ACR Radiation Oncology Practice Accreditation Program (ROPA)
ACR Radiation Oncology Practice Accreditation Program
“Everything You Need to Know”

Brian T. Monzon MBA RT(R)(T)
Program Manager
Quality and Safety

Michael Ray
Program Coordinator, Quality & Safety/RO Accreditation

May 19, 2017
Webinar Goals

- Provide an overview of ACR and ROPA Website
- How to create user name and password
- Show the application process
- Learn the benefits/importance of accreditation
- Provide contacts and links for ROPA
- The webinar presentation will be followed by a Q&A session.
The content reviewer and staff members listed below have indicated they have no relevant financial relationships or potential conflicts of interest related to the course material.

<table>
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<tr>
<th>Name</th>
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Faculty / Presenters:

- The faculty members listed below have indicated they have no relevant financial relationships or potential conflicts of interest related to the material presented, and they also do not attend to commercial products/services.

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System Requirements for ROPA

- Operating Systems:
  - PC (XP or Greater)
  - Mac Computer (OS X and above)
- Web browsers:
  - Google Chrome (version 22+)
  - Firefox (version 27+)
  - Safari (version 5+)
  - Internet Explorer (version 10+)
WHO ARE WE?

- Historically
- ACR was founded in 1923
  - ROPA was established 1986
    - 30 year track record
  - Extension of Patterns of Care Studies
- Sponsored
  - NCI
  - ACR
ACR nationally recognized accreditation programs
ACR Accredited Facilities (July 28, 2014)

- Breast MRI: 1365
- Breast Ultrasound: 2039
- Computed Tomography: 6861
- Mammography: 8224
- MRI: 7142
- Nuclear Medicine: 3603
- PET: 1581
- Stereotactic Breast Biopsy: 1374
- Ultrasound: 4793
ROPA in the United States
WHO IS ACCREDITED IN RADIATION ONCOLOGY?

- As of October 21, 2016
  - 671 Facilities are Accredited
  - 67 Facilities are In Process
- “In Process”
- Deferred/submitting corrective action
- Site visit has not yet been completed
- Final report has not been written yet
ACR ROPA Committee
The ACR Committee for ROPA directs the program

- Christopher Pope, M.D., FACR
  ROPA Chair
- Seth Rosenthal, MD, FACR
  RO Commission Chair
- Matthew Pacella, M.S., FACR
  ROPA Physics Subcommittee Chair

ACR Staff:
- Brian Monzon, MBA, RT(T)(R)
- Melody Blake, BS, RT (R)(T)
- Shannon Rexrode M.Ed., RT(T)
- Mike Ray, ACR Associate
- Alan Hartford, M.D., FACR
  (Parameters and Standards Representative)-Liaison
- Shannon Fogh, M.D.
- Michael Haas, M.D.
- Warren S. Inouye, M.D.
- Rena Zimmerman, M.D.
- Join Y. Luh, M.D.
- Richard LaFontaine, PhD
- Tobin Hyman, MS
- Jennifer Johnson, M.S., M.B.A.
- Debbie Schofield, M.S.
- Niko Papanikolaou, Ph.D.
ACR Radiation Oncology Practice Accreditation Program

- The ROPA program provides radiation oncologists with a third party, impartial peer review, and evaluation of patient care. The facility’s personnel, equipment, treatment planning and treatment records, as well as patient safety policies, quality control/quality assessment activities, are assessed.
- Web based program launched in January 2011
- Application, interview and data collection forms, surveyor report and summary are all captured electronically
- Paperless
ACR Home Page

http://www.acr.org

Starting point
Access you can find majority of your information
Quality & Safety Tab
  Click on Accreditation
Accredited Facility Search
Click on Accreditation
Select Radiation Oncology Section
ACR Home Page cont.
http://www.acr.org/Quality-Safety/Accreditation

Useful Links
Appropriateness Criteria®
Practice Parameters
Radiation Oncology
Radiation Oncology Accreditation

GETTING STARTED

STEP 1: Program Requirements

Before applying for accreditation, please review the document below for a summary of the modality-specific program requirements.

