

# ASTRO'S APE<sub>x</sub> - ACCREDITATION PROGRAM FOR EXCELLENCE®



## Surveyor Guide

Thank you for volunteering as a surveyor for ASTRO's APEX - Accreditation Program for Excellence®. APEX is designed to recognize high-quality radiation oncology practices (ROPs) by evaluating performance in areas that affect patient care and safety. APEX Surveyors are an integral part of the accreditation process. This guide, paired with the APEX Standards Guide, provides detailed information to assist you as an APEX Surveyor.



# Surveyor Policies and Procedures

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## Surveyor Agreement

As an APEX Surveyor you have agreed to:

- the terms and conditions specified in the Surveyor Agreement.
- the Terms of Use and Privacy Policy of the ASTRO website.
- complete Health Insurance Portability and Accountability Act (HIPAA) training.
- complete an annual statement of disclosure.
- adhere to the survey processes and timelines as set forth by ASTRO.
- serve as a mentor/resource to new surveyors.
- conduct radiation oncology practice accreditation surveys only for ASTRO. (If you serve as a surveyor on behalf of another organization, you must formally relinquish your status as a surveyor before beginning APEX orientation.)
- not accept any fee in exchange for consulting with respect to any accreditation program (this does not prevent you from advising your practice as part of your regular duties).
- having never been convicted of a criminal offense related to health care or the provision of services paid for by Medicare, Medicaid, or another federal health care program, nor having ever been excluded or debarred from Medicare, Medicaid, or another federal health care program.
- waive any right to view information submitted by professional references, materials in your application file and any materials related to its review.

## Surveyor Requirements

ASTRO expects APEX Surveyors to comply with all aspects of the Surveyor Agreement and all APEX Procedures, including but not limited to the following:

- be a U.S. licensed and board-certified radiation oncologist or medical physicist;
- be an ASTRO member;
- be an experienced professional with at least eight years of U.S. radiation oncology experience post Board certification;
- be currently engaged in active practice in a U.S. based radiation oncology practice and/or education (surveyors may stay active for five years after retirement);
- comply with all ongoing orientation and training requirements; and
- be available to complete no less than one (1) one-day survey per year.

Contact [APExSupport@astro.org](mailto:APExSupport@astro.org) if you are no longer meeting any aspect of the Surveyor Agreement and/or Surveyor Requirements.

ASTRO expects surveyors to abide by all surveyor-related policies and procedures included in this guide and any additional policies and procedures communicated by ASTRO staff. This includes complying with ASTRO's travel policy, providing ASTRO with disclosures on an annual basis and with updates as needed due to changes in circumstances and relationships.

### ***APEX Surveyors must also maintain:***

**Accreditation Knowledge.** Surveyors are expected to maintain knowledge of the APEX Standards and be able to apply that knowledge when gathering facility data and reporting findings. Surveyors must participate in ongoing professional development activities and orientation exercises designed for all APEX Surveyors.

**Computer Skills.** Surveyors are expected to have sufficient computer skills to allow them to collect data using current technologies and to be able to complete online survey forms in a competent and timely manner at the facility. ASTRO will assign surveyors based on their familiarity with the facility's treatment modalities and techniques, EHR and treatment planning systems.

Surveyors:

- should describe their role to the facility, following the script provided by ASTRO.
- may not communicate with a facility in any manner related to the facility's accreditation status before, during or after the facility visit.
- may not conduct independent investigations into a facility they are surveying. Facilities should be judged solely on their compliance with the APEX Standards.
- may not accept any fee in exchange for consulting with respect to APEX or radiation oncology accreditation.

## Training and Orientation

As an approved surveyor, you have successfully completed and passed the training modules and knowledge check questions in the ASTROAcademy. You are welcome to review the modules any time by logging into the APEX Surveyor Portal using your MyASTRO username and password.

**HIPAA.** Since ASTRO is a business associate of each facility applying for APEX Accreditation, surveyors must complete HIPAA training that applies to your role as a representative of ASTRO and your obligations to protect the privacy and security of protected health information (PHI) of APEX Applicants. Once you have completed the initial ASTRO HIPAA training, you are required to remain in good standing by completing ASTRO's HIPAA training course every three years.

