

I. Policy

This policy describes the responsibilities, composition and operation of the administration of the Cancer Center of Excellence designation.

II. Authority

A. Chapter 381.925, *Florida Statutes*, Quality Cancer Care

III. Procedures**A. Application cycles**

1. The Department conducts two application cycles per year, one in the spring and one in the fall. However, the Department may change the timing of the application cycles due to extraordinary circumstances. The Department publishes the timeframes for the application cycles on its website by January 31, 2014 and annually thereafter by December 31. The Department will accept applications for at least four weeks and no longer than six weeks in each application cycle.
 - a. The Spring application cycle will begin as early as January 1, but no later than February 1. The deadline for submissions may be as early as February 15, but no later than March 30.
 - b. The Fall application cycle will begin as early as July 1, but no later than August 1. The deadline for submissions may be as early as August 15, but no later than September 15.
 - c. All applications are due by 5:00pm eastern time on the due date for each application cycle. Applications not submitted by the due date may be submitted to the following application cycle.

B. Submission of Applications

1. Applications and all documentation are submitted using an electronic system specified by the Department. The system will allow staff at organizations to register for user accounts; complete an application form and attach supporting documentation; submit the application; and track the Department's review.
2. An application consists of:
 - a. An application form, including a list of supporting documents for each Standard
 - b. An overview of the organization's cancer program (ten pages maximum)

- c. Supporting documentation, including copies of all required materials, and other documentation showing the organization meets all Standards.
 - d. A copy of the application with original signatures of the required organizational officials, in addition to scanned copies of signatures as part of the supporting documentation.
- C. Departmental review of applications
 - 1. Within 5 days of receipt of the application, the Department determines eligibility and informs the site if it is not eligible, for example, because it is not accredited by the Commission on Cancer.
 - 2. Within 30 days of receipt of an application, the Department issues a Departmental Review Report identifying required revisions for each Standard, if any. This report provides specific suggestions about how to revise the application. For example, if the Report identified the need for revisions for Standard I-6, it will include specific recommendations such as the following: "Attach treatment plans, survivorship care plans, and a summary of the evaluation of care coordination."
 - 3. The Department's review is based solely on the materials submitted and does not include information from any discussions with the organization.
 - 4. The organization responds to each required revision in the Departmental Review Report. At this time, the organization may communicate with the Department about proposed revisions and seek Department comment on proposed revisions to the materials for each Standard. Once the responses to all Standards are complete, the organization submits a revised application. The revised application must be submitted within 30 days of receiving the Departmental Review Report.
 - 5. Upon submission of a revised application the Department confirms the revised application is complete and that all revisions have been made, and notifies the organization that the application is ready for review by a team of evaluators.
- D. Review by team of independent evaluators
 - 1. The Department maintains a list of evaluators with sufficient qualifications and expertise to conduct a rigorous evaluation of the organization's application. Evaluators are nationally recognized experts in cancer care and research. Evaluators may be drawn from academic medical centers, hospitals, and government agencies such as the National Institutes of Health or Centers for Disease Control and Prevention. In general, evaluators will hold a rank of full professor or chief, or leadership

positions such as chief of medicine or provost. Whenever possible, evaluators will be members of the National Academy of Sciences or Institute of Medicine. Evaluators make recommendations about whether Standards are met.

2. Within 10 days of acceptance of a revised application, Department staff will recommend to the Surgeon General a team of independent evaluators, confirm each person does not have a conflict of interest, and document that no conflict of interest exist by having persons sign an attestation prior to being appointed by the Surgeon General. The Surgeon General will appoint each member of the evaluation team and designate a team leader. The team shall consist of five evaluators to be selected, in any combination, from the following:
 - a. No more than five health care practitioners or health care facilities not licensed in this state which provide health care services involving cancer diagnoses or treatment;
 - b. No more than three members from the Florida Cancer Control and Research Advisory Council;
 - c. No more than two members from the Biomedical Research and Advisory Council; and
 - d. No more than one layperson who has experience as a cancer patient or as a family member of a cancer patient if that person or his or her family member did not receive care from the applicant or providers being evaluated.
3. Once the team of evaluators has been identified, evaluators are granted access to the electronic system to conduct a peer review of the organization's application to determine if the organization meets all Standards. Evaluators have at least 30 days to conduct this review.
4. Prior to the end of the independent review period the team leader will determine if a site visit should be scheduled.
5. If no site visit is scheduled, reviews from each member of the evaluation team are forwarded to the Surgeon General.
6. If a site visit is indicated, two evaluators may conduct an on-site visit. The Surgeon General specifies which evaluators from the team are to conduct a site visit. An onsite evaluation is scheduled in approximately 30-60 days to verify application materials. The on-site evaluation is a public meeting as defined in Chapter 286, Florida Statutes.
7. Within 14 days of the site visit, evaluators submit a Site Visit Report to the Department.

8. The Department provides the Site Visit Report to the organization. The organization has 30 days to respond with clarifications or plans for improvement.
9. The Site Visit Report and the organization's response, if any, is communicated to the other evaluation team members, who have an opportunity to revise their evaluations. The revised evaluations are provided to the Department within 30 days. The review of the site visit report and organization's response is a public meeting as defined in Chapter 286, Florida Statutes.
10. Within 30 days of receiving a site visit report, all evaluation team members submit a revised evaluation.
11. Once the revised evaluations are complete, the results are provided to the Surgeon General.

VI. History Notes

The Public Health Research Unit, in the Division of Community Health Promotion is responsible for this policy.

Created August 5, 2013

VII. Signature Block with Effective Date

John H. Armstrong, M.D. F.A.C.S.
Surgeon General and Secretary of Health

Date