



ARKANSAS DEPARTMENT OF HEALTH

SITE SURVEY GUIDELINES FOR HOSPITALS SEEKING LEVEL IV STATUS

Pre-Survey Process:

1. Hospitals will submit the completed Hospital Pre-review Questionnaire (PRQ) at least six weeks prior to the survey date. The PRQs will be reviewed at the Arkansas Department of Health (ADH) and then forwarded electronically to the survey team at least one month prior to the visit.
2. Please do not hesitate to call your ADH Trauma Nurse Coordinator (TNC) for questions about the PRQ or the site survey. It is appropriate to communicate directly with the Surveyor about logistics of the survey but not details concerning completion of the PRQ.
3. All Trauma Registry records for the facility's reporting period are due to the Arkansas Trauma Registry upon submission of the PRQ, regardless of the standard submission schedule.
4. During the six-week period between submission of the PRQ and the survey the hospital should:
 - a. Work with the ADH TNC to arrange travel if appropriate. Airfare, car rental, and/or mileage costs will be provided by the Surveyor to the ADH TNC at least one month prior to the site survey. The ADH TNC will communicate the travel costs to the hospital. Mileage will be paid at the State of Arkansas mileage rate (currently \$0.52 per mile) and can be found at www.gsa.gov/perdiem.
 - b. The reimbursement for expenses and the honoraria of \$1500 for the Surveyor will be presented to the ADH Trauma Section representative at the time of the survey. The Trauma Section representative will then present the funds to the Surveyor. The honorarium needs to be payable to the Surveyor.
 - c. The hospital should secure the appropriate number of hotel rooms for the Surveyor and ADH staff. The hospital will pay the hotel directly.
 - d. Begin compiling all Quality Improvement (QI) documents for patients that could be reviewed during the survey.
 - e. Secure a room for the chart review. This area should have a hospital computer for the Surveyor and adequate workspace to review charts and the QI minutes for selected patients. This room should be quiet and out of the hospital traffic flow. Lunch should be served during the chart review.



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5. The hospital will receive the list of charts selected for survey two to three weeks prior to the site survey from the ADH Trauma Section. Additional records may be requested on the day of the survey. The Trauma Nurse Coordinator will need to have the following documents printed from the electronic medical records (EMR), if EMRs are used within the trauma center.

List of documents to be printed if EMRs are used:

- H & P
- Discharge Summary
- Operative Reports
- Initial imaging reports
- Run Sheets
- Trauma Flow Sheets
- ED Physician Records

Survey Process:

6. Conduct of the Site Survey

The site survey for Level IV hospitals is conducted in a half to a full day. The Surveyor will arrive at the hospital at or around 10:00 a.m. (or at the discretion of the Surveyor). You will receive an agenda for the survey from your ADH TNC. Site surveyors are charged with the responsibility of obtaining a detailed and accurate assessment of a hospital's capabilities in a very short period of time. For this reason, there will be no presentations or deviations in the agenda or tour.

7. Hospital Tour – The site survey may begin with a hospital tour. This process takes about one hour. Areas toured can include:
 - Ambulance bay
 - Decontamination equipment area
 - ED trauma bay
 - Radiology – CT scanner
 - ICU
 - Blood bank Floor OR/PACU
8. Working chart review lunch - Have one person per Surveyor who is extremely familiar with the EMR in order to “guide” the Surveyor through the chart. All QI documents pertinent to the patient's care and subsequent discussion should be present with the chart for review.



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9. The Surveyor will also review the QI process, Continuing Education for physicians and nurses, Injury Prevention, and any other relevant documents during the chart review process. The chart review process will take between two and four hours. If the trauma center uses EMRs, have the names and medical record numbers listed by the chart categories below:
 - a. ***Level IV trauma centers: at least 10 charts will be reviewed***
 - Deaths
 - High level activations Patients admitted with ISS>8
 - Pediatric patients (<15 years of age)
 - Patients with ED LOS > 2 hours with an ISS >8 for transferred patients
 - Patients intubated in the ED
 - Hospital QI cases (3) that followed the QI process and represent good QI management
10. The Surveyor will deliberate and prepare for the exit interview.
11. The Surveyor will conduct the exit interview with Trauma Program staff. This will take about thirty minutes. It is mandatory that the following personnel attend the exit interview: Trauma Medical Director, Trauma Program Manager, Trauma Registrar, and the Administrator with oversight of the Trauma Program. Others may be invited at the discretion of the Trauma Program. This session can be recorded.

Post-Survey Process:

12. Within two weeks of the site survey, the Trauma Section will send to the hospital a Surveyor and Designation process evaluation. Please have the Trauma Program Manager complete these in conjunction with the Trauma Medical Director and hospital administration.
13. The final survey report should be back to the hospital within eight weeks of the designation site survey.