

METABOLIC AND BARIATRIC SURGERY ACCREDITATION AND QUALITY IMPROVEMENT PROGRAM

# Site Visit Savvy 2020

# The webinar will begin shortly...



# ASK MBSAQIP Agenda

Time (CST)	Agenda Item	Panelist
12:00 Noon	Welcome & Introductions	Paul Jeffers
12:05 – 12:50 PM	Site Visit Savvy	Paul Jeffers
12:50– 1:00 PM	Q & A	Panelist





#### METABOLIC AND BARIATRIC SURGERY ACCREDITATION AND QUALITY IMPROVEMENT PROGRAM

# **ASK MBSAQIP House Rules & Technical Tips**

#### **Questions**

**Questions submitted prior to the deadline will be answered first.** Questions will be displayed on screen, panelists will answer the question aloud.

#### **Control Panel**

**Audio Pane** – Use the Audio pane to switch between Telephone and Mic & Speakers. The bottom of the audio pane indicates who is presenting. You are muted by default.

**Questions Pane** – If you wish to ask a question, click on the question pane on your control panel and type in your question. We will address these questions at the end of the call.



# Why is my question not listed?

- **1.** We're not answering write-in questions today!
- 2. Questions submitted will be answered offline via email.
- 3. We will answer questions related to site visits at the end of the call, time permitting.
- 4. If you do not receive an answer to your question, please email us at <u>mbsaqip@facs.org</u> or submit the question to our next call!

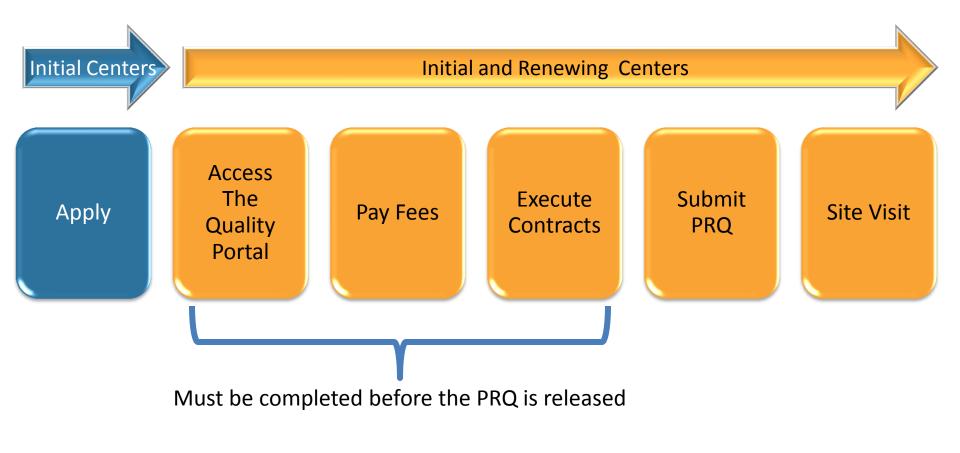


# Welcome & Purpose





# **Accreditation Process Overview**



https://www.facs.org/quality-programs/mbsaqip/apply







# **Available/Blackout Dates**

#### **MBSAQIP Quality Portal**



#### American College of Surgeons

Inspiring Quality: Highest Standards, Better Outcomes

100+years

#### ACS Home Contact Us Log Out Home

Site Visits are scheduled every 3 years to assess compliance with standard and as needed for focus visits. Our records indicate you have an upcoming site visit. Please complete the following information on your site's availability.

