

SOUTH DAKOTA TRAUMA RECEIVING HOSPITAL (TRH) SITE SURVEY REPORT



D = Desirable

E = Essential

Y = Yes

N = No

Review Date:
Facility:
Facility Participants:
Reviewers:

The following is a list of requirements based upon SD Trauma System Administrative Code 44:68:02:08 with guidance from the American College of Surgeons (ACS) recourse book.

CRITERIA	D/E	Y/N	COMMENTS
Trauma Program / System			
Trauma Program w/physician medical director and trauma nurse leader <i>Who?</i> <i>How long in position?</i> <i>Time Trauma RN Coordinator dedicated to position?</i>	E		
Multidisciplinary Operational and PI Review Committee (may be combined with another PI committee est. by hospital) <i>Multidisciplinary?</i> <i>Defined purpose and meeting format?</i> <i>Who are the committee members?</i> <i>Is there critical review of trauma care by providers?</i> <i>Are there meeting minutes that include identified issues and actions taken and follow-up?</i>	E		
Hospital-specific definition of a trauma team alert patient <i>Posted?</i>	E		
Defined trauma team roles and responsibility <i>Who do they include?</i>	E		

Defined trauma team activation guidelines/process <i>Posted?</i> <i>How is team activated?</i> <i>Is trauma team activation documented?</i>	E		
Defined trauma transfer protocols <i>Updated q 5 years?</i> <i>Reviewed annually?</i>	E		
Emergency Medical Services <i>Pertinent details</i>	E		
A collaborative involvement in pre-hospital care protocols	E		
Prior recommendations/opportunities for improvement addressed from last site visit	D		
Hospital Statistics <i>Variances or clarifications from the volumes noted in the application</i>	D		
Emergency Department Capabilities			
EMS communication-two-way communication with vehicles of emergency transport <i>Which EMS services?</i> <i>Relationship with EMS?</i> <i>Is EMS documentation available?</i> <i>Where are the radios located?</i> <i>How is cell phone service?</i> <i>Can nurses hear it at night?</i>	E		
Emergency Department Details <i>How many beds?</i> <i>How many rooms set up for trauma?</i> <i>How do they staff the ED?</i>	E		
24/7 operation	E		
Published on-call schedule for trauma team members	E		
Physician, PA, or CNP on-call with a max 30 min response time. Response time documented and monitored.	E		
A Registered Nurse available in hospital and promptly available to the ED	E		
Ambulance Bay Details <i>Enclosed?</i> <i>Close to ED?</i>	D		

Disaster/Mass Casualty Protocol <i>Do you have disaster protocols? What is your role in disaster management? When was your last disaster drill?</i>	D		
Single Patient Decontamination Unit <i>Where is it located? Does it have a direct entrance into the hospital?</i>	D		
Emergency Department Equipment			
Thermal control equipment <i>Room temperature adjustment? Bair Hugger? Warm blankets? Fluid/blood warmer?</i>	E		
Pediatric resuscitation equipment <i>Broslow/Weight based cart? Broslow bag? Current Broslow tape?</i>	E		
Airway control and ventilation equipment (all sizes) <i>Laryngoscope Video guidance ETT (adult and peds) King tube/rescue airway Bag-mask resuscitator Pocket masks Oxygen Bougie</i>	E		
Pulse oximetry	E		
End-tidal CO2 <i>Adult? Peds?</i>	E		
Suction devices <i>Rigid? Flexible?</i>	E		
Sterile surgical sets including <i>Airway control, Cricothyrotomy, Thoracotomy, Tracheostomy Vascular access Needle decompression or chest tubes (various sizes, preferably w/o trocars)</i>	E		
Monitor/defibrillator	E		

Standard IV fluids and administration devices <i>Fluids</i> <i>Large bore IVs</i> <i>IO systems</i> <i>IO use and education</i>	E		
Vascular Doppler	E		
Gastric decompression <i>NG</i> <i>OG</i>	E		
Spinal immobilization <i>Cervical collars?</i> <i>Adult and peds?</i> <i>Long Back Board?</i>	D		
Tourniquets <i>How many?</i>	D		
Urinary Catheter and Drainage Device <i>Foley?</i> <i>Straight Cath?</i>	D		
Drugs for emergency care <i>How often checked and restocked?</i> <i>How do you obtain meds for DAI (RSI)?</i> <i>Where do they keep fridge medications?</i>	D		
Diagnostic Imaging			
X-ray availability 24 hours a day, seven days a week	E		
Conventional radiography <i>Staff hours?</i> <i>Response times?</i> <i>Portable x-ray?</i>	E		
A radiology technologist on-call with a maximum 30-minute response time. Response times shall be documented and monitored	E		
CT Scanning (if available) <i>How many slice CT scanner?</i> <i>Who reads scans?</i> <i>Protocols?</i> <i>Contrast used?</i> <i>Pediatric considerations?</i> <i>Any delays noted in transferring patient due to CT scanning?</i>	D		

