

Example

Example

**Ministry Trauma Services
Performance Improvement Tracking Tool: 2011**

Registry # 33 MHN# 127645 EDA 6.1.11 Time 0135
MOI Driver, single vehicle rollover Physician Smith

Outcome	Yes	No	N/A
PREHOSPITAL			
P1. EMS Run Report Present in ED		X	
P2. Full Set of Vital Signs with GCS	X		
P3. C-Spine Immobilization	X		
P4. Scene Time > 20 minutes		X	
P5.			
P6.			
Emergency Department			
E1. ED RN- Hourly vital signs		X	
E2. Definitive Airway- GCS <8			X
E3. C-Spine Immobilization	X		
E4. Patent IV lines- 2 large bore	X		
E5. Transferred Out >3 hrs		X	
E6. Return to ED with Injury < 24 hrs		X	
E7. Patient Expired		X	
E8.			
E9.			

1. Code: P1 Description No EMS report left in ED

☐ Disease-related ☒ System-related ☐ Provider-related ☐ Undetermined
☐ Non-Preventable ☐ Potentially Preventable ☒ Preventable

Corrective Action: ☐ Letter to Provider ☒ Education ☐ Protocol Development ☐ Unnecessary

Discussed at Case Conference: ☐ Yes ☒ No

Comments: contacted EMS chief, he will review & staff
the value of the run report for providers

2. Code: E1 Description no temp in first set of v.s., v.s. done once,

☐ Disease-related ☐ System-related ☒ Provider-related ☐ Undetermined ED LOS 2.5 hrs
☐ Non-Preventable ☐ Potentially Preventable ☒ Preventable

Corrective Action: ☐ Letter to Provider ☒ Education ☐ Protocol Development ☐ Unnecessary

Discussed at Case Conference: ☐ Yes ☒ No

Comments: Staff RN + ED tech educated re: rationale for hrly full set
of vital signs

Example

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3. Code: _____ Description _____

☐ Disease-related ☐ System-related ☐ Provider-related ☐ Undetermined
☐ Non-Preventable ☐ Potentially Preventable ☐ Preventable

Corrective Action: ☐ Letter to Provider ☐ Education ☐ Protocol Development ☐ Unnecessary

Discussed at Case Conference: ☐ Yes ☐ No

Comments: _____

4. Code: _____ Description _____

☐ Disease-related ☐ System-related ☐ Provider-related ☐ Undetermined
☐ Non-Preventable ☐ Potentially Preventable ☐ Preventable

Corrective Action: ☐ Letter to Provider ☐ Education ☐ Protocol Development ☐ Unnecessary

Discussed at Case Conference: ☐ Yes ☐ No

Comments: _____

5. Code: _____ Description _____

☐ Disease-related ☐ System-related ☐ Provider-related ☐ Undetermined
☐ Non-Preventable ☐ Potentially Preventable ☐ Preventable

Corrective Action: ☐ Letter to Provider ☐ Education ☐ Protocol Development ☐ Unnecessary

Discussed at Case Conference: ☐ Yes ☐ No

Comments: _____

Reviewer _____

Date _____

Please return completed form to Trauma Nurse Coordinator @

Ministry Trauma Services Performance Improvement Tracking Tool: 2011

Registry # _____ MHN# _____ EDA _____ Time _____
MOI _____ Physician _____

Outcome	Yes	No	N/A
PREHOSPITAL			
P1. EMS Run Report Present in ED			
P2. Full Set of Vital Signs with GCS			
P3. C-Spine Immobilization			
P4. Scene Time > 20 minutes			
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Emergency Department			
E1. ED RN- Hourly vital signs			
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Corrective Action: ☐ Letter to Provider ☐ Education ☐ Protocol Development ☐ Unnecessary
Discussed at Case Conference: ☐ Yes ☐ No

Comments: _____

2. Code: _____ Description _____

☐ Disease-related ☐ System-related ☐ Provider-related ☐ Undetermined
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Corrective Action: ☐ Letter to Provider ☐ Education ☐ Protocol Development ☐ Unnecessary
Discussed at Case Conference: ☐ Yes ☐ No

Comments: _____

3. Code: _____ Description _____

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Corrective Action: ☐ Letter to Provider ☐ Education ☐ Protocol Development ☐ Unnecessary

Discussed at Case Conference: ☐ Yes ☐ No

Comments:

4. Code: _____ Description _____

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Corrective Action: ☐ Letter to Provider ☐ Education ☐ Protocol Development ☐ Unnecessary

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Comments:

5. Code: _____ Description _____

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Corrective Action: ☐ Letter to Provider ☐ Education ☐ Protocol Development ☐ Unnecessary

Discussed at Case Conference: ☐ Yes ☐ No

Comments:

Reviewer _____ Date _____

Please return completed form to Trauma Nurse Coordinator @ _____

EACH ISSUE NEEDS THE FOLLOWING 5 ITEMS IDENTIFIED

1. RELATED FACTOR

NO factor identified

PROVIDER related:

- Error in mgt
- Error in technique
- Delay in diagnosis
- Deviation from protocol
- Deviation from standard of care

SYSTEM related:

- Equipment failure
- Equipment/supply deficiency
- Protocol failure
- Departmental deficiency
- Departmental failure
- Communication deficiency
- Communication failure

MORTALITY related:

- Mortality – anatomical diagnosis
- Mortality – survival probability
- DNR order
- Withdrawal of Life Support
- DOA/DOS

MORBIDITY related:

- Pre-existing conditions
- Disease related/Co-morbidity

2. PREVENTABILITY STATUS

- (P) Preventable
- (PP) Potentially Preventable
- (NP) Not Preventable
- (PP-R) Potentially Preventable with Reservations
- (NP-R) Not Preventable with Reservations
- (PU) Preventability Undetermined
- (UNK) Unknown Preventability

3. A.C.S. GRADE

- Grade I - (Non-life threatening; NO lasting Disability)
- Grade II – Potentially life threatening; NO Residual Disability
- Grade III – Life threatening; WITH Residual Disability
- Grade IV – Death

4. RELATED ITEMS

- System
- Disease
- Provider

5. RESOLUTION

- Provider/Team Counseling
- Develop/Revise Policy-Protocol
- Education
- Other

MSJH Trauma Services
Peer Review Nomenclature- Deaths (2011)

1. Unanticipated mortality with opportunity for Improvement
2. Mortality without opportunity for Improvement
3. Anticipated mortality with opportunity for Improvement