The CSV Consultation Visit is designed to assist hospitals in evaluating their readiness to apply for verification. A consultation site visit will provide a gap analysis in compliance with the Optimal Resources for Children’s Surgical Care standards and will aid the facility in attaining verification.

Sites will self-identify areas they would like to focus on; these areas of focus will be selected based on site identified deficiencies. The Pre-Review Questionnaire (PRQ), Site Visit Agenda and Site Reviewer Team will be customized to address the needs of the site. Following the site visit, a report will help your institution to close gaps and provide strategies in achieving verification.

To begin the consultation process, please visit the ACS Quality Portal (QPort) and provide details on the Site Visit Request tab. An ACS children’s surgery team member will then reach out to assist in the process.

The CSV leadership and the ACS children’s surgery team are available to discuss any questions about the consultation visit. Please reach out to us at childrenssurgery@facs.org with your questions.

**Consultation Visit Manual Contents**

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Process Overview

1. To begin the consultation process, visit the ACS Quality Portal (QPort) and provide details on the Site Visit Request tab. Areas of focus will be provided at this time. See “Site Visit Scheduling and Virtual Details” below for additional information.
   a. A prerequisite for sites interested in completing a consultation site visit is enrollment in ACS NSQIP Pediatric
   b. ACS Staff will ensure hospital has an up-to-date Hospital Participation Agreement and Business Associate Agreement with the ACS
   c. Identification of Areas of Focus is required at the time of application
2. Pay Consultation Visit Invoice
3. Complete PRQ – You will only be required to complete the chapters and tables required for the identified areas of focus (The level of detail provided by your institution will inform the gap analysis.)
4. Coordinate site visit date with ACS
5. Phone call with ACS and Site Reviewer to review site visit agenda and site visit logistics
6. Consultation site visit occurs
7. Institution receives Consultation Visit Report

Areas of Focus

Centers self-identify areas of focus in QPort. These areas of focus are selected based on the hospital’s identified deficiencies. The Pre-Review Questionnaire (PRQ) and Site Visit Agenda are customized to address these focus areas.

Areas of Focus:
1. Program Framework and Resources (including Ambulatory)
2. Quality Structure
3. Protocols
4. Research

Hospitals that select Program Framework/Resources or Quality Structure will require a full day comprehensive site visit. All other areas will be a half day focused site visit.

Contract/Invoice

All participants are required to have a Hospital Participation Agreement and Business Associate Agreement with the American College of Surgeons. If you are a current NSQIP Pediatric participant, your Hospital Participation Agreement and Business Associate Agreement will carry over to verification. ACS Staff will reach out to you to complete the agreements if required.

An invoice will be sent to the site once hospital is approved for a consultation site visit.
PRQ Breakdown
Sites will be required to complete the PRQ based on the areas of focus. Please see below for the PRQ elements required per area of focus. The PRQ reporting year should preferably be the 12 months prior to receiving the PRQ. The last fiscal reporting year is also acceptable.

1. Program Framework and Resources (including Ambulatory): Chapters 1, 2, 3, 4, and all Tables
2. Quality Structure: Chapters 2, 5, 6, 7, PIPS Attendance Table, and Surgical Case Volume Table
3. Protocols: Chapter 5
4. Research: Chapter 8, and Education Outreach Scholarly Activities Table

The PRQ must be submitted a minimum of 2 months prior to site visit.

Site Visit Scheduling and Virtual Details
To schedule a consultation site visit, visit ACS Quality Portal (QPort) and select the “Site Visit Request” tab. Within this tab you will provide site visit availability and select your areas of focus. The ACS Team will work with the hospital to schedule the visit based on the hospitals preferred site visit dates.

- Site Visits will be scheduled 5-7 months from the time of site visit request.
- All consultation site visits will be held virtually. The site visit will be conducted using a virtual platform of the hospital’s choice. The hospital must have a team member proficient with running the selected software, including switching presenters and screen sharing. All agenda items will be completed via virtual review by the Site Reviewer using the designated video conferencing platform. The following features are required for any selected virtual video conferencing platform: HIPAA compliant/secured connection, video conferencing capabilities, screen sharing capabilities, can switch presenters. The hospital will notify the ACS staff of their video conferencing platform one month before the site visit.
- The hospital is responsible for scheduling, hosting, and running all technical logistics of the virtual site visit.
- ACS Staff will act as a liaison between the Site Reviewers and site as needed. ACS Staff will review timelines and deliverables with both the Site Reviewers and site throughout the process.

