



# Trauma Facility Designation Site Visit Guidelines: On-Site Focused Review

**Bureau of EMS, Trauma and Preparedness  
EMS and Trauma Division**

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**On-Site Focused Review Date:**

**Review Team Members:**

## Facility Site Visit Guidelines: On-Site Focused Review

### Overview

A focused review is required to determine that the critical deficiency(ies) identified by either the site review team or the Designation Subcommittee has been satisfactorily addressed. A focused review may be conducted as an on-site review or by the submission of requested documentation to the Michigan Department of Health and Human Services (MDHHS). The type of focused review required is determined by MDHHS with input from the Designation Subcommittee. On-site focused reviews must be scheduled and conducted within 12 months from the date of the initial review. The facility must contact MDHHS no later than 9 months after the initial review to schedule the on-site focused review once the identified deficiency(ies) has been corrected. Progress related to areas of opportunity outlined in the site visit report may also be reviewed as part of the on-site focused review. MDHHS reserves the right to cite additional critical deficiency(ies) if found.

### Reviewers

The following reviewers are scheduled to perform your on-site focused review site visit: **(Reviewer Name)** and **(Reviewer Name)**.

### On-Site Focused Review Visit Day

Allow approximately four hours for the on-site focused review visit. Your Regional Trauma Coordinator, **(Name of RTC)**, may participate partially or fully in the review day. The Trauma Medical Director (TMD) and Trauma Program Manager (TPM) must be available for the duration of the on-site focused review.

### Travel Arrangements

Reviewers arrange their travel independently. Facilities are not responsible for travel costs.

### Arrival of Reviewers

The reviewers will gather in the lobby of the main entrance unless other arrangements have been made. They will alert the Trauma Program Manager of their presence and they should be taken to the room that has been designated for the on-site focused review. The designated room must be secure. The reviewers will take a few minutes to organize their responsibilities and ensure all materials needed are present.

A typical agenda for the on-site focused review will consist of:

- 8:00 a.m. Presentation on the corrective actions taken to address the deficiency(ies) and areas of opportunities
- 8:30 a.m. Chart review/validation
- 11:00 a.m. On-Site Focused Review Wrap-Up: Review team discusses findings internally
- 11:30 a.m. On-Site Focused Review Outcome Discussion: Review team discusses findings with TMD, TPM, and others as desired by the facility

### Presentation of Corrective Actions

Use this time to present the actions your trauma program has taken to correct the identified deficiency(ies) and progress made regarding areas of opportunity from the original site visit report. Ensure any staff whose positions were involved in the identified deficiency(ies) are available for questions. While the areas of opportunity are not the primary focus of the visit,

reviewers can provide additional comments and/or recommendations to assist in organizational success.

### **Chart Review/Validation**

The following items are necessary for the on-site focused review visit:

- A secure, private conference room reserved for the full four hours
- A table large enough to accommodate the charts for review and room for two people to work comfortably
- Two computers with access to the EMR
- Staff available to navigate the EMR and printed charts
- Pull a minimum of four of the most recent medical records within the focused review reporting period that substantiate the work done to address the identified critical deficiency(ies). In the event there are less than four records, pull all the medical records in the focused review reporting year that document the correction of the identified deficiency(ies).
  - Then, have the following portions of the medical records printed and include in the appropriate category (stack) above:
    - EMS record
    - ED Record/Trauma flow sheet
    - Provider ED notes/H&P
    - Discharge summary/transfer record/disposition documentation
    - Surgeon's ED note (if applicable)
    - Any multidisciplinary review or performance improvement records that exist for the pulled charts. For example, PI tracking worksheet with attachments (emails, education presentations, newsletters, etc. illustrating activity surrounding PI), multidisciplinary meeting minutes, peer review minutes, and any other committee meeting that addressed the PI issue.

### **On-Site Focused Review Wrap-Up: Closed Session (Reviewers Only)**

The reviewers will go into closed session to prepare for the findings discussion after the chart review process is completed for no longer than 30 minutes.

### **On-Site Focused Review Findings Discussion**

The On-Site Focused Review Findings Discussion will take place in the designated chart review room. Unlike the formal exit interview at the original site visit, the outcome discussion will be a brief discussion of the findings related to the correction of the identified deficiency(ies). The TMD and TPM must be present. Others as desired by the hospital administration may be in attendance.

***The reviewers' findings are preliminary. MDHHS will make the final determination on the correction of the identified deficiency(ies).***

### **Final Report**

Upon completion of the on-site focused review visit, the review team members will submit a final report to MDHHS. The report will be reviewed by the Designation Subcommittee who will forward their recommendation regarding the verification and designation determination to MDHHS. The final verification and designation determination will be made by MDHHS based on recommendations from the Designation Subcommittee and the on-site focused review team.