- Radiation Oncology Practice Accreditation Program Requirements Updated 10-21-16

STEP 2: Frequently Asked Questions

- Radiation Oncology Practice Accreditation Program FAQ
- Radiation Oncology Practice Accreditation FAQ for Medical Physicists
- General Accreditation FAQ
Radiation Oncology Accreditation

- Select Radiation Oncology Section
- [http://www.acraccreditation.org/Modalities/Radiation-Oncology-Practice](http://www.acraccreditation.org/Modalities/Radiation-Oncology-Practice)
- Program Requirements
- Frequently Asked Questions
- Apply for Accreditation
- Additional Resources
01 Program Requirements

- Introduction
- Application for Accreditation
- Case Review
- On-Site Survey
- Defines Multiple Sites
- Personal Qualifications of Staff
- Staff Levels
- Continuous Quality Improvement
- Frequent Deficiencies
- Final Report
- Accreditation Status
- Marketing
- Application Renewal
- Appeal Mechanism
- Survey Fees
02 Frequently Asked Questions

Top questions about the ACR
ROPA
FML (Facility Master List)
Not included:

Focus Studies – Department
Quality Improvement that is
process related (how to fix it)

Outcome Studies – Generally
outcome studies deal with patient
response to treatment, such as
pain relief, skin reaction, disease
free interval.

02 | Frequently Asked Questions

- Radiation Oncology Practice Accreditation Program FAQ
- Radiation Oncology Practice Accreditation FAQ for Medical Physicists Updated 1-10-17
- General Accreditation FAQ
Register/Log In

Access to application
https://ropa.acr.org/pages/Login.aspx
04 ROPA Resources

- 2017 MIPS Improvement Activities Suggested for Radiation Oncology
- ACR ROPA Brochure
- Toolkit for Practice Sites Updated 3-8-17
- R-O PEER™ for Radiation Oncologists (MOC) Agreement
- ACR M-P PEER™ for Medical Physicists (MOC) Agreement
- ACR M-P PEER™ for Medical Physicist Group Practice (MOC) Agreement
- Radiation Oncology Consultative Surveys
- ACR Mini-Audit Survey
- Live Chat Support
Information Hub

https://ropa.acr.org

Links are at the bottom of page (Black Bar):

- ACR Appropriateness Criteria
- ACR Journal Advisor
- ACR R-O PEER
- ACR M-P PEER
- ACR Group M-P PEER
- Program Requirements
- Radiation Oncology Parameters
- Medical Physics Technical Standards
- Contact information
ROPA

New User Click on the section:
Create Facility Registration
Profile

Email-ID (User Name)
First Name
Last Name
Press Submit
User will receive an email to confirm account
Create a password
Confirmation of Email

Thank you for registering for The Radiation Oncology Practice Accreditation (ROPA) program. In order to access the online application, the account needs to be activated.

To activate your user account Click here.

After following the link to activate your account, you will be prompted to create your password.

Thank you,
Brian Monzon, MBA, RT(R)(T)
Program Manager
Radiation Oncology Accreditation Program
Phone: (800)770-0145
E-mail: bmonzon@acr.org

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Password Activate
8 Characters that include case sensitive alphanumeric and special characters (i.e. Welcome1!)
ROPA Practice Home Page

- Click on View Button to create an application:
Application Part I and II

- Part I gathers information about your facility; staffing, equipment, physical location
- Part II includes specific questions about the practice such as your Policy and Procedures, adherence to ACR Practice Parameters and Technical Standards
Practice-Application Sites

- Add Additional Site
- Open/Delete
- Blank PDF
Part 1 of ROPA Application

- Site Information
- Facility Type
  - Modalities
  - Treatment Planning System
  - Record and Verify System
- Patients and Equipment
- Staff
- Machine QA
- Physician Release Form
Part II of ROPA Application

