

**Do you have the requirement for your site team lead of being a Trauma Medical Director? Or are there any specific requirements for the lead reviewer i.e. must be from out of state, having done reviews before, etc.**

*Question asked May 2016*

**Alaska:**

For Level I-III, state statute requires verification through the ACS-COT. For Level IV verification reviews, the physician and nurse reviewer must be a member of the State Trauma Committee.

**California:**

In California our site review team composition is managed at the local EMS agency level (local government) as they are responsible for managing their own system. Most use ACS.

**Delaware:**

Delaware is ACS for Levels 1-3. For Level 4 (Trauma System Participating Hospitals) we use an out of state ED physician as lead reviewer, and myself and the chair of our Trauma System Designation Committee as review team members.

**Montana:**

Below is Montana's Administrative Rule regarding composition of site review teams. We used to have language requiring in-state surveyor's to be from a different region than where they practice, but due to difficulties meeting that requirement and the sheer size of our state's regions ( for instance in our Eastern region Plentywood to Ennis is over 500 miles!) we removed that requirement and have not had any issues. Most of our Regional centers and Area Trauma hospitals are also ACS verified, so we defer to their physician site review team and just add in an in-state nurse reviewer and myself.

**37.104.3020 COMPOSITION OF SITE REVIEW TEAMS**

- (1) The site review team for regional trauma centers must be composed of out-of-state surveyors, including two general surgeons and a trauma nurse coordinator, as well as department staff and or any other members determined to be necessary by the department or requested by the health care facility being reviewed.
- (2) The site review team for area trauma hospitals and community trauma facilities must be composed of either out-of-state or in-state surveyors and must include a general surgeon, a trauma nurse coordinator, department staff, and other members determined to be necessary by the department or requested by the health care facility being reviewed.
- (3) The site review team for a trauma receiving facility must be composed of either out-of-state or in-state surveyors and must include a physician, a trauma nurse coordinator, department staff, and other members determined to be necessary by the department or requested by the health care facility being reviewed.

**New Mexico:**

In New Mexico, we have been on a journey of training TMD's and Trauma Managers as in-state site surveyors. This is my first year using all in-state surveyors. While there are some political, personality, and other various issues, in the training I make it very clear that their "other hats" and views need to be left at the door, and each facility is verified individually and as non-biased as possible.

The qualifications are:

1. Cannot live in the county of the hospital being surveyed (I usually arrange for someone from another "region")

2. Have at least 3 years direct experience the care of a trauma patient,
3. Currently employed in the coordination of care for trauma patients, or have been employed within the last year as a surveyor
4. Direct experience in the preparation for and successful completion of trauma facility verification/designation (preferable 2 surveys)
5. Must have
  - a. RN – TNCC or ATCN, PALS or ENPC
  - b. MD – Board Certification in surgery, or emergency physician (for Level IV's only) and current in ATLS
6. If new to surveying, must have observed a survey with mentors and submitted a report based on their observation
7. Must sign confidentiality agreements at the time of the survey

I have had three surveys using in-state surveyors it appears to be very successful. I am very pleased with the outcome.

**North Carolina:**

Our Level I and II reviewers must be out of state. All of our Level I centers are also ACS verified so that takes care of the out of state issues. Our requirements for out of state reviewers are that they be a Fellow of the ACS. For our Level III center's we use in state reviewers. They do not have to be a Trauma Medical Director, but do need to be a member of our state COT.

**Texas:**

We use the ACS for all level I and II surveys, level IIIs and IVs we use an in-state organization that provides surveyors to do the reviews. For a Level III, there is always a (1) trauma surgeon and a (1) trauma nurse manager as the team; the physician serves as the team lead. For the Level IVs, depending on the surgical volume (>150 trauma surgeries in a 12 month period) a surgeon may be required otherwise, otherwise it is only the trauma nurse manager that conducts the onsite survey.

**Utah:**

Utah has adopted by rule the ACS-COT Orange Book requirements for designation. Utah does require ACS Verification for all Level I and II trauma centers as a condition of designation by the state. Since the Orange Book does outline the qualifications for a TMD, Utah requirements will be the same. The TMD for a Level IV trauma center where there is no surgeon will require that a physician on staff fill that role, but his duties will be those outlined in the Orange Book.

Requirements for a lead reviewer are outlined in rule as well. Utah Rule mandates that the site review team include a TMD from a designated trauma center with expertise in PI. This usually falls to a TMD from a Level I or II facility. We use in-state TMDs but rule prohibits any surveyor from participating in the survey of any trauma center they have an affiliation with either as a staff member or being on staff of any hospital in the same corporation. The same holds true for the nurse surveyors.

So far the process has worked well. The state surveys Level III and IV trauma centers and the ACS surveys Level I and II. This has kept the system growing and has created a network of TMDs and TPMs that has been of great benefit to the regionalization initiatives supported by the state trauma system.

**Washington State:**

In Washington State all physician surveyors must be current trauma medical directors. In some cases if they have recently transitioned out of that role we still allow them to survey. Surveyors for level I and II trauma services must be from out of state. Level III surveyors can be from in-state but must be from a different region.

**Wyoming:**

No, we do not. Our rules are squishy but I would definitely want a new reviewer to my system to go on at least one (or two) reviews with a Wyoming experienced review team. I ran into some challenges with a doc out of another state who couldn't stay focused on Wyoming system/rules and kept referring back to his home state's rules/legislation etc.

I also would like to have lead reviewers with some experience as a TMD, however I would definitely take folks who had an active role on their hospital trauma committee and have had some training...