

Trauma Coordinators Committee

Statewide Trauma Advisory Council
Wednesday, September 6, 2023



Acronyms

- CRC: Classification review committee
- DHS: Department of Health Services
- EMS: Emergency medical services
- ISS: Injury severity score
- PIPS: Process improvement and patient safety
- PRQ: Pre-review questionnaire
- RTAC: Regional trauma advisory council

Acronyms

- TCF: Trauma care facility
- TMD: Trauma medical director
- TPM: Trauma program manager
- WTCS: Wisconsin trauma care system

Agenda

- Introductions and announcements
- Review and approve June 2023 meeting minutes
- Billing project update
- Mentorship program launch
- The classification cycle presentation
- Classification trends
- Public comment related to trauma coordinators of WTCS

Committee Members

- Co-Chairs:
 - ◆ **Lisa Heinz**, Aurora Summit, Region 7, Level II
 - ◆ **Rebecca Ekenstedt**, Cumberland Healthcare, Region 1, Level IV
- Committee Members:
 - ◆ **Ali Heiman**, Aurora Oshkosh, Region 7, Level III
 - ◆ **Betty Brien**, UPH Meriter, Region 5, Level IV
 - ◆ **Christal Foreyt**, Gundersen Boscobel, Region 5, Level IV

Committee Members

- ◆ **Kelly Faymoville**, SSM St. Agnes, Region 7, Level III
- ◆ **Krista Miller**, Hudson Hospital, Region 1, Level IV
- ◆ **Michelle Hackett**, ProHealth Oconomowoc/Waukesha, Region 7, Level III
- ◆ **Rebecca Ekenstedt**, Cumberland Healthcare, Region 1, Level IV
- ◆ **Tracie Halvorsen**, SSM St. Mary's Madison, Region 5, Level II
- ◆ **Wendy Galonski**, Aurora St. Luke's, Region 7, Level III

Approval of Minutes

Billing Project Update

Billing Project Update

- Researching available resources
- Drafting document
- Looking for someone from the Division of Medicare and Medicaid to partner
- Timeline goal on Spring 2024

Mentorship Program Launch

Mentorship Program Launch

- Link will be shared via Gov Delivery system and through RTACs after the meeting.
- Link will be open until September 29, 2023 at 4:00pm.
- We will plan to reopen for new persons who want to sign up quarterly.

Trauma Care Facility Site Review Cycle

Broad Overview of the Process



Pre-Review: Scheduling

- Scheduling: Can schedule whenever the site would like but DHS will reach out six months to one year before.
- At a minimum, the TPM, TMD, and a representative of administration should be available for the duration of the visit.

Pre-Review: Documents

- Level [III](#) or [IV](#) PRQ
- [Trauma Care Facilities \(TCF\) Classification Process](#)
- [TCF Site Review Agenda](#)
- [TCF Classification Site Review Introduction PowerPoint Outline](#)
- [Required documents checklist](#)
- [Pediatric equipment checklist](#)
- Documents are online and will be sent via email approximately three months prior to your scheduled site visit

Pre-Review: Submission

- 45 days prior to the scheduled site visit, submit to DHSTrauma@dhs.Wisconsin.gov,
 - ◆ Completed PRQ
 - ◆ Written PIPS Plan
 - ◆ Activation Criteria
 - ◆ TPM Job Description
 - ◆ TMD Job Description
 - ◆ Any other documents you referenced within your PRQ

Pre-Review: Tips and Tricks

- This is a living document that can be updated as needed.
- By typing rather than handwriting information, the document can be updated more easily.
- Several people should review the document for accuracy and spelling.
- It can be used as an orientation tool for new trauma coordinators or registrars.

Pre-Review: Chart Preparation

- Plan for the trauma medical director and trauma coordinator to attend the chart review.
- Select your charts in advance, as indicated in the [TCF Classification Site Review Agenda](#).
 - ◆ Last five trauma deaths treated at your facility within the reporting year.
 - ◆ Last five trauma patients admitted to or transferred out from your facility with an ISS greater than 15
 - ◆ Last five trauma patients admitted to or transferred out from your facility

Pre-Review: Chart Preparation

- Last five trauma deaths treated at your facility within the reporting year.
- Last five trauma patients admitted to or transferred out from your facility with an ISS greater than 15.
- Last five trauma patients admitted to or transferred out from your facility.
- All charts should demonstrate your PIPS process.

