NCRA FORMAL EDUCATION PROGRAM GUIDE TO ACCREDITATION
The National Cancer Registrars Association Accreditation of Formal Education Programs in Cancer Registry Management (CRM)¹

I. Introduction

The National Cancer Registrars Association (NCRA)
NCRA is a not-for-profit association, chartered in May 1974 and incorporated in October 1976. NCRA represents cancer registry professionals and Certified Tumor Registrars (CTRs). NCRA’s primary focus is education and certification with the goal to ensure all cancer registry professionals have the required knowledge, skills, and abilities to demonstrate excellence in their chosen field. With over 5,800 members, NCRA is the largest professional organization for cancer registrars representing the various types of institutions with an interest and responsibility in cancer data and surveillance.

The Profession
Cancer registrars possess the clinical and technical knowledge and skills necessary to maintain components of the disease-related data collection systems consistent with medical, administrative, ethical, and legal and accreditation requirements of the health care delivery system. In all types of facilities, and in various locations within a facility, cancer registrars manage and analyze clinical cancer information for the purpose of processing, maintaining, compiling and reporting health information for:

- Research
- Quality management and improvement
- Facility planning and marketing
- Long-term follow up
- Cancer program development
- Cancer prevention and surveillance
- Survival data
- Compliance with reporting standards
- Evaluation of treatment results
- National cancer program accreditation

¹ Cancer Registry Management (CRM) is the familiar title that identifies programs that educate for the collection, analysis, and management of accurate and complete cancer data that can be used for cancer control and epidemiological research, public health program planning, and patient care improvement. Programs in the field may also be titled Cancer Information Management (CIM) and/or Cancer Data Management (CDM). For purposes of this document, our reference to CRM programs include those called CIM and/or CDM.
Formal Education Program Review Committee

NCRA’s Formal Education Program Review Committee (FEPRC) is responsible for establishing, maintaining, and applying accreditation standards (hereafter “standards”) that ensure the quality and continuous improvement of cancer registry education and reflect the evolving practice of cancer registry management.

Role and Value of NCRA Formal Education Program Accreditation

NCRA's interest in accreditation is based upon the belief that professions which provide services to the public have an obligation to ensure, as far as possible, that services provided by its members are of high professional quality. One effective way in which this obligation can be met is by establishing appropriate standards of educational quality and publicly identifying those educational programs that meet or exceed these standards. NCRA Formal Education Program accreditation is intended to protect the interests of students; benefit the public; and improve the quality of teaching, learning, research, and professional practice in the field of cancer registry.

NCRA accredited programs are given access to support and a variety of resources intended to guarantee continued excellence in the program. NCRA offers several marketing opportunities for accredited programs to communicate with potential students and post job vacancies for instructors. The NCRA Job Bank is available to students who are searching for clinical placement sites and positions in registry facilities.

Most importantly, students who successfully complete the curriculum from an NCRA-accredited program, and 160 hours of a clinical practicum experience, are eligible to apply to sit for the Certified Tumor Registrar (CTR®) Examination. Visit the web site maintained by the NCRA Council on Certification for more information on eligibility routes to the CTR exam.

II. Accreditation Classifications

When applying for NCRA accreditation, programs may be classified in one of two accreditation options:

Accreditation – NCRA accreditation is awarded to a fully operational Cancer Registry Management (CRM) program that is in compliance with the standards and prepared to graduate students within one-year of the accredited status.

Provisional Accreditation - Provisional accreditation status is awarded to an applicant program that may not meet all the accreditation standards and has not graduated students from a CRM. Students enrolled in a program that holds provisional accreditation status, are eligible to apply the academic course work and clinical practicum hours earned while in the program toward their eligibility to sit for the CTR exam. Provisional status requires the program become fully compliant with the standards within two years. This allows new programs to evolve over time and to secure necessary resources to administer the program while being closely monitored by NCRA.

Programs must meet, at a minimum, specific standards (#2 and #3) at the time of application for provisional status, and demonstrate movement toward compliance of all standards during the two-year reporting process, with the expectation that full compliance will be met by the end of the provisional time period. An institution may withdraw its application for provisional status without prejudice at any time prior to NCRA taking final action.

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Timeline of Provisional Status
The program seeking provisional status must submit:

1. Formal application submitted to NCRA for evaluation 18 months in advance of enrolling students in the program.

2. Six month progress reports to the NCRA FEPRC documenting compliance with standards.

3. Completed application for full accreditation submitted to NCRA no later than 24 months after approval of the provisional application and the graduation of students.
Accreditation and Accreditation Cycles
The Program Director of the institution must sign the application for accreditation. One electronic copy of the application for accreditation is submitted to:

Chair, Formal Education Program Review Committee
National Cancer Registrars Association
1330 Braddock Place, Suite 520
Alexandria, VA 22314
Education@ncra-usa.org

Communications should be directed to the Manager of Education Programs at (703)299-6640 X314.

