## Appendix I Collector V5 QA Tracking Instructions

Trauma Data Editor	
Demographic Injury Prehospital Referring Facility ED/Resus Patient Tracking Providers Procedures Diagnoses Outcome QA Tracking Memo Custom	
2QA Items QA Tracking Notes	Section Complete
A Iteris A Tracking Notes 3 ACS/Questions User Defined Questions Filters NTDB Complications Category QA Item Response Occurrence Date QA Tracking Select the QA Tracking Module (1), QA Items (2-3) - ACS Questions, User Defined Questions, Filters, and NTDB Complications/Hospital Events. See specific QA Items definitions below.	Section Lomplete
	Custom
✓ Check IDX Save and Exit Save and Exit	Prev 🕑 Next
Allen, James W Arrive: 12/3/2018 Trauma Number: 20153576 MRN: 60002984562	

	ACS Ouestions	These are default	ACS Questions	Use as needed.
		questions in the system.	Record       Edit       Novigate         ?       BM/EDH with Caracitory > 4 hrs after Anival         ?       SDM/EDH with Caracitory > 4 hrs after Anival         ?       SDM/EDH with red for of Exhibited         ?       Renchabration with red for of Exhibited         ?       Invision of Databrate Rel relivel         ?       Invision of Databrate Relivel         ?       Invision of Databrate Relivel         ?       HNP Poabre	Select the date and QA Tracking box at the bottom of the page to include the responses to any of these question in the records QA Tacking page.
QA ITEMS	User Defined Questions	Custom QI related questions can be created here.	Record       Eds       Neingate         This is the favorities speed screen. To configure your User Defined Questions go to the Admin Module, select the Menu Catalog option and select the User Defined Questions menu (Menu ID Issue030). Next, go into Registry Module, select User System Setup; and configure 'User Defined Questions Quick List' tab with desired questions.	Consult with the DOH Trauma Registry Coordinator for instructions.
	Filters	This lists all class I, II and trending audit filters. Custom audit filters can be created here. Defaults to the speed screen.	Click on filter tab - select the filter(s) – occurrence date in the DATE section and mark a Y in the QA Tracking – choose all the filters that pertain to the patient – If there is a filter that needs more description – double click on the filter and use the NOTES for more description – click OK – when all done with the filters select OK.	When you click on the filter – you will see the <u>image</u> <u>below</u> , which typically list ALL class I filters as favorites. Select additional filters – this is where you add other filters that are on your filter list. Date – the occurrence date the filter occurred. <b>QA tracking should always be marked yes (Y)</b> .
	NTDB Complications	List of all NTDB complications.	Use these FIRST, do not choose the same one in the filters tab.	See the data dictionary for a complete list along with their definitions. Referred to as Hospital Complications.

Filters

This is the favorites speed screen. Go to the menu	to set your favorites/frequently used menu items	
🗖 Missed Injury dx after discharge	🔲 Trauma Death	Open fracture not surgically corrected in 24 hours
🔲 Over Triage	🔲 Delay in Physician Response	Pre-Hospital Medication Issues
🔲 Under Triage - Trauma Code - Full	Interesting Case	Un-necessary repeat imaging
Patient receives head CT >1 hour from time of arrival (arrival)	All patients with ISS >= 16	🔲 Delay in Diagnosis
🔲 Overtriage - partial (alert)	No arrival of Trauma Surgeon for FTTA	Other Prehospital
🔲 Undertriage - partial (alert)	Trauma Narrator not used for activations	SNAT/NAT
ICH pts on anticoags not reversed within 2 hrs	$\square$ Lack of required trauma documentation on activations	Indicated Procedure Not Performed
Other Case Managment Issues not listed	🔲 Less than 2 sets of VS taken on each trauma patient	
All Full activations	Transported to Appropriate Facility	
Admit to ICU under care of Hospitalist	Outside Hosptial Issues/Concerns	
C-Spine issues	Cardiac Arrest Outside of ED ie, CT	
🔲 Patients with elevated BA or +tox screen who did not re	Mass Transfusion Protocol Initiated	
Backboard removal >20 min	🔲 Non Trauma Death	
🗌 🔲 No trauma surgeon consult for 2 or more system injuries	🔲 Open fracture not given antibiotics in 1 hour of arrival	
Select Additional Filters	Date 🗾	
	QA Tracking	
$\checkmark$ <u>OK</u> $\times$ <u>Cancel</u>		

х

## SELECT FILTERS – Incude Occurrence Date and QA Tracking Yes (Y) (The ones that pop up first are the facility favorites – Class I and II Filters)

