**Disease Specific Care Certification**

**Two Day Review Template Agenda for:**

**Thrombectomy-Capable Stroke Center Certification (TSC) or**

**Primary Stroke Center Certification (PSC) providing Mechanical Thrombectomies**

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

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| **DAY ONE** | **Activity** | **Organization Participants** |
| 8:00 – 9:30 am | **Opening Conference**   * Reviewer will begin this session with a few remarks and introduction of themselves, followed by an introduction of the program staff * Next, hospital and/or program leadership will present an orientation to Program. Topics to be covered include:   + Program leadership   + Program interdisciplinary team composition   + Program design and integration into hospital   + Program mission, vision, and goals of care   + Population characteristics and needs   + Health equity efforts   + Program selection and implementation of Clinical Practice Guidelines (CPGs)   + Overall program improvements implemented and planned * Presentation will be followed by a brief Q&A * Reviewer will end session with:   + Overview of agenda and objectives   + Dialogue about what the reviewer can do to help make this a meaningful review for the program | Program Clinical and Administrative Leadership  Individuals responsible for performance improvement processes within the program and, as applicable, the organization  Others at the discretion of the organization |
| 9:30 – 10:00 am | **Reviewer Planning Session**  A list of stroke patients for tracer selection separated by diagnosis, with date of admission and discharge (as applicable)   * Current Inpatients * Discharged patients | Program representative(s) that can facilitate patient selection and tracer activity |
| 10:00 am –  12:30 pm | **Individual Tracer Activity** - Evaluation of patient care, treatment, and services, including:  1. **Emergency Department**  -How patients arrive and process for notification  -Discuss process for obtaining EMS records  -Discuss transfer in/transfer out protocols  2. **Advanced Imaging**  3. **IR Suite**  -Informed consent  4. **Acute Stroke Care**  -Stroke unit  -ICU  5. **Post-Acute Stroke Care**  -Assessment  -Goals  -Patient/Family education  -Referrals  -Transfers  -Medical care  -Nursing care  -Social work/Case management  -Additional care (could include speech therapy, physical therapy, occupational therapy, psychology, pharmacy)  6. **Transfer/Discharge**  7. **Follow-up Call**  8. **Closed Record Review** | Program representative(s) that can facilitate tracer activity |
| 12:30 – 1:00 pm | **Reviewer Lunch** |  |
| 1:00 – 3:30 pm | **Individual Tracer Activity (cont.)** | Program representative(s) that can facilitate tracer activity |
| 3:30 – 4:30 pm | **Team Meeting/Reviewer Planning Session** – − Address any special issues for resolution  − Communicate summary of the first day’s  observations  − Select individual patient tracers for Day 2 | As determined by the organization |
| **DAY TWO** | **Activity** | **Organization Participants** |
| 8:00 – 8:30 am | **Daily Briefing**  A brief summary of the first day’s agenda will be provided | As determined by the organization |
| 8:30 – 11:30 am | **Individual Tracer Activity (cont.)** | Program representative(s) that can facilitate tracer activity |
| 11:30 am –  1:00 pm | **System Tracer:** Data use, and  performance improvement (PI)   * Use of a defined performance improvement   methodology   * Volumes of mechanical thrombectomies * Complication rate data * Public reporting of outcomes (for TSC only) * Current stroke performance measure data * Interdisciplinary program review * Use of the stroke registry * Patient perception of care data specific to stroke patient population * Review of the program’s stroke team log |  |
| 1:00 – 1:30 pm | **Reviewer Lunch** |  |
| 1:30 – 3:00 pm | **Competence Assessment/Credentialing Process**:   * Orientation and training process for program * Methods for assessing competence of practitioners and team members * Inservice and other education and training activities provided to program team members   Reviewers will review personnel records and Credentialing files.   * Nursing Staff * Medical Staff * Other Staff   The reviewers may also ask to view the personnel  records of the:   * Medical Director of Stroke Program * Stroke Coordinator * Director of Rehabilitation Services * Advanced Practice Nurse   **Provider Files**   * Licensure * DEA Licensure * Most recent reappointment letter * Board certification * Privileges and applicable supporting documents * OPPE or FPPE (two most recent, as applicable) * CME or attestation for CME   **Staff Files**   * Licensure (if applicable) * Certification (if applicable) * Job description * Most recent performance evaluation * Program Specific *Orientation* Education/Competencies * Program Specific *Ongoing* Education/Competencies | Individuals responsible for Program Education  Medical Staff Office Personnel  Human Resources |
| 3:00 – 3:30 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) * 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 * Did I meet the goals of your team today? | Program Leadership  Others at Program’s discretion |
| 3:30 – 4:00 pm | **Reviewer Report Preparation** |  |
| 4:00 – 4:30 pm | **Program Exit Conference** | Program Leadership  Hospital Leadership  Interdisciplinary Team Members |

**Note: This agenda is a guide and may be modified based on organizational need and reviewer discretion**