

Audit Policy Update:

Audits in the STS databases

STS Database Audits

- Purpose
 - Data accuracy
 - Education opportunity
- Requirement participation agreement
 - Approximately 10% sites within each database audited annually

Policy posted
on the STS
website

<https://www.sts.org/about-sts/policies/sts-national-database-audit-policy>

STS Database Audit – Site Selection

Random selection of sites from the eligible audit pool

Audit Pool Inclusions

- Active participant for all 12-months of the audited time period
- Capture specified minimum number of procedures during the audit time period
(CHSD = 30 index ops)

Audit Pool Exclusions

- Sites successfully completed an audit within the previous 3 years
- Sites identified as not meeting expectations during a recent audit

2022 CHSD Audit

- 20 randomly selected index operations
- All mortalities related to an index operation
- Case log review

Surgical Dates:

07/01/20

Thru

06/30/21

CHSD – Random Case Audit Fields

Fundamental diagnosis (374)

Primary diagnosis

Diagnosis (890)

Primary procedure

Procedure (930)

Operation type (1056)

Gender (340)

Premature birth (<1yr) (350)

Gestational age (1yr) (370)

NCAA (530)

Chromosomal abnormality (570)

Syndromes (610)

Date of Admission (780)

Location from which patient was
admitted (781)

Date of surgery (790)

Height (800)

Weight (810)

Age at time of surgery (820)

Number of cardiothoracic
operations (1090)

Date of hospital discharge (4220)

Discharge location (4240)

Date of database discharge (4250)

Mortality status at hospital
discharge (4230)

Mortality status at database
discharge (4260)

Mortality 30-day status (4300)

COVID date (6723)

COVID diagnosis (6724)

Preoperative factors (select)

Complications (select)

CHSD – Random Case Audit Fields

Select Preoperative Factors

- Mechanical circulatory support
- Shock, Persistent at time of surgery
- Shock, Resolved at time of surgery
- Hepatic dysfunction
- Necrotizing entero-colitis, Treated medically
- Sepsis
- Coagulation disorder, Hypocoagulable state secondary to medication
- Preoperative neurological deficit
- Renal dysfunction
- Renal failure requiring dialysis
- Mechanical ventilation to treat cardiorespiratory failure

CHSD – Random Case Audit Fields

Select Complications

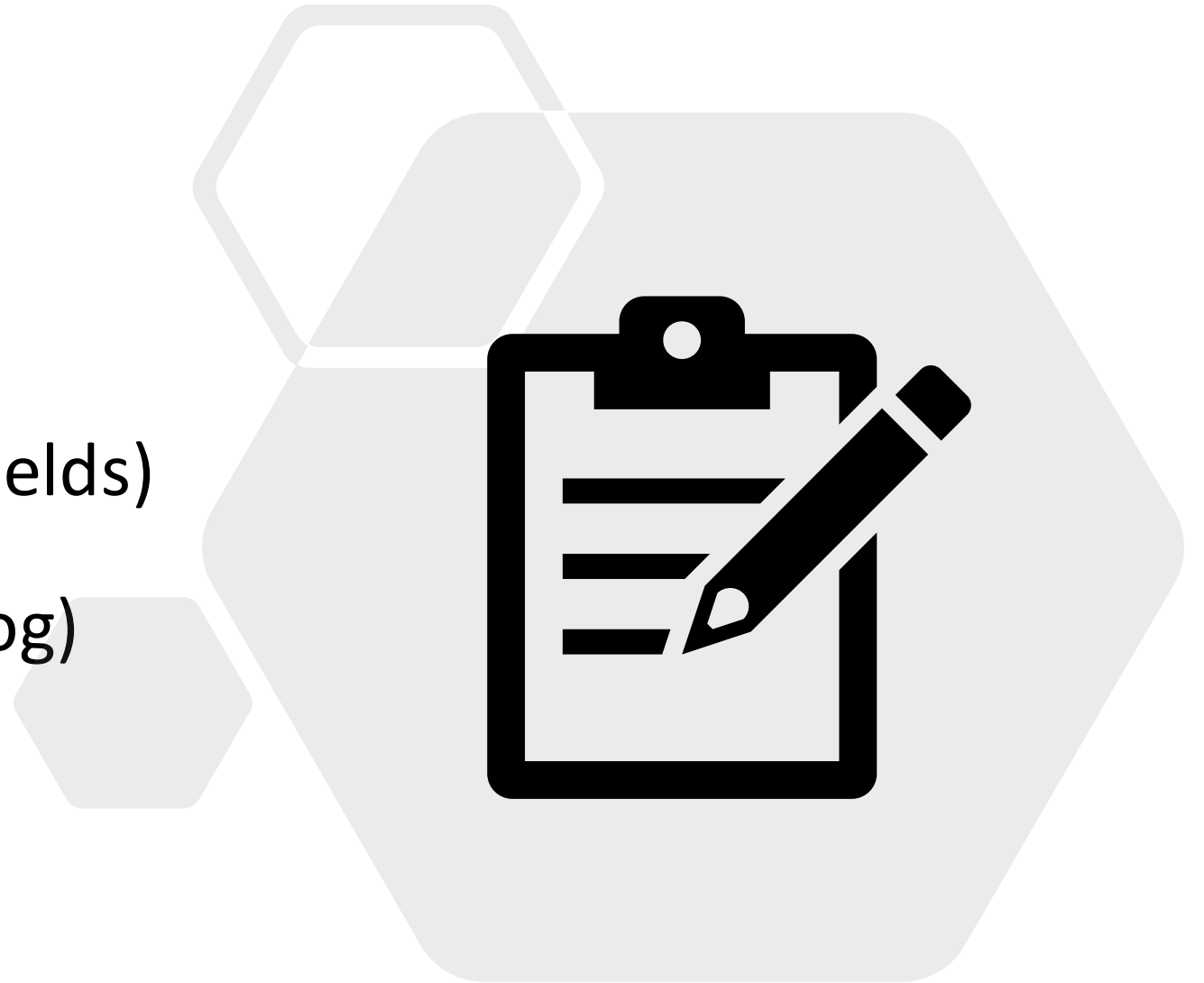
- Unplanned interventions (22, 24, 26, 240)
- Renal failure (223, 224, 230)
- Postoperative/postprocedural mechanical circulatory support (40)
- Arrhythmia necessitating pacemaker, Permanent pacemaker (74)
- Paralyzed diaphragm (300)
- Unexpected cardiac arrest (30)
- Neurological deficit, Neurological deficit persisting at discharge (320)