🗄 Tr	rauma Data Editor		
Dem	ographic Injury Prehospital Referring Facility ED/Resus	Patient Tracking Providers Procedures Diagnoses	Outcome QA Tracking Memo Custom
QAI	tems QA Tracking Notes		Screen Complete
	Filters		
	This is the favorites speed screen. Go to the men	u to set your favorites/frequently used menu item	5.
			Lack of VS documentation
	Induite Death     Transfer Out of Appropriate Facility	Over Triage	No Pediatric BP taken in the ED
	Other Case Management not listed	Mass Transfusion protocol initiated	No Temperature taken in the ED
	Positive EAST scan - not directly to OB	Delay in Physician Besponse	backboard removal time >20 min
	No VTE prophylaxis w/in 72 hrs (except SCD)	Overtriage (partial activation - trauma alert)	Elevated BA or + tox screen who did not receive SBIB1
	ICH pts on anticoagulants not reversed w/in 2 hrs	Undertriage (partial activation - trauma alert)	Delay of Pain Medication
		ABG not done on FTTA	□ Interesting Case
		Inappropriate Midlevel response to trauma	
	Missed Injury (Type II dx after tertiary assessment)		
	· · · · · · · · · · · · · · · · · · ·		
	Select Additional Filters	Date 05/18/2015 I	
		QA Tracking <b>Y</b>	
	V OK X Cancel		
			Custom
$\checkmark$	Check Save Save and Exit 😂 Print	× Close	Prev Next
<u> </u>			7 MBN:

Additional filters box that are not in favorites.

"Filters"	x			
Favorites	100			
9999, Trauma Death				
10028, Transfer Out of Appropriate Facility	🛛 🗙 Cancel			
10210, Other Case Management not listed				
10205, Positive FAST scan - not directly to OR	Search			
10206, No VTE prophylaxis w/in 72 hrs (except SCD)	Show <u>A</u> ll			
10207, ICH pts on anticoagulants not reversed w/in 2 hrs				
10030, Under Triage				
10021, Missed Injury	Add to			
10200, Missed Injury (Type II dx after tertiary assessment)	Fa <u>v</u> orites	bital Referring Facility ED/Resu	s Patient Tracking Providers Procedures Diagnoses	Outcome QA Tracking Memo Custom
10201, Missed Injury (Type III dx after dc from hospital)				Screen Complete
10025, Over Triage				
10204, Mass Transfusion protocol initiated				
9004, Delay in Physician Response		<u> </u>		
10202, Uvertriage (partial activation - trauma alert)				
10203, Undertriage (partial activation - trauma alert)		speed screen. Go to the me	nu to set your favorites/frequently used menu ite	ems.
10203, Abd not done on FintA				
10206, mappropriate midlevenesponse to tradma				
10212 Lack of VS documentation			Missed Injury (Type III dx after dc from hospital)	Lack of VS documentation
10220. No Pediatric BP taken in the ED		propriate Facility	🔲 Over Triage	No Pediatric BP taken in the ED
10221. No Temperature taken in the ED		gement not listed	Mass Transfusion protocol initiated	No Temperature taken in the ED
10217, backboard removal time >20 min		in - not directly to OR	Delay in Physician Response	backboard removal time >20 min
10216, Elevated BA or + tox screen who did not receive SBIR1	l referral	is w/in 72 brs (except SCD)	Overtriage (partial activation - trauma alert)	Elevated BA or + tox screen who did not receive SBIB1
10012, Delay of Pain Medication		and and a set of concept of the 2 has	Undertained (anticipation for the derivation)	Delau - ( Deia Madiantian
10222, Interesting Case		aguiants not reversed w/in 2 hrs	<ul> <li>Undertriage (partial activation - trauma alert)</li> </ul>	Delay of Pain Medication
🕀 Standard			I✓ ABG not done on FTTA	Interesting Case
🕀 User Defined			Inappropriate Midlevel response to trauma	
/, Not Applicable		e II dx after tertiary assessment)	All Full activations	
?, Unknown				
	Select Additional I		Data 05/19/2015	
		1.010		
Click in the box to see				
more filters			QA Tracking   Y	
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			Arrive: 5/18/2015 Trauma Number: 20150	647 MBN:

### All Filters Selected

211 211	Trauma Data Edit	or							_ 🗆 🗙
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	Category	QA Item			Re	sponse (C	Occurrence Date	QA Tracking	🖉 <u>E</u> dit
	Filters	Trauma Death			Ye	s ()	02/25/2015	Yes	Delete
	Filters	All Full activations			Ye	s ()	02/25/2015	Yes	
	Filters	Delay in Physician Response			Ye	s O	2/25/2015	Yes	Set PI Track
ll	1								
									Custom
Γ	✓ Check Save	Save and Exit Save and Exit		,					Prev Next
L	arson, Ella M		An	ive: 2/18/2015	Trauma Number:	20150190	MRN: 6000475	3384	A *

