

ACS NAPBC National Accreditation Program for Breast Centers
American College of Surgeons

Optimal Resources for Breast Care 2024: Improving Standards; Improving Quality

NAPBC Workshop
February 22, 2024
Austin, TX

NAPBC

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Tools for Site Visit Preparation

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Disclosures

- Nothing to Disclose

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Tools for Site Visit Preparation

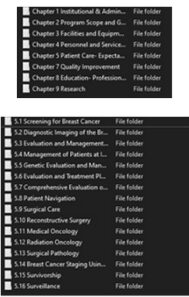
- Resources are available in the Quality Portal
 - NAPBC Program → Resources
- Accreditation Folder Structure - NAPBC 2024 Standards
- NAPBC Templates
- 2024 Site Visit Sample Agenda and Instructions

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Accreditation Folder Structure - NAPBC 2024 Standards

- Helpful organizational template
- Folders for each chapter and standard
- Compliance documentation
- Stay organized!



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NAPBC Templates

- Templates for documenting compliance with the NAPBC Standards

2018 Standards Templates	2024 Standards Templates
<ul style="list-style-type: none"> Standard 1.1: Breast Care Team Worksheet Standard 1.1: BPLC Annual Audit Worksheet Standard 1.2: MBCC Sign-In-Sheet Standard 2.12: Radiation Therapy Quality Assurance Plan Standard 2.20: Survivorship Care Plan (SCP) Decision Matrix Standard 2.20: Survivorship Care Plan Summary Worksheet Standard 2.20: Survivorship Care Plan Standard 4.1: Education, Prevention and Early Detection Template Standard 5.1: Breast Center Staff Education Activity Worksheet Standard 6.1: Quality Improvement Study Guidance Document Standard 6.1: Quality Improvement Studies Worksheet 	<ul style="list-style-type: none"> Standard 2.1: BPLC Template Standard 2.3: Breast Care Team Template Standard 2.4: MBCC Template Standard 4.1: Physician Certification Credentials Template Standard 4.2: Oncology Nursing Credentials Template Standard 4.3: Physician Assistant Education Template Standard 7.2: Quality Improvement Initiative Template Standard 8.1: Education Prevention and Early Detection Template Standard 8.2: Continuing Education Template Standard 9.1: Clinical Research Template

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Division of Laboratory Accreditation

NAPBC Templates

- Completed by NAPBC Programs to document compliance data and program activity
- Recommendation:**
 - Use the templates early and often
 - Keep them up-to-date
- Submitted with the Pre-Review Questionnaire (PRQ)
- Reviewed by the Site Reviewer to confirm compliance

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Division of Laboratory Accreditation

2024 Site Visit Sample Agenda and Instructions

Reminder: Instructions are based on the 2018 Standards

- NAPBC is still conducting site visits under the 2018 Standards until EOY
- Instructions are updated annually for latest site visit guidance

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Division of Laboratory Accreditation

2024 Site Visit Sample Agenda and Instructions

- Operational Components
- Program Responsibilities
- Site Reviewer Responsibilities
- Medical Record Review Process
- Completion of the NAPBC Templates
- Sample Agenda

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2024 Site Visit Sample Agenda and Instructions

Operational Components

- Site visits may be held virtually or in-person
- Estimated duration of the entire site visit is 7 hours

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2024 Site Visit Sample Agenda and Instructions

Program Responsibilities

- Exchange contact information with the Site Reviewer
- Coordinate the dates and times of the site visit components at mutually agreeable times between the Site Reviewer and the Program
- Establish a secure and private, HIPAA-compliant, meeting platform
- Have an IT representative present or on stand-by

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2024 Site Visit Sample Agenda and Instructions

Program Responsibilities

- Submit the PRQ at least **60 days** before the site visit
- Upload a de-identified patient list to the "Site Visit Documents" link within the PRQ section of Qport
 - Notify the Site Reviewer when the list is posted
- Finalize the site visit agenda

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2024 Site Visit Sample Agenda and Instructions

Program Responsibilities

- Prepare the selected medical records **14 days** before the site visit
- Compose a list of questions
- Finalize the site visit agenda
- Check in with the Site Reviewer

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2024 Site Visit Sample Agenda and Instructions

Program Responsibilities (After the Site Visit)

- If advised by the Site Reviewer, upload additional documents within **3 business days**
 - Change to the PRQ and documents submitted after the 3-day deadline will not be accepted
- Complete the Site Visit Experience Survey (SVES) within **14 calendar days**

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2024 Site Visit Sample Agenda and Instructions

