



ARKANSAS DEPARTMENT OF HEALTH

OVERALL DESIGNATION PROCESS FOR ARKANSAS TRAUMA CENTERS

Selection of Trauma Surveyors

Trauma Surveyors (hereafter referred to as Surveyors), with the exception of the Arkansas Department of Health (ADH) representative, should be active practitioners in a designated trauma program. Previous site survey experience is preferable but not required. All candidates for Surveyors will be required to successfully complete an ADH-sanctioned credentialing course. This course is more fully described in a separate document captioned “ADH - Trauma Surveyor Credentialing Process.” Once the course has been completed, ADH will designate the individual as a Surveyor Candidate. The Surveyor Candidate’s first site survey will be proctored by an ADH Medical Consultant. The Surveyor Candidate will complete the survey and produce a written report in accordance with the *Arkansas Trauma System Rules and Regulations* (hereafter referred to as the *Rules*). This initial report will be reviewed by an ADH Medical Consultant and feedback will be provided to the Surveyor Candidate. Successful completion of one survey will result in the Surveyor Candidate attaining full designation status as an Arkansas Trauma Surveyor. The Lead Surveyor will be someone with extensive survey experience. Any expenses related to the Surveyor candidate will be paid by ADH. The Surveyor candidate will not receive a stipend for this survey.

The composition of the survey team is specified in the *Rules* and will be a mixture of in-state and out-of-state Surveyors. Level I survey teams must be made up of a majority of out-of-state Surveyors whereas Level II teams must have at least one out-of-state Surveyor. Level III and IV surveys may be performed by in-state Surveyors from another region of the state.

Scheduling and Financial Aspects of a Site Survey

A hospital seeking designation as a Level I-IV Arkansas Trauma Center should first place a telephone call to their ADH Trauma Nurse Coordinator (TNC). This should be followed by a formal, written request from the hospital’s Administrator/Chief Executive Officer (CEO) to Renee Joiner, Trauma Section Chief, Arkansas Department of Health, 4815 West Markham

Street, Slot 4, Little Rock, AR 72205-3867. The request should include a two week period for the survey, with blackout dates included. It is noted that Level I and II site surveys will require two days and Level III and IV surveys will require only one day. In addition, the letter should set forth the identities, e-mail addresses, and contact numbers of the hospital's Trauma Medical Director and Trauma Program Manager. The dates for the survey must be finalized at least four months prior to the anticipated visit.

The ADH will respond with a letter to the Administrator/CEO setting forth the date(s) of the site survey and other pertinent information, including the identities of the Surveyors involved in the survey. In addition, an e-mail will be forwarded to the Trauma Medical Director and the Trauma Program Manager attaching the above letter and other relevant documents the staff will need for the site survey.

The Pre-review Questionnaire (PRQ) should be completed by the hospital and returned to the ADH TNC no later than six weeks prior to the site survey. The reporting period on which the PRQ is based should span a 12 month time period. The reporting period may not be older than 15 months (406 days) prior to the site survey.

The ADH will choose the facility's survey team from the list of approved Surveyors. The Surveyors will work with the ADH TNC to come to a consensus on the date(s) of the site survey.

The ADH TNC will coordinate with the facility the composition of the survey team and the cost of the survey. It is the responsibility of the hospital to ensure that appropriate payment is made to the Surveyors. There are several categories of expenses a hospital should consider. First, honoraria must be paid to each Surveyor. The Surveyors for Level I and II facilities will receive \$2,000 each, with the Lead Surveyor receiving an additional \$1,000 for his/her effort in writing the report. Surveyors for Level III and IV facilities will receive \$1,000 each with the Lead Surveyor receiving an additional \$500. It is the hospital's responsibility to have the honorariums available at the time of the site survey.

Airfare, rental car, and/or mileage cost will be provided by the Surveyor to the ADH TNC one month prior to the site survey visit. Mileage should be paid at the State of Arkansas mileage rate (currently \$0.42 per mile) and can be found at www.gsa.gov/perdiem. The Surveyor will be responsible for any meals not provided by the hospital. The check for the honoraria and expenses should be given to the ADH representative for review and distribution to the Surveyors during the site survey.

The hospital should secure the appropriate number of hotel rooms for the Surveyors and ADH staff. The hospital will pay the hotel directly.

All hospital correspondence and communication regarding the expenses and honorarium should be with the ADH.

Survey Reports and Designation

The purpose of the site survey is not to designate but rather to verify the information provided in the hospital's PRQ, as well as the operations and assets of the hospital, and report the findings to the ADH, which has ultimate authority to designate the facility at the appropriate level.

The survey team will complete the survey and in an exit interview present to the hospital an executive summary of their findings prior to leaving the facility. The executive summary will include identified deficiencies, strengths and weaknesses of the program, and recommendations to correct weaknesses and deficiencies. Deficiencies are described as areas in which the *Rules* have not been met. The hospital will have the opportunity to comment on the executive summary during the exit interview. Comments and discussion will be included in the final report written by the Lead Surveyor. Surveyors will be required to inform the facility that the findings of the report may be altered by the Trauma Advisory Council's Site Survey and Assessment Panel (SSAP) prior to its submission to the ADH.

The report of the site survey will be produced by the Lead Surveyor and submitted in the required format to the ADH TNC within two weeks of the visit. It will identify any deficiencies or weaknesses in the program and will summarize the survey team's recommendations for compliance with the *Rules*, should deficiencies be found, and/or recommendations for improvements in the program if weaknesses are identified.

The ADH TNC will review the report for accuracy and completeness. Any questions or discrepancies will be discussed with the Lead Surveyor prior to distribution of the report to the SSAP members. The report will then be sent electronically to members of the Committee. Committee members with conflict should recuse themselves from the vote. The Committee members will have five business days to complete their review and will then vote on whether or not to recommend designation of the facility based on their review and the Lead Surveyor's findings. The Committee members' vote should be emailed to the ADH TNC. It will be the chairman's prerogative to accept the electronic vote or hold the vote for discussion of the full Committee. The Committee will also have the option of

recommending non-designation, full designation, full designation with the provision of timely correction of minor deficiencies, or provisional designation with a performance improvement plan, in which case the correction would be verified by a focused survey, as stated in Section VI., B., 2., a - d., of the *Rules*. The Committee's recommendation will be given to the ADH TNC. The hospital will be notified of the final adjudication within eight weeks of the designation site survey.

Should the Trauma Section find that the facility meets the requirements for designation at the level requested, it will forward a letter to the facility formally granting designation. However, if the Section finds that the hospital has deficiencies in its program and does not meet the requirements for full designation, it will so state this in the letter to the facility. In this case, the letter would state either recommendations for remediation in the case of non-designation, or recommend a performance improvement plan in the case of provisional designation per the *Rules*.

If a hospital disagrees with the ruling of the ADH's Trauma Section with respect to its designation status, the facility may request a meeting with the SSAP and the ADH TNC for the purpose of mediation. The hospital will send its Trauma Medical Director, Trauma Program Manager, and Administrator/CEO to present its case to the Committee, which will hear the appeal and consider its original ruling in light of the information presented by the facility. The Committee will send a letter outlining its findings and recommendation to the Trauma Section within five business days of the meeting with the facility. The Section will consider the Committee's recommendation and notify the facility of its decision to either uphold or amend its original ruling. Should the hospital continue to disagree with the ruling, it may follow the formal appeal process outlined in Section VI., 6., C. & D. of the *Rules*.