#### NEED MORE INFORMATION IN A SPECIFIC FILTER – add information to NOTES

### If it is not clear why the filter was chosen, please provide more information (double click on the filter to provide more information)

al noune bate cator	
Demographic Injury Prehospital Referring Facility ED/Resus Patient Tracking Providers Procedures Diagnoses Outcome QA Tracking Memo Custom	
QA Items QA Tracking Notes	creen Complete
ACS/Questions User Define QA Item Record Edit Browse Category QA Item Filters Trauma Des Filters Othere Category QA Item 10210 Other Case Management not listed Yes	<u>E</u> dit <u>D</u> elete Set PI Track
	Custom
✓ Check Save and Exit Solution Print X Close	Prev Next
Arrive: 5/18/2015 Trauma Number: 20150647 MRN:	A [ *

## List of NTDB Hospital Events/Complications – WA State Required Data Elements

NTDB		23
Acute Kidney Injury	Pressure Ulcer	
Acute Respiratory Distress Syndrome (ARDS)	Superficial Incisional Surgical Site Infection	
Cardiac Arrest with CPR		
Deep Surgical Site Infection		
🗖 Deep Vein Thrombosis (DVT)		
Extremity Compartment Syndrome		
Myocardial Infarction		
🗖 Organ / Space Surgical Site Infection		
🗖 Pulmonary Embolism		
🗖 Stroke / CVA		
Unplanned Intubation	Follow the Hospital Event definitions in the data	
🔲 Osteomyelitis	dictionary before selecting.	
Unplanned Return to the OR		
Unplanned Admission to the ICU		
Severe Sepsis		
C Other		
Catheter Associated Urinary Tract Infection (CAUTI)		
Central Line Associated Bloodstream Infection (CLABSI)		
Ventilator Associated Pneumonia (VAP)		
Alcohol Withdrawal Syndrome		

# QA Tracking Form – Use to document the QI process (see instructions below).

🔁 QA Tracking	
Record Edit Browse	
QA Item 9999 Trauma Death Date Opened 05/18/2015 Notes.   Location	
Reviewed By Date Comment	
	<b>_</b>
Contributing Factors	
Determination System Related OFI Status Disease Related Grade Provider Related Care Given Status	
Corrective Action Status	
	▲  ▼
✓ Check ✓ <u>D</u> K × <u>C</u> ancel	_ 

SUNG	Auto Trigger	Click auto trigger – this will bring over all the QI items you selected in the previous tab	E Traves Dala falar E Straves Dala falar E
QA TRACK		Treams Data Editor      Deconstantial Field      Deconstantial Fi	And a Dark X Dool And And X Dool And And And And And And And And And And
	Each QA Filter	Click on each individual Filter to open the QA Tracking Form. Fill out all pertinent information.	Use the QA Tracking Form to document the QI process.

QA item	Defaulted from filter		
Date Opened	Date of filter event		
NOTES	Include all QI related		
	notes.		
Location	Choose location where specific filter occurred.	<ul> <li>1, Resuscitation Room</li> <li>2, Emergency Department</li> <li>3, Operating Room</li> <li>4, Intensive Care Unit</li> <li>5, Step-Down Unit</li> <li>6, Floor</li> <li>7, Telemetry Unit</li> <li>8, Observation Unit</li> <li>9, Burn Unit</li> <li>10, Radiology</li> <li>11, Post Anesthesia Care Unit</li> <li>12, Special Procedure Unit</li> <li>13, Labor and Delivery</li> <li>14, Neonatal/Pediatric Care Unit</li> <li>90, Prehospital</li> <li>91, Referring Facility</li> <li>7, Not Applicable</li> <li>7, Unknown</li> </ul>	
Loop Closed	Date this filter was closed – if it is a trending filter Class II the date will be the discharge date.	Loop closure is the last step in the QI process.	
Service	What service is responsible for the filter.	1, Trauma         2, Neurosurgery         3, Orthopedics         4, General Surgery         5, Pediatric Surgery         6, Cardiothoracic Surgery         7, Burn Services         8, Emergency Medicine         9, Pediatrics         10, Anesthesiology         11, Cardiology         12, Chaplain         13, Child Protective Team         14, Critical Care         15, Discharge Planner         16, Documentation Recorder         17, Drug/Alcohol Counselor	There are 66 service options to choose from. Not all are listed.