Application materials for NCRA Accreditation are available online in the NCRA Accredited Program section of the web site. See Resources to Help You Get Started.

An institution may withdraw its application without prejudice at any time before final action by NCRA. The program retains the right to reapply at a later time without prejudice. In addition, NCRA has the authority to delete a program from the list of accredited programs when NCRA concludes that the program is no longer in existence. In such instances, NCRA will notify the program of the pending action.

III. Accreditation Process

FEPRC Review of Application for Accreditation
The FEPRC will review an application and adhere to rules guiding an ethical decision-making process. To avoid any actual or implied conflict of interest, the following procedures are followed:

(a) Members of the FEPRC will recuse themselves from a meeting during discussions about any accreditation decisions involving their own institution.

(b) Members of the FEPRC must refrain from participating in the consideration of an accreditation decision whenever, for any reason, there is a conflict of interest or the appearance of a conflict of interest.

The FEPRC will vote to either:
(a) Award accreditation for three years;
(b) Deny accreditation of a new applicant program if, in the opinion of the FEPRC, the accreditation application does not meet the requirements of the standards.

The FEPRC’s decision is transmitted in writing to the program director within 30 days of the decision.
Site Visit Determination
On occasion, the FEPRC, in consultation with the program director, may determine that a site visit is warranted in order that the FEPRC gather additional information about a program before an accreditation decision is made. At this time, the school is required to submit an additional site visit fee to NCRA, to be determined by the FEPRC. The FEPRC will work with the program to coordinate the logistical aspects of the site visit. The FEPRC will submit a tentative site visit agenda to the program at least 30 days before the visit.

The program director must ensure that the site visit is announced in a timely manner so that faculty, administrators, and students have the opportunity to address the member(s) of the site visit team.

Site visitors are responsible for a comprehensive review of the program and for identifying documentation relative to all the standards for NCRA Formal Education Program accreditation. All information gathered at the site visit is treated in a strictly confidential manner. The team member(s) will perform the following duties:

- Confer with the institution’s administrators on plans for the program;
- Verify program administrative structure; library holdings;
- Interview the academic staff regarding the academic programs;
- Select and review materials and all documentation on the curriculum and academic program;
- Select and review materials and all documentation on clinical education;
- Select and review student records of academic and clinical experiences;
- Gather information relative to the FEPRC’s identified concerns or requests for clarification from review of the application for accreditation.

Throughout the site visit, open discussion between the site visit team and all individuals interviewed is encouraged. The site visit team will provide an exit report to the program director to clarify or verify information that has been collected. The program director is encouraged to invite interested individuals, such as the program's instructional staff and university administrators, to the exit report meeting. During the exit report, and indeed at any time during the site visit, the site visit team cannot express any opinions or recommendations concerning the program's prospects for accreditation.

At the conclusion of a site visit, programs are asked to complete an evaluation of the member(s) of the site visit team, as well as the accreditation process. These written site visitor evaluations form part of an ongoing assessment process that is carried out by the FEPRC on an annual basis.

Review of Site Visit Report
The site visit team submits a written report to the FEPRC within 30 days of the visit. This report includes a summary of the site visit team’s observations regarding each standard and any information not included in the application. The observations on which the site visitors report must be supported by documentation. Site visit reports must summarize the program's strengths and limitations and supply explanatory information. The site visit report must not include any recommendations concerning accreditation. All site visitors must sign site visit reports.
The chair of the FEPRC sends the site visit report to the director of the program and the institution's president or designee within 10 days of receipt, with an invitation to review and respond to the report. Within 30 days of the date of the letter, the program director must provide to the FEPRC chair a written response that comments on the accuracy of the information contained in the site visit report, any changes in the program since the site visit, and planned changes.

The program’s response to the site visit report is shared with the FEPRC. The committee will have two weeks to provide additional comments to the chair of the FEPRC.

To ensure confidentiality and objectivity, individual members of the NCRA office staff and the FEPRC are prohibited from responding to requests from anyone for information about the accreditation review. Procedural questions regarding the conduct and report of the site visit must be directed to the chair of the FEPRC. The FEPRC has sole authority to make official accreditation decisions for a program and identify any opinion that may reflect findings different from those reported by the site visit team.

**Application for Reaccreditation**

NCRA awards reaccreditation to programs in good standing, as determined by successful annual reports, for a maximum of three years. A statement of concerns may accompany the letter awarding reaccreditation to assist the program in conducting self-evaluation prior to the next annual report.