- Name of Practice
- Which is your Main Site?
- Policy and Procedures
- QA and Improvement Activities
- Practice Self Assessment
- Compliance with ACR Practice Parameters and Technical Standards
- Organization Chart
- Survey Agreement
- Payment Invoice
- Checklist
- Schedule Dates
After Submitting Application

Hard Copies
  - Download Invoice
  - Blank PDF
  - Export Submitted Application

Site Status
Status Of Application

- Application Submitted
- Application Accepted/Resubmit
- Site Survey Scheduled
- Surveyors Assigned
- Census Sheet Unapproved
- Census Sheet Approved
- Surveyor Submitted Report
- Report Pending
- Accredited
- Submit CAP
- Renew/Reapply

### Practice History

<table>
<thead>
<tr>
<th>Practice Name</th>
<th>Accredited</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of sites</td>
<td>1</td>
</tr>
<tr>
<td>Application Submitted Date</td>
<td>09/06/2012</td>
</tr>
<tr>
<td>Application Accepted Date</td>
<td>09/06/2012</td>
</tr>
<tr>
<td>Scheduled Survey Date</td>
<td>11/09/2012</td>
</tr>
<tr>
<td>Current Status</td>
<td>Reviewers Report Submitted - Accredited</td>
</tr>
<tr>
<td>MO Surveyors Assigned</td>
<td>IOD2-ACR</td>
</tr>
<tr>
<td>Physical Surveyors Assigned</td>
<td>Albert Einstein</td>
</tr>
<tr>
<td>Committee Reviewers Assigned</td>
<td>IOD Committee ACR, Physical Committee ACR</td>
</tr>
</tbody>
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Checklist

- A minimum of 2 computers with Internet Access
- 2 Monitors per computer (The two monitors will be connected to one computer to view your EMR(s) and for data entry to website)
- Two Staff members (preferably a Dosimetrist/Physicist) available all day (for single and multi-sites) to assist with EMR/Paper Charts
- A quiet room (preferably a conference room) with a minimum two chairs for the surveyors
Stopping points on ROPA

- Can’t Submit the Application
- What is an FML number?
- I cannot upload a e-signature
- Where do I mail the payment to?
- When do I schedule my site survey?
- Submitting cases
Can’t Submit the Application

Make sure everything is filled out
Make sure there are no “X” marks on the left menu
What is an FML number?

If you are new applicant, ACR will assign FML number
If renewing it’s located on the front page of the final report and the accreditation certificate
Need number if you select Renewal on Part I Page 1 of application
Call ACR and we will provide the FML number
I cannot upload an e-signature

Recommend Paint Brush
Sign on blank paper and scan
Select Sign on hard copy
Mail with Check
Each Physician (currently practicing) needs to sign it
Medical Director
Where do I mail the payment/Documents to?

ACR
1891 Preston White Drive
Reston, VA 20191
Attn: Radiation Oncology Practice Accreditation (ROPA) Program
When do I schedule my site survey?

Part II Last Page
Recommend 30-90 days after you submit your application
Number Days will be determined by number of sites
  1 Site = 1 Day
  2-4 Sites = 2 Days
  5-7 Sites = 3 Days
  8 + Sites = 4 Days
Cannot schedule on Saturday or Sunday
ACR can update schedule dates
Census Sheet

Select Census Sheet

For Single Sites
- 25 Cases

Multi Sites
- 25 At Main Site
- 3 Cases per Treatment Area at each facility

Types of cases
- Breast (x5)
- Prostate (x5)
- Head and Neck (x5)
- Lung (x5)
- Generic (x5)

Modalities
- Conventional
- IMRT
- SRS/SBRT
- HDR

- 2 Cases per physician
Census Sheet

Enter Patient ID
Enter Final Treatment Date
Select Treatment Code
Name (Facility)
Enter MD
Enter Disease Site
Add New Patient
  Save
  Cancel
  Delete

*Facility can add, edit, and delete cases before ACR approves. Once cases have been approved, facility cannot update or change cases.
Accreditation Program Goals