Site Profile Schedule Site Visit PRQ					Your si	te visit m	nust occur betw	Ambulatory Adolescen Comprehe	t Center			cent			
ite Visit History	Availab	le						Comprehe Data Colle			accredit	ed)			
ile Sharing tesources	Select	Dates	Select	Date Ra	inde			Low Acuity Comprehe	Center	22		52	ne Qualif	ications	
cources		Dutto		tember,	0.078		>			nter with		cent and			ualifications
	SU	MO	TU	WE	TH	FR	SA	SU	MO	TU	WE	TH	FR	SA	
					1	2	3					1	2	3	
	4	5	6	7	8	9	10	4	5	6	7	8	9	10	
	11	12	13	14	15	16	17	11	12	13	14	15	16	17	
	18	19	20	21	22	23	24	18	19	20	21	22	23	24	
	25	26	27	28	29	30		25	26	27	28	29	30		
	Add Da	ate(s)						Add Da	te(s)						
	Available	ə:						Blackout							
							*							*	
	Remov	e Select	ed				Clear	Remov	e Selecte	ed				* Clear	

Please provide any additional comment regarding the site visit. AV staff may contact you directly to assis you with your requests.



# **Available/Blackout Dates**

#### **MBSAQIP Quality Portal**

		Sept	ember,	2022		>				Sept	ember,	2022		
SU	MO	TU	WE	тн	FR	SA		SU	MO	ти	WE	тн	FR	SA
				1	2	3					31	1	2	3
4	5	6	7	8	9	10		4	5	6	7	8	9	10
11	12	13	14	15	16	17		11	12	13	14	15	16	17
18	19	20	21	22	23	24		18	19	20	21	22	23	24
25	26	27	28	29	30	1.		25	26	27	28	29	30	1
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vailable	): 						Bla	ackout	i i					
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Please provide any additional comment regarding the site visit. AV staff may contact you directly to assis you with your requests.



https://www.facs.org/quality-programs/mbsaqip/resources

- ✓ MBSAQIP Site Visit Agenda v10.1.19
- ✓ \*NEW\* MBSAQIP Site Visit Agenda Template
- ✓ MBSAQIP Site Visit Complication List 2019
- ✓ 2019 MBSAQIP Standards
  - Read them!



### Site Visit Agenda

- ✓ Your guide for MBSAQIP Site Visits
- ✓ Chart Review Prep
- ✓ Full schedule for the day
- ✓ Require personnel
- Checklists of required documentation
- ✓ The SVA does <u>NOT</u> replace the Standards Manual



SITE VISIT AGENDA Version 10.1.19

For questions, contact:

Paul Jeffers, MBSAQIP Verification Specialist

pieffers@facs.org 312-202-5728

All centers preparing for a site visit must complete the MBSAQIP Site Visit Complication List, available using the link below: <u>MBSAQIP Site Visit Complication List</u>

This will be a HIPAA-compliant list of the center's metabolic/bariatric surgery complication charts, which will be sent to your assigned Site Reviewer. The Site Reviewer will use this list to determine which charts they will review during the site visit.

Please compile the Complication List using the same data reporting timeframe used to complete the Application Data Template.

#### Chart Review Preparation:

- 1. Complete the MBSAQIP Site Visit Complication List, documenting <u>all\*</u> complication charts from the following categories:
  - a) All Mortalities within 30 days, 90 days, or 1 year of the operative procedure
  - b) All Reoperations within 30 days of the operative procedure (Do not include interventions)
  - c) All Lengths of Stay longer than 7 days after the operative procedure
  - d) All Transfers to an acute care facility
  - e) All Readmissions within 30 days of the operative procedure
  - f) All IRB cases if applicable
  - g) 10 Sample Cases: The MBS Director and MBS Coordinator must choose ten (10) different metabolic/bariatic surgery sample cases for review. Please choose cases that represent all actively practicing bariatric surgeons, and all primary procedure types performed at the center. Please choose cases with a normal postoperative course.
- 2. Send the Complication List to your assigned Site Reviewer, and discuss their preference for paper or electronic chart review
- 3. Prepare all complication charts requested by the Site Reviewer, and the 10 sample cases, for review during the site visit
- \* Do not list the same complication chart more than once. If a chart falls into more than one complication category, place the chart in the most severe complication category. The complication categories are listed in order of severity. All appropriate complication charts must be documented, including complications that are not related to bariatric surgery.

#### Chart Preparation:

At minimum, prepare the following documents for each chart. Tab the chart chronologically by document type.