**FEPRC Action on Applications for Reaccreditation**

Upon completion of its review, the FEPRC will take one of the following actions described below:

(a) Established programs that seek reaccreditation status will retain accredited status while the application is reviewed.

New accreditation cycles will be established when approved by NCRA and will be assigned by the FEPRC according to the review date. All programs are notified of their status following the review by the FEPRC. Reaccreditation is awarded for a maximum of 3 years, subject to review of annual reports by the FEPRC.

(b) Place an accredited program on probation if the reaccreditation application does not meet the requirements of the standards. The program is expected to meet the requirements of the standards identified by the FEPRC by the end of the probationary period. The probationary period is for one-year.

**FEPRC Action on the Withdrawal of Accreditation**

The FEPRC may withdraw accreditation from an institution for the following reasons:

(a) The program has discontinued the accredited CRM program. Withdrawal of accreditation includes the removal of any information identifying the program as accredited by NCRA on the NCRA website, NCRA printed material, and the institution’s academic program listing on their website.

(b) Withdraw accreditation from a program if, upon FEPRC review of a reaccreditation application, or probationary report the program does not meet the requirements of the standards.
The FEPRC will notify the program's director and/or designee that accreditation has been withdrawn. Notification also includes justification for the decision, and informs the program of its opportunity to request a further consideration review of the decision by the FEPRC, and subsequently, to appeal the decision. If the program chooses to request a further consideration review, the request must be received within 30 days from the date of notification. Further consideration is the mechanism whereby the program can present written documentary evidence of compliance with the appropriate standards. By exercising this prerogative, the program asks the FEPRC to reevaluate its decision not to reaccredit. With the request for a further consideration review, the program must submit written documentation to justify why reaccreditation should not be withdrawn. If the program does not exercise its further consideration option, the FEPRC's decision to withdraw accreditation is final and cannot be appealed.

Within two months of receiving the program's response to the further consideration notification, the FEPRC makes a decision to reaccredit, place the program on probation, or withdraw accreditation. Notice of withdrawing accreditation includes a statement justifying the decision and is sent to the program director.

**Appeal of Decision to Withdraw Accreditation**

A program may appeal a decision to withdraw accreditation if:

(a) The program can prove that FEPRC decision was arbitrary, capricious, or not supported by substantial evidence in the record on which the FEPRC took action;
(b) The procedures used to reach the decision were contrary to accreditation policies and procedures.

A FEPRC decision can be appealed only if the institution has exercised its option to undergo further consideration of that decision and that review has been completed in accord with procedures specified in this manual.

When accreditation or provisional status is withdrawn, a copy of the current appeal procedure is sent to the program. The program and/or its institution may appeal the FEPRC’s decision to an Appeal Panel. Within 60 days of the date of the FEPRC’s letter containing the FEPRC's decision, the program shall submit its appeal to the NCRA Department of Education. The appeal should include a full written explanation of the grounds for appeal.

Decisions of the Appeal Panel are submitted to the FEPRC for final action consistent with the findings of the Appeal Panel. No change is made in the program’s accreditation status during the appeal process; that is, during the appeal process; accredited programs remain accredited and unaccredited programs remain unaccredited. No public notice is made until the Appeal Panel reaches a decision. If the program does not submit an appeal within 60 days of the date of notification of the accreditation decision, then the decision to withhold or withdraw accreditation or reaccreditation becomes final.
Accreditation Follow-up Review(s) and Actions
In order to maintain accreditation, programs must submit various reports for FEPRC approval, as described below.

Annual Reports
An accredited program must submit an annual report to NCRA according to the schedule assigned by the FEPRC in its review decision letter following the previous review. The purpose of the annual report is to document any changes that have taken place since accreditation and to ensure the program’s continuing compliance with the standards. The FEPRC reviews the annual report to determine whether a program appears to remain in compliance with the standards and to gather statistical information on each program.

If an obvious omission is noted in an annual report, the program will be notified and asked to supply additional information. If the annual report is not received within 45 days of the due date, the program’s director is notified.

Probation Reports
After the FEPRC has placed a program on probation for non-compliance with the standards, the program must demonstrate compliance by submitting a probation report no later than one year from the date of the letter transmitting the probation decision. A program on probation maintains its current accreditation status and will be required to submit an annual report on the original due date. Probationary status remains in effect until the FEPRC makes a decision, to reaccredit, withdraw, or grant to extend probation for one-year.