In addition, you have received a copy of ASTRO's HIPAA Privacy and Security Policies and Procedures. If you have additional questions about HIPAA and how it affects your role as an APEX Surveyor, we encourage you to contact ASTRO's Privacy Officer at [HIPAA@astro.org](mailto:HIPAA@astro.org).

## Travel Policy and Reimbursement

ASTRO's travel policy was developed to provide APEX Surveyors with reasonable accommodations when performing facility visits, while at the same time, preserving ASTRO's financial resources as a nonprofit organization. Surveyors should use sound financial judgment when booking any travel arrangements and when acting on ASTRO's behalf. Expenses outside of a reasonable amount for the facility visit location will be rejected.

All travel and lodging for APEX facility visits (airfare, rail, hotel and pre-approved car rental) must be booked through Concur using MacNair Travel as the service provider after ASTRO staff confirms the facility visit. Review the Concur Guide for platform details.

### NON-REIMBURSABLE EXPENSES

ASTRO will not reimburse surveyors for child or pet care, fines or legal fees, parking tickets, ATM or credit card late fees, dry-cleaning, lost, damaged or stolen items.

### AIRFARE

**DO NOT book 'Basic Economy' or non-refundable flights.** Those flights have additional restrictions and cannot be changed, cancelled, or refunded. Regular Economy is preferred.

Surveyors should select the lowest airfare available via Concur. Airfare booked in Concur is charged to the ASTRO credit card and should not be included on your reimbursement form.

APEX **will** reimburse for services related to the facility visit, including:

- economy/coach class airfare,
- baggage fees associated with the first checked bag,
- in-flight internet when used for ASTRO business.



APEx **will not** reimburse for the following expenses:

- airfare or rail class upgrades (including coach plus, early bird check-in, first-class tickets),
- companion/family travel,
- luxury vehicle rental or premium rideshare,
- travel insurance,
- in-flight entertainment, including headphones,
- baggage fees beyond the first checked bag,
- change of flight - cancellation or change penalties should be discussed with ASTRO staff before being incurred as only ASTRO-related adjustments are reimbursable.

## LODGING

Surveyors are encouraged to choose a mid-range hotel via Concur. Consideration should be given to the location relative to the facility. Unlike airfare, surveyors are asked to book their hotel reservation on a personal credit card and then provide receipts for reimbursement after the facility visit.

APEx **will** reimburse one standard room fees, tax, and internet access (the night before the facility visit). If a second night is required because of flight limitations, a second night will be reimbursed **only with pre-approval** from ASTRO staff before booking in Concur.

APEx **will not** reimburse the following expenses:

- room upgrades,
- pay-per-view movies,
- spa fees,
- toiletries,
- medicines,
- clothing
- gift shop charges, or
- alcoholic beverages from in-room mini-bars.

A hotel folio showing service details and payment information must be submitted for reimbursement. Room service costs listed on a hotel folio require an additional itemized receipt for reimbursement.

## TAXIS AND OTHER GROUND TRANSPORTATION

- ASTRO prefers that surveyors use car services like Uber or taxis, rather than renting a car, when traveling for facility visits, which are reimbursable.
- Other reasonable transportation services (e.g., hotel shuttles) to and from airport/hotels should be used if available. Any additional rail stations and transportation to facilities in connection with business activities are reimbursable.
- Receipts must be provided for fares exceeding \$25.00.

## CAR RENTAL

- Reservations of rental cars **must be pre-approved by ASTRO staff** and booked in Concur. Generally, rental cars are approved when it is the least expensive option or other options like Uber are not available in the facility visit location.
- Unlike airfare, surveyors are asked to book their rental car reservation on a personal credit card and then provide receipts for reimbursement after the facility visit.
- The surveyor must purchase liability insurance and physical damage waiver from the rental company.
- APEx will reimburse a GPS rental fee and gasoline expenses.
- ASTRO will only reimburse economy-size vehicles.
- Rental car receipts must be itemized and show payment information for reimbursement.