- Primary Care Physician History & Physical (H&P), if applicable
- Surgeon H&P
- Initial Surgery Consult
- Operative Notes
- Discharge Summary, Discharge Orders, or equivalent
- 30-Day Post-Operative Follow-Up Notes
- Mortality Documents (ex. death certificate, physician notes, or autopsy report)
- Any additional progress notes which can provide further information regarding the patient's history or clinical course
- Any additional documentation requested by the Site Reviewer

#### Additional Documentation:

- 1. The center's 3 most recent Semiannual Reports (SAR) must be available for reference during the Chart Review
  - a. Initial Centers preparing for their first site visit will <u>not</u> have SARs to review
- 2. The center's Patient Education and Patient Care Pathways (Standards 5.1 and 5.2) must be available during the Chart Review
- 3. Administrative data file or operative logs to verify 100% case capture in the MBSAQIP Registry, and center volume

Chart Review Preparation



Site Visit Agenda Template

# ✓ New Resource!!

- ✓ <u>OPTIONAL</u> customizable Word document template
- Personalize the SVA for your center and your site visit
- 1 page, easy distribution to staff and relevant team members





	MBSAQIP Site Visit Agenda	
	Center Name	
Site Visit Date:	Site Visit Date	
Meeting Room:	Conference Room/Location	
Site Reviewer:	Site Reviewer Name	

Time	Agenda Item	Location	Attendees
7:45 - 8:00 AM (15 minutes)	Welcome: Center representatives will meet the Site Reviewer.		MBS Director MBS Coordinator
8:00 – 11:00 AM (3 hours)	Chart Review: The Chart Review must be the first agenda item of the day. Review of bariatric patient charts.		MBS Director MBS Coordinator MBSCR
11:00 – 12:00 PM (1 hour)	Lunch: Lunch meeting with the Site Reviewer and bariatric team.		All bariatric team members
12:00 – 1:30 PM (1.5 hours)	Facility Tour: Bariatric floor PACU/OR ED ICU Endoscopy IR Other areas		MBS Director MBS Coordinator
1:30 – 2:00 PM (30 minutes) *Interviews may run over 30 minutes	One-on-One Interviews: MBS Director MBS Coordinator MBS Clinical Reviewer Pediatric Medical Advisor* Obesity Medicine Director*		MBS Director MBS Coordinator MBSCR PMA* OMD*
2:00 - 3:00 PM (1 hour)	Pathway & Protocol Review: Review of compliance documentation.		MBS Coordinator
3:00 - 3:30 PM (30 minutes)	Exit Interview Preparation : The Site Reviewer will prepare for the Exit Interview.		Site Reviewer Only
3:30 - 4:00 PM (30 minutes)	Exit Interview: The Site Reviewer will present their findings from the site visit.		MBS Director MBS Coordinator MBSCR Facility Leadership

#### **Site Visit Complication List**

	-	-	-	-	•	~			-		-	
Chart #	Complication Type*	Gender*	Age *	BMI*	Pre-Op Risk Factors*	Surgeon*	Principal Operative Procedure*	P.O.P Month*	P.O.P Year*	Complication Details	<b>Complication Month</b>	<b>Complication Year</b>
					o2 Dependent					PE on POD 15, patient found		
1	Mortality < 30 Days	Female	71-80	71-80	LVAD	Dr. Potter	RnY Gastric Bypass	(02) February	2018	down at home.	(02) February	2018
2	Readmission	Male	41-50	41-45		Dr. Potter	Sleeve Gastrectomy	(10) October	2018	N/V	(11) November	2018
										Unable to progress diet,		
3	LOS > 7 Days	Non-Binary	< 18	51-55		Dr. Potter	Band to Sleeve Conversion	(07) July	2019	persistent nausea	(08) August	2019
					o2 Dependent							
4	Reoperation	Female	61-64	61-65	Limited Ambulation	Dr. Potter	Pouch revision and HH repair	(05) May	2019	Staple line leak	(05) May	2019
5	Random Sample	Male	> 80	41-45		Dr. Potter	Sleeve Gastrectomy	(02) February	2018	Random Sample	(02) February	2018
6												