Pre-Review: Chart Preparation

- If printing your documents:
 - ◆ Print the required documents and place in order in a designated folder. It is helpful to have them divided into sections (prehospital, emergency department, transfer, inpatient).
 - ◆ Place all performance improvement documentation, such as checklists or multidisciplinary meeting minutes, pertaining to that issue in the patient-specific folder.

Pre-Review: Chart Preparation

- If sharing your documents electronically:
 - ◆ Ensure you have at least two individuals who are familiar with your system and charts available to assist each of the site reviewers with navigation of the folder. The electronic health record (EHR) should only be utilized upon request of the site reviewers.
 - ◆ Ideally, export the items from the EHR and save the documents into a patient-specific folder.

Pre-Review: Chart Preparation

- ◆ Ensure you have all sections of care (prehospital, emergency department, transfer, inpatient) clearly labeled within the specific patient's folder.
- ◆ Ensure you have all performance improvement documentation, such as checklists or multidisciplinary meeting minutes, pertaining to that issue within the specific patient's folder.
- Electronic charts do NOT need to be submitted ahead of time.

Pre-Review Virtual Call

- Approximately two weeks prior to your scheduled site visit, you will have a pre-review virtual call with one or both of your site reviewers.
- In this call, the reviewers will discuss any clarification needed from the PRQ, review the agenda for the day, and discuss logistics.

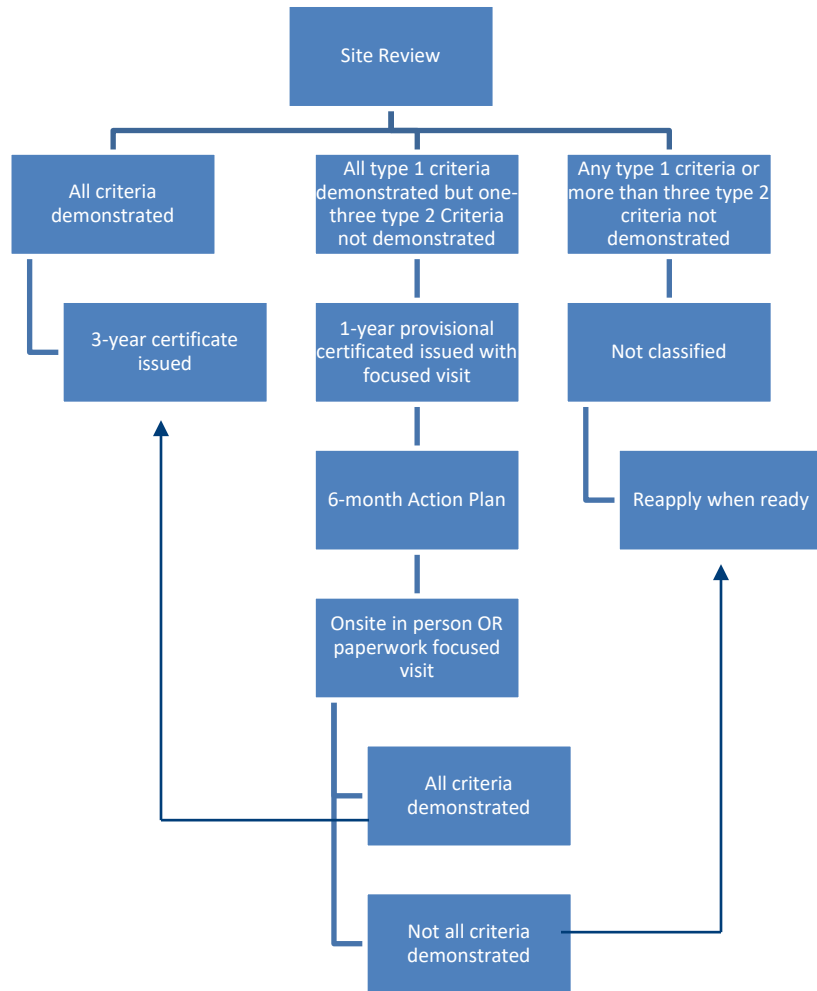
Site Visit: Day-of

- Typically begins at 9 a.m. and lasts four to six hours
- Agenda
 - ◆ Opening Remarks
 - ◆ Medical Record and Document Review
 - ◆ Hospital Tour
 - ◆ Site Reviewer Conference
 - ◆ Exit Interview

