Gray Book Group Review Meeting Questions – Two Reviewers

This is a framework of questions that may be asked to "fill in the gaps" between the documents uploaded for the PRQ. Reviewers may use their judgment as to which ones to ask. Specific, focused questions should be added for any standards in which the documentation supplied is unclear or indicates a possible deficiency. Explain potential standards that are not in compliance noted during this meeting so there are no surprises during the exit meeting.

Administration

1.1 Administrative commitment (lead reviewer)

- (Hospital administrators) Tell us how you support the trauma program and how you see it developing in the future.
- (CMO / VPMA) What does the medical staff think about the trauma program?
- Are you finding it difficult to secure specialty coverage for your call schedules?

2.1 State and regional involvement (associate reviewer)

Tell us about your participation in local, state, and regional trauma activities.

Prehospital

8.3 Prehospital provider training (associate reviewer)

- How does your hospital work with prehospital agencies to develop and refine practice protocols?
- What educational opportunities does your hospital provide to EMS agencies?

7.10 Prehospital care feedback (associate reviewer)

 How do you notify EMS of potential care issues and obtain feedback that they have been addressed?

Disaster

2.2 Disaster committee (associate reviewer)

• (See tour questions)

2.3 Disaster management

• Which surgeon sits on your disaster committee? (associate reviewer)

Transfers out and Diversion

5.12 – 5.14 Transfer in/out (associate reviewer)

• Describe the process for receiving a transfer or transferring a patient to another center.

4.21 Surgical specialists availability (associate reviewer)

• Ask questions if there are questions about submitted coverage documents or if there are transfers out for these services.

5.15 Trauma diversion (associate reviewer)

Describe the different types of ED diversion and the specifics of the trauma diversion process.

Trauma Activations

5.5 Trauma surgical evaluation for activations below highest level (lead reviewer)

• What is the expected surgeon response time for intermediate-level activations and consults?

TMD / TPM

2.8 TMD requirements (lead reviewer)

- Who do you report to in hospital administration, and how often do you meet?
- Who do you report to for surgery department issues?

2.11 TPM requirements (lead reviewer)

- Who do you report to in hospital administration, and how often do you meet?
- Do you have regularly scheduled meetings with the TMD for planning or PI? How often?

Trauma service

4.2 Trauma surgeon coverage (lead reviewer)

- How is the call and coverage schedule constructed?
- How do you promote continuity of care between surgeons?
- What other responsibilities do the surgeons have, e.g. emergency general surgery?
- Does this impact their trauma responsibilities, and how?

8.4 Postgraduate education (Level I only) (lead reviewer)

Tell us about how the trauma service is staffed with residents (PGY levels, services).

Emergency department

5.2 Trauma surgeon / emergency physician shared responsibilities (associate reviewer)

- (EM liaison) Describe the relationship of the emergency physicians and trauma surgeons.
- Describe the PI process for FAST exams.

4.8 ED physician coverage (associate reviewer)

- (EM liaison) What is the lowest level of emergency physician staffing, and when does it occur?
- (EM liaison) Can the last emergency physician be called away from the department for any reason?

8.2 Nursing trauma orientation and education (associate reviewer)

• (ask about trauma-specific orientation, education, and certification courses at this review meeting or during the tour)

Neurosurgery

4.10 Neurotrauma care (lead reviewer)

- (Neurosurgery liaison) Describe the structure of the neurosurgical group.
- (Neurosurgery liaison) Is the neurosurgeon on call for more than one hospital simultaneously? If so, describe the backup process.
- Which specialty repairs spine fractures: neurosurgery or orthopaedics?

5.17 Neurosurgeon response (lead reviewer)

• Tell us who responds to the neurosurgical 30-minute response requirements and how you capture call and arrival times.

Orthopaedic surgery

4.11 Orthopaedic trauma care (LI-II) (lead reviewer)

- (Orthopaedic liaison) Describe the structure of the orthopaedic group.
- (Orthopaedic liaison) What do you do when a patient with complex orthopaedic issues is admitted when a non-OTA surgeon is on call?
- Which specialty provides comprehensive hand care: plastics, orthopedics, or other?
- Who handles soft-tissue coverage

5.21 Orthopaedic surgeon response (lead reviewer)

• Tell us who responds to the orthopaedic surgical 30-minute response requirements and how you capture call and arrival times.

