Making QI work for you

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Agenda

Everything we learned in TOPICS & more

- Basic QI Process & Forms
- QI Process & Groups
- Keep the Filters Flowing
- Show your work & Be Proud
- How to Continuously Review
Back to the Basics

- KEY - Identify & have a written Process to your QI
- Secondary Review
- Identification of QI Indicator
- Tertiary Review
- Primary Review
- Loop Closure
Identification of Quality Indicator

- Identify How your Institution Identifies Quality Indicators
- Program plan should have the process identified

- Registry capture
- Rounds
- Email/Word of mouth
- Coordinator/Medical Director/ Trauma Surgeon
- And So on...
## Primary Review

- Trauma Coordinator/Program Manager
- Chart Review
- Identification of Times
- Reports
- ISS/TRISS
- ICD-9/ Diagnosis
- Comorbidities/Complications

### Trauma Service Performance Improvement

<table>
<thead>
<tr>
<th>Client Name</th>
<th>Medical Record</th>
<th>Date of Admission</th>
<th>Date of Discharge</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Admit Service/Attending</th>
<th>Discharge Service/Attending</th>
</tr>
</thead>
</table>

**History of Injury**


**INDICATORS:**
- (NS) Non Surgeon admission
- (MI) Missed Injury
- (IT) Inter-hospital transfer complication
- (NSG) nursing documentation
- (DEA) All deaths
- (TC) Trauma code not called
- (MI) Injury diagnosed 24 hours after admission
- (OTH) Other
- (ICL) Level 1 trauma code called after ED arrival
- (TCC) Transfer center complication
- (TA) Trauma Attending not available and/or late to trauma code
- (SP) Standards and Protocols not followed
- (OK) Operating room/Anesthesia staffing availability
- (MTP) Massive Transfusion Protocol

**Review Date:**

**Recommendations:**

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**NO REDISCLOSURE OF THE ABOVE INFORMATION IS ALLOWED**
Secondary Review

- Coordinator & Medical Director
- Review charts
- Identify Loop Closure Cases
  - Cases that fit within an identified policy
  - Cases that need to be trended
  - Cases within department that can be closed by medical Director
- Identify Cases to go to Multidisciplinary Group
- Weekly for Higher Volume
- Know what your institutions volume & Need is

- Multidisciplinary Group
  - Orthopedics
  - Neurosurgery
  - Anesthesia
  - Emergency medicine
  - Nursing, Radiology, Ad hoc
- Smaller group of cases
- Identify Corrective Actions
  - Education
  - Policy & Protocol
  - Counseling
- Monthly
Nomenclature & Registry

- Deaths
  - Unanticipated Mortality with Opportunity for Improvement
  - Anticipated Mortality with Opportunity for Improvement
  - Mortality without Opportunity for Improvement
- Non surgeon Admit
  - Low Falls
  - ISS <=4
  - Surgical Consult
- Autopsy Reports
- Documentation into registry & ability to pull reports
- Filing
- Documentation of minutes/agenda
QI Process

• Your Process has to be written
• &
• Have to follow it, and show that you follow it

• Indicators
• Primary Review
• Secondary Review
• Tertiary Review

• Corrective Actions
  • Proof

LOOP CLOSURE
Tertiary Review

- Identification of Tertiary Review
- Form Letter of Request
  - Give a deadline
  - Follow up with it
- Form Response
  - Determination
  - Preventability
  - Corrective Action

- Need more information
- Can not determine corrective Action
- Not Documented
TOPICs

Trauma Outcomes Performance Improvement course

- 4 Step Process
- Identify Quality Indicators
- Assess Quality Indicator
- Review Case
- Close or Send for further Review
- Continuous Evaluation
Committees

• Trauma Governing Committee
• Trauma Peer QI
• Multidisciplinary
  • Trauma
  • Orthopedic
  • Neurosurgery
  • Anesthesia
  • Radiology
  • Nursing

What must you have?

Attendance!!!!!
Attendance

Documented Attendance of all Representatives

- Documentation of all Representatives
  - In Minutes of each Meeting
  - Minutes must be printed for survey
  - What percentage of meeting attendance is your **Goal!!**

- Compliance of Attendance
  - How do you review your compliance
  - Who Reviews
  - Where is it Reviewed
  - How often is it reviewed
In Review

- Trauma Indicator is triggered
  - Review of Chart is done by Trauma Coordinator
  - Trauma coor. Reviews chart with Medical Director
  - Determines the need for Peer Review

- Trauma Peer QI
  - Case Review by committee
  - Determination
  - Preventability
  - Corrective Action

- Further Review & Determination Approved
  - Education
  - Policy/Procedure Change
Phew!!! Your QI is done, RIGHT?

Ready for The ACS
There’s More! Continuous Evaluation!

- HMMMM!
- I already continuously Evaluate?
  Don’t I?

