

Hello, Commission on Cancer (CoC) Cancer Liaison Physicians.

Please make sure to save the dates and register for these upcoming meetings:

- [Cancer Liaison Program Office Hour: Operative Standards](#)
 - Monday, April 20
- [ACS Quality, Safety & Cancer Conference](#)
 - July 30-August 2, in Orlando, FL
- [CLP Meeting: September 16](#)
- [ACS Clinical Congress 2026: September 26-29 in Washington, DC](#)
 - CoC Plenary Session: Saturday, September 26

2026 CLP Outstanding Performance Awards

The CoC is accepting nominations for the annual [CLP Outstanding Performance Award](#) program. To submit a nomination, please complete [this survey](#) by **May 4**. The CoC State Chair CLP Education Advisory Group will review the nominations and choose the winners, which will be announced this summer. CLPs can be nominated by members of an accredited program's cancer committee, registrars, CoC site reviewers and State Chairs, American Cancer Society regional staff members, and by self-nomination. For more information on eligibility criteria and the nomination process, visit the [CoC website](#).

Updates to CoC Accreditation Standards

The CoC [recently announced](#) the release of an updated version of its accreditation standards, [Optimal Resources for Cancer Care \(2020 Standards\)](#). Please review the [Change Log](#) for detailed information on all changes reflected in the March 2026 update. Highlights include:

Standard 4.2: Oncology Nursing Credentials

Standard 4.2 was [recently revised](#) effective January 1, 2026. The March 2026 version adds an option for programs to utilize an action plan during the annual review requirements if the program is not meeting its policy or Standard 4.2 requirements.

Standard 6.1: Cancer Registry Quality Control

The Standard 6.1 Specifications by Category for Integrated Network Cancer Programs (INCP) and NCI Networks (NCIN) have been updated. Previous language was subject to multiple interpretations, so the requirements have been clarified to better accomplish the goals of this standard.

Rural Cancer Program Specifications

The [recently-released](#) rural cancer program requirements were added to the Specifications by Category section.

Previously Announced Changes

In addition to the updates published in March, previously announced updates impacting 2026 compliance are summarized below to help your program stay current with the recent changes.

- **Annual Review Timelines:** The requirements for standards requiring annual evaluation, review, and/or reporting were updated and standardized. Please review pages vii and viii of [Optimal Resources for Cancer Care \(2020 Standards\)](#) for more details.
- **Double Dipping:** Work to obtain compliance with one CoC standard may not replace, duplicate, or augment the work required to obtain compliance with another standard. Please review this [Cancer Program News article](#) for more details.
- **Standard 4.8: Survivorship Program** was updated to clarify that services must address the needs of patients who have completed their first course of treatment. Services evaluated to meet this standard cannot be single events and must be available to patients throughout the calendar year or at specific intervals during the calendar year. Please review this [Cancer Program News article](#) and [this webinar](#) for more details.

- **Operative Standards (Standards 5.3-5.6):** A new process is required starting with 2026 activity. Programs must conduct an internal audit each calendar year to confirm compliance with the technical requirements and synoptic reporting requirements for each of the operative standards (Standard 5.3–5.6). Required templates are posted in the Resources section of the [Quality Portal](#). Please review this [Cancer Program News article](#) for more details. A [webinar](#) detailing these requirements is also available.
- **Standard 5.9: Smoking Cessation for Patients with Cancer** was added. Please review this [Cancer Program News article](#) and [this webinar](#) for more details.
- **Standard 7.1: Quality Measure** was reactivated starting in 2025. The cancer committee must review program compliance against the four quality measure benchmarks. Please review this [Cancer Program News article](#) for more details.
- **Standard 9.1: Clinical Research Accrual**
 - Programs unable to meet Standard 9.1 may provide a report to the cancer committee and develop an action plan as an alternative compliance pathway. Please review this [Cancer Program News article](#) for more details.
 - Patient enrollment in retrospective studies is not eligible for accrual toward Standard 9.1. Please review this [Cancer Program News article](#) for more details.

Please submit any questions about these updates or the CoC Standards through the [CAnswer Forum](#).

Exemption for CoC Standard 5.7

Beginning with 2026 site visits, CoC programs accredited by the National Accreditation Program for Rectal Cancer (NAPRC) are exempt from compliance with CoC Standard 5.7: Total Mesorectal Excision. Eligible programs must indicate their NAPRC accreditation by adding a comment in the Standard 5.7 comment box in the Pre-Review Questionnaire (PRQ). For the medical record review, rectal cancer patients may be excluded from the submitted patient list. During the site visit, Standard 5.7 will not be reviewed and will be rated “Not Applicable.”

NAPRC-accredited programs that have already submitted their CoC PRQ, can reach out to CoC@facs.org to confirm the exemption is being applied. Other questions may be submitted through the [CAnswer Forum](#).

American Cancer Society Resources

- The [American Cancer Society HealthCare Professional Webpage](#) offers easy access to resources that support both care teams and patients. The site brings together evidence-based guidelines, patient education materials and resources, research data, collaboration opportunities, events, and advocacy to support clinical practices and professional development.
- Cancer care team members are encouraged to register for the American Cancer Society’s upcoming [Understanding Multi-Cancer Detection Testing ECHO program](#). The program will equip multidisciplinary cancer care team members and primary care clinicians with a foundational understanding of multi-cancer detection tests and will provide support for evidence-based communication regarding these tests and their results. Sessions will be held monthly at 10 a.m. CT on Tuesdays, April 28 through August 25.