## PERSONAL CAR

- APEX follows the IRS set personal automobile mileage reimbursement rate. This rate includes the fixed/variable costs of operating an automobile, such as gasoline, wear and tear and automobile insurance; therefore, these items will not be reimbursed separately.
- **Surveyors must include a map** showing the route with mileage (e.g., Google Maps) with reimbursement receipts.
- The cost of toll fares and parking are reimbursable.
- Surveyors should use economy parking, rather than daily/hourly, at airports.
- Receipts for parking charges and toll fares exceeding \$25.00 must be provided.

## MEALS

- APEX **will** reimburse reasonable cost of meals for breakfast, lunch, and dinner during APEX-related travel.
- APEX **will not** reimburse for companion/family, entertainment, or excessive meal/alcohol expenses.
- Each surveyor's name should be added on a meal receipt if more than one surveyor is included.
- Itemized receipt and payment receipt for all meals exceeding \$25.00 must be submitted for reimbursement.

## PHONE CALLS

- The use of personal cell phones is strongly encouraged as calls from hotel phones may incur excessive fees.
- If calls made during APEX travel cause the surveyor to exceed their allotted phone plan minutes, the surveyor can request to be reimbursed for the additional fees with an itemized bill, identifying the overage and all calls made during APEX-related travel.

## GRATUITIES

- APEX will reimburse reasonable gratuities to airport, hotel, restaurant, and taxi staff. For example:
  - Courtesy Shuttle Driver: \$1-\$2 per person
  - Taxi Driver: \$5
  - Porter/Doorman/Bell Staff: \$1-\$2 per bag
  - Meal tips: 15 to 20% for food costs
- Review the bill before providing an additional gratuity to confirm if gratuity has already been added.

## HONORARIUM AND EXPENSE REIMBURSEMENT

ASTRO requires a current W-9 form on file to process the surveyor honorarium payment. The W-9 form must be submitted before your first facility visit, if there is a change of address, or every two years to [www.astro.org/W9](http://www.astro.org/W9) or [financeservices-251@astro.org](mailto:financeservices-251@astro.org). **DO NOT submit to APEXSupport.** ASTRO staff will inform you if a replacement is needed. Failure to provide ASTRO with a current W-9 form will delay the honorarium payment until the W-9 form is completed. The W-9 form and instructions for completing and submitting it are located in the APEX Surveyor Portal.

Surveyors must complete an APEX Surveyor Reimbursement Form to receive the surveyor honorarium and reimbursement for the business expenses related to the facility visit. The downloadable form can be found in the APEX Portal. The form and related documents must be submitted within 30 days following the facility visit. ASTRO requests that a separate reimbursement form be used for each trip.

A reasonable effort should be made to obtain an itemized receipt with evidence of payment. In the rare instance a receipt is lost or destroyed, a signed Lost Receipt Form, found in the APEX Surveyor Portal, must be completed, describing the purchase and reason receipt is not available.

Surveyors have the option to receive reimbursement via direct deposit by submitting a completed ACH form, found in the APEX Surveyor Portal, at least four weeks before the first facility visit or whenever updating banking information.

You should include only the business expenses in the reimbursement request. Do not include personal expenses, such as flight or hotel upgrades, same-day flight change fees without pre-approval from ASTRO, companion expenses, or additional nonapproved nights of lodging or car rental days.

If you have any questions, please contact ASTRO staff at:

**Concur Questions:** [ASTROTravel@astro.org](mailto:ASTROTravel@astro.org) | **Pre-approval or Reimbursement Questions:** [APEXSupport@astro.org](mailto:APEXSupport@astro.org)

# Program Structure

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APEX Surveyors' responsibilities occur during the facility visit preparation and facility visit phases of the program. Applicant facilities have already completed a Self-Assessment to gauge current practice against APEX Standards, allowing them time to adjust processes before the facility visit. Your role as a surveyor is to objectively assess, in-person or virtually, the facility's processes after these changes have been made.



## Facility Visit Scheduling

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Surveyors must provide availability for a facility visit at least one day twice per year to maintain knowledge and expertise. Generally, it is helpful to communicate your preferences to ASTRO staff, including how many surveys you are willing to perform per year, how much advance notice you require, and how far you are willing to travel. Additionally, it is helpful to know if any days do not work for you (e.g., I can't do Tuesday because that is my sim day).