3.3 OR for orthopaedics (lead reviewer)

- (Ortho liaison) Tell us about the operating rooms available to you for nonemergent fracture care.
- How are you able to treat urgent operative cases without undue delay?

Pediatric trauma

2.6 Adult centers admitting pediatric patients (peds only) (lead reviewer)

• (See tour questions)

4.27 Child abuse (lead reviewer)

• Describe your processes for identifying non-accidental trauma and the resources you have available to manage it.

Geriatric trauma

4.5 Specialty liaisons to the trauma service (associate reviewer)

• (Geriatric liaison) Tell us about your background and interest in geriatric trauma care.

5.6 Care protocols for the older adult (associate reviewer)

• (Geriatric liaison) Tell us about how you manage geriatric trauma patients, from trauma activation to discharge.

4.26 Medical specialists

- How are hospitalists integrated into care of injured patients?
- What kind of education or training do they receive to support their care of trauma patients?

Anesthesia

4.13 Anesthesia services (lead reviewer)

• (Anesthesia liaison) Describe the in-house and on-call coverage available, how they are called, and expected response times.

Operating room

3.1 OR availability (lead reviewer)

• Describe the composition of the in-house OR team overnight. (LI-II only)

3.2 Additional OR availability (lead reviewer)

- How are additional members called in when needed?
- What are the allowable response times?

(Additional questions for this area on the tour)

PACU

8.2 Nursing trauma orientation and education (lead reviewer)

• (ask about trauma-specific orientation, education, and certification courses at this review meeting or during the tour)

(Additional questions for this area on the tour)

Radiology

3.5 Medical imaging availability (associate reviewer)

- (Radiology liaison) Tell us about availability and response times for:
 - o CT scan
 - o IR
 - o MRI

4.15 Interventional radiology response (associate reviewer)

- How do you monitor response times for IR (call time and puncture time)?
- If there is a hybrid room, who staffs it and where is the equipment stored?

4.15 Radiology interpretation (associate reviewer)

- How are misreads handled?
- Do you use a review system such as RadPeer, and how?

4.14 Radiologist access (associate reviewer)

• (see tour questions)

(Additional questions for this area on the tour)

ICU

4.16 – 4.19 ICU (associate reviewer)

5.23 - 5.24 ICU coverage (associate reviewer)

• (see tour questions)

8.2 Nursing trauma orientation and education (associate reviewer)

• (ask about trauma-specific orientation, education, and certification courses at this review meeting or during the tour)

Massive transfusion protocol

5.8 MTP (lead reviewer)

• (see tour questions)

Ancillary health services and rehabilitation

4.28 Allied health services (associate reviewer)

5.27 Rehabilitation services (associate reviewer)

- (see ICU tour questions for allied services)
- How do you evaluate and refer patients who may benefit from a rehab center?
- Is it CARF-approved? Tell us more about it.

Alcohol misuse screening

5.30 – 5.31 Alcohol misuse screening and intervention (associate reviewer)

• (see chart review questions)

Mental health screening

5.29 Mental health screening (associate reviewer)

• Describe your process for evaluating and managing patients at risk for mental health problems.

Organ procurement

2.13 Organ procurement (associate reviewer)

• (If organ procurement rate is low, ask what is being done to improve it.)

Registry and PI

4.31 – 4.35 Registry and PI staffing

• (see chart review questions, or ask during documentation review session)

6.1 – 7.10 Registry and PI

• (see chart review questions)

Clinical practice guidelines

5.1 Clinical practice guidelines

• (discuss during documentation review session)

Education

8.1 Public and professional trauma education

• (see documentation review questions)

Research

1.2 Research support (Level I only) (associate reviewer)

- Tell us about your research infrastructure.
- Do you have a research committee? How often does it meet?
- How do obtain support for biostatistical support and manuscript preparation?
- How do you encourage surgeons and others to participate?

Close

Miscellaneous questions (lead reviewer)

- Is there anyone here who we did not ask any questions?
- Does anyone have any questions for us?