

## **Attachment B**

### Massachusetts Department of Public Health Division of Health Care Quality

#### **Special Project to perform primary angioplasty without onsite open-heart surgery**

#### **Guidelines for development of Collaboration Agreement**

Hospitals participating in the Special Project to provide primary angioplasty services without onsite open-heart surgery must enter into a collaborative association with a tertiary hospital. In this context a tertiary hospital is defined as a hospital which has onsite open-heart surgery.

The purpose of this collaborative association is:

- to provide to the Special Project hospital's staff with an appropriate environment for the clinical phase of the staff training program.
- to provide ongoing availability of expert consultation to medical and nursing staffs at the Special Project hospital in the care of patients that have a primary angioplasty procedure performed.

The collaboration agreement at a minimum must:

- be *current* and *specific* to the applicant hospital's participation in the Special Project and the services/support that the tertiary hospital agrees to provide.
- be developed through the participation of all appropriate disciplines (at a minimum: physicians, nurses and hospital administrators) from *both* the Special Project hospital and the tertiary hospital.
- be signed by the CEO of each hospital and the Director of the Cardiac Catheterization Service or the Director of the Cardiology Services of each hospital.
- include the names of the lead physicians and nurses for the Special Project at *each* facility.
- delineate the joint development of educational program for each group of staff (physicians, nurses and technicians). At a minimum include:
  - names of the staff person/s, at each facility, who is/are responsible for the development, coordination and implementation of the education and training programs.
  - process for the joint development, coordination and implementation of the education and training programs.
  - provisions for Special Project hospital staff (including all nursing and technical staff) of the cardiac catheterization service to participate in "one to one" observational training at the tertiary hospital. Each "trainee" will be paired with a tertiary hospital staff person of the same discipline.
  - provisions for Special Project hospital staff (including all nursing and technical staff) of the cardiac catheterization service who will serve as "second operators" adequate opportunities for training and "hands on" experience, in a minimum of 25 procedures, at the tertiary hospital.

## Collaboration Agreement (continued)

- timeframes for the development and implementation of each aspect of the staff education and training.
- include terms specifying that the tertiary facility will provide, through its medical and nursing staffs, 24-hour availability for immediate patient care consultation.
- include provision for the services of appropriate tertiary hospital nursing staff to provide consultation and assistance to the nursing staff at the Special Project hospital in the development of written nursing care plans and critical pathways.
- include provision for the joint development of competency and performance evaluations of all Special Project hospital staff and any retraining programs which may be required.
- include provision for ongoing assistance to the Special Project hospital for staff education.
- delineate the plan for the joint development of a quality assurance review program at the Special Project hospital which focuses on patient outcomes. At a minimum include the following:
  - Job titles (e.g. VP of Nursing Services) of members of the Joint Quality Assurance Committee (Joint QA Committee), which shall include representatives of each professional discipline and staffing category (e.g., administrators, physicians and nurses) from each hospital.
  - The frequency of Joint QA Committee meetings. At a minimum the committee shall meet twice a year.
  - The process for developing and implementing a plan of correction for any problems identified.
  - The process for including this quality review assessment in the Special Project hospital's Quality Assurance program.
- include guidelines for the selection of patients to have primary angioplasty performed, with specific reference to the Special Project requirements.
- include specific provisions for the emergency and routine transfer of patients. At a minimum the following must be delineated:
  - Protocol specifying the responsibilities of each hospital's physician and nursing staffs in addressing any emergent situations.
  - The tertiary hospital's agreement to accept, without delay, any patient referred emergently. The tertiary hospital's cardiac surgery staff and facilities shall be immediately available if needed.
  - The pertinent patient information required, the agreed upon cardiac catheterization image standard, and the method of transmission of this information to the tertiary facility in a timely manner. Information to accompany the patient during transfer should be identified.
  - Which facility is responsible for arranging the safe and expeditious physical transfer of the patient and his/her personal belongings.
  - Who shall accompany the patient during the transfer.
- include provisions to affirm that both hospitals will provide all patient information required by the Department in a timely manner.