I have Loop closure
I did everything the taught me, Right?
Continuous Evaluation
How do you continuously Evaluate

- Trauma Surgeon Activation Response Times
- Non Surgeon Admit Rate
- Under/Over Triage Rate
- Attendance to meetings
- CME/IEP
- Number of Admissions per Surgeon correlated with their ISS (for lower volume centers)
- Any Ongoing Frequent Indicators in your facility
Continuous Evaluation

- Medicine & Nursing – do this for everything else
  - Washing Hands
  - Audits of Policy & Procedures
- Take your already existing data and bring it back to your Secondary Review Team
- Compliance Tool or audit tool
- Governance Committee
- Hospital Committee
- Leaving no surprises
# Report Card

## Adult Trauma Physician Report Card - Cumulative Jan-Dec 2012

<table>
<thead>
<tr>
<th>Trauma MD</th>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
<th>E</th>
<th>F</th>
<th>G</th>
<th>H</th>
<th>I</th>
<th>J</th>
<th>K</th>
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<td>Total Admissions to Trauma Surgery</td>
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<tr>
<td>ISS &lt; 15</td>
<td>77</td>
<td>79</td>
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<td>26</td>
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<td>30</td>
<td>71</td>
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<td>4</td>
<td>12</td>
<td>5</td>
<td>1</td>
<td>3</td>
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<td>103</td>
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<tr>
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<td>0-15 minutes (Goal 100%)</td>
<td>42</td>
<td>52</td>
<td>43</td>
<td>8</td>
<td>12</td>
<td>29</td>
<td>10</td>
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<td>3</td>
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<td>116</td>
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<td>Not Present within 15 minutes</td>
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<td>3</td>
<td>7</td>
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<td>5</td>
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<td>11</td>
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<td>N/A due to MD/RN documentation</td>
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<td>ED to OR</td>
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<td>8</td>
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<td>ED to ICU</td>
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<td>11</td>
<td>15</td>
<td>26</td>
<td>12</td>
<td>0</td>
<td>3</td>
<td>8</td>
<td>89</td>
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<tr>
<td>ED to Floor</td>
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<td>88</td>
<td>139</td>
<td>35</td>
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<td>ED to Stepdown</td>
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<td>13</td>
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<td>11</td>
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<td>0</td>
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<td>CME’s</td>
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<td>Hours completed to date</td>
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<tr>
<td>Trauma Peer QI (Goal 75%)</td>
<td>69%</td>
<td>92%</td>
<td>54%</td>
<td>100%</td>
<td>62%</td>
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<tr>
<td>Trauma Committee (Goal 75%)</td>
<td>89%</td>
<td>89%</td>
<td>56%</td>
<td>50%</td>
<td>67%</td>
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<tr>
<td>Trauma Conference (Goal 75%)</td>
<td>22%</td>
<td>22%</td>
<td>22%</td>
<td>0%</td>
<td>11%</td>
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<td>RTAC</td>
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<tr>
<td>Length of Stay - all providers</td>
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<td>All patients - All Services</td>
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<td>LOS in ICU</td>
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<tr>
<td>Non Surgical admits</td>
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<tr>
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<tr>
<td>Surgical Consult</td>
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<tr>
<td>Due to same height fall</td>
<td>50</td>
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<tr>
<td>ISS &lt; 4</td>
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<td>Total percentage</td>
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</table>

## Committee Attendance by Service

<table>
<thead>
<tr>
<th>QI</th>
<th>Committee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Committee Attendance by Service</td>
<td></td>
</tr>
<tr>
<td>EM - Adult</td>
<td>85%</td>
</tr>
<tr>
<td>Neuro - Adult</td>
<td>62%</td>
</tr>
<tr>
<td>Ortho - Adult</td>
<td>19%</td>
</tr>
<tr>
<td>Anesthesia - Adult</td>
<td>31%</td>
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</table>

<table>
<thead>
<tr>
<th>Cribari</th>
<th>ISS 0-15</th>
<th>ISS 10-75</th>
<th>Total</th>
</tr>
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<tbody>
<tr>
<td>Pull Trauma Activation</td>
<td>210</td>
<td>179</td>
<td>389</td>
</tr>
<tr>
<td>Limited or No Activation</td>
<td>1207</td>
<td>323</td>
<td>1530</td>
</tr>
<tr>
<td>Undertriage Rate</td>
<td>21.1%</td>
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</tr>
<tr>
<td>Ideally ≤ 5%</td>
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<td></td>
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</tr>
<tr>
<td>Overtriage Rate</td>
<td>54.00%</td>
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<td></td>
</tr>
<tr>
<td>Ideally ≤ 60%</td>
<td></td>
<td></td>
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</tbody>
</table>
Continuous Evaluation

• Evaluated at the Secondary Review Level and Move Forward
  - TMD & Coordinator
  - Multidisciplinary QI
  - Evaluate the information from the reports and Discuss and Corrective Action Needed

• Trauma Governance Committee
  - Is there an issue & is the Corrective Action Appropriate
  - Representatives speak to their own numbers & PI

• Hospital Committee
  - Awareness, Approval & Action
QI Drives The Whole Program

- Injury Prevention
- Education
  - ATLS
  - Nursing Education
  - Ex. MTP
- Outreach
  - What hospitals
  - MD or RN or both
  - EMS
- QI
- Research
Questions