- ✓ HIPAA-compliant list of complications for Chart Review
- ✓ Must be completed and sent to the Site Reviewer in advance
- ✓ Site Reviewer will provide guidance on which cases to prep
- ✓ Discuss paper vs. electronic chart review

# <u>Updates</u>

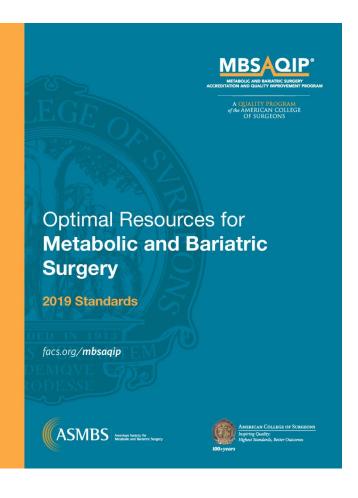
- Unlocked, no more password
- Reduced size, simplified



**MBSAQIP Standards 2019** 

...no, seriously...

## **Read Them**





# **Site Visit Preparation**

#### Communication

#### □ With your assigned Site Reviewer

- □ Chart Preparation (Further detail later)
- □ Meeting time and place
- Dietary Restrictions/Allergies
- □ Adjustments to the site visit agenda be flexible!
- □ Site Reviewer is responsible for travel/lodging

### With your team

- What to expect on the site visit
  - □ Be prepared to speak to the Site Reviewer, answer questions
- □ Call/Alert system for the facility tour
- □ Stress importance of attending the lunch:
  - Integrated health team
  - Participating surgeons
- □ Stress importance of attending the exit interview:
  - □ This is YOUR time to impact change

### With MBSAQIP

□ Call or email us any time!





# **Site Visit Preparation**

#### **Facilities**

#### Clear Your Schedule

□ MBS Director, MBS Coordinator, MBSCR

#### **Establish a base of operations (Conference Room/Meeting Room)**

Quiet and collaborative space, preferably that locks

□ With Wi-Fi/Internet Access

Have IT on standby

Easy Access to EMR and MBSAQIP Registry

□ Book the room for the whole day!

#### Refreshments

□ It's a long day – supply the energy

#### Mock Walk-Through

- □ Facility Tour
- Give leadership and team members a reminder!
- □ Is one of your surgeons a Site Reviewer?



## Site Visit Preparation Chart Review

#### Data reporting timeframe:

✓ There may be

That's Ok!

overlap

✓ Use the Application
 Data Template

#### I. VOLUME AND OUTCOMES DATA

Name of Site:

St. John's Hospital

#### A. Data Reporting Timeframe

**INSTRUCTIONS:** Each reporting year will span a full 12 month period (i.e. June 2016 - May 2017) and be contiguous. The center will use 36 months prior to application date as the Reporting Timeframe. Dates provided below will serve as the timeline for all data being reported for the purpose of this application, including procedure volumes, CME, etc. Year Three must reflect the most recent reporting year.

Reporting Timeframe: 36 months prior to application date

Month

Application Month and Year: January

Please enter the month and year the current application was started.

The reporting timeframe dates will autopopulate based on the application month and year.

Year

2020

Year Three								
(most rece	ent year)							
Begin	End							
12/1/2018	11/30/2019							

Year Two								
Begin	_	End						
12/1/2017		11/30/2018						

Year One								
Begin End								
12/1/2016		11/30/2017						



# **Site Visit Preparation**

**Chart Review** 

- **Given SVA instructions**
- Complete the Complication List
- Send it to the Site Reviewer
- Discuss Paper vs. Electronic review
- Prep the requested charts!