Site Visit Elements
Please see below for site visit elements that are required per area of focus. Please note site visit agendas will be customized depending on the site’s chosen areas of focus.

<table>
<thead>
<tr>
<th>Site Visit Element</th>
<th>Areas of Focus</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introduction</td>
<td>• All Areas of Focus</td>
</tr>
<tr>
<td>Chart Review</td>
<td>• Program Framework/Resources</td>
</tr>
<tr>
<td></td>
<td>• Quality Structure</td>
</tr>
<tr>
<td></td>
<td>• Protocols</td>
</tr>
</tbody>
</table>
*The Reviewer team may request a tour as needed.

**Site Visit Sample Agenda**
Refer to the sample agenda below. Site visit agendas will be customized depending on the site’s chosen areas of focus.

**Comprehensive Consultation Sample Agenda: Quality Structure**

**Site Visit Agenda Details**
ACS staff will set up a secure file sharing portal called Box to share documents before and during the site visit. The Box is referenced below in several instances.

**Introduction:**
- Hospital will present on selected areas of focus.
- Hospital will include an overview of compliance gaps.
- Additional requirements will be requested based on the selected areas of focus and PRQ review.

**Expectations for Chart Review/Evaluation of Performance Improvement:**
A minimum of 7-10 charts will be reviewed by the Site Reviewer.
- Chart reporting period: 12 months preceding PRQ submission.
- Hospital completes the chart review excel template for all charts identified on the Chart Review Requirements document.
- Hospital submits chart review Excel template via Box 60 days prior to site visit.
- CSV staff will notify CSPM of the selected charts 30 days prior to site visit.
- Hospital will complete a cover sheet template for all selected charts and upload the cover sheets to Box at least one week before the site visit.
The hospital must utilize an EMR system to facilitate remote/electronic review of patient charts. Direct access to the EMR is not required. The center can use presentation/screen sharing to allow the Site Reviewer to review patient medical records.

One navigator will be required per Site Reviewer to display the EMR. Navigators should be from Children’s Surgery and be able to answer PI process questions. The MDCS and CSPM should be available to answer any questions for the Site Reviewers if the EMR Navigator is unable to.

PI documentation including any PIPS or M&M review must be available for review.

Hospital must obtain permission/approval from the facility’s legal counsel or an individual with comparable authority to provide the assigned Site Reviewer with remote/teleconference access to and/or review of patient medical records and hospital documentation if such permission/approval is deemed necessary beyond the existing agreements between the facility and ACS CSV.

Required Chart Content:
1. H&P
2. Consults
3. Op notes
4. Anesthesia Record
5. Discharge Summaries
6. Transport documentation, if applicable
7. Autopsy reports, if available
8. Copies of PI documentation and other related information, if applicable

*Other documents from the EMR may be requested by the Site Reviewer on the day of the visit. The above list details the documents that are typically reviewed.

Staff Interviews
- Required personnel based on areas of focus/PRQ Review.
- MDCS, MDCA, and CSPM are required for all areas of focus.

Evaluation of On-site Requirements:
- Hospital will submit on-site requirements via Box one week before the site visit.
- Include any on-site requirements for the standards that fall under the selected areas of focus.

Evaluation of NSQIP Pediatric and Appendix I:
- Provide an overview of the most recent NSQIP Pediatric Semi-Annual Report (SAR).
- Provide an overview of the Appendix I Safety Data Report.

Exit Interview:
- Site Reviewer will provide an overview of the site visit and discuss any identified deficiencies, opportunities for improvement and strengths.
- Site Reviewer will provide an overview of post site visit action items.
Consultation Visit Report
Following the site visit, centers will receive a detailed Consultation Visit Report with the Site Reviewer’s feedback and recommendation for compliance for all non-compliant standards. The non-compliant standards and recommendations for compliance are outlined in the Consultation Visit Report. Non-compliant standards require corrective action prior to verification.

Following Consultation Visit - Applying for Verification
Sites can formally apply for verification when ready. Contact the ACS team at childrenssurgery@facs.org to begin the application process.