

## IDENTIFICATION and VERIFICATION PROCESS

Veterinary Committee on Trauma (VetCOT)

**Last approved changes:** (Dec2021) 20April2018 - ACVECC Regents meeting

**Pending amendments/edits:** None

**Date generated:** 11May2014

### IDENTIFICATION:

Veterinary Trauma Centers (VTC) will be identified on an approximately annual basis through an application process. Materials to be submitted by the proposed VTC lead for review will include:

1. Letter from the proposed VTC lead and hospital administration supporting the application and confirming understanding of the requirements as outlined in the most recent version of the VetCOT Veterinary Trauma Center “Resources” document. The letter should include statements that indicate a commitment to improving trauma patient care, and if identified as a VTC, intent to create an internal Trauma Advisory Board, implementation of and ongoing effort to a Performance Improvement and Patient Safety (PIPS) program and addition of trauma cases to the veterinary Trauma Registry.
2. Online application (survey) describing hospital resources available as outlined in the VetCOT VTC “Resources”.

Process:

1. The VetCOT committee chair and/or administrative team will de-identify applications for blind review by the VetCOT Verification subcommittee.
2. The VetCOT Verification subcommittee will review the applications and send a report of recommendations to the VetCOT committee chair. A majority vote to approve each individual hospital by the VetCOT Verification subcommittee is required.
3. Hospital identity will be unblinded, and a list of recommendations for official VTC identification status and process for selection will be forwarded by the Verification lead(s) and VetCOT chair to the ACVECC Regents for final approval.
4. All hospitals that applied for VTC identification will be notified of their status within 30 days of the ACVECC Regents meeting.
  1. Hospitals that do not meet requirements for identification will be given a summary of the process for identification, and which criteria were not met based on application materials.
    1. Appeals: These hospitals will have a 30-day period to respond with additional supportive information and documents regarding deficiencies. The subcommittee will review these addendum documents within 30 days.
      1. If approved: Documents will be forwarded to the Regents for approval and notification of decision will be made within 30 days of the Regents meeting

2. If not approved: Notifications and reasoning will be given.
  - b. Hospitals that do not meet requirements for identification will be able to re-apply during the next application cycle.
5. Hospitals identified as VTCs (recognized as “provisional trauma centers”) will work with the VetCOT committee and proceed to the Verification process approximately 12-18 months later.

#### **VERIFICATION:**

Previously identified VTCs will be given application materials for verification at least 8 weeks prior to the application deadline.

Application materials include: Checklist of required verification documents (1-page), ACVECC VetCOT verification survey (4-pages), and VTC Advisory Board worksheet (1-page). Examples of previous applications, including CE worksheets and SOPs are available by request.

1. The Verification subcommittee member leading the verification process will set application deadlines.
2. Additional information evaluated by the subcommittee will include conference attendance and data entry in the trauma registry.
3. The VetCOT Verification subcommittee will review applications. Each hospital will be reviewed by at least 3 subcommittee members.
4. A summary report requesting additional information and clarification of submitted materials will be sent to the VTC leads within 5 weeks of the application deadline (#1).
5. VTC leads will have 3 weeks (from #4 notification) to provide explanation and/or additional requested materials.
6. Within 3 weeks (of #5 completion), the VetCOT Verification subcommittee will review additional materials and notify VTC leads of the recommendations for Level status which will include a review of their submitted documents.
7. The VetCOT will forward their recommendations for verification to the ACVECC Regents for final approval.
8. Verified VTCs will be notified of their Level of verification within 30 days of the ACVECC Regents final decision. The letter of notification will include reasoning for Level assigned.

#### **RE-VERIFICATION:**

Re-verification of VTCs will be approximately every 3 years. Previously verified VTCs will be given application materials for re-verification as a Level I or II VTC at least 8 weeks prior to the application deadline.

Application materials are similar to the verification process (see above). While ensuring ongoing availability of resources as outlined in the most updated “Resources” document is important, an emphasis of the review process will be to assess a continued commitment to improving trauma patient care through evaluation of data entry in the trauma registry, documentation of contributions made by Trauma Advisory Board (e.g., memos, approved SOPs) documentation of Performance Improvement and Patient Safety (PIPS) program efforts, maintenance of VECCS facility certification, and attendance at the ACVECC VetCOT trauma conference.

1. The Verification subcommittee member leading the re-verification process will set application deadlines.
2. The VetCOT Verification subcommittee will review applications. Each hospital will be reviewed by 3 subcommittee members.
3. A summary report requesting additional information and clarification of submitted materials will be sent to the VTC leads within 5 weeks of the application deadline (#1).
4. VTC leads will have 3 weeks (from #4 notification) to provide explanation and/or additional requested materials.
5. Within 3 weeks (of #5 completion), the VetCOT Verification subcommittee will review additional materials and notify VTC leads of the recommendations for Level status, which will include a review of their submitted documents.
6. The VetCOT will forward their recommendations for re-verification to the ACVECC Regents for final approval.
7. Re-verified VTCs will be notified of their Level of verification within 30 days of the ACVECC Regents final decision. The letter of notification will include reasoning for Level assigned.

#### Verification submission extension criteria:

Hospitals that have been identified are able to apply for a 6-month extension on submission of verification materials by providing the following for Verification subcommittee review (due the same date as verification material submission):

1. Continued hospital administration support (via letter on hospital letterhead)
2. Evidence that the Internal Advisory Board has been formed (submit VTC Advisory Board worksheet)
3. Well-described timeline with target dates for addressing application deficiencies (e.g., specific steps/plan for tracking cases, application for VECCS certification, etc.)

