



ACPA

American Cleft Palate
Craniofacial Association

Team Approval Procedures Manual

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Introduction

The American Cleft Palate Craniofacial Association (ACPA) is a non-profit (501(c)(3)) association of interested individuals and healthcare professionals who treat and/or perform research on oral cleft and craniofacial conditions. ACPA is unique – it is a multidisciplinary organization of over 2,100 members who represent more than 30 disciplines in over 50 countries.

Since its inception in 1943, ACPA has worked to support the care of individuals affected by cleft and craniofacial conditions. These patients require care from a variety of specialists over time, and ACPA supports patients, families and professionals through every stage of their cleft and craniofacial journey.

Vision

Leading interdisciplinary cleft and craniofacial care so patients and families thrive.

Mission Statement

We empower and support cleft and craniofacial healthcare professionals and the patients they serve through research, education, and advocacy. We promote team care and professional collaboration to ensure the highest quality resources are available to all with craniofacial differences throughout their healthcare journey.

The ACPA Team Approval process plays a major part in ensuring the mission becomes a reality. Cleft and craniofacial teams from the US and Canada can apply to be recognized as an ACPA Approved Team. This distinction is for teams that demonstrate they meet the [Standards for Approval of Cleft Palate and Craniofacial Teams](#) – standards that identify essential characteristics of quality for team composition and functioning. The standards are based on [The Parameters for Evaluation and Treatment of Patients with Cleft Lip/Palate or Other Craniofacial Anomalies](#), which identify recommended practices for the care of patients.

[ACPA Approved Teams](#) are listed on the website and are available for the general public to reference when choosing a provider for cleft and craniofacial healthcare needs. Although ACPA Team Approval does not extend beyond teams outside of the U.S. and Canada, the website also [lists teams from around the world](#) as a resource for patients and families.

Background & History

ACPA's Team Standards Committee developed a listing mechanism for teams that was implemented in 1996. Before that time, team listings were only available to ACPA members. The new process defined criteria for team listings based on minimum standards of care and included a mechanism for the categorization of teams.

In the spring of 2006, ACPA established the Task Force on Team Compliance to determine whether or not the current process appropriately reflected optimal patient care. The Task Force reviewed the current mechanism, other organizations' compliance processes and relevant documentation including the *Parameters for Evaluation and Treatment of Patients with Cleft Lip/Palate or Other Craniofacial Anomalies*.

The Task Force proposed an approval process to verify the quality of care provided by teams. The process provided standards that identified essential characteristics of quality for team functioning to facilitate the improvement of team care. It also offered accurate information to patients and families regarding services provided by teams that meet specific standards.

Six components were identified as essential to the quality of care provided by treatment teams:

1. Team Composition
2. Team Management and Responsibilities
3. Patient and Family/Caregiver Communication
4. Cultural Competence
5. Psychological and Social Services
6. Outcomes Assessment

The Task Force developed the *Standards for Cleft Palate and Craniofacial Teams* which are closely aligned with the ten fundamental principles for optimal care addressed in the *Parameters*. These standards were widely circulated for peer review and comment by ACPA members and related organizations. The *Standards* were approved by the ACPA Board in 2008. A pilot team approval program was introduced in 2008 and the approval process was initiated in 2009.

Commission on Approval of Teams

The Commission on Approval of Teams was established in November 2008 to:

- Maintain standards for the approval of teams providing interdisciplinary care to individuals and families affected by cleft lip, cleft palate and other craniofacial anomalies;
- Evaluate teams that voluntarily apply for approval;
- Recognize teams that meet the standards for approval;
- Maintain a listing of approved teams; and
- Furnish lists of approved teams to appropriate persons and agencies.

The Commission consists of nine voting members, which includes the chair and chair-elect. Members are recommended by the Commission and approved by the ACPA Board for a three-year term. The chair-elect is chosen by the Commission from the current Commission members and is approved by the ACPA Board. The position of chair-elect is a one-year term, which is then followed by a two-year term as chair of the Commission. All voting members of the Commission are ineligible to hold positions on the ACPA Board or Nominating Committee during their terms of service.

