**Disease Specific Care Review Agenda**

**Advanced Certification in Perinatal Care**

**One or More Reviewers for Two Days**

Please refer to the Perinatal Care Review Process Guide for additional information. All times are local.

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| **Date/Time** | **Activity** | **Organization Participants** |
| Review Day 18:00-9:30 am | **Opening Conference** * Greetings and introductions from reviewers
* Introduction of Center staff

**Orientation to Center – Program Presentation**Topics to be covered include: * Program scope of care, treatment, and services
* Program philosophy
* Patient population and community demographics
* Program leadership, responsibilities, and accountabilities
* Interdisciplinary team composition and responsibilities
* Other personnel and support services
* Backup systems and plans
* Program and organization integration, interaction and collaboration
* Diversity, equity, and inclusion efforts
* Communication and collaboration within the program and with patients and families
* Program team member selection—qualifications, orientation, training, ongoing education, and support
* Performance measures and measure threshold compliance
* Early risk identification and managing the risk corresponding to the program’s capabilities

**Reviewers will end session with:*** Overview of agenda and objectives
* Dialogue about what the reviewers can do to help make this a meaningful review for the Center
 | * Program’s Joint Commission contact
* Program clinical and administrative leadership
* Others at program’s discretion
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| 9:30-10:00 am  | **Reviewer Planning Session**Please have the following information available for this session:* A current list of patients in the program, both obstetric and newborn
* Performance improvement action plans
* Order sets, care plans, as applicable
* Schedule for interdisciplinary team meetings or rounds on patients
* Program’s back-up schedule for perinatal services needed to meet the needs of the pregnant, postpartum, and newborn patients
 | Program representatives that can facilitate patient selection and tracer activity |
| 10:00 am-12:00 pm | **Individual Tracer Activity**Tracer activity begins where the patient is currently receiving care, treatment, and services. If two reviewers, one reviewer will trace the maternal population while the other reviewer traces the newborn population. * Includes an interactive review of patient records with staff actively working with the patient, including each patient’s course of care, treatment, and services from prenatal up to the present and anticipated for the future (postpartum and newborn care) will be mapped.
* Continues with tracing each patient’s path, visiting different areas, speaking with program team members, and other organization staff caring for or encountered by the patient
	+ Defined perinatal continuum—areas, units, departments, programs, services—may include the labor and delivery unit, newborn nursery, operating room, PACU, emergency department, prenatal program, ultrasound, radiology, laboratory, and pharmacy services.
* Includes a patient and family interview if they are willing to participate

At the continuation of each tracer, the reviewer will communicate to the program leaders and care providers:* Specific observations made
* Issues that will continue to be explored in other tracer activities
* The need for additional records to verify standards compliance, confirm procedures, and validate practice
* Closed record reviews that may be necessary
 | Program representatives that can facilitate tracer activity |
| 12:00–12:30 pm | **Reviewer Lunch** |  |
| 12:30-2:30 pm | **Individual Tracer Activity (cont.)** | Program representatives that can facilitate tracer activity |
| 2:30-4:00 pm | **System Tracer—Data Use**Topics to be covered include:* Members and responsibilities of the perinatal performance committee
* Performance improvement plan, including data analysis and priority setting
* Program performance measurement and improvement activities
* Measure threshold criteria
* Use of TJC perinatal care core performance measures
* Data collection related topics, including data monitoring, analysis and interpretation, and dissemination and transmission
* Other issues for discussion or follow up
* Patient and family evaluation of care, treatment, and services provided (i.e., patient satisfaction at the program level), and improvement activities related to their feedback
* Recently implemented program improvements
 | Program Leaders, interdisciplinary team, and those involved in Performance Improvement |
| 4:00-4:30 pm | **Team Meeting/Reviewer Planning Session**Discussion will include accomplishments during Day One, and plans for Day Two | * Program’s Joint Commission contact
* Others requested by reviewers
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| **Date/Time** | **Activity** | **Organization Participants** |
| Review Day 28:00-8:30 am | **Daily Briefing**A brief summary of the first day’s observations and plans for Day Two will be discussed. | As determined by the Center or organization |
| 8:30-11:30 am | **Individual Tracer Activity (cont.)** | Program representatives that can facilitate tracer activity |
| 11:30 am-12:00 pm | **Reviewer Lunch** |  |
| 12:00-1:30 pm | **Individual Tracer Activity (cont.)** | Program representatives that can facilitate tracer activity |
| 1:30-2:30 pm | **Education and Competence Assessment Process**Discussion will focus on:* Processes for obtaining team members
* Orientation and training processes
* Methods for assessing team member competence
* Inservice and other ongoing education
* Education and competence issues identify during tracer activities
* Identified strengths and areas for improvement

Note: The reviewer will request personnel records and credentials files to review based on team members and staff encountered throughout the review.  | **Medical Staff Credentialing and Privileging Process**Discussion will focus on:* Credentialing and privileging process specific to perinatal care, treatment, and services
* If privileges are appropriate to the qualifications and competencies
* Monitoring the performance of practitioners on a continuous basis
* Evaluating the performance of providers
* Identified strengths and areas for improvement

Note: The reviewer will request files of the following leaders: perinatal program, obstetric services, newborn unit, and obstetric anesthesia services. Additional files will be requested based on tracer activities.  | * Individuals responsible for Program Education
* Medical Staff Office Personnel
* Human Resources
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| 2:30-3:00 pm | **Summary Discussion**This time will be utilized for a final discussion prior to the reviewer’s report preparation and the exit conference. Topics that may be discussed include:* Any issues not yet resolved (IOUs)
* The identified Requirements For Improvement (RFIs)
* What made the review meaningful to the team
* Sharing best practices to inspire quality improvement and/or outcomes
* Educative activities of value to the program (i.e., knowledge sharing related to CPGs or the latest scientific breakthroughs)
* Did I meet the goals of your team today?
 | * Program Leaders
* Program’s Joint Commission contact
* Others at program’s discretion
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| 3:00-4:00 pm | **Reviewer Report Preparation**  |  |
| 4:00-4:30 pm | **Program Exit Conference**  | * Program’s Joint Commission contact
* Program Leaders
* Program team members
* Organization leadership
* Others at program’s discretion
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