- Provides impartial, third party peer review
- Evaluate and promote quality of care
- Recommendations for practice improvement
- The accreditation process is designed be collegial and not punitive in nature
Benefits of Accreditation

- Offers specific recommendations for improvement from experienced, practicing radiation oncologists and practicing medical physicists
- Survey report may support requests for increased staffing and equipment needs
- As an ACR accredited facility, you have exclusive access to an online marketing kit customized for radiation oncology
ROPA Program Growth 2006 – 2016

Applications Received

- 2015-16
- 2014-15
- 2013-14
- 2012-13
- 2011-12
- 2010-11
- 2009-10
- 2008-09
- 2007-08
- 2006-07
VA Hospital Contract

- 2008 ACR Awarded the Contract
- 2011 Competed All Facilities
- 2012 Phase 3 of contract – Renewing all facilities
- 2015 Competed second cycle – Reaccreditation of all facilities
- 2017 Beginning third cycle
ACR Radiation Oncology Practice Accreditation Program

- Apply today
  - Provide available dates 3 months after submitting application
  - Final Report provided an average 4-6 weeks

- Renewals
  - Begin application 9 months to a year
  - Submit 3-6 months before accreditation expires
Why is Accreditation Important?

- Evidence of achievement in the areas of quality and patient safety
- Education and learning process for staff
- Demonstrates commitment on the part of the facility in meeting the highest standards in the field of radiation oncology
- Enhances credibility in the eyes of the public
- Broader recognition by peers in the field
Survey Fees

- Single Site $9500.00*
- Each additional site $3000.00*
- *Includes surveyor travel
Multi Site Survey Criteria

- The physician group has a single medical director.
- The physicist group has a single director.
- Physicians’ peer review includes all the practice sites.
- All practice sites utilize uniform treatment methods.
- All practice sites have uniform chart organization and forms.
- Geographic accessibility (site(s) is within one hour drive from the main site).
Coordinating Site Visit

- A program specialist will reach out to the facility’s Point of Contact (POC)
- Program specialist will coordinate schedule
- Clarification:
  - Location
  - Parking
  - Computer
  - Staff Availability
How long does the survey take?

- A single site is completed in one day (generally between 8 a.m. to 4:30 p.m.); multi sites vary depending on number of sites, physicians and location.
What happens during the on site survey?

- The site visit is always conducted by a board certified radiation oncologist and qualified medical physicist.
- First activity will be an interview with key personnel (Chief MD, chief physicist, chief therapist, dosimetrist, RN, etc.) followed by a tour of facility.
- After completion of tour, surveyors will begin chart reviews. The facility must provide one or 2 staff members to assist with navigating through charts/EMR, etc.
- Facilities must provide Internet access.
-On Site Survey, cont.

- Physicist interview (time to be determined on site)
- Review of QA manuals, P&P, throughout day
- “Exit Interview” prior to departure with same personnel from AM interview. The team will not give their recommendations but will use this opportunity to clarify any issues, etc.
ACR ROPA accreditation outcomes

- 3 Categories:
  - Accreditation
  - Deferral
  - Denial of Accreditation
ACR ROPA Accreditation

- Accreditation Cycle is 3 years
- Even if your facility is accredited, you will receive recommendations for improvement
- Reaccreditation – did you address previous recommendations?
Deferral of Accreditation

- 90 days to submit Corrective Action Plan (CAP)
- Possible Self-Assessments
- Following CAP approval by the ACR ROPA committee, the facility will either receive a report and their ACR certificate or recommend a follow-up visit
Corrective Action Plans (CAP)

- Need to address each of the recommendations in the report
- May involve submission of additional documentation such as physician peer review, physics report, etc.
Denial of Accreditation

- 90 days to submit CAP
- After committee approval of CAP, facility must participate in a resurvey (6-9 months after response to CAP is received)
- Re-application fee ($5000) required
Reasons for Deferral

- Recommendations for improvement are based on nationally recognized parameters, including ACR and American Society for Radiation Oncology (ASTRO) parameters, ACR, and American Association of Physics in Medicine (AAPM) technical standards, and AAPM Task Group reports.