Voting Members of the Commission on Approval of Teams

Position	Qualifications	Number
Medical and health care professionals representing the following specialties/roles: Surgery, orthodontics, speech-language pathology, psychology/social work, team coordination, craniofacial surgery, and other medical professional.	ACPA Member in good standing	7
Public Representative (<i>e.g., affected individual or family member</i>)	Represent direct and indirect users of team skills or services. ACPA membership is not required.	2

Two ex-officio non-voting members also serve on the Commission. One acts as liaison to the ACPA Board of Directors and the other is the ACPA National Office liaison.

Standards for Cleft Palate, Craniofacial, & Cross-Specialty Teams

ACPA Approved Teams are comprised of experienced and qualified professionals from medical, surgical, dental and allied health disciplines working in an interdisciplinary and coordinated system. The purpose and goal of team approval is to confirm that the team has the commitment and capacity to provide care in a coordinated and consistent manner with the proper sequencing of evaluations and treatments with the framework of the patient's overall developmental, medical and psychological needs.

The [Standards for Approval of Cleft Palate and Craniofacial Teams](#) identify essential characteristics of quality for team composition and functioning.

Note: ACPA Team Approval is a voluntary and non-exclusionary process. There is no judgment or statement of quality made about established teams that have not selected to apply for approval; nor is holding approval required in order for health care professionals to organize and advertise themselves as a team. However, all

teams that do choose to undergo an external evaluation and demonstrate compliance with the standards for team care will be listed as ACPA Approved Teams. ACPA encourages patients and families to consider ACPA Approved Teams first for cleft and craniofacial healthcare needs.

Benefits of Approved Team Recognition

The ACPA Team Approval Program:

- Improves Quality Outcomes
- Supports Patient Satisfaction
- Demonstrates Commitment to Ongoing Improvement
- Increases Institutional Reputation
- Supports Insurance Company Requests for Treatment

ACPA Approved Teams receive the following benefits:

- Listing on ACPA website
- Option to list approval status in marketing and communication materials
- Document recognizing status as an ACPA Approved Team
- Access to the ACPA Team Approval Logo
- ACPA Team Approval materials including brochures and table tents
- Team Toolkits provided upon approval

Application & Instructions

The [application for ACPA Team Approval](#) is made available online each spring. Applications are typically due during the summer.

Instructions

Email teams@acpacares.org or call 919-933-9044 for more information.

- When preparing the application, teams are encouraged to refer to the implementation language associated with each standard as outlined in the [Standards for Cleft and Craniofacial Teams](#) document.
- **Important Notes Regarding Medical Records**
 - All reports should be current, within three years of submission date.
 - Comply with HIPAA regulations and omit all patient identifying information. Applications containing Protected Health Information will be returned for redactions. If an application is returned a second time, a \$125 penalty will be due upon resubmission.
 - Only submit the pertinent medical record pages. If an item is submitted from electronic systems, place a star (*) by the section(s) that document compliance with the standard. Remove all extraneous pages.
- When responding to essay questions, be sure all responses are in English with proper grammar and spelling.
- Only completed applications that meet the page and word limitations will be accepted and reviewed. Each essay response has a maximum of 500 words. Cleft Palate Teams are not to complete the sections specifically noted for Craniofacial Teams or Cross-Specialty Teams.
- It is recommended that you download a copy of the entire submission and keep it on file.

- Include payment to ACPA by check, Visa, MasterCard, Discover, or American Express. Payment can be made online or submitted to:

ACPA Team Approval
P.O. Box 63193
Charlotte, NC 28263-3193
919.933.9044
teams@acpacares.org

Fees

A non-refundable application fee is required from all applying teams. An annual listing fee is due from all Approved Teams. This fee is included in the application fee for an Approved Team's first year of approval. A penalty fee may be applied to applications that include unredacted Protected Health Information.

Team fees help offset the costs to administer the ACPA Team Approval program. More information regarding fees is available on the ACPA Web site and from the ACPA National Office.

Approved Team Status – Duration and Compliance

When a Team is approved, the status is recognized for five (5) years.

ACPA Approved Teams must submit an [Annual Self-Audit Report](#) to demonstrate continued compliance with the Standards.

