Site Reviewer Guidelines for Trauma Facility Designation: On-Site Focused Review

Bureau of EMS, Trauma and Preparedness
EMS and Trauma Division

Verification and Designation Coordinator
Tammy First
(517) 241-7353
TraumaDesignationCoordinator@michigan.gov

Mailing Address
PO Box 30207
Lansing, MI 48909

www.michigan.gov/traumasystem

On-Site Focused Review Date:

Facility Name:
Site Reviewer Guidelines: On-Site Focused Review

Thank you for agreeing to assist the Michigan Department of Health and Human Services (MDHHS) in the on-site focused review of (Facility Name) on (Date). The information throughout this guide will help you prepare for the review.

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 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.

List of Contacts:

<table>
<thead>
<tr>
<th>Title</th>
<th>Name</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trauma Medical Director</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Trauma Program Manager</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Regional Trauma Coordinator</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reviewer</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reviewer</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Contact your co-reviewer prior to the on-site focused review visit to develop an action plan. Both the Trauma Medical Director (TMD) and Trauma Program Manager (TPM) must be available for questions during the on-site focused review. The facility has been given instructions and materials to prepare for the visit.

**On-Site Focused Review Visit Day**

On-site focused reviews are conducted in one four hour day.

**Enclosed Materials**

The following documents are enclosed and electronic versions can be found online at [www.michigan.gov/traumasystem](http://www.michigan.gov/traumasystem). Please review all materials in advance of the on-site focused review visit and come prepared with any questions you may have.

1. Facility’s completed Pre-Review Questionnaire (PRQ) from original site visit
2. Facility’s Designation Application from original site visit
3. Site Visit Report from original site visit
4. Designation Determination letter from original site visit
5. Michigan Criteria
6. Medical Record Evaluation Tool (Level III or Level IV)
7. Performance Improvement Process Checklist Tool (Level III or Level IV)
8. Quick Criteria Reference Guide (Level III or Level IV)
9. Final On-Site Focused Review Report Template (use the electronic version when completing the final report)
**Lead Author**
The lead author will compile the findings from the on-site focused review, write, and submit the final report. The lead author will be identified by MDHHS prior to the on-site focused review. The lead author is responsible for assimilating the reviewers input into the report reflecting consensus whenever possible.

**Contract**
Part of the process includes a contract that formalizes your roles (lead author vs. team member), responsibilities and agreement to conduct site reviews on behalf of MDHHS. If you have not previously completed a contract in the last three years, a contract will need to be completed. The contract must be signed every three years. Work cannot commence until a fully executed contract has been secured.

**Travel Arrangements**
Travel is set up by the reviewer following MDHHS policy (see Appendix A). The Verification/Designation Coordinator is available for assistance.

**Confidentiality and Communication**
Outside evaluation may be anxiety producing. Effective communication can mitigate this and provide a productive experience for growth. Communication throughout this process must be respectful, thoughtful, and professional.

Important Reminders:
- Handle confidential information in a confidential manner.
- Keep all materials associated with this review secure.
- Do not divulge any information regarding the verification/designation process or potential outcomes of the visit.
- If discussions take place, be thoughtful about where and who is included.
- Maintain complete objectivity.
- Recommendations must be data driven.

Any questions on the PRQ or site visit report can be discussed with your co-reviewer prior to the site visit. If needed, you may contact the facility for more details or follow-up at the on-site focused review visit.

**Overview**
Your charge is to verify the facility has corrected the identified deficiency(ies) documented in the original site visit report. The on-site focused review visit will include a presentation of corrective actions taken by the facility, and as applicable, a review of medical records and the performance improvement process. The facility has been instructed to have the TMD and TPM available for the duration of the on-site focused review.

Your responsibilities as a site reviewer are:
- To conduct an on-site focused review to verify corrective actions have been taken to address the identified deficiency(ies).
- To make a report of your findings.
Important Review Documents
Prior to the on-site focused review visit, thoroughly review the facility’s site visit report and PRQ from the original site visit. If further clarification is needed, you may contact the lead author from the original site visit.

The review documents containing notes must be submitted to MDHHS with the final on-site focused review report.