# Organize by complication type

- 1. Mortalities (1 year)
- 2. Reoperations (30 days)
- 3. LOS > 7 days
- 4. Transfers
- 5. Readmissions (30 days)
- 6. IRB Cases
- 7. 10 Sample Cases



Organization



# **Site Visit Preparation**

**Chart Review** 

## Tab your Charts!

- □ In Chronological Order
- By Document Type
- 1. Primary Care H&P
- 2. Surgeon H&P
- 3. Initial Surgery Consult
- 4. Operative Notes
- 5. Discharge Summary
- 6. 30-Day Post-Operative Follow-Up Notes
- 7. Mortality Documents
- 8. Additional progress notes
- 9. Any additional documentation requested by the Site Reviewer
- **Electronic (EMR) Chart Review** 
  - Practice navigation!





## Site Visit Preparation Pathway and Protocol Review

Efficiency

#### □ The Infamous Binders!

- □ It. Works.
- Electronic review must be approved by the Site Reviewer

#### **Given Separate by Standards**

Organize documentation numerically, following the Standards

Geisinger MBS QA Process	bolic & Bariatric ery Director Description	Standard 2.4	Standard 2.5

2:00 PM	Pathway & Protocol Review (All Standards)	MBS Coordinator*
(1 hr.)	During the Pathway & Protocol Review, the Site Reviewer will evaluate compliance documentation for all Standards applicable to you center's designation level. Please make the following documentation available to the Site Reviewer. Paper or electronic copies are acceptable. Please prepare these documents in binders or electronic folders organized by Standard.	MBSCR
	*The MBS Committee meeting minutes will confirm compliance with a number of different Standards. They only need to be included with the documentation for Standard 2.4. Committee meeting minutes must include attendance records.	
	Standard 1	
	Letter of institutional commitment (1.1)	
	Standard 2	
	☐ MBS Committee meeting minutes (2.4) <sup>★</sup>	
	<ul> <li>MBS Director privileges/credentials (2.5)</li> </ul>	
	<ul> <li>MBS Director job description/contract (2.5)</li> </ul>	
	<ul> <li>MBS Coordinator job description/contract (2.6)</li> </ul>	
	<ul> <li>MBS Coordinator health care license or registration (2.6)</li> </ul>	
	<ul> <li>MBSCR job description/contract (2.7)</li> </ul>	
	<ul> <li>Obesity Medicine Director privileges/credentials (2.8)</li> </ul>	
	<ul> <li>Obesity Medicine Director job description/contract (2.8)</li> </ul>	
	Standard 3	
	<ul> <li>Health care facility accreditation certificate (3.1)</li> </ul>	
	<ul> <li>Written/electronic system of defining equipment weight limits (3.2)</li> </ul>	
	<ul> <li>Equipment rental/lease agreements (3.2)</li> </ul>	
	<ul> <li>Care pathway for patients who exceed equipment weight limits (3.2)</li> </ul>	
	Standard 4	
	MBS credentialing guidelines (4.1)	
	<ul> <li>Privileges for all active M/B surgeons and proceduralists (4.1)</li> </ul>	
	<ul> <li>Surgeon Verification: quality meeting attendance (4.2)</li> </ul>	
	<ul> <li>Surgeon Verification: lifetime and annual volume case logs (4.2)</li> </ul>	



# **Site Visit Day**

#### Welcome

Time	Agenda Item *Designates required participants	<b>Required*</b> and Optional Participants
	All MBSAQIP designation levels are covered by the Site Visit Agenda. You may see Standards and required documentation that does not apply to your center's designation level. Please refer to the Designation Requirements Overview in the <u>MBSAQIP</u> <u>Standards</u> for a full list of applicable Standards for each designation level.	
7:45 AM	Welcome	MBS Director*
(15 min.)	Center representatives welcome the Site Reviewer at a designated meeting location, with brief introductions to begin the site visit. The MBS Director or a member of the facility administration is welcome to provide a brief overview of the bariatric program and/or the facility, but please keep such presentations under 10 minutes in total duration.	MBS Coordinator* MBSCR Administrative Leadership