Post-Review

- Two to six weeks post visit, your site reviewers present their findings to CRC.
- CRC provides the final report and recommendation to DHS.
- DHS Medical Oversight reviews final report and recommendation from CRC.
- DHS provides post letter, final report, and certificate if appropriate.
- Post-review survey link is provided via email.

Post-Review



Post-Review: Classification

- All criteria demonstrated
- 3-year certificate issued
- Continue the great work and connect with DHS as needed

Post-Review: Not classified

- Any type 1 criteria or more than three type 2 criteria not demonstrated
- Notify local EMS, hospitals, and RTAC
- Work with DHS as needed
- Reapply when ready

Post-Review Focused Visits

- The visit will either be on site in person or virtually through paperwork.
 - ◆ If criteria is demonstrated through chart review or documents that may contain PHI, the visit will be onsite in person.
 - ◆ If criteria is demonstrated through certificates, meeting minutes, or other documentation that can be submitted electronically, the visit will be virtual through paperwork.

Post-Review Action Plan

- Regardless of type of visit, the hospital will need to complete F-00602C Action Plan.

TRAUMA CARE FACILITY CLASSIFICATION REVIEW COMMITTEE FOCUSED VISIT ACTION PLAN REPORT

Facility Name	Requested Level	Date of Submission	Date of Original Review
█	Select One	█	█

Criterion Deficiency with Corrective Action

Criteria Deficiency: █
Corrective Action: █

Criterion Deficiency with Corrective Action

Criteria Deficiency: █
Corrective Action: █

Criterion Deficiency with Corrective Action

Criteria Deficiency: █
Corrective Action: █

Additional Comments

█

Trauma Program Manager or Trauma Coordinator Signature	█
Trauma Medical Director Signature	█
Administrator Signature	█

Post-Review Action Plan

- The action plan form is provided with your final site visit documentation email.
- This form should be completed and returned to DHS no later than six months prior to your scheduled focused visits.
- **NEW:** DHS will provide feedback on action plan.

Focused Visit: Onsite In Person

- This will be scheduled one-year from your original site review date.
- At a minimum, the TPM, TMD, and a representative of administration should be available for the duration of the visit.

Focused Visit: Onsite In Person

- Each in person visit varies slightly based on the needs of the cited criteria deficiencies, please work with DHS in your specific instance.
- All in person visits will have a chart review sections, we ask that you pull charts that demonstrate compliance with the cited criteria deficiencies.

Focused Visit: Onsite In Person

- Typically begins at 9 a.m. and lasts three to four hours
- Agenda
 - ◆ Introduction (no PowerPoint presentation)
 - ◆ Discussion of Action Plan
 - ◆ Medical Record and Document Review
 - ◆ Site Reviewer Conference
 - ◆ Exit Interview

Focused Visit: Onsite In Person

- You will receive a f-00602a after the focused visit date.

DEPARTMENT OF HEALTH SERVICES
Division of Public Health
F-00602A (01/2023)

STATE OF WISCONSIN

**TRAUMA CARE FACILITY
IN PERSON FOCUSED VISIT FINAL REPORT**

Facility Name	Facility Address	Requested Level <small>Select One</small>	Date of Review
█	█	█	█
Criterion Deficiency with Corrective Action			
Criteria Deficiency: █			
Corrective Action: █			
Criterion Deficiency with Corrective Action			
Criteria Deficiency: █			
Corrective Action: █			
Criterion Deficiency with Corrective Action			
Criteria Deficiency: █			
Corrective Action: █			
Strengths			
█			
Opportunities for Improvement			
█			
Additional Reviewer Comments <small>(Include any potential criterion deficiencies)</small>			
█			
Comments from Reviewed Facility			
█			
Site Reviewers	█	█	█
Hospital Attendance	TPM: █	TMD: █	Administrator: █ Others: █

