

What to Expect at the Site Visit

Your facility is due for a site visit to renew your state trauma level designation.

Your facility's current trauma level designation expires: _____

The attached application must be completed and returned to the DEMS within the next 1-2 months.

The application asks for numerous attachments. You can email to nbrunelle@nd.gov, fax to 1-701-328-0357 or mail the application and all the requested documents to:

Mary Waldo
State Trauma System Coordinator
Division of Emergency Medical Systems
1720 Burlington Dr.
Bismarck, ND 58504

When the application is received, it will be reviewed. If there are any questions or additional information is needed, the Trauma Coordinator will be contacted regarding this.

The application is then forwarded to Review Team who has agreed to be a part of the site visit.

The Review Team for your facility will include:

Trauma Surgeon:
Level II Program Manager:
State Trauma Coordinator: Mary Waldo, RN MSN

The Review Team will determine suggested dates to complete the site visit.

It is important that prior to agreeing on a suggested date for the site visit that the date has been coordinated with the hospital staff at your facility that need to be present for the site visit.

Each facility staffs differently so there is no right or wrong list of people that need to be present for the site visit. Typically it is the Trauma Coordinator, the Administrator, the person in charge of Quality Improvement, the DON, the Medical Director and ED manager. If you have questions about who from your facility should be there, please contact the State Trauma Coordinator.

The Review Team will typically arrive at your facility in the morning, about 9:00. And will typically leave about 1:00. When the Review Team arrives, we should be directed to a meeting room where we can work while we are there. We will spend a few minutes introducing ourselves and explaining what we are going to do and why. This is an informal meeting but is often the time that we meet the Trauma Coordinator, Administrator, DON, and other members of your team. Your facility can use its own discretion as to who should attend.

During the survey process, the Review Team will tour the Emergency Room looking at the equipment and supplies available. A list of essential and desired equipment can be found under Level IV and V Designation Criteria on our website at:

<https://www.health.nd.gov/epr/emergency-medical-systems/state-trauma-system/state-trauma-system-hospital-designation/> It is important to check this list prior to our arrival and assure that the equipment and supplies are available and not outdated.

The Review Team may visit with staff we encounter to gauge their understanding of Trauma Team activations and criteria.

The Review Team will talk specifically to the managers of the Radiology and Lab departments. Questions asked will include response times and testing capabilities specific to their departments as well as quality assurance activities they are involved in.

Most of the time that the Review Team is at your facility will be spent reviewing actual trauma cases. About 1 week prior to the site visit, the Trauma Coordinator will be sent a list describing the patient records that we would like available for our review. If these charts will be reviewed electronically, it is important that staff be available to assist the review team with locating necessary documents electronically and that there be computers available for each of the Review Team members.

The patient records will be reviewed to assure quality care standards are met for all trauma patients. The Review Team will ask a number of questions related to the performance improvement/quality assurance (PI/QA) process. Attempts will be made to match the patient records with the PI/QA process that occurs at your facility. It is important that staff involved in this process be available to assist the Review Team and answer questions related to your PI/QA process.

When we have reviewed the patient records and have asked all our questions, the Review Team will meet. They will compare notes and discuss findings or formulate additional questions. This process takes about 15 minutes. During this time, your facility can gather the staff it would like present for the Exit Interview.

An Exit Interview is held at the end of the site visit. This meeting is typically attended by the Trauma Coordinator, Administrator, DON, and Medical Providers, if available. EMS personnel and/or other members of the trauma team may be invited as deemed appropriate by the facility. During the Exit Interview the findings of the Review Team are shared and explained. Your facility's strengths and weaknesses within the trauma program are identified as well as recommendations for improvement.

After leaving your facility, the Review Team prepares a site visit report. This report is blinded and submitted to the State Trauma Committee for their review. The State Trauma Committee meets every other month. At the State Trauma Committee's next scheduled meeting your facility's site visit report will be discussed without disclosing the location of the site visit. Based upon this blinded report the State Trauma Committee will make the actual determination regarding the length of the trauma designation for your facility.

This determination is shared back to the Trauma Coordinator as soon as possible via e-mail. An official letter and certificate noting the new designation period will be mailed to the Administrator within 1-2 weeks of the trauma level designation determination.

If you have any questions at all during this process, please do not hesitate to contact me!

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