# Site Visit Day Chart Review

8:00 AM	Chart	Review (Standards 2.1 – 2.3, 2.7, 4.15, 5.1, 5.2, 5.5, 6.1 – 6.3)	MBS Director*
(3 hrs.)	Location:		MBS Coordinator*
		Please provide a comfortable meeting room to conduct the chart review	MBSCR*
The Chart Review <i>must</i> be the		The room should include internet access and a computer for review of the MBSAQIP Registry and the center's Electronic Medical Records	Staff Member proficient in EMR
first agenda item of the day.		Please assign a staff member proficient and knowledgeable in your EMR to assist with the Chart Review, as needed	
The other	Recom	mended Order of Tasks:	
agenda	1.	Review the Semiannual Reports (SAR)	
items may be done in	2.	Review administrative data file/operative logs (annual case volume)	
any order to facilitate a	3.	Review patient and procedure selection criteria	
more	4.	Review Patient Education and Patient Care Pathways	
efficient site visit.	5.	Review IRB for any investigational procedures	
Changes to the order of events must be approved by the Site	6.	<b>Review complication charts:</b> For each chart, the Site Reviewer will review the patient's preoperative course and overall health, the patient's clinical course and progression of care, use of standardized order sets, the patient's postoperative course, adequacy of clinical documentation, and highlight any overall impressions regarding strengths and opportunities for improvement.	
Reviewer.	7.	<b>Chart Audit</b> : The Site Reviewer will write a case summary for 10 of the complication charts reviewed. Sample cases will also be used if there are fewer than 10 complication charts.	
	8.	Review Sample Cases (as many charts as time permits)	
	9.	MBSAQIP Registry Review: The MBSCR and the Site Reviewer will review Registry access, the data collection process, and long-term follow-up.	





- **Review the Semiannual Reports (SAR)**
- Review administrative data file/operative logs (annual case volume)
- Review patient and procedure selection criteria
- Review Patient Education and Patient Care Pathways
- Review IRB for any investigational procedures
- Review complication charts
- Chart Audit
- Review Sample Cases (as many charts as time permits)





# Site Visit Day

11:00 AM	Lunch (Standard 7.2)	MBS Director*
(1 hr.)	This is a lunch meeting with your extended bariatric team and the Site Reviewer. The lunch hour will be led by the Site Reviewer to:	MBS Coordinator* MBSCR*
	Address questions or areas for clarification from the chart review	Surgeons Seeking
	Address questions or areas for clarification from the center's Pre-Review	Verification*
	Questionnaire (PRQ)	MB Surgeons*
	Discuss the center's Quality Improvement (QI) initiatives and methodology for execution	Pediatric Medical Advisor*
	□ Address questions or concerns from the center and team members	(if applicable)
	*All surgeons seeking MBSAQIP Surgeon Verification are required participants for the lunch hour. If a surgeon seeking verification cannot attend this part of the site visit, please contact MBSAQIP.	<b>Obesity Medicine</b> <b>Director*</b> (if applicable) Integrated Health Team Providers





#### Lunch

#### □ Attend, attend, attend, attend.

- □ This is YOUR time
- Get those integrated health folks involved! This is THEIR time too.
- Surgeons need to be there
- □ Surgeons seeking verification must be present free food!
- Prepare any questions for the Site Reviewer

#### □ Have your QI Initiative Ready

- Be ready to discuss!
- □ Ask your QI/P department about how to present QI initiatives
- Be prepared to have everyone attending speak and share how they serve the bariatric community and your program

### Work, but relax too!

- Take a breath
- Have a bite
- □ Share your work



# Site Visit Day Facility Tour

12:00 PM	<b>Facility Tour</b> (Standards 3.2, 3.3, 4.4 – 4.12)	MBS Director*
12:00 PM (90 min.)	<ul> <li>Facility Tour (Standards 3.2, 3.3, 4.4 – 4.12)</li> <li>The Site Reviewer will tour the center to verify facilities-based compliance measures and ensure that the appropriate infrastructure exists to provide safe care to patients with obesity. The MBS Director and MBS Coordinator will lead the tour. Departmental staff must be available to meet the Site Reviewer, answer questions, and review specific compliance measures.</li> <li>Inspection: Facilities, Equipment, Furniture, Care Pathways, and Staffing</li> <li>Dedicated Bariatric Unit / Patient Rooms</li> <li>Pre-Op Care Area, PACU, Operating Room</li> <li>Emergency Department</li> <li>Critical Care Unit (CCU) / Intensive Care Unit (ICU)</li> <li>Endoscopy Department</li> </ul>	MBS Director* MBS Coordinator* MBSCR MB Surgeons Pediatric Medical Advisor (if applicable) Obesity Medicine Director (if applicable)
	<ul> <li>Diagnostic and Interventional Radiology Department</li> <li>Additional areas where metabolic and bariatric patients are managed</li> </ul>	