Substantive Change Plans
At times, substantive changes occur in a program that may have a direct and significant impact on the program’s ability to comply with the standards. Types of substantive changes include those that:
(a) Alter the mission, goals or objectives of the accredited program;
(b) Alter the control of the accredited program;
(c) Allow 50% or more of academic instruction from the accredited program to be in a format significantly different from what was originally accredited, or
(d) Change or add programs at a degree level different from that which is included in the program's original accreditation.

To assess the continued quality of education being provided to students in NCRA-accredited programs and the program’s continued compliance with the standards, the FEPRC must review and approve substantive changes that occur between scheduled review periods. The FEPRC requires that the program submit a Substantive Change Plan to the FEPRC describing the proposed change(s).

Examples of substantive changes in the delivery of education covered by this policy are the following:
a) A change in a degree level (e.g., certificate to associate’s) from that which was originally accredited;
b) An change in the of a method of learning and/or instructing (e.g. online/blended) to an accredited program;
c) The establishment of a consortium which will include the accredited program;
d) The establishment of a contractual arrangement with a third party that will impact the existence of the accredited program.
The FEPRC will evaluate whether the proposed change affects the accredited program’s ability to maintain compliance with the standards. Site visits will be conducted if necessary.

Upon review of the Substantive Change Plan by the FEPRC, the options available are the following:

a) Continue accreditation,
b) Place the program on probation,
c) Withdraw the program’s accreditation.

A program whose accreditation is withdrawn has the option to request further consideration of the decision by the FEPRC and, subsequently, to appeal the decision, as noted above.

Public Notice of Accreditation Actions

The purpose of NCRA Accreditation is to identify those education programs that meet and maintain standards for education for professional development in Cancer Registry Management. A roster of the NCRA-accredited programs is posted on the NCRA web site.

Programs may use the following language to publicize their NCRA accreditation status in catalogs, Web sites, or in recruitment literature:

Accredited
The [degree designator] education program in Cancer Registry Management at [name of institution of higher education] is accredited by the National Cancer Registrars Association, 1330 Braddock Place, Suite 520, Alexandria, VA 22314.

Provisional status for accreditation
The [degree designator] education program in Cancer Registry Management at [name of institution of higher education] is a provisional applicant for accreditation by the National Cancer Registrars Association, 1330 Braddock Place, Suite 520, Alexandria, VA 22314. Provisional is designated a "pre-accreditation" status, awarded to developing or emerging programs for a maximum period of two years. Students who complete the program while the program is in provisional status are eligible to sit for the CTR Examination.

A program that provides inaccurate or misleading information concerning its accreditation status, violates the Standards of Formal Education Programs in Cancer Registry Management. If an institution or program misrepresents or distorts any action by the FEPRC with respect to any aspect of the accreditation process, its accreditation status, or final FEPRC accreditation actions or decisions, the FEPRC will notify the chief executive officer of the institution and the program director, informing them that corrective action must be taken. If corrective action is not taken, the FEPRC will release a public statement that provides correct information and may invoke other sanctions as deemed may be appropriate.

Accreditation Fees

The applicable fee must accompany applications for initial accreditation and reaccreditations, and annual reports. In cases when a site visit is necessary, a separate site visit fee is also charged. All reviews of accreditation applications will commence when the FEPRC has received all application materials and the appropriate fee has been paid in full.
The current fee schedule is as follows:

**Initial or Reaccreditation Application Fee:** $500  
**Annual accreditation fee:** $200  
**Site Visit Fee - $1750 per Committee Member**

The Chair of the FEPRC and/or members of the FEPRC are available at any time during the accreditation process to provide ongoing guidance to programs.

The FEPRC and staff members may be contacted through the NCRA national office at:

**National Cancer Registrars Association**  
1330 Braddock Place, Suite 520  
Alexandria, VA 22314  
Ph: 703-299-6640 ext. 314  
Fax: 703-299-6620  
E-mail: Education@ncra-usa.org
Accreditation Standards for NCRA Formal Education Programs in Cancer Registry Management

I. Introduction
NCRA is committed to ensuring that quality education in Cancer Registry Management is provided to the public. Consequently, NCRA maintains a system of accreditation for formal education programs that provide entry-level professional preparation with a major emphasis in Cancer Registry Management. The accreditation program, which includes both the setting and implementation of standards is conducted by the NCRA Formal Education Program Review Committee (FEPRC). The FEPRC is the administrative body for the accreditation of cancer registry management programs of formal education programs at the certificate and degree level, leading to the eligibility to apply for the Certified Tumor Registrar (CTR®) examination, throughout the United States and abroad.