CHSD – Mortality Audit Fields

- Date of surgery (790)
- Date of admission (780)
- Date of hospital discharge (4220)
- Age at time of surgery (820)
- Gender (340)
- Operation type (1056)
- Date of database discharge (4250)
- Mortality status at hospital discharge (4230)
- Mortality status at database discharge (4260)
- Mortality 30-day status (4300)
- Mortality date (490)

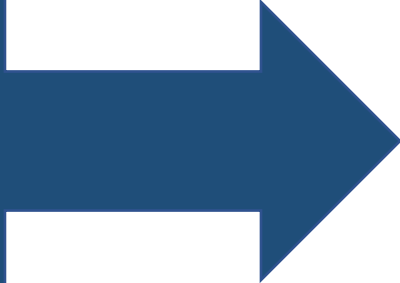
Audit Scoring

- Data accuracy (data fields)
- Data completeness (data fields)
- Data completeness (case log)



Audit Scoring Continued

Thresholds differ for each section, i.e., complication and mortality sections



- Exceeds expectations
- Meets expectations
- Does not meet expectations

Audit Scoring – Overall Site Accuracy

- $\geq 98\%$ exceeds expectations
- 90.0% - 97.9% meets expectations
- $\leq 89.9\%$ does not meet expectations

A site achieving $\leq 89.9\%$ for overall site accuracy will require a re-audit

Audit Scoring - Complications

- $\geq 98\%$ meets expectations
- 90.0% - 97.9% does not meet expectations

**A site achieving $\leq 89.9\%$ for
complication accuracy will
require a re-audit**

Audit Scoring - Mortality

- $\geq 98\%$ meets expectations
- 90.0% - 97.9% does not meet expectations

A site achieving $\leq 89.9\%$ for mortality accuracy will require a re-audit

Audit Scoring – Mortality Post Procedure Status Verification

- 100% meets expectations

A site achieving $\leq 99.9\%$ for mortality post-procedure verification will require a re-audit

Mortality Verification

Variables for post-procedure verification

- Mortality 30-day status
- Mortality status at database discharge

Must provide documentation of where these fields were obtained. EHR documentation is best.

Submit all
documentation
of post
procedure
status

Status at 30 days after surgery: **Mt30Stat (4300)** Alive Dead Unknown

30 Day Status Method of Verification: **Mt30StatMeth (4310)**

Evidence of life or death in Medical Record

Contact w/ patient or family

Contact w/ medical provider

Office visit to provider \geq 30 days post op

SSDMF

Other

Date of Database Discharge: **DBDischDt (4250)** (*mm/dd/yyyy*) __ __ / __ __ / __ __ __ __

Mortality Status at Database Discharge: **MtDBDisStat (4260)** Alive Dead Unknown

Must show source for this information:

- Upload documents from medical record
- If unavailable, tracking log can be submitted

Tracking Log for Audit

Acceptable without any other source of documentation

- Source used
- Date source identified
- Detailed information

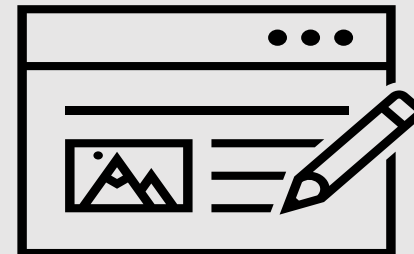
12/01/21: Phone call to patient's mother, Dawn. Reported patient doing well, returned to school.

08/07/22: Spoke with patient's pediatrician, Dr. Garcia. Last appointment on 08/01/22, no concerns, gaining weight appropriately.

Tracking Log Continued

- Can be within the database (vendor specific)
- Can be outside of the software (i.e., Excel etc.)

Must be able to upload for audit



Scenario:

I've been selected for audit – what are next steps....

DON'T PANIC!

Audit Prep

- Follow the instructions on the audit notification
- Note the timeline/due dates
- Ask questions
- ***Get Organized!***
 - Make a plan!***
 - Start early!***

Audits – in Summary

- Read the audit policy on the STS website
- Cannot update data for audit – auditors already took a snapshot of data
- Can document source for mortality validation