Laboratory Services													
Available 24 hours per day, 7 days a week <i>Staff hours?</i> <i>Response times?</i>	E												
Standard analysis of blood, urine, fluids <i>Result times?</i>	E												
O-negative blood supply <i>Units?</i>	E												
Coagulation studies (PT/PTT)	E												
Blood Typing	D		<table border="1"> <tr> <td>A+</td> <td>A-</td> </tr> <tr> <td>B+</td> <td>B-</td> </tr> <tr> <td>O+</td> <td>O-</td> </tr> <tr> <td>AB+</td> <td>AB-</td> </tr> <tr> <td>FFP</td> <td>Platelets</td> </tr> </table>	A+	A-	B+	B-	O+	O-	AB+	AB-	FFP	Platelets
A+	A-												
B+	B-												
O+	O-												
AB+	AB-												
FFP	Platelets												
Comprehensive blood bank or access <i>Policy for emergency release of uncross-matched blood?</i> <i>Regional Blood Bank Source?</i>	D												
Blood gases and pH determination <i>Who performs?</i> <i>Time to results?</i>	D												
Microbiology <i>Grow or send out?</i>	D												
Drug and alcohol screening	D												
Trauma Lab Panel	D												
TXA (Tranexamic Acid)	D												
Hospital Support Services													
Respiratory Services <i>Available Services?</i>	E												
Performance Improvement and Patient Safety Program													
Organized and Structured Performance Improvement Program with Injury Prevention component	E												
<i>Patient care issues reviewed?</i> <i>System issues reviewed?</i> <i>How do you determine which issues to address?</i> <i>Do you see resolution (loop closure) on issues identified?</i>	E												

<p>An operation performance improvement program including notification and arrival times for the following team members... <i>On-call physician, physician assistant, or nurse practitioner?</i> <i>Radiology technologist?</i> <i>Laboratory technician?</i> <i>Respiratory therapist, if part of the trauma team?</i></p>	E		
<p>Multidisciplinary trauma committee to review trauma patients <i>If issues identified, are they brought to multidisciplinary trauma committee?</i> <i>Are cases reviewed documented in mtg minutes?</i> <i>Are minutes marked confidential?</i></p>	E		
<p>Quarterly Morbidity and Mortality Review <i>Are deaths reviewed?</i> <i>Were ATLS guidelines followed?</i> <i>Opportunities for improvement identified?</i></p>	E		
<p>Trauma registry submission <i>Current with data submission?</i> <i>Any issues entering data?</i></p>	E		
<p>Focused audit of selected criteria and patient care of trauma cases <i>Which charts are selected for review?</i> <i>Who performs the review?</i></p>	D		
<p>Submission of data to trauma registry within < 30 days of incident</p>	D		
<p>Participation in Regional PI Case Review Meetings? <i>How many calls participated in last year?</i> <i>Number of cases reviewed?</i> <i>Number of cases submitted to state for review?</i></p>	D		
<p>Trauma Medical Director or designated provider present at 50% of regional Performance Improvement Meetings <i>Documentation of involvement?</i></p>	D		
<p>Tertiary Facility Feedback <i>Do you receive feedback?</i> <i>Do you receive education?</i> <i>Participation in the PI process?</i></p>	D		

ATLS physician review of all trauma code cases in which a midlevel practitioner was the team leader (within 72 hours) <i>Is there documentation that midlevel care was reviewed within 72 hours?</i>	D		
Decision to transfer times <i>Are times documented?</i>	D		
Critical Skills Verification <i>Examples?</i>	D		
Trauma Prevention and Outreach			
Injury prevention and public awareness activities-providing public education regarding trauma and injury prevention <i>Fall (i.e. STEADI) Road safety Home safety Newspaper articles Bill stuffers Safety fairs Posters or flyers Giveaway</i>	E		
Collaboration with other institutions <i>SD Department of Health? High school/Elementary school Hunters safety courses Police department EMS</i>	D		
Monitor progress/effectiveness of prevention programs	D		
Hospital Staff Educational Requirements			
Physician Medical Director must have current certification in ATLS	E		<i>Date expires?</i>
The surgeon, if on staff, must: <ol style="list-style-type: none"> 1. Have current certification in ATLS education; or 2. Have documentation indicating successful completing of ATLS education at least once and a minimum of 16 hours of trauma continuing medical education credits every 4 years 	E		<i>Surgeon on staff? Current?</i>

<p>The physician covering the emergency department must:</p> <ol style="list-style-type: none"> 1. Have current certification in ATLS education; or 2. Have documentation indicating successful completing of ATLS education at least once and a minimum of 16 hours of trauma continuing medical education credits every 4 years 	E		<p><i># of physicians covering ED?</i> <i>All current?</i></p>
<p>The physician assistant or nurse practitioner covering the emergency department must:</p> <ol style="list-style-type: none"> 1. Have current certification in ATLS education; or 2. Have documentation indicating successful completing of ATLS education at least once and a minimum of 16 hours of trauma continuing medical education credits every 4 years 	E		<p><i># of mid-levels covering ED?</i> <i>All current?</i></p>
<p>Each emergency department nurse shall be current in TNCC education</p>	E		<p><i># of nurses?</i> <i>All current?</i></p>

Chart Review Summary:

Number of charts pulled _____
 Number of charts reviewed _____
 Number of deaths in ER _____
 Number of DOA's _____

Patient care/system issues identified and summarized:

Strengths:

Weaknesses:

Recommendations for improvement:

Recommendation on designation by reviewers:

Date of Review: _____

Signature of Reviewer

Date

Signature of Reviewer

Date