On-Site Focused Review
Plan to arrive about 15 minutes prior to the scheduled start time. Meet in the lobby of the main entrance (unless other arrangements have been made). Start by meeting with your co-review team member in the designated area. Once you have met, notify the TPM of your presence. The TPM will take you to a designated room. Once you are in the designated room, take a few minutes to organize responsibilities between yourself and the other site reviewer. Ensure the facility has included the materials below in the room as instructed.

- Two computers with access to the EMR
- Printed charts for case review

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

8:00 a.m. Presentation of 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 Findings Discussion: Review team discusses findings with TMD, TPM, and others as desired by the facility

There is no scheduled tour for the on-site focused review. However, in the event the identified deficiency(ies) warrants a look at another department in the trauma program, you may visit that department. Please notify the facility in advance if you plan to visit a department.

Presentation of Corrective Actions:
The facility will present the corrective actions that have been implemented to address the deficiency(ies) and progress in the areas of opportunities identified from the original site visit report. In addition, the facility has been instructed to have all staff whose positions are involved in the identified deficiency(ies) available at this time for questions. While the areas of opportunity are not being reviewed for the on-site focused review, use this time to provide ongoing education to the facility on the correction of the areas of opportunity to assist in organizational success.

Chart Review
Facilities have been instructed to provide unrestricted access to the entire medical record (EMR) and to have staff available to navigate the EMR if necessary. They have been instructed to pull four of the most recent medical records within the focused review reporting period that document the correction of the identified deficiency(ies). In addition, the following portions of the record will be printed:

- 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 PI records that exist for the pulled charts (feedback from centers)

Please note, while the facility will be printing the medical records, reviewers may utilize the EMR if preferred.

Use the Medical Record Evaluation Tool to guide the evaluation of each chart. Notes on the Medical Record Evaluation Tool must be objective and based on the facts contained within the record.

In the event there are less than four records, the facility will print all the medical records within the focused review reporting year that address the correction of the identified deficiency(ies).

**On-Site Focused Review Wrap-Up: Closed Session (Reviewers Only)**
Use this time to prepare your verbal report to the TMD, TPM, and others as identified by the facility. The verbal report will identify whether the deficiency(ies) cited in the original report has been corrected.

The reviewers will spend the time in the closed session to organize who will give the verbal report and develop a plan to finalize the report. The closed session should last 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. The TMD and TPM must be present. Others as desired by hospital administration can be in attendance, however, unlike the formal exit interview at the original site visit, this will be a brief discussion of the findings related to the identified deficiency(ies).

**Read the following statement as an introduction to the outcome discussion:**

“This on-site focused review site visit has been made by reviewers approved by the Michigan Department of Health and Human Services. The reviewers’ findings are focused on the correction of the identified deficiency(ies) from the original site visit report.

The final decisions regarding the correction of the identified deficiency(ies) from the original site visit report will be made by the Michigan Department of Health and Human Services and may differ from the findings we are about to report.”

If there is disagreement on the findings, remind the facility that the report will go through the Designation Subcommittee then MDHHS before a final determination is made. If they disagree with the final determination, they should contact the Verification/Designation Coordinator for information on the appeals process.

**Post Site Visit: Report Creation**
Use information obtained from the on-site focused review day to write the report. The reviewers will collaborate on a report draft. The lead author will be responsible for reviewing, revising and completing a final report for submission to the Verification/Designation Coordinator. The following information will provide guidance on each section of the report.
**Corrective Actions**
Carefully document the findings from the review (presentation on corrective actions, chart and performance improvement review) to report on the corrective actions the facility took to correct the deficiency(ies) identified in the original site visit report. Clearly document the cited deficiency(ies) and corrective actions as the Designation Subcommittee and MDHHS will base the final determination on the findings of the report.

**Case Summaries**
Case summaries provide an important overview of a trauma program. At least one case summary must be completed for each category reviewed. Use the case summary section on the Medical Record Evaluation Tool to make notes for the final on-site focused review report.

Case summary reports should be de-identified by avoiding identifiers such as medical record number, age, name of receiving facility, or any other information that might identify the case. Only include gender, description of age (young/elderly) and a summary of pertinent information. Include the following information for each case reviewed:

1. Requested information noted on the on-site focused review report:
   a. Date of service
   b. Admission service (if applicable)
   c. Level of activation
   d. ICU patient (if applicable)
   e. Injury Severity Score (if applicable)
2. Provide a summary of the case.
3. Summarize the facility's PI activities and your comments regarding the depth, breadth and effectiveness of those PI activities.