The FEPRC has identified five components of cancer registry education essential to achieving competency in the field and has established the standards accordingly:

- Standard 1: Administrative Structure and Governance
- Standard 2: Faculty/Instructional Staff
- Standard 3: Curriculum (Academic and Clinical Education)
- Standard 4: Students
- Standard 5: Program Resources

II. Eligibility
To be eligible for accreditation, programs must meet the following criteria:
a) The applicant institution must be accredited by a recognized agency such that credits earned are transferrable;
b) The applicant institution must offer specialty courses in cancer registry management as part of an associate’s degree, a baccalaureate degree, or a certificate program, that will fulfill the requirements to apply for the CTR Exam.

III. Standards and Implementation
The FEPRC has adopted the following standards as necessary conditions for the accreditation of eligible formal education programs. Programs must satisfy all standards to be awarded accreditation. The FEPRC is responsible for evaluating the adequacy of an applicant program's efforts to satisfy each requirement. The FEPRC recognizes that each of the standards may be satisfied by a variety of means.

Compliance with the following standards represents the minimum requirements for Accreditation.
1.1 The program's mission, goals, and objectives are consistent with NCRA - recognized national Standards for Accreditation for entry into professional practice and with the mission of the institution.

The application must include the mission statements of the institution and college as well as of the program. The program faculty and professional staff must evaluate, on a regular basis, the consistency of program, its institutional goals and objectives, and the extent to which they are achieved.

1.2 The program conducts ongoing and systematic assessments of academic and clinical education and performance of students and graduates and allows students ongoing opportunities to assess their program. Results of the assessments are used to plan and implement program improvements that promote high-quality educational experiences for students.

The program will detail the procedures followed in evaluating the quality, currency, and effectiveness of its education program, the academic and clinical preparation of its students, the professional performance of its graduates, and the process by which it engages in systematic self-analysis. The program will document the methods used to evaluate each component and the schedule on which the evaluations are conducted.

The program provides students with instructions to log in to the NCRA Center for Cancer Registry Education as part of their program orientation. Students complete an informational survey and receive information regarding access to NCRA student benefits.

1.3 The program must document student progress toward completion of the certificate or degree and professional credentialing requirements, and make this information available to assist students in qualifying for certification.

The program will maintain accurate and complete electronic records throughout each student’s enrollment and make them available to students. The program will maintain documentation on each student planning to apply for professional credentialing in sufficient detail so that completion of all academic and clinical requirements can be verified. The program will provide Career Counseling Services for achieving CTR status and refer students to the NCRA Council on Certification Web site.

1.4 Information about the program and the institution is provided to students and to the public that is current, accurate, and readily available.

Catalogs, advertisements, and other publications (electronic or otherwise) will include accurate information regarding the program's accreditation status, standards and policies regarding recruiting and admission practices, academic offerings, academic calendars, grading policies and requirements, and fees and other charges.
Standard 2: Faculty/Instructional Staff

2.1 Faculty and adjunct instructional staff are qualified and competent by virtue of their education, experience, and professional credentials to provide the academic and clinical education for the program seeking accreditation.

The program will make the curriculum vitae of faculty and adjunct instructional staff available. Qualifications and competence to teach courses must be evident in terms of appropriateness of degree level, practical or educational experiences specific to curricular responsibilities in the program, and other indicators of competence to offer formal education. Individuals providing clinical supervision for the purposes of certification or re-certification must hold the NCRA Certified Tumor Registrar (CTR) credential. All Cancer Registry Management (CRM) instructional staff must possess and submit with application, current and valid CTR credential number.

2.2 Faculty/Instructional Staff is available for student consultation.

The faculty/instructional staff will provide students with a means of communicating with them, such as, an e-mail address and/or telephone number and schedule of availability.

Standard 3: Academic and Clinical Education Curriculum

3.1 Prior to enrolling in coursework, students must document that they satisfy the institution’s prerequisite requirements for entering the program.

The program must provide evidence of the process for verifying that students have met the prerequisite requirements for entering the NCRA accredited program.

Prerequisites must be college-level courses, taken for credit. Medical Terminology
The Medical Terminology course should cover medical terminology, symbols, and abbreviations, and the application language in the field of healthcare. The main focus should be on the study of medical terms through word origin and structure. The course should also include the language of surgical and diagnostic procedures as well as medical specialties.