At the end of five years, Teams that wish to maintain their status as an ACPA Approved Team must re-submit the application.

Approval Process

Classifications of Approval

Three classifications exist for ACPA Team Approval:

- **Approved:** Meets all requirements for approval.
- **Denied:** Does not meet the requirements for approval.
- **Pending:** More information is required before a final decision can be made.

Review Process

The ACPA Team Approval process is described below. Teams seeking approval should contact ACPA if questions arise regarding the process or interpretation of the approval standards. The ACPA National Office team is available to provide assistance.

ACPA Commission on Approval of Teams
510 Meadowmont Village Cir, Suite 377
Chapel Hill, NC 27517
Phone: 919-933-9044
E-mail: teams@acpacares.org

Evaluation of Applications

The National Office reviews applications to ensure they are complete and have been redacted appropriately and notifies teams of any issues. The Commission then evaluates the applications. In order to avoid actual or implied conflict of interest, members of the commission must recuse themselves during discussions and voting:

- Pertaining to the applications or approval decisions involving their own team.
- Including any conflict of interest or the appearance of a conflict of interest.

After reviewing and discussing each application, the Commission votes to:

- Award approval for five years.
- Request additional information.
- Deny approval. Denied teams are invited to reapply as early as the following year.

The Commission's decision is transmitted in writing to teams within 30 days of the decision.

Pending Status

If a team receives a status of pending, they must submit additional documentation as outlined in the notification letter within 60 days. The Commission will review additional documentation and notify the team within 60 days of receipt. A Pending status can only be conferred once; if the Commission determines that the additional documentation does not meet the Standards, approval will be denied.

Review of Annual Self-Audit Report

Teams must submit an annual self-audit report (using the ACPA Self-Audit Report) and a team listing fee to maintain status as an ACPA Approved Team. These items must be submitted in the years between applications. Upon receipt of the annual self-audit report and fee, the Commission will review the report and determine whether corrective action needs to be taken by the Team. If corrective action is required, the Commission will communicate that to the Team. In the communication, the Commission will specify the areas that need correction and/or improvement and will establish a deadline by which the Team must (1) take those actions and (2) submit a written report demonstrating compliance with the approval standards. If the Team fails to implement the required actions to the satisfaction of the Commission, the Commission may decide to withdraw approval or, if circumstances warrant, grant the Team additional time to achieve compliance. A decision to withdraw approval may be appealed in accordance with the appeal procedures specified below.

Procedures for Reconsideration and Appeal

Reconsideration of Decision to Deny or Withdraw Approval

The Commission will provide justification for any denial or withdrawal of approval. The applicant team may request a reconsideration of the decision. The reconsideration provides the team with the opportunity to present additional evidence, in writing, attesting to compliance with the appropriate standards.

A team desiring a reconsideration must submit a letter containing the formal request and additional evidence addressing each standard for which the team was cited for being out of compliance within 30 days of the decision letter date. A team may submit this information via email to teams@acpacares.org or mail to:

Commission on Approval of Teams
Team Approval Reconsideration
510 Meadowmont Village Cir, Suite 377
Chapel Hill, NC 27517

The team is responsible for ensuring that the request for reconsideration is received by the Commission within 30 days of the decision letter date. If the team does not submit a reconsideration request within the allowable timeframe, the decision to deny or withdraw approval is final and cannot be appealed. The Commission will review reconsideration requests within 60 days of receipt of the team's request. If the Commission reaffirms the original decision, the team may file an appeal.

Appeal Process

Only decisions to deny or withdraw approval may be appealed. An appeal may be made only after a team has asked for reconsideration. A team may appeal only on one or more of the following grounds:

- The decision was arbitrary, capricious or not supported by substantial evidence;
- The Standards were not applied properly; or
- The approval policies and procedures were not followed.

The burden of proof rests with the appealing program. The standard of proof is proof by a preponderance or greater weight of the evidence.