**Closing Comments**
Indicate whether the identified deficiency(ies) from the original report has been corrected. Educational comments and/or recommendations related to the areas of opportunity may also be briefly discussed. Include any further comments you may have that were not covered previously in the report.

**Report Submission**
The report is due to the Verification/Designation Coordinator *within three weeks* of the on-site focused review visit. The lead author will email the final report (Word version) to the Verification/Designation Coordinator and copy the co-reviewer. Both reviewers are responsible for mailing the originals of the facility’s PRQ with your notes, and all other documents containing notes from the review (pre-addressed envelope provided). Upon receipt of these documents, travel expense reimbursement and contract payment will be processed.

**Invoice and Receipts**
Please ensure you have the most recent invoice document, which is available on the trauma website. In addition, utilize the *Travel Guidelines* document (see Appendix A) to guide you through the reimbursement process. Please submit the invoice once travel is completed.
Appendix A – Guide to In-State Site Review Team Travel Reimbursement

I. Payments through Electronic Funds Transfer (EFT)
   • The State of Michigan requires all new and existing contractors to receive their agreement reimbursements through EFT. When going through the EFT sign-up process, a W-9 form will be automatically completed as well. A W-9 is required to receive payment. For more details and to sign up for EFT, visit [http://michigan.gov/cpexpress](http://michigan.gov/cpexpress).
     o On the homepage of the website above, click on “Contract and Payment Express (C&PE) Pre-Registration Overview” and then click on “Individual Payee” for an overview training.
     o Once the overview training has been completed, click on “Register for Contract & Payment Express” back at the homepage and follow the instructions to set up EFT payments and complete a W-9.

II. Reimbursement of Mileage*
   • Mileage is reimbursed at $0.54/mile
   • Complete the mileage calculation on the invoice (Can use MapQuest to calculate mileage).

III. Reimbursement of Meals*
   • Meals, including reasonable gratuity, are reimbursed at the following rates:
     o Breakfast - $8.50
       ➢ When travel commences prior to 6:00 a.m. and extends beyond 8:30 a.m.
     o Lunch - $8.50
       ➢ When travel commences prior to 11:30 a.m. and extends beyond 2:00 p.m.
     o Dinner - $19.00
       ➢ When travel commences prior to 6:30 p.m. and extends beyond 8:00 a.m.
   • A receipt is required to request reimbursement of meals up to the published maximum meal rate.
   • The receipt must be an itemized receipt and include the date, time, business name, and city and state where the business is located.
   • Credit card receipts are not allowable as they are not itemized.
   • Tips on meals cannot exceed 20%.
   • Alcoholic beverages are not allowable as reimbursable expenses.
   • State of Michigan does not allow per diem rates for meals.

IV. Reimbursement of Lodging Expense
   • Overnight stays must be approved by the Verification/Designation Coordinator.
   • Sales or use taxes, applicable to lodging charges, are reimbursable in addition to the regular lodging rate.
   • The receipt must be an itemized receipt and include the date, time, and business name.
   • The receipt must have a zero balance.

V. Professional Fee and Lead Author Fee
   • Physician Fee: $1300
   • Nurse or Physician Assistant Fee: $800
   • Lead Author Fee: $200
   • Supplemental for travel over 300 miles one way: $500
Appendix A – Guide to In-State Site Review Team Travel Reimbursement (continued)

VI. **On-Site Focused Review Professional Fee and Lead Author Fee**
   - Physician Fee: $800
   - Nurse or Physician Assistant Fee: $500
   - Lead Author Fee: $200
   - Supplemental for travel over 300 miles one way: $500

VII. **Instructions for Invoice Submission**
   1. Fill out the invoice completely. The invoice, as well as a completed example, can be found at [www.michigan.gov/traumasystem](http://www.michigan.gov/traumasystem).
   2. Scan the invoice and individual receipts for lodging and meals.
   3. Submit the invoice and itemized receipts to the State Trauma Designation Coordinator at [traumadesignationcoordinator@michigan.gov](mailto:traumadesignationcoordinator@michigan.gov).
   4. Approval of the invoice is sent after completed site review report is received.

*Rates determined by the State of Michigan and are subject to change.*