Surveyors will be sent an email requesting confirmation of their availability for a designated facility visit. It is important that they promptly respond by either accepting or declining the invitation within a five-day time frame. The offer will otherwise be rescinded, and another surveyor will be chosen.

## Facility Visit Preparations

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Surveyors must wait for a facility visit confirmation email from ASTRO staff before proceeding with the following activities.

### Book travel and accommodations

Following ASTRO's Travel Policy, flights, lodging and any necessary car rental can be booked through the Concur travel platform. More details can be found above in the Travel Policy section below. Travel bookings should be made at least 6 weeks in advance whenever possible. The facility visit confirmation email from ASTRO may include airport and hotel recommendations.

### Review facility Self-Assessment

The practice's results from the Self-Assessment are available to assigned surveyors only. This is an excellent way to familiarize yourself with the facility before the facility visit.

### Review facility visit questions

You should review the facility visit questions for each section to familiarize yourself with the information you will gather during the facility visit.

### Review facility forms

The APEX Facility Visit Form and APEX Facility Visit Itinerary are uploaded into the APEX Portal for your review at least one week before the facility visit date. Both forms provide details about each facility and the specifics of the day. Review/print off a copy of each form before the facility visit.

### Communicate with other assigned surveyors

The facility visit confirmation email will include the other surveyor(s) assigned to the same practice. You can use this information for any planning or coordination needed for the facility visit.

# Facility Visit Overview

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## Main vs. Satellite

A practice is considered the “main” facility if it is the only site in a single-applicant practice or is the primary location of a multi-facility practice. A multi-facility practice includes a “main” campus and one or more “satellites.” To qualify as a multi-facility practice where facilities are covered by the same accreditation application, all facilities must meet established criteria. Main facility visits are scheduled for a full day and satellites are scheduled for a half-day (morning or afternoon).

## Survey Team

All facilities within the practice will have their facility visit conducted on the same day for in-person and within a one-to-two-day range for virtual facility visits. A single location practice or a main facility visit will usually consist of a two-person team which includes a medical physicist and radiation oncologist. For satellite visits, a medical physicist will attend. The satellite facility visit takes half a day to complete, so surveyors may do 1 or 2 satellite surveys in a single day.

The facility visit include the following four sections.

**Medical Record Review** - The Medical Record Review during the facility visit assesses 10 new medical records against the same evaluation criteria as the Self-Assessment. The surveyor will conduct the review, entering responses into the APEX Portal. Facility staff member(s) will assist the surveyor in navigating their EHR(s) to locate the required documentation.

**Physicist Interview** - The physicist surveyor will conduct an interview and perform a document review with at least one senior physics staff member. The surveyor will enter data into the APEX Portal based on the findings.

**Team Interview** - The surveyors will interview representatives of the entire radiation oncology team. The interview questions are intended to engage the full practice staff. The surveyor will enter data into the APEX Portal based on the findings.

**Verification** - The surveyors will complete this section during the facility visit tour based on the facility review and when or after witnessing a patient time out. The surveyor enters data into the APEX Portal based on the findings.

## Itinerary

A facility-specific itinerary will be sent to surveyors before the facility visit occurs. Generally, the facility visit will begin with a brief welcome with introductions, followed by a facility visit tour. At a main facility, the radiation oncologist will then begin the Medical Record Review, while the medical physicist starts the Physicist Interview. Both surveyors will join together in the afternoon to complete the Team Interview. The Verification section should be the last section completed and doesn't require facility staff involvement.

## Medical Record Tracking Worksheet

The Medical Record Tracking Worksheet documents the medical records reviewed during the facility visit. A facility staff member will provide a copy of their worksheet. This worksheet should not leave the facility. Please return it to facility staff when the Medical Record Review is complete. It contains two sections:

**Section 1** will list the medical records reviewed during the Self-Assessment at the main facility. These records will not be reassessed during the facility visit. If you are surveying a satellite, Section 1 will be blank, as the satellite does not complete the Self-Assessment.



