

PI **QA**

Trauma PI and Peer Review
The Role of the Trauma Medical Director

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PI **QA** **TMD**

Disclosures

- No financial ties to any organization discussed
- No off label or investigational use
- Reviewer for the ACS
- Opinions expressed are mine alone

Objectives

- Recognize the importance of PI to Trauma Center function and verification
- Review a typical PI program structure and where the TMD fits into it
- Discuss strategies for getting the most from your Trauma Medical Director

Importance of PI Program

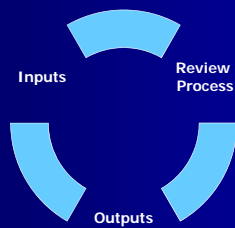
- Important to verifying agencies
 - Typical site survey
 - 1 hour facility inspection
 - 5hrs + of PI review
- Important to you
 - Documents the quality of the trauma care that you provide
 - Most common reason for verification visit deficiencies



Performance Improvement Program

- What it is
 - Continuous monitoring of processes and outcomes
 - Time and data intensive
 - Vitally important to the existence of your center
- What it is not
 - Easy
 - Cheap
 - A guarantee of passing your verification visit

PI Components



PI Inputs



PI Review Process



PI Outputs

- System problems – Massive Transfusion Protocol
 - Guidelines & protocols
 - Education
 - Enhanced resources (\$)
- Peer review problems
 - Education
 - Counseling
 - Change in privileges
- Documentation
 - Trauma program
 - Hospital

} TMD only for MD issues

"Closing The Loop"

- Identification
 - Finding patterns of problems
 - Dramatic increase in number of admits to non-surgical services
- Correction
 - Providing remediation
 - Reviewing trauma activation and consultation criteria with ED physicians
 - Educating nonsurgical service chiefs



"Closing The Loop"

- Monitoring
 - Repeat data collection
 - Monitor non-surgical admits for another quarter
- Documentation
 - Maintain an easily followed audit trail of entire process
 - Open items log



Functions of the TMD



Functions of the TMD

- Set the tone for the PI program
- Facilitate the work of all other trauma program staff
- Delegate appropriate items to staff



Functions of the TMD

- Review PI materials that have been preprocessed by the TPM
- Participate in surgery and/or trauma M&M conferences
 - Minutes vs analyses

Functions of the TMD

- Oversee patient care
 - Many formats are possible
- Deal with all physician PI communications
- Chair TPOPP/TOPIC and MDTPIC committees
 - Review all materials in advance, have a plan

Functions of the TMD

- Work with TPM to followup on all action items from committee meetings
- Help identify system vs peer issues
- External PI communications
 - TMD to outside physicians
 - TPM to TPM
 - Either to EMS or liaison

Functions of the TMD

- Think big!
 - Interpretation of clinical issues
 - Future planning
- Be the “face” of the Trauma PI program!

Specific Pointers



Specific Pointers

- Work closely with all trauma program personnel
 - Registrars
 - Trauma nurses, PAs

Specific Pointers

- Organize, organize, organize
 - Use your trauma registry or other software
 - Patient folders
 - System issue folders
 - Open item list
 - Keep a list of your successes



Specific Pointers

- Organize your PI well for your site visit
 - Patient folders
 - System issue folders
 - Flag key areas of your medical records
 - Assign one EMR expert to each reviewer
 - Test everything that is not made of paper
 - Make sure TMD is familiar with all paperwork
 - TMD must review all deaths and know them well

Specific Pointers

- Using an EMR for your trauma flow sheet will give you headaches!

- Data entry
 - Concurrency
 - Accuracy

- Reporting
 - Usually a nightmare!



EMR Entry Needs To Look Like This!





- @regionstrauma #traumapro



- Regionstrumapro.com



- www.regionstrauma.org/facebook



- Michael.D.McGonigal@HealthPartners.com

Case 1

- Your autopsy rate for trauma deaths is abysmal. What can you do?

Case 2

- List 2 examples of loop closure for peer review issues
- List 2 examples of loop closure for system problems

Case 3

- Our percentage of admissions to nonsurgical services is 18%.
 - Is this too high?
 - What can be done about it?

Case 4

- Our reverification visit is 3 months away, and I just noticed that several of our liaisons have poor attendance at the Trauma PI Committee meeting. What can I do?

Final Pointers

- Design a solid PI program foundation
- Help the TMD do their job
- Expect the TMD to help you do your job
- When you bring problems to the TMD, always have a solution in mind