Anatomy and Physiology – two semesters
Human Anatomy and Physiology courses should include the study of the structures of the human body and how the systems within the body support its function. Areas of study should include: bones, muscles, tissues, and supportive systems that promote life in the body. The course should also include information on human physiology, which is the study of the normal mechanical, physical, and biochemical functions of the human body, including the cells, organs, and human systems. The curriculum should also address physiology/pharmacology with an emphasis placed on the characteristics of the disease processes affecting the human body (i.e. cancer). It should also include the study of causes, diagnosis, and treatment of disease as well as an understanding of the basic principles of pharmacology.
Computers in Healthcare
The Computers in Healthcare course should provide a general overview of computers and the Internet and the role each has played in healthcare and will play in the future. Students should learn the basics of hardware and software and should gain a general understanding of the most commonly used applications in healthcare. The course should include an introduction to Health Information Management (HIM) applications, data quality, storage and retrieval, and clinical information systems.

3.2 The academic and clinical curriculum is consistent with the mission and goals of the program and is sufficient to permit students to meet NCRA Council on Certification-recognized national standards for eligibility to sit for the CTR Examination.

_The program should describe the curriculum leading to an AA, BS, or Certificate in Cancer Registry Management (CRM). The intent of this standard is to ensure that the program graduates are able to meet the NCRA Council on Certification requirements to sit for the CTR exam. The program may describe outcome evaluations of students’ knowledge, skills, and abilities that fulfill exam requirements._

_Programs should submit course syllabi to illustrate compliance. Syllabi should reflect the most current practices in the profession and utilize the most current resource materials._

3.3 NCRA Accredited Formal Education Programs in Cancer Registry Management (CRM) include the seven educational components: (most recent edition/versions of materials)

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<th>COURSE TITLE</th>
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<td>CANCER REGISTRY STRUCTURE AND MANAG</td>
<td>Introduction to the Cancer Registry</td>
<td>-Cancer Registry Management Principles &amp; Practice for Hospitals and Central Registries, 3rd Edition (CRM)</td>
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<td>-CRM                                                                                     -STORE Manual                                                                 - (CoC) Cancer Program: Ensuring Patient-Centered Care</td>
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<td>-Surgical Procedures in Oncology</td>
<td>STORE Manual</td>
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<td>-Quality Management and Improvement of Cancer Registry Data</td>
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<td>-Statistics, Epidemiology, and Data Utilization</td>
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<td>ABSTRACTING METHODS</td>
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<td>-Review source documents/reportable cases</td>
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<td>-Patient Identification</td>
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<td>-Cancer Identification (e.g., primary site, histology)</td>
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-Facility-specific information (e.g., date of first contact, class of case, and managing physician).
-Purpose of text.

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<td>-Central registry reporting</td>
<td></td>
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<tr>
<td>Abstracting Major Disease Sites – Carcinoma: Breast, Lung, Prostate, Bladder, Colon</td>
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<tr>
<td>CLINICAL PRACTICUM</td>
<td>Clinical Practicum Activities (See Clinical Practicum Guide)</td>
<td>As per supervisor</td>
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</table>
3.4 The clinical practicum consists of 160 hours under the direct supervision of a CTR and will include hands-on experiences for application of course knowledge in all education components and the 12 activities of the practicum.

Students will not be accepted into facilities for the clinical hours until they have completed all the coursework in the degree/certificate curriculum.

The supervising CTR will document the student experience regarding the completion of the activities, to ensure students complete the required clinical practicum activities and have had training in all education components.

Students must complete a minimum of 30 abstracts.
Sites to be emphasized in abstracts are lung, breast, colon, prostate, bladder, and the site(s) most common to the facility in which the student is practicing. Students may complete up to 15 abstracts at the SEER*Educate website, under the supervision of an advisor/mentor.

Student activity on the SEER*Educate web site tool for casefinding (up to nine hours) may be applied toward the requirement of 160 total hours, under the supervision of an advisor/mentor.

Students who do not complete all the activities in the clinical practicum will not receive their degree or certificate of completion and will not be eligible to sit for the CTR Exam. Students must provide a timesheet to document clinical activities that is signed by the clinical supervisor and the clinical supervisor will sign off on the CTR exam application in the ‘Experience Verification’ section.
### NCRA CLINICAL PRACTICUM/EXPERIENCE REQUIREMENTS