# **Site Visit Day**

**Facility Tour** 

□ You know your facilities the best! Tour schedule is flexible!

- Bariatric Unit / Patient Rooms
- Pre-Op
- PACU
- Emergency Department
- □ Critical Care Unite (CCU) / Intensive Care Unit
- Endoscopy
- Interventional Rad
- Additional areas where patients are treated







#### □ In <u>ALL</u> Areas of the Facility:

- ✓ SAFE FACILITIES
- ✓ Appropriate seating
- ✓ Appropriate toilets
- ✓ Appropriate equipment
- ✓ Labeling/documentation for weight limits
- ✓ Departmental providers/nurses
- ✓ Bariatric care pathways
- Call/page ahead when as you're walking to the next area





## □ Keep the tour group small!

- ✓ Site Reviewer
- ✓ MBS Director
- ✓ MBS Coordinator
- ✓ One other person, maybe......





# Site Visit Day One-on-One Interviews

1:30 PM	<b>One-on-One Interviews</b> (Standards 1.1, 2.5 – 2.8, 4.13)	MBS Director*
(30-60 min.)	The Site Reviewer will conduct one-on-one interviews, approximately 10 minutes each, to discuss:	MBS Coordinator* MBSCR*
	<ul> <li>The individual's role and integration within the bariatric program</li> <li>Resource allocation and program needs</li> <li>The center's strengths and opportunities for improvement</li> <li>Questions or concerns from the individual team members</li> </ul>	Pediatric Medical Advisor* (if applicable) Obesity Medicine Director* (if applicable)





#### □ Ok, this is really YOUR time.

- 10 minutes
- Quiet, private space
- □ What do you think your center needs?
- What do you need?
- □ Strengths
- Opportunities for improvement

### □ Can other people attend?

- No. One at a time.
  - MBS Director
  - MBS Coordinator
  - □ MBSCR
  - □ PMA (if applicable)
  - OMD (if applicable)



Other team members can request a One-on-One with the Site Reviewer! Ask in advance.



# Site Visit Day Pathway and Protocol Review

2:00 PM	Pathway & Protocol Review (All Standards)	MBS Coordinator*
(1 hr.)	During the Pathway & Protocol Review, the Site Reviewer will evaluate compliance documentation for all Standards applicable to you center's designation level. Please make the following documentation available to the Site Reviewer. Paper or electronic copies are acceptable. Please prepare these documents in binders or electronic folders organized by Standard.	MBSCR
	*The MBS Committee meeting minutes will confirm compliance with a number of different Standards. They only need to be included with the documentation for Standard 2.4. Committee meeting minutes must include attendance records.	
	Standard 1	
	$\Box$ Letter of institutional commitment (1.1)	
	Standard 2	
	□ MBS Committee meeting minutes (2.4)*	
	□ MBS Director privileges/credentials (2.5)	
	□ MBS Director job description/contract (2.5)	
	□ MBS Coordinator job description/contract (2.6)	
	□ MBS Coordinator health care license or registration (2.6)	





Time to Review Those Binders!

□ Be organized!

□ Have everything ready for review

□ If it isn't written down, it doesn't exist.

