

Introductions

01

INTRODUCE ESSENTIAL PERSONNEL 02

REVIEW LOGISTICS FOR VIRTUAL REVIEW PROCESS 03

PROVIDE
POWERPOINT
PRESENTATION ON
THE STRUCTURE OF
THE TRAUMA
PROGRAM AND PI
PLAN/PROCESS

- ♦ Reviewers will conduct the medical record review separately in virtual Zoom breakout rooms for Level III facilities.
- ♦ Reviewers will conduct the medical record review together in the main Zoom room for Level IV facilities. The reviewers will take turns reviewing their medical records with the TMD and TPM/TPC.
- ♦ Provide a navigator that is familiar with the trauma patients, EMR, and supporting PI documentation for each reviewer to assist with chart review. This is particularly important for the TMD when the chart reviews are in 2 rooms.



- ♦ What is the chart review selection process?
 - ♦ Trauma programs will be required to provide a deidentified list of trauma patients that will include the most recent medical records within the reporting year based on the required five categories.
 - ♦ A Chart Review Selection (CRS) Template will be provided in advance for the hospital to complete.
 - ♦ The lead reviewer will select the required medical records from the list provided by the hospital. The trauma program will then provide those medical records to the reviewers prior to the site visit.
- ♦ It is within the purview of the reviewers to request additional charts for review if they deem necessary.

Trauma guidelines manual, including, but not limited to:

- Guidelines/protocols for attending surgeon response to lower activation patients requiring hospital admission (Level III only)
- Non-surgical admission guideline (Level III only)
- Transfer agreements
- Emergency Department resuscitation guidelines/protocols for trauma patients
- Organ procurement policy
- ♦ Review period report that demonstrates ETOH screening of at least 80% of the injured patients that were admitted with a stay of >24 hours and able to participate with the screening (dashboard acceptable)
- Over/under TTA analysis
- Current Ongoing Professional Practice Evaluation form used for trauma panelists, subspecialists, and APPs involved in trauma care

Neurosurgery (Level III Only)

- Neurosurgery guidelines/protocols
- ♦ Call and backup call schedules for the last month of the reporting year
- ♦ The neuro-trauma diversion and contingency plan
- ♦ Guideline for placement of ICP monitors in patients with severe TBI

Orthopedic Surgery (Level III Only)

Orthopedic surgery guidelines/protocols



Radiology

♦ Policy on the process of radiologists notifying physician of critical readings/information and changes in interpretation of radiographs, misreads, and missed injuries

Trauma Registry

- ♦ Trauma registry policy which should include:
- ♦ At a minimum, 80 percent of cases entered within 60 days of discharge
- ♦ Use of current NTDB data elements
- Quarterly data submission to the Michigan Department of Health and Human Services
- ♦ Chart audit process

Performance Improvement and Patient Safety (PIPS)

- ♦ PI Plan
- Minutes of trauma PI meetings during the review period
- Attendance records for the peer review meetings during the review period
- Documentation of two or three PI initiatives during the review period

Community Outreach/Injury Prevention

♦ Two or three prevention activities (attaching flyers, event schedule, clips/picture from PPT presentation)



Review Meeting

- ♦ Review and discuss the PRQ which will be up on the screen during the meeting.
- ♦ Each attendee must log into the videoconferencing meeting separately from their workstation. It is not recommended to have all participants in one meeting room.
- Hospital must provide the state and reviewers with a list of names of all attendees and their positions.



Hospital Tour

- ♦ Live visual access to the following areas:
 - Emergency Department your chance to show off your trauma bay
 - ♦ Radiology may not go into the area due to poor reception
 - ♦ Operating Room/PACU
 - ♦ ICU (if applicable)
 - ♦ Blood Bank this area has machine noise in the background which can make it hard to hear staff
 - Medical Surgical Floor
 - ♦ Rehabilitation (if applicable)



Meeting with TMD and TPM/TPC

- Discuss findings and/or concerns with the reviewers, if needed.
- ♦ You're almost done!





Exit Interview

Reviewers present preliminary findings