Filing an Appeal

A team requesting an appeal must submit a letter specifically requesting the appeal, citing one or more of the grounds listed above upon which the team is basing its appeal within 30 days of the reconsideration decision letter date. The team will also provide a written explanation of the grounds for appeal. No new information or supporting documentation shall be included that was not present at the time of the decisions made by the Commission. The team shall submit its appeal to the ACPA President via email to teams@acpacares.org or post to:

ACPA President
Team Approval Appeal
510 Meadowmont Village Cir, Suite 377
Chapel Hill, NC 27517
cc: Chair of the Commission

The team is responsible for ensuring the request for appeal has been received within 30 days of the Commission reconsideration decision letter date. The Commission will provide the ACPA President with all information regarding its decision and shall not introduce any information not present in the original decision.

Appeal Panel

The ACPA President shall select at least five persons as members of the appeal panel. Those selected may not have a conflict of interest with the team or the decision being appealed. If the president has a conflict of interest with the program or the decision the president must recuse him/herself. In that event the president-elect will act in the president's place. After the panel has been appointed, the names will be transmitted to the team representative and the Commission chair. The Team and the chair have the ability to challenge any appointment for just cause (e.g., conflict of interest, bias, etc.). Following consideration of any challenges, the president (or if necessary, the president-elect) shall select three members (one to serve as chair) to hear the appeal. The team and the Commission chair shall be informed of the final appointments. Appointment of the panel shall be completed within 30 days of the receipt of the team's appeal.

Appeal Hearing

The panel chair shall schedule an appeal hearing within 60 days of receipt of the written appeal and the written response of the Commission. Each side shall have the right to present a statement or argument via telephone conference. After the hearing, the panel shall meet to consider its decision. The decision must be approved by majority vote of the panel.

Panel Decision and Report

The appeal panel is charged to review the record and to determine whether the team has carried its burden of proving the ground(s) it alleged in support of its appeal.

The panel may make one of the following decisions:

- Affirm the decision made by the Commission.
- Remand the case to the Commission for reconsideration in light of the panel's findings regarding procedural violations or substantive errors in the decision.

The panel will produce a written report stating the basis for its decision. The report will be disseminated to the team, the ACPA President and the Commission within 15 days of its decision. If the panel upholds the decision of the Commission, that decision becomes final.

Reconsideration Following a Remand

When a decision is remanded, the Commission shall reconsider its previous decision no later than 30 days following notification of the panel's decision. The results of the reconsideration will be transmitted to the team

and the president within 15 days of the reconsidered decision. Reconsidered decisions after an appeal are final. No further appeals process is available.

Information for Stakeholders

Public Disclosure

The Commission will release the following information regarding the approval process:

- Information concerning the policy and procedures associated with the approval process including the members of Commission.
- A listing of teams that have been approved.

The Commission will not make available to the public any team's application, supporting documentation and/or resulting correspondence.

Conflict of Interest

All representatives of the Commission and the supporting National Office staff must annually document any conflicts of interest and avoid them in all matters concerning the approval of teams. Responsibility for avoiding conflicts will reside with the Commission.

Listing of Approved Teams

The ACPA National Office publishes the list of approved teams on the website. ACPA Approved Teams may indicate their approval status to the public using the marketing guidelines provided by the ACPA National Office. The listing must reflect the current status of approval. Teams providing inaccurate approval information will be notified. If the information is not corrected, the Commission will provide a public notice correcting the listing and may change the approval status.

Complaints

Complaints Regarding Approved Teams

A complaint about an ACPA Approved Team may be submitted by any professional staff member and/or member of the public.

Criteria

Complaints filed against approved teams must:

- Be related to the *Standards for Cleft Palate and Craniofacial Teams*,
- Describe the specific nature of the complaint, and
- Have occurred within two years of the date of the filing of the complaint.

Complaints must be in writing and include the complainant's name, address and telephone contact information and the complainant's relationship to the team. The letter must be signed and submitted in writing via email to teams@acpacares.org or post to:

Chair, ACPA Commission on Approval of Teams
510 Meadowmont Village Cir, Suite 377
Chapel Hill, NC 27517

Investigation

Within 15 days of receipt of the complaint, a copy (with identifying information removed) will be forwarded to the chair of the Commission for review. If the Commission determines that the complaint meets the criteria, the Commission will decide whether or not to investigate. A majority vote of the Commission is required to investigate the complaint. If the complaint does not meet the criteria, the individual filing the complaint will be notified within 30 days of the Commission receiving the complaint.