Additionally, the Verification subcommittee will verify that the VTC lead and/or representative has been present for at least 1 conference call OR been in regular communication with Verification subcommittee or VetCOT lead(s)

- During the extension period, they may continue to advertise as *ACVECC-provisional veterinary trauma center*.

### Re-application processes:

After identification, hospitals may suspend provisional-status for 3 months with submission of a “Change in status” form.

- During the suspension period, they may not advertise as *ACVECC-provisional veterinary trauma center*.
- These hospitals will be invited to submit verification materials with the subsequent verification wave.

Hospitals that have been verified and submit a “Change in status” form regarding their verification status (withdrawing from network):

- If the trauma medical director remains the same, the hospital may reapply through the verification process at any point.
- If the trauma medical director changes, the hospital may re-apply through the verification process within 2 years of suspension.
- If the trauma medical director changes and it has been > 2 years from date of suspension, the hospital must reapply through the identification process.
- During the withdrawal period, the hospital may not advertise utilizing any verbiage related to *ACVECC- veterinary trauma center*

### OTHER:

VTCs that expand resources enabling them to be verified at a higher level may apply for re-evaluation of their verification level in June and December of each year.

VTCs must notify the VetCOT within 1-week of resignation if the trauma medical director leaves the facility and there is not a DACVECC on staff that can either act as the interim or replacement trauma medical director.

VTCs that lose a resource that is required for their verified level (e.g., second overnight DVM, CT capabilities, etc.) must report this change in status (using a “Change of status” form) if the intention is to not replace the resource and/or the resource is not replaced within 3 months.

### Trauma registry requirements:

All identified and verified VTCs are expected to have their trauma cases entered and updated into the Trauma Registry on a quarterly basis. Data may be directly entered in the Registry, or onto data capture forms, but documentation must be made within 30 days of the end of each quarter. Per the Resources document (2018) and initial documentation sent to VTCs (FAQs):

*“All cases are entered into registry by the end of each quarter: January 31 (cases seen through December 31), April 30 (cases seen through March 31), July 31 (cases seen through June 30) and October 31 (cases seen through September 30).”*

Deficiencies in data entry must be addressed promptly.

Ideally, the VTC would contact the chairs of the Registry subcommittee and Verification subcommittee to inform VetCOT that they are having problems keeping up with data entry. In the absence of VTC self-reporting, a deficiency in data entry would only be discovered at the time that the Registry subcommittee chair generates quarterly reports.

Moving forward, the Registry subcommittee chair will send unblinded quarterly reports to the designated Verification subcommittee chair for review. The Verification subcommittee chair will identify VTCs with deficient case entry and contact them via email. Deficient case entry will be considered ZERO cases, or < 25% of the previous quarterly case totals for that VTC.

The goal of the Verification subcommittee chair contacting the VTC lead is three-fold; (i) to understand the cause of the problem resulting in deficient data entry, (ii) to provide help where possible, and (iii) to notify the VTC that they will be placed on probationary status until the deficiency is corrected (assuming no trauma case data has been captured).

If for example, the problem lies with online database entry (i.e., paper data capture forms are done, but they just haven't had a chance to enter them into REDCap), the VTC will be encouraged to get those cases entered and ensure that this is done on a 3-monthly basis to fulfil their obligations. This would have no repercussions for the VTC.

If however, the data has not been captured at all, the VTC lead will be encouraged to identify strategies to correct the deficiency. The VTC will be placed on probation, with a 6-month target to correct the deficiency. Probation will be lifted as soon as the VTC achieves a 3-month period of complete data entry. If at the end of 6 months the VTC has not corrected the deficiency, then they lose their VTC designation, and are no longer able to advertise.

Note that missed trauma cases should not be entered retrospectively (otherwise this may compromise the integrity of the registry). To correct a deficiency, prospective trauma case entry must resume.

### **External challenges to VTC status**

The Verification subcommittee will field inquiries from within the veterinary profession and members of the public regarding the resourcing of provisional and verified VTCs. The cooperation of VTCs with subcommittee requests for information is required to document ongoing compliance with the Resources document.

1. VTC leads are required to respond with requested supporting documentation within 30 days.
2. The VTC lead's response will be reviewed by VetCOT and Verification chairs within 30 days; the VTC lead and person/group putting forth the inquiry will be informed of the plan of action, which may include no further action, review by the full subcommittee, review by the ACVECC Regents, request for generating a "Change in status" form, etc.
3. The review processes will be documented.

**Marketing verbiage:**

From ACVECC Regents meeting minutes, September 9, 2014; Amended January 2016:

After identification, pre-verification: *ACVECC-**provisional** veterinary trauma center*

After verification: *ACVECC-verified Level X veterinary trauma center.*

(\*\*Note: approved by ACVECC Regents: February 2017)

**History of changes to this document:**

**Date generated:** 11May14

Date approved by VetCOT Guidelines and Verification subcommittee (initially):  
1June14

Previous amendments: 18Jan16 (with comments from Jan Regents meeting);

1Oct16 with updated dates (no changes to intent/content); 20Mar17: Feb17 Regents meeting approved wording for verified hospitals.

8Oct17 (added Re-verification section, updated dates)

Jan-April2018 - Additional wording re: mechanisms if case entry falls behind (CS), fielding inquiries/challenges to VTC status (CS) and specific date removal (KH)

November 2021 - Edits to reflect change from Internal Trauma Steering Committee to Trauma Advisory Board (DLC)

November 2021 -- Edit to reflect recertification period from 2 years to 3 years as proposed by the committee. (RF/KH)