Level II Verification Experience July 2024

Crystal Walsh, BSN Mercy Medical Center Redding

Surveyors

Lead Reviewer: Fredric Cole. Disaster is his focus

Associate Reviewer: Billy Morgan out of Texas. EMS is his focus

Qport



Crystal Walsh +

Contact Us

Crystal Walsh Dignity Health Mercy Medical Center Redding Company Id: 14565 Trauma

Site Information

Site Profile

Site Contacts

Data Platform Contacts

<u>Invoice</u>

Program Enrollment

Site Visit Request

PRQ

Site Visit History

File Sharing

Resources

Surgical Quality Partner
Marketing Resources

Home Resources

Trauma Quality Program Resources

- Annual Call for Data (NTDB) Website
- TQP Best Practice Guidelines Website
- TQP Fee Structure
- TQIP (Trauma Quality Improvement Program) Website
- <u>TQIP Participant Guide</u>
- TQIP Participant Education Portal
- 2023 NTDS Data Dictionary
- 2024 NTDS Data Dictionary
- · Verification, Review, and Consultation (VRC) Program Website
- Resources for Optimal Care of the Injured Patient (2022 Standards)
- Change Log for 2022 Standards December 2022 Revision
- Change Log for 2022 Standards December 2023 Revision
- PRQ for 2022 Standards (PDF Version) (Dec 2023 Revision)
- VRC Contact Form

Site Visit Information: Virtual Site Visit Documents (for visits on 2022 Standards)

- · Virtual Site Visit Agendas (same for adult and pediatric programs and levels I, II, III)
 - Consultation
 - Verification/Reverification
 - Combined Programs (Adult Level I or II and Pediatric Level II)
 - Corrective Action Review
- Agenda Appendix 1 Medical Record Review [Do not upload medical records to QPort.]
- Agenda Appendix 2 Preselected Chart Review (PCR) Template



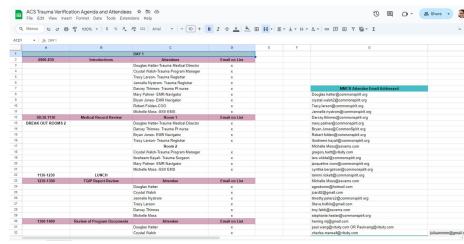
Home Contact Us PRQ Crystal Walsh Dignity Health Mercy Medical Center To access an open PRQ, please click the appropriate "PRQ" hyperlink in the table below. New PRQs are issued within 10 Redding days of site visit application submission. Company Id: 14565 Trauma The new online PRQ is accessible for centers with visits September 2023 and Close Site Information Do not upload medical records or any documents containing protected her Site Profile Docu nts Site Contacts entries **Data Platform Contacts** any documents containing protected health information. ad medical record Invoice Program Program Enrollment Site Visit Site Uploads Reviewer Uploads PRO 1 Selection IT Type Location Reviewers Site Visit Request Corrective Action Virtual PRQ Show ✓ entries with Site Visit History Documentation Site Uploads File Sharing ↓ File 11 Category ↓↑ Date No data available in table Showing 0 to 0 of 0 entries Previous Next **Delete Selected Files** Drag & Drop files here to upload. Or click here to select files individually. Close

Pre Review Checklist

Onsite Logistic Coordinator- Use someone good at zoom or team. Ensure they have the appropriate access to your video conferencing. Test many times with chart review and tour.

One calendar invite. Created a spreadsheet for the logistic coordinator with list of

who needs to attend which section.



Pre Review Call

Have a chart ready to share with them

Allows them to provide tips for a better chart layout.

Ensures they can open the chart

They will go over the agenda

Charts

Upload them as early as possible

Ask to have them verify they received the list.

They may use Qport to return the list with their picks

Chart Build

Created google spreadsheet of charts picked by surveyors

Introductions

Powerpoint highlighting:

TMD, Senior Leadership, Trauma APPs, Trauma Office Staff and EHR Navigators and logistics coordinator.

Map of the area and catchment area.

Regional Outreach

Chart Review Process and PI Tabs we created in Tl.

TQIP Poster and Peregrine Award Project.

Date on Volume, Activations, Transfers

OFI from last visit and actions done

Medical Record Review

TMD and TMP had separate rooms within 20 feet of each other.

TMD had the PI nurse and lead reviewer

TMP had Trauma Surgeon with associate reviewer

My reviewer gave conflicting feedback

Lead Reviewer felt PI by the committee could have been stronger (i.e create guideline).

Each person had a computer station with 2 screens. Set this up the night before and test.

TQIP Report Review

I had my PI nurse do a presentation. She reviewed the ACS Education portal on how to review your TQIP report.

Used as a basis for her presentation.

Review of Program Documents

Injury Prevention provided a presentation

Time to ask clarifying questions regarding documents provided in the PRQ. They didn't have any questions for us

Review Meeting

Provided Physicians the PRQ with their sections tabbed and highlighted prior to survey.

Provided any additional documents as well.

Met with providers ahead of time to discuss the PRQ and answer any questions

Hospital Tour

Provided Maps via email prior to survey.

Used Ipad on wheels with Jabra puck for hospital tour.

Practiced many times using the "spotlight" on Zoom.

Meeting with TMD, TPM

Discuss with your TMD what he may say and what you may say.

Have a list of things you want or wish you had

Exit Interview

- Non-compliant standards
 - Registry- insufficient # for volume
 - PIPS meeting attendance for one trauma surgeon was not at required 50%.
- Opportunities
 - Trauma surgeon staffing is low. Should work to get 1-2 more core surgeons instead of using locums
 - Neurosurgery staffing- There is only 1 local full time physician. This is not sustainable. Continue recruiting
 - Mental health screening tool- need to have an objective defined tool used to screen trauma patients
 - PIPS program- There is good loop closure or nursing and systems issues, but medical decision making loop closure needs additional work. Suggest additional clinical practice guidelines (ie. penetrating cardiac injury)
 - o MTP- need to look into getting TEG or ROTEM

Exit Interview

Strengths

- Good administrative commitment
- Good state and regional involvement for TMD and TPM
- TMD- Great leadership, historical knowledge and commitment
- o TPM- excellent work. Doing director level work
- Stephanie- excellent work with injury prevention tailored to the types of injuries you are seeing in the community
- OPO rate is excellent
- Very good ortho room availability in the OR
- MTP process (supply, ratios, review) is very good
- Excellent ortho trauma care provided without transfers out, having 2 ortho traumatologist is excellent
- Anesthesia- very good collaboration and willing to do regional blocks
- o Dr. Kayali- since he also does critical care
- PI- very good understanding of the TQIP report and documentation of loop closure- but likely to need to consider additional staffing for PI as the volume continues to increase
- Jason Swann -very engaged with community education and outreach, feedback to medics

Report

Surveyors has follow up questions after survey before the final report

Difference in Trauma Surgeons on the call panel and the Trauma committee attendance

SBIRT Policy

Emailed on 9/18

Report is obtained through Qport.

Side Notes

They had issues with our emergent OR sheet.

I was able to change the sheet and upload to the PRQ.

Survey was dreaded but was a good experience

Remember they are there to help

Created ACS patient lists by surveyor in Cerner

Created ACS patient chalkboard in T1

Questions