If the Commission votes to investigate the complaint, the complainant will be notified within 30 days of the

transmittal of the original notification of the chair that the investigation will proceed. The complainant will be notified that it may be necessary for him/her to be identified during the investigation. If the complaint proceeds, the complainant will be asked to sign a waiver of confidentiality (limited to those involved in the investigation and decision-making process). If the complainant does not want to be identified, the complainant may withdraw the complaint, and the investigation will not proceed.

The team will be notified in writing by the chair of the Commission of the complaint within 15 days of receipt of the waiver of confidentiality. A copy of the complaint will accompany the correspondence from the Commission. The team will be given 45 days to provide a written response and any supporting documentation. Within 15 days of receipt of the response to the complaint, the chair of the Commission will forward the information to the Commission members. Identifying information about the complainant and the program under investigation will not be provided unless a majority of the voting members of the Commission consider the information necessary for the investigation. Additional information can be sought from either the complainant and/or the team if requested by a majority of the Commission. All conflict of interest policies regarding Commission members' participation in approvals will apply to complaint procedures.

The Commission must determine a course of action within 30 days of receiving information. Possible actions include the following:

- Dismissing the complaint;
- Recommending changes to be implemented within a specified period of time;
- Withdrawing approval.

Withdrawing approval will be communicated to the team within 15 days of the decision. The team will have the opportunity to request reconsideration within 30 days of the notification. If the team does not seek reconsideration, the finding will be final. After a reconsideration that upholds a decision to withdraw approval, the team may appeal the decision.

Complaints Regarding the Commission on Approval of Teams

Criteria

Complaints against the Commission may be filed by any approved team professional staff member and/or member of the public. Complaints filed against Commission must:

- Be related to the Standards for Cleft Palate and Craniofacial Teams.
- Describe the specific nature of the complaint.
- Have occurred within one year of the date of the filing of the complaint.

Complaints must be in writing and include the complainant's name, address and telephone contact information and the complainant's relationship to the team. The letter must be signed and submitted in writing via email to teams@acpacares.org or post to:

ACPA President
510 Meadowmont Village Cir, Suite 377
Chapel Hill, NC 27517

Investigation

Within 15 days of the receipt of the complaint, a copy (with identifying information removed) will be forwarded to the ACPA President. The president will determine if the complaint meets the criteria stipulated above. If the complaint does not meet the criteria, the individual filing the complaint will be notified of that finding within 30 days of the forwarding of the complaint. The decision of the president to reject the complaint is final.

If the president determines to investigate the complaint, the complainant will be notified that the investigation will proceed within 30 days of the transmittal of the forwarding of the complaint. The complainant will be notified that it may be necessary for him/her to be identified during the investigation. If the complainant does not want to be identified, they can withdraw the complaint, and the investigation will not proceed.

The Commission will be notified of the complaint in writing by the president within 15 days of receipt of the waiver of confidentiality. A copy of the complaint will accompany the correspondence from the Commission. No identifying information about the complainant will be provided. The Commission will be given 45 days to provide a written response and any supporting documentation.

The president will appoint a complaint review committee of three individuals within 30 days of the receipt of the confidentiality waiver. The members shall be familiar with the standards process. None of the members may have any relationship to or conflict of interest with the complainant. The response from the Commission will be forwarded to the review committee within 15 days.

The complaint review committee must make its determination within 60 days of the receipt of the materials. The committee will provide its results and recommendations in writing to the president. Potential recommendations include:

- Dismissal of the complaint;
- Recommendation of changes in the Commission's policies and procedures; or
- Other recommendations.

The recommendation of the review committee will be forwarded to the Commission in writing within 15 days. The Commission will review the recommendations at its next regularly scheduled meeting and will provide a written response to the president detailing how the Commission intends to respond to the recommendations. The written report will be submitted to the president within 15 days of the meeting.

The complainant will be notified within 15 days of the action taken by the Commission. Decisions made by the Commission relative to complaints may not be appealed.