center Care Team.
   b) Assesses the center’s compliance with each standard through review of documentation and the SAR.
   c) Conducts a medical record review.
   d) Tours the center.
   e) Attends a breast conference (a breast conference must be scheduled for the day of survey).
   f) Provides a summary of the findings at the conclusion of the survey.
Accreditation Makes a Difference

Patients receiving care at an NAPBC-accredited center can be confident that the breast care team includes health care professionals from a variety of disciplines who are committed to working together to provide the patient with the best care available throughout the entire course of treatment.
Proudly Display Your NAPBC Accreditation

The NAPBC offers marketing resources to accredited breast centers, including press releases, logos, and brochures so you can easily tell your patients why accreditation matters. Many centers announce their achievement of becoming accredited on Twitter and Facebook.

Apply for NAPBC Accreditation Today!

To complete an application, visit: bit.ly/NAPBCAccredApplication
Accreditation Matters

“Quality improvement initiatives, policies, and processes are embedded into the NAPBC accreditation program. The standards encourage organizations to strive to meet goals that otherwise might not be met. It strengthens interdisciplinary team effectiveness by ensuring an acceptable level of quality among health care providers. Accrediting bodies revise their standards over time, so they are based on research and accepted best practices. These elements elicit continued quality improvement efforts. The bottom line is NAPBC accreditation contributes to the provision of high-quality, safe health care with greatly improved patient outcomes. As an administrator, there is no better way to measure successes and, more importantly, areas that need improvement.”

Colleen Johnson, RN, CBPN-IC
Regional Director of Breast Health Services
Carondelet Health System
Kansas City, MO

“Being Austin’s first NAPBC-accredited breast program evokes a great sense of pride. St. David’s Medical Center’s team of physicians, allied health professionals, and volunteers is committed to providing the highest quality of care for patients being evaluated for or diagnosed with breast cancer. NAPBC accreditation identifies high-quality clinical program development, clinical services, continuum of care services, patient outcomes, and data quality, which is aligned with St. David’s Medical Center’s core values and programmatic goals of providing exceptional care, creating customer loyalty, and building financial strength. Through NAPBC accreditation, we strive to uphold our vision of providing exceptional care to every patient, every day, with a spirit of warmth, friendliness, and personal pride.”

Nancy Etzold, CTR
Cancer Program Manager
St. David’s HealthCare
Austin, TX
The NAPBC is an ACS Quality Program, which are based on four key principles:

- **Structure**
- **Standards**
- **Verification**
- **Improvement**

Participating ACS Quality Programs have been shown to improve the quality of care, prevent complications, reduce costs, and save lives.