- ACR Practice Parameters and Technical Standards serve as the foundation for all of our accreditation programs, although accreditation criteria may be more stringent.

- Not all of these are “deal breakers”, in other words, leading to denial of accreditation.
Reasons for Deferral – (MD) Based on the Radiation Oncology Parameters/Standards

- Lack of physician peer review
- Lack of weekly on treatment notes
- Inadequately documented H&P, staging, work-up information, follow up information in the chart
- Treatment outside the accepted standard of care
- Inadequate portal imaging policy
- Incomplete prescriptions, prescription not signed prior to first treatment
- Lack of implementation of prior correction action items (from previous survey)
- Lack of physician coverage
Reasons for Deferral (Physics Issues)

- Treatment machine calibration/output within acceptable national standard (AAPM TG 40, 51, 142)
- Treatment machine daily, monthly, and annual QA records (AAPM TG 40, 51, 142)
- ADCL calibration of equipment within last 2 years
- Treatment planning system acceptance, commissioning, and periodic testing records
Reasons for Deferral (Physics Issues)

- Documentation of training for personnel involved in special procedures (SRS, SBRT, TBI, TSI, HDR, LDR)
- Records of violation report from NRC/State
- Physics policy and procedures manual
- Independent calibration/output check of treatment machine (TLD’s, RPC, or independent physics peer review)
- Staffing level of physicist/dosimetrist
Reasons for Deferral (Physics Issues)

- QA documentation of 3D conformal, IMRT, SRS, SBRT treatment plans
- Documentation of dose volume constraints and records of DVHs
- Imaging QA (Simulator, PET/CT, IGRT, CBCT)
- Physics review of treatment chart (weekly, EOT)
- Brachytherapy documentation of written directive, machine/source/plan QA, total dose, safety survey
The final report is currently issued approximately 4-6 weeks following the survey.

The final report will contain:
- Accreditation Decision: PASS, DEFER, DENY
- Staffing/Resources Table
- Recommendations for improvement based on Parameters/Standards and AAPM reports
- Link to Media Kit for marketing accreditation
Final Report (cont.)

- Medical Director only receives the final report (Survey Agreement)
- Packet will include: (Accreditation Granted)
  - Final Report
  - ACR ROPA Certificate
  - ACR Marketing Tool Kit
  - ACR Decal
Consultative Survey

- Issues within the Practice
- Does not lead to accreditation
- Includes all of the activities performed during accreditation but with a special emphasis on areas identified by facility as needing a more comprehensive review
- 2 day survey with a 3 or 4 person team
- Cost $11,500 and travel and expenses
Mini Audit

- Evaluates current compliance through a “mock survey” process
- May lead to accreditation if a practice applies within six months of the scheduled mini-audit
- Includes all of the activities performed during accreditation but the team will provide immediate feedback whether the practice meets the Radiation Oncology Accreditation Program Requirements
- 1 day survey with a 2 or 3 person team
- Cost $5,000 and travel and expenses
Future of ROPA

- National Data Registry for RO
- Chart Rounds/Peer Review
- Radiation Oncology Centers of Excellence
- Scoring System
- Automated Final Draft
- Quicker Scheduling Process
- Metrics/Trends
- Streamlined Process
- Feedback from all users
- International Accreditation
Links for ROPA

- http://www.acr.org
- https://ropa.acr.org
- http://www.acraccreditation.org/Modalities/Radiation-Oncology-Practice
Questions - Contacts

- Brian Monzon – Program Manager
  - bmonzon@acr.org (703) 476-1116 (x6116)
- Melody Blake – Program Specialist
  - mblake@acr.org (800) 227-5463 (x6231)
- Shannon Rexrode - Program Specialist
  - srexrode@acr.org (703) 390-9824 (x6824)
- Mike Ray - Program Coordinator
  - mray@acr.org (800) 770-0145 (x6867)