<table>
<thead>
<tr>
<th>ACTIVITY</th>
<th>HRS</th>
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<tbody>
<tr>
<td><strong>DOMAIN I:</strong></td>
<td></td>
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<tr>
<td><strong>CASEFINDING</strong></td>
<td></td>
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<tr>
<td>A. Review source documents for potentially reportable cases to enter into a suspense file.</td>
<td>9</td>
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<tr>
<td>B. Determine single versus multiple primaries.</td>
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<td><strong>DOMAIN II:</strong></td>
<td></td>
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<tr>
<td><strong>ABSTRACTING/CODING – STAGING</strong></td>
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<tr>
<td>A. Patient Identification:</td>
<td></td>
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<tr>
<td>1. Verify and enter demographic information at diagnosis.</td>
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<tr>
<td>2. Identify primary payor.</td>
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<tr>
<td>3. Collect information on comorbidities.</td>
<td>45</td>
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<tr>
<td>4. Assign accession and sequence numbers.</td>
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<tr>
<td>B. Cancer Identification:</td>
<td></td>
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<tr>
<td>1. Analyze medical record source documents to code primary cancer characteristics (e.g., primary site, histology)</td>
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<tr>
<td>2. Analyze medical record source documents to interpret and code facility-specific information (e.g., date of first contact, class of case, and managing physician).</td>
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<tr>
<td>3. Record pertinent information from source documents in text format to support all coded data items.</td>
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<td>4. Clarify conflicting, ambiguous, or incomplete documentation.</td>
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<tr>
<td>C. Staging:</td>
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<tr>
<td>1. Determine the stage of primary cancer.</td>
<td>15</td>
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<tr>
<td>a. TNM</td>
<td></td>
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<tr>
<td>b. Summary Stage</td>
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<tr>
<td>c. Specialty staging</td>
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<tr>
<td>d. Other Staging</td>
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<tr>
<td>2. Code other stage related elements</td>
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<tr>
<td>a. Site-specific factors</td>
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<tr>
<td>b. Mets at diagnosis</td>
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<tr>
<td><strong>ABSTRACTING/CODING – TREATMENT</strong></td>
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<tr>
<td>D. Treatment:</td>
<td>15</td>
</tr>
<tr>
<td>1. Use standard of care treatment guidelines to identify expected care.</td>
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<tr>
<td>3. Determine first course of treatment vs. subsequent treatment.</td>
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## ABSTRACTING/CODING – CASE VALIDATION & FINALIZATION

**E. Case Validation and Finalization:**

1. Interpret and resolve single-field, inter-field and inter-record edit errors.
2. Update or correct cases as necessary from a quality control review (e.g., internal or external review, including central registry).

## DOMAIN III:

### FOLLOW-UP

A. Obtain follow-up information from physicians, patients, and/or other sources.
B. Enter follow-up information, such as: vital status, cancer status, date of last contact, first recurrence, progression of disease, and subsequent treatment.
C. Determine the need to submit additional information to central registries for previously reported patients.

## DOMAIN IV:

### DATA QUALITY ASSURANCE

A. Develop and maintain the quality control plan.
B. Analyze the use of unknown and NOS data values.
C. Respond to inquiries from central registries
D. Conduct casefinding audits to assess completeness of case reporting.
E. Conduct re-abstracting audits to assess accuracy of data.
F. Perform visual review of text fields to assess accuracy of coded data
G. Review edit reports from external sources (e.g., NCDB, central registries) to improve the quality of facility data.
H. Identify education and training needs based on results of quality reviews.
I. Communicate results of quality assurance activities to appropriate entities.
J. Participate in quality studies conducted by standard setters (e.g., reliability studies).
K. Conduct follow-back activities.

## DOMAIN V:

### ANALYSIS AND DATA USAGE

A. Recommend data selection criteria for study requests.
B. Provide data for the evaluation of treatment, patient outcomes, and quality of life.
C. Prepare reports to document research results and satisfy requests for data.
D. Process data requests according to privacy standards and institutional policy.
E. Provide information to support strategic planning, education, research, and marketing.
F. Monitor program adherence to evidence-based clinical practice guidelines.
G. Use benchmarking techniques to identify areas for improvement.
H. Generate data to identify the need for screening, prevention, or educational programs.
I. Conduct statistical analyses.
J. Maintain data request log.
### DOMAIN VI:
#### REGISTRY ORGANIZATION AND OPERATIONS
- A. Maintain knowledge of current trends, standards, and developments in oncology, cancer registry, and cancer program management.
- B. Establish liaisons with peer professionals and organizations and encourage their utilization of data derived from the registry.
- C. Ensure program compliance with state/provincial and national registry rules, regulations and standards.
- D. Prepare and submit data to a central cancer registry.
- E. Process registry software upgrades or data conversions.
- F. Comply with applicable laws, regulations and policies regarding confidentiality, release of information, use of medical records, and research.
- G. Maintain up-to-date policies and procedures.
- H. Participate in the development of outcomes analyses and annual reports for dissemination.
- I. Define staff roles and responsibilities.
- J. Establish staff productivity and quality metrics.
- K. Manage work assignments to meet project goals.
- L. Provide training, education, and development to staff and peers.
- M. Monitor staff for compliance with applicable policies and procedures.
- N. Define and document operational requirements.
- O. Share information for reportable cases with other cancer registrars within the institutional confidentiality guidelines.