Site Reviewer Responsibilities

- Begin review of the PRQ **30 days** before the site visit
 - May ask questions
 - Request additional documentation
- Select medical records for review from the accession list **14 days** before the site visit
 - Site Reviewer will upload the list of selected cases to the "Site Visit Documents" link within the PRQ
- Submit presentation to the program contact **7 days** before the site visit

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2024 Site Visit Sample Agenda and Instructions

Site Reviewer Responsibilities (After the Site Visit)

- Advise the program if additional documents should be uploaded to the PRQ
 - Change to the PRQ and documents submitted after the 3-day deadline will not be accepted
- Review any additional documents
- Complete the Site Reviewer Assessment of the standards

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2024 Site Visit Sample Agenda and Instructions

Medical Record Review Process

- **60 days before** the site visit, upload **de-identified** accession list
 - All analytic breast cancer cases where treatment was provided at the program within the last calendar year
 - Accession number
 - Class of Case
 - Histology
 - Age
 - Definitive stage (stage 0, I, II, and III patients only)
 - Definitive surgical treatment (Breast Conserving Surgery, Mastectomy)
 - Double-check for patient identifiers!
- Upload the list into the Medical Records Review section of the PRQ

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2024 Site Visit Sample Agenda and Instructions

Medical Record Review Process

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 - All analytic breast cancer cases where treatment was provided at the program within the last calendar year
 - Accession number
 - Class of Case
 - Histology
 - Age
 - Definitive stage (stage 0, I, II, and III patients only)
 - Definitive surgical treatment (Breast Conserving Surgery, Mastectomy)
 - Double-check for patient identifiers
 - Treatment dates
- Upload the list into the Medical Records Review section of the PRQ

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2024 Site Visit Sample Agenda and Instructions

Medical Record Review Process

- **14 days before** the site visit, the Site Reviewer will review the list and select cases
 - Uploaded to PRQ section "Site Visit Documents"
- Site Reviewer will notify the program when the list of selected cases is available
- Program will prepare medical records for review
 - 20 malignant cases chosen from the accession list by the Site Reviewer
 - 10 benign cases chosen by the program
 - 5 must be atypical ductal hyperplasia (ADH), lobular carcinoma in situ, or atypical lobular hyperplasia (ALH)
 - 5 additional cases with any benign breast disease (e.g., fibroadenoma, mastitis, or nipple discharge)

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2024 Site Visit Sample Agenda and Instructions

Medical Record Review Process

- Malignant case review
 - Case abstract form (if available)
 - Imaging reports – mammogram, sonogram, and/or MRI
 - Method of diagnosis
 - Biopsy pathology with ER/PR/HER2
 - Surgeon's consultation notes
 - Plastic surgeon's consultation notes, if applicable
 - Surgical pathology report(s) and cytology report(s) relevant to the case – with ER/PR/HER2, and if applicable, genomic profiling
 - Operative notes
 - Staging form, if applicable
 - Medical oncologist's consultation notes and treatment summary
 - Radiation oncologist's consultation notes and treatment summary
 - Genetics referral or testing and pre/post-test counseling
 - Survivorship care plan

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2024 Site Visit Sample Agenda and Instructions

Medical Record Review Process

- Benign case review
 - Radiology report(s), if indicated
 - Surgical pathology report(s), if indicated
 - Surgeon's or another clinician's/provider's consultation note(s)
 - Operative report(s), if indicated
 - Genetics referral or testing and pre/post-test counseling, if indicated
 - Risk reduction discussion, where applicable

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2024 Site Visit Sample Agenda and Instructions

Medical Record Review Process

- For virtual medical record reviews:
 - **Medical records cannot be uploaded into the Quality Portal (QPort)**
 - QPort site is not HIPAA-compliant
 - Program must provide a HIPAA-secure platform for sharing medical record information

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2024 Site Visit Sample Agenda and Instructions

Completion of the NAPBC Templates

- Templates document compliance data
- Reviewed by the Site Reviewer before the site visit
- Standard 1.1: Breast Program Leadership Committee Annual Audit Worksheet
 - **Critical this template is completed in full**
 - Assists the Site Reviewer with locating when/where standards were discussed by the BPLC (meeting minutes)

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2024 Site Visit Sample Agenda and Instructions

Sample Agenda

- **Medical Record Review**
 - 2-3 hours
- **Breast Program Director Meeting**
 - 30 minutes
- **Multidisciplinary Breast Care Conference**
 - 60 minutes
- **Breast Care Team Meeting**
 - 60-90 minutes
- **Facility Tour**
 - 10 minutes
- **Summation Meeting with the Breast Program Leadership Committee**
 - 30 minutes

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