### Sit with the Site Reviewer

- □ Reviewer will confirm compliance as they go
- □ Be ready to hand them documentation/binders or otherwise assist
- Go in order of the Standards





# Site Visit Day Site Reviewer Preparation

3:00 PM	Site Reviewer Preparation	Site Reviewer*
(30 min.)	Please provide a room for the Site Reviewer to prepare for the Exit Interview. The Site Reviewer will summarize their notes and findings from the site visit before presenting them at the Exit Interview.	
	The MBS Coordinator should consult with the Site Reviewer regarding a start time for the Exit Interview, and notify all attendees.	





### Take a breather

### □ Alert your Exit Interview Attendees

- □ 15 minute warning
- Be on time for the Exit Interview!
- □ Make sure your MBS Director is there
- □ Invite anyone you want to be there!
- Definitely someone from the C-suite
- Prepare any final questions you may have for the Site Reviewer



# Site Visit Day Exit Interview

3:30 PM	Exit Interview	MBS Director*
(30 min.)	Attendees at the Exit Interview are invited at the discretion of the MBS Committee.	MBS Coordinator* MBSCR*
	The Site Reviewer will present their findings from the site visit, including an overview of the day's events and key discussion topics. The Site Reviewer will highlight the center's performance relative to the following areas:	Pediatric Medical Advisor* (if applicable)
	□ Strengths	Obesity Medicine
	Opportunities for improvement	Director* (if applicable)
	<ul> <li>Standards non-compliance</li> <li>The Site Reviewer will also present their accreditation recommendation.*</li> <li>Lastly, the Site Reviewer will address any final questions from the center's staff.</li> </ul>	MB Surgeons
		MBS Behavioral Health Provider
	The site visit will conclude at the end of the Exit Interview.	Registered Dietician





**Exit Interview** 

#### □ Attend, attend, attend, attend.

- MBS Committee
- Integrated team
- Anyone who cares for MBS patients
- Executive Level team members
- **Q** I leaders
- Anyone else you want in attendance

### 🖵 Listen

- Strengths
- Opportunities for Improvement
- □ Standard non-compliance
- Accreditation recommendation

#### 🛛 Ask

- □ If you have any questions, feel free to ask them now
- Clarity





The accreditation recommendation is only that... a recommendation
 Standards and Verification Subcommittee has final say

#### □ If it's not on paper it doesn't exist

Missing compliance documentation will <u>not</u> be accepted after the site visit ends

DO NOT send it to the Site Reviewer

□ After the site visit, address all questions and concerns to MBSAQIP Staff

DO NOT ask the Site Reviewer

#### □ The Site Reviewers are data experts, not Data Registry experts

clinicalsupport@mbsaqip.org

#### **Complete the Site Visit Experience Survey**

□ We want your honest feedback!



# **Celebrate!**

## The site visit is over!

Relax

- Be proud of your accomplishments
- Congratulate your team





# **Post Site Visit Timeline**



Average turnaround time is 7 weeks.



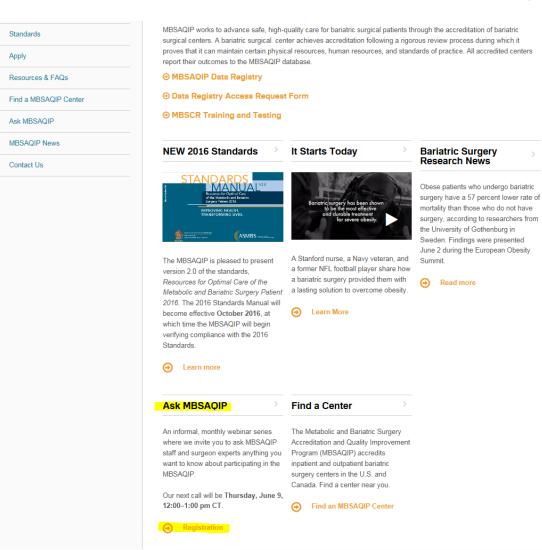
# **Additional Questions?**

At this time we will answer any questions typed into the questions pane.

We will answer as many questions as possible, time permitting.



# **Thank You for attending ASK MBSAQIP!**



## **Next ASK MBSAQIP Call:**

## Thursday, Feb. 13<sup>th</sup> 2020

## at 12pm CST