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### DOMAIN VII:
#### CANCER PROGRAM ACCREDITATION
- A. Collaborate with committees (e.g., cancer committee, breast program leadership) to plan and schedule committee activities.
- B. Coordinate and participate in committee meetings.
- C. Prepare data and reports for presentation at committee meetings.
- D. Document cancer program activities in committee meeting minutes.
- E. Maintain supporting documentation necessary for accreditation.
- F. Participate in accreditation survey site visits.
- G. Coordinate resolution of deficiencies identified during accreditation surveys.
- H. Participate in the application, approval, and evaluation processes for maintaining continuing education credits for cancer conferences (i.e., tumor boards).
- I. Coordinate cancer conference activities.
- J. Document cancer conference activities.
- K. Facilitate discussion of NCCN guidelines, prognostic indicators, and options for clinical trial participation.

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**Total:** 160
3.5 Academic and clinical education reflects current knowledge, skills, technology, and scope of practice in a reasonable sequence of learning. The curriculum will provide study in the ethics of the profession, the legal requirements for confidentiality, and safety practices in the facilities. The curriculum is reviewed annually and updated as necessary.

The program will provide evidence that the curriculum is systematically evaluated on an annual basis and updated, as necessary, to reflect current knowledge and scope of practice in the profession. Curriculum evaluations are cited in the annual report and verified by the FEPRC.

3.6 Clinical practicum experience obtained in external placements is governed by agreements between the program and the external facility and are monitored by program faculty/instructional staff.

The program will provide examples of its written agreements with external facilities and evidence that clinical education in external facilities is monitored by program faculty/instructional staff. Should the student secure a facility for their practicum without the assistance of the accredited program, the school/institution must obtain a written agreement with the student’s facility. Students should be prepared to submit documentation to satisfy the requirements of the facility: drug test, background check, record of immunizations, professional liability insurance.

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**Standard 4: Students**

4.1 The program criteria for accepting students in the Cancer Registry Management program are consistent with the institutional policy for admission.

_A comparison of institutional and program policies should confirm that the program’s criteria for admission meet or exceed those of the institution._

4.2 Students are informed about the program’s policies and procedures, certificate and/or degree requirements, requirements for professional credentialing, and ethical practice. A student complaint process is documented.

_Programs will provide this information to students through orientation meetings, student handbooks, assigned academic advising, or other means of information dissemination. The program will maintain a record of student complaints and make these available to the FEPRC upon request. Students should be made aware of the mailing address and telephone number of the FEPRC in the event they wish to file a complaint:_

NCRA
FEPRC Administration
1330 Braddock Place, Suite 520
Alexandria, VA 22314 703/299-6640 X314

Complaint information to include:
Student name, mailing address, city, state, zip, phone number, email address Name of institution, title of accredited program
Name of Faculty/Instructor

_NCRA Formal Education Accreditation Manual_
Name of Program Chair/Department Head
Mailing address, city, state, zip, phone number, email address Nature of complaint
Supporting document included Signature of student submitting report

Standard 5: Program Resources

The students should be familiar with the following websites (not an inclusive list): American Cancer Society (ACS)

American College of Surgeons, Commission on Cancer (CoC) National Cancer Data Base (NCDB)

STandards for Oncology Registry Entry/ CAnswer Forum

American Hospital Directory

American Joint Committee on Cancer (AJCC)

Administrators in Medicine (AIM) doctor finder

American Medical Association (AMA) doctor finder

Centers for Disease Control (CDC):
  CDC Cyber Cancer Registry
  National Program of Cancer Registries (NPCR)
  Invasive Cancer Incidence Request
  NPCR's Links to Other State Health Departments / State Registries

Certified Tumor Registry (CTR) Exam

College of American Pathologists CAP):Complete List of Protocols

Gray’s Anatomy

National Cancer Institute (NCI)

Surveillance, Epidemiology and End Results Program (SEER).

Information for Cancer Registrars:
  Abstracting and Coding
  Guide to Hematopoietic Diseases
  Interactive Antineoplastic Drugs Database (SEER Rx)
  Multiple Primary and Histology Coding Rules (MP/H)
SEER ICD-O-3 Coding Materials
SEER Registrar Staging Assistant
SEER inquiry
Solid Tumor Rules

State Cancer Profiles

National Cancer Registrars Association (NCRA)
National Comprehensive Cancer Network (NCCN) – Practice Guidelines
North American Association of Central Cancer Registries (NAACCR)
National Plan & Provider Enumeration System (National Provider Identifier-NPI)

Social Security Death Index

State Health Departments and Services

World Health Organization

Zip codes and FIPS