**Section 2** will list 25 medical records that the facility has selected for your potential review. You will review 10 records from this section, choosing various disease sites, physicians, and techniques/modalities. New medical records must have completed a course of treatment within the last 12 months from the facility visit date and have evidence of a follow-up or reasoning for no follow-up (e.g., medical oncology will follow-up) to be eligible for selection. You should choose a different medical record if treatment for a selected record was completed more than 12 from the facility visit date. A unique APEX patient identifier, the APEX ID, will be included in the Medical Record Tracking Worksheet. You must enter it into the APEX Portal when you begin the review to assist facility staff with tracking their feedback report.

## Assessment Notes

During a facility visit, surveyors objectively assess the facility by entering data and pertinent notes into the APEX Portal. Entering assessment notes allows for nuanced insight that the binary responses of the Interview and Team Interview questions do not provide. Assessment notes, entered into the 'Findings' text box, provide a complete picture of the practice to ASTRO's Practice Accreditation Subcommittee (PAS) as they make a final determination.

Assessment notes should be used for the following scenarios:

- Sharing additional information;
- Rationale for any adverse findings;
- Comments for when you are unsure of compliance; or
- When the facility is only partially documenting/completing the task.

### *Tips for assessment notes*

- No PHI will be entered.
- Include the corresponding Evidence Indicator number for reference.
- Document the notes in the same way as clinical notes in a medical record, as the content can be seen by the facility during an appeal.
- Confirm that assessment notes are clear, concise and objective.
- Enter factual details on how the practice is or is not meeting the requirements rather than recommendations.

The examples below show optimal assessment notes which can be easily interpreted and shared with the PAS during the determination process:

*El 2.1.2a: Simulation order has positioning, and immobilization listed as "standard for site." Therapists use devices based upon their training at orientation. These are later documented in simulation procedure note.*

*12.1.4 Linac QA motion management: Facility uses DIBH for breast RT and a compression belt for respiratory management in other indications. No specific QA on the gating or respiratory management equipment is done.*

## Facility Visit Tips & Reminders

- Dress in business casual attire for a facility visit.
- Contact the designated facility staff member listed on the itinerary if you are running late or get lost finding the facility.
- Confirm that the internet connection provided by the facility is strong. If not, request the facility to hardwire your laptop or provide a hotspot for a better internet connection.
- Save your progress and log out of the APEX Portal before going to lunch. You can relaunch the portal when you return.
- Confirm that you enter data into the correct facility name and section if you are assigned to more than one facility.
- Contact ASTRO staff at [APExSupport@astro.org](mailto:APExSupport@astro.org) or by calling 703-502-1550 or one of the numbers in the facility visit email immediately if questions arise during the facility visit and/or the portal is not working correctly. Include screenshots of error messages when experiencing portal issues.

## Determinations

ASTRO staff may contact you with follow-up questions about the information submitted during the facility visit. This additional information assists the PAS as they make an informed accreditation determination.

# Glossary of Terms

COMMONLY USED ACRONYMS	
ART - adaptive radiation therapy	PMI - preventative maintenance inspection
AU - authorized user	PSO - patient safety organization
EBRT - external beam radiation therapy	QA - quality assurance
EHR - electronic health record	QC - quality control
EI - Evidence Indicator	QM - quality management
EMR - electronic medical record	QMP - qualified medical physicist
HDR - high-dose rate	RO - radiation oncologist
IGRT - image guided radiation therapy	ROP - radiation oncology practice
IMRT - intensity modulated radiation therapy	RPT - radiopharmaceutical therapy
IORT - intraoperative radiation therapy	SBRT - stereotactic body radiation therapy
LDR - low dose rate	SGRT - surface guided radiation therapy
MP - medical physicist	SOP - standard operating procedure
MU - monitor unit	SRS - stereotactic radiosurgery
NRC - Nuclear Regulatory Commission	TPS - treatment planning system
OIS - oncology information system	VMAT - volumetric modulated arc therapy
PAS - Practice Accreditation Subcommittee	

**APEX Patient Identifier:** Unique alpha-numeric identifier located on the medical record tracking worksheet for each medical record entered into the APEX Portal during medical record review.