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Case Review/Case Number: █	Category: █
Review of Facts	
EMS: █	
ED: █	
Level of Activation: █	
Injury Severity Score (if available): █	
Inpatient Stay: █	
Admission Service: █	
Performance Improvement	
Levels of Review: █	
Issue Found: █	
Plans and Implementation Summary: █	
Loop Closure: █	
Reviewer Comments	
█	
Case Review/Case Number: █	Category: █
Review of Facts	
EMS: █	
ED: █	
Level of Activation: █	
Injury Severity Score (if available): █	
Inpatient Stay: █	
Admission Service: █	
Performance Improvement	
Levels of Review: █	
Issue Found: █	
Plans and Implementation Summary: █	
Loop Closure: █	
Reviewer Comments	
█	

Focused Visit: Paperwork

- All documents will be due one-year from your site visit date.
- Documentation needed for submission varies based on the cited criteria deficiencies, please work with DHS in your specific instance.

TRAUMA CARE FACILITY
PAPERWORK SUBMISSION FOCUSED VISIT COVER SHEET

Facility Name	Requested Level	Date of Submission	Date of Original Review
	Select One		
Criterion Deficiency with Corrective Action (with attached documentation) Criteria Deficiency: <input type="text"/> Corrective Action: <input type="text"/> Documentation attached? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please supply the name of the document <input type="text"/>			
Criterion Deficiency with Corrective Action (with attached documentation) Criteria Deficiency: <input type="text"/> Corrective Action: <input type="text"/> Documentation attached? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please supply the name of the document <input type="text"/>			
Criterion Deficiency with Corrective Action (with attached documentation) Criteria Deficiency: <input type="text"/> Corrective Action: <input type="text"/> Documentation attached? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please supply the name of the document <input type="text"/>			
Additional Facility Comments <input type="text"/>			
Reviewer Comments (For DHS use only) <input type="text"/>			
Facility Signature	TPM: <input type="text"/> TMD: <input type="text"/> Administrator: <input type="text"/>		
Site Reviewer Signature (For DHS use only)	<input type="text"/> <input type="text"/>		

Focused Visit: Paperwork

- DHS will provide you will a f-00602b to fill out and return as a coversheet to your documentation provided.

Post-Review: Focused Visit

- Two to six weeks post visit, your site reviewers present their findings to CRC.
- CRC provides the final report and recommendation to DHS.
- DHS Medical Oversight reviews final report and recommendation from CRC.
- DHS provides post letter, final report, and certificate if appropriate.
- Certificate will be three years from your original site review date.

Post-Review: Survey

- After every site visit, a post-review survey link is emailed with your facilities information.
- Written or verbal feedback to the State Trauma Coordinator on the process is always welcomed.

Criteria Trends



Unclassified Trends

- **Unclassified (voluntary): Six facilities**
 - ◆ One level III
 - ◆ Five level IV
- **Unclassified through site visit: Eight facilities**
 - ◆ Three level III
 - ◆ Five level IV

Change in Classifications

- One facility level III to IV then closed
- Two facility level III to IV (official only)
- One facility level II to level III
- One facility unclassified to level IV

New TPM

Criteria cited

Criteria Type	New TPM	Not New TPM
At least one Type 1	4	1
At least one Type 2	15	12
4 or more Type 2s	4	1

Criteria of Note: Type 1

- 2(a): The TCF must have an integrated, concurrent trauma PIPS program
- 2(f): Surgeon response time
- 5(q): Rounding for injured patients who are admitted to individual surgeons or nonsurgical services
- 8(e): Timely neurosurgical care
- 9(c): Orthopedic surgeon liaison
- 11(c): Physician anesthesiologist or certified registered nurse anesthetist or a certified anesthesia assistant liaison

Criteria of Note: Type 2

- 2(m): ATLS for physicians and APPs
- 2(o): Multidisciplinary committee requirements
- 5(r): Written guidelines for the care of non-surgically admitted patients
- 7(e): Alternate pathway for emergency physicians
- 14(i): Trauma registry validation
- 17(b): Injury prevention included in a job description

Mitigation

- Start PRQ early as a gap analysis
- Focus first on type 1 criteria, then type 2
- Email questions to DHSTrauma@dhs.Wisconsin.gov

Questions?