**APEX Portal:** A web-based portal, hosted on the Fabric® platform, used by facilities and surveyors to collect information and documents required for APEX®.

**APEX Standard:** The framework of APEX, that are essential practices that contribute to high quality patient-centered care. The standards provide the elements of practice; however; they are not intended to prescribe processes for facilities.

- **Evidence Indicator (EI):** Subunit of the APEX Standards. Practice are assessed for compliance with APEX Standards through the Evidence Indicators. All EIs must be addressed during the Self-Assessment and facility visit.
- **Evaluation Criteria (EC):** Criteria used to show compliance to EIs and the APEX Standards.

**APEX Surveyor Reimbursement Form:** Collection form to itemize surveyor expenses related to the facility visit. APEX Surveyors must complete and submit to ASTRO to receive their reimbursement and honorarium.

**ASTROAcademy:** Web-based learning management system. Surveyor and HIPAA training are completed through this portal.

**Clinical Continuity:** A plan or process to ensure that patients continue their treatment during an extended period of downtime (e.g., machine breakdown, natural disaster causing damage, etc.). Mitigation strategies may include having to swap machines or treat the patient elsewhere. Or something like this as this is confusing and so many don't understand what is being asked.

**Competency Assessment:** Any system for measuring and documenting personnel competency within the ROP. Competency assessment aims to identify education needs with employee performance and correct any deficiencies before they affect patient care.

**Comprehensive Patient Evaluation:** Documented consultation(s) before a patient starts preparation or planning for treatment. This may include an initial consultation, additional pretreatment consultations and/or informed consent.

**Conflict of Interest Review:** A pre-facility visit activity performed by the facility staff and surveyors to ensure that impartiality isn't impaired by any financial interest, personal relationship, commercial relationship or interest of the surveyor's employer.

**Concur:** ASTRO's web-based travel platform surveyors use to book travel and lodging arrangements for a facility visit.

**Culture of Safety:** An environment where all team members participate in assuring safety; the practice capitalizes on opportunities to improve safety; and no reprisals are taken for staff that report safety concerns.

- **Patient Safety Events:** Something that happens to or involves a patient; encompasses patient safety incidents, near-misses and unsafe conditions.
  - **Incident:** A safety event that reached the patient or staff, with or without harm.
  - **Near-miss:** An event that did not reach a patient but had the potential to do so.
  - **Reportable Safety Event:** Safety events that reach a threshold for reporting to an external entity based on local, state or federal laws and regulations.
  - **Unsafe Conditions:** A circumstance that increases the probability of a safety event occurring.
- **Patient Safety Organization (PSO):** Federally recognized incident learning system dedicated to improving health care safety and quality of care. PSOs are designed to create a secure, non-punitive environment where clinicians and healthcare organizations can collect, aggregate, and analyze data to identify and reduce the risks and hazards associated with patient care (e.g., RO-ILS).
- **Interdisciplinary Safety Meetings:** Team-based meetings to discuss safety events within the practice, with the intent to review trends and discuss action plans to improve safety within the ROP. This approach includes, at minimum, one representative from each professional discipline within the ROP.

**Documented Evidence:** Proof of activity (e.g., training attendance list, PMI report, shielding calculations, etc.).

**External Validation:** An audit performed by an external entity separate from the ROP.

**Facility Visit:** The on-site or virtual survey of an ROP conducted by trained APEx Surveyors to verify the ROP's compliance with APEx Standards.

**Intradisciplinary Peer Review:** The process by which health care professionals from the same discipline evaluate each other's clinical performance to learn from one another and evaluate each other's clinical performance, such as radiation oncologist-to-radiation oncologist, medical physicist-to-medical physicist, radiation therapist-to-radiation therapist, or dosimetrist-to-dosimetrist.

**Medical Director:** A position within the ROP held by a radiation oncologist, who is responsible for oversight of the SOPs and quality of patient care within the ROP.

**Medical Physics Staff:** Staff member within the physics team of the ROP (includes Qualified Medical Physicist(s) (QMP), medical physicist(s), physicist assistant(s), and/or medical dosimetrist(s)).

**Motion Management:** The use of special techniques and/or equipment to manage the effects of tumor motion in thoracic, abdominal and pelvic tumors during radiation therapy (techniques include respiratory tracking or gating, breath-hold, fiducial tracking, etc.).

- **Respiratory Management:** The use of special techniques and/or equipment to manage the effects of tumor motion associated with breathing.
- **Surface Guided Radiation Therapy (SGRT):** The use of vision technology to track patients' surface in 3-D, for both setup and motion management during treatment.

**Multidisciplinary Review Program (e.g., tumor board):** A structured approach in which qualified providers from appropriate disciplines review the management and treatment options for a patient. This can include radiation oncologists, medical oncologists, surgeons, and other physicians for patients.

**Nonphysician Provider (NPP):** Providers who can perform professional services but are not physicians. This includes, but is not limited to, nurse practitioners, clinical nurse specialists, advanced practice nurses and physician assistants. In a hospital-based facility, an NPP may directly supervise hospital outpatient therapeutic services associated with radiation therapy if it is documented within their scope of practice and hospital-granted privileges.

**Not Documented, Not Done:** A healthcare and quality improvement mantra focusing on the role of consistent documentation. In APEX, it is used when assessing compliance to the Evidence Indicators. Requirements are met through consistent documentation within the EMR and/or policy and procedures documents.

**Planning Directive:** Patient-specific documentation completed by the radiation oncologist.

- **Simulation/Pre-Treatment Directive:** A written planning/preparation document completed by the radiation oncologist before simulation, to help guide the simulation or pre-treatment procedure, and includes the treatment site, preparation requirements and patient setup.
- **Treatment Planning Directive:** Completed before treatment planning to help guide the planning team with the treatment volume dose(s) goals, and constraints for normal tissues. In brachytherapy cases, this includes NRC and/or state requirements.

**Quality Management (QM):** An overall program that aims to organize all the quality efforts appropriately to promote the quality and safety of the use of the system; must be established for each new system or process. The QM program should include hazard analysis, quality assurance, training and documentation, and ongoing quality improvement efforts.

- **Quality Assurance (QA):** Activities that demonstrate the level of quality achieved by the output of a process. QA checks are essential parts of QM for most devices and systems, as they can check the output of potentially complicated decisions or actions performed by the system.

**Radiation Oncology Practice (ROP):** One or more facilities where radiation therapy services are provided under the direction of a common set of standard operating procedures and a qualified radiation oncologist as a medical director.

- **Main:** A single facility or the primary facility of a multi-facility practice application.
- **Satellite:** One or more facilities at a separate location from the main facility but part of the same multi-facility application and operating under a uniform set of SOPs.

**Radiation Oncology Practice Staff:** Clinical staff within the ROP (includes the radiation oncologist(s), medical physicist(s), medical dosimetrist(s), radiation therapist(s) and nurse(s)). Tasks within the ROP staff should be limited to the scope of practice and assessed competencies.

**Self-Assessment:** An internal review process in which the ROP assesses their compliance with the APEX Standards. The ROP must complete each Self-Assessment section to be deemed ready for a facility visit.

**Standard Operating Procedures (SOPs):** Collection of policies and procedures for the radiation oncology practice.

- **Policy:** A written directive detailing the radiation oncology practice's standard rules of operation.
- **Procedure:** A written, detailed description of how a specific activity or workflow is performed.

**Supervision:** The oversight by the RO or QMP during procedures within the ROP.

- **General Supervision:** The procedure is furnished under the physician's overall direction and control, but the physician's presence is not required during the procedure.
- **Direct Supervision:** The physician must be present and immediately available to aid and direct throughout the performance of the procedure. The physician does not need to be in the room during the procedure.
- **Personal Supervision:** The physician must attend during performance of the procedure.

**Therapeutic Intervention:** An effort to assist with the well-being of patients before, during and after their cancer treatment(s). Interventions may include, but are not limited to, social work, speech therapy, massage therapy, aromatherapy, acupuncture and physical therapy.

**W9:** The IRS Form used to provide personally identifiable information to ASTRO for reporting income paid to surveyors. The form must be completed by surveyors and updated every two years to receive an honorarium after participating in a facility visit.