Provider	Select the provider		
	involved specifically		
	with the fall out filter. if		
	unknown leave blank.		
Reviewed by	Choose the reviewer and		20-27 are recommended custom additions:
neviewed by	date reviewed Add any	1, Case Manager	1 Case Manager
	nortinent comments	2 Cance	2. Grand Rounds
	per tillent comments.	2, Grand Hounds	3. M and M Review
		4 Multi-Disciplinary Beview Q Search	4. Multi-disciplinary Review
	Select ALL who have	/ Not Applicable Show All	5. Risk Management
	reviewed the patient	5 Bisk Management	6. Trauma Committee
	record in regards to	6 Trauma Committee	7. Trauma Director
	this filter.	7. Trauma Director	/, Not applicable
		?. Unknown	?, Unknown
	The "Reviewed by"		20. Trauma Nurse Manager
	field is customizable.	vatora -	21. Trauma Coordinator
			22. Trauma QI/PI Coordinator
			23. Designee
			26. Orthonedic Surgeon
			27 EMS Representative
<b>Contributing Factors</b>	Choose all factors that	0, No Factors Identified	
	have contributed to the	1, Provider - Error in Management	
	specific filter.	2, Provider - Error in Technique	
	of come more than the second sec	3, Provider - Delayed Diagnosis 4. Provider - Missed Diagnosis Q. Searc	n
		5, Provider - Deviation from Protocol Show All	
		6, Provider - Deviation from Standard of Care	
		21, System - Communication Deficiency	
		22, System - Communication Failure 23, System - Departmental Deficiency	
		24, System - Departmental Failure	
		25, System - Equipment or Supply Deficiency	
		26, System - Equipment Failure	
		27, System - Protocol Dericlency 28 System - Protocol Failure	
		41, Mortality - Anatomical Diagnosis	
		42, Mortality - DNR Order	
		43, Mortality - DOA or DOS	
		44, Mortality - Survival Probability 45. Mortality - Withdrawal of Life Support	
		61, Morbidity - Comorbidity	
		62, Morbidity - Disease Related	
		63, Morbidity - Other Pre-Existing Condition	
		54, Morbidity - Patient Behavior or Refusal	
		?, Unknown	

Determination	Choose whether it was system, disease or provider related (may be 1,2 or all 3)	Determination System Related Y Disease Related Provider Related	Yes – Y No – N / - Not Applicable ? – Unknown
OFI Status	Opportunity for Improvement (OFI), choose the correct response. Usually determined by the TPM, TMD, or MTQIC.	1, Unanticipated Event with Opportunity for Improvement         2, Event with Opportunity for Improvement         3, Event Without Opportunity for Improvement         4, Undetermined Opportunity for Improvement         7, Not Applicable         9, Unknown Event Outcome	
Grade	What disability grade has occurred due to injury.	0, Grade Not Assigned         1, Grade I - Non-Life-Threatening (No Lasting Disability)         2, Grade II - Potentially Life Threatening (No Residual Disability)         3, Grade III - Life Threatening (Residual Disability)         4, Grade IV - Death         /, Not Applicable         ?, Unknown	This may be determined by Medical Director at some facilities.
Acceptability / Care Given Status	Choose correct response for Acceptability of care given.	1, Acceptable       2, Acceptable with Reservations       3, Unacceptable       /, Not Applicable       ?, Unknown	Was the care given acceptable?
Corrective Action& Status	Choose type of corrective action and then choose type of status.	<ul> <li>0. No Action Items Taken</li> <li>1. Education Offering</li> <li>2. Policy or Practice Guideline: Develop</li> <li>3. Policy or Practice Guideline: Revise</li> <li>4. Provider or Team Counseling</li> <li>5. Improve Resources</li> <li>6. Improve Resilities</li> <li>7. Improve Communication</li> <li>8. Referral to Department Head</li> <li>9. External Review</li> <li>10. Disciplinary Action</li> <li>11. Change in Provider Credentialing</li> <li>12. Administrative Action</li> <li>13. Suspension or Termination of Provider</li> <li>99. Other</li> <li>7. Unknown</li> <li>14. Discussion with Individual</li> <li>16. Referral to Prevised</li> <li>17. Referral to Prevised</li> <li>18. Referral to Previseal</li> <li>20. Track and Trend for Further Reporting</li> </ul>	Status: 1, Active 2, Pending 3, Closed Tagged for Follow-Up 4, Closed /, Not Applicable ?, Unknown Show <u>A</u> ll

🔛 QA Tracking							
Record Edit Browse							
QA Item 9999 Trauma Death   Location	<u> </u>						
Reviewed By     Date     Comment       Image: Comment     Image: Comment       Image: Comment     Image	▲  ▼						
Contributing Factors							
Determination System Related OFI Status Disease Related Grade Provider Related Care Given Status							
Corrective Action Status	▲  ▼						
✓ Check ✓ <u>OK</u> × <u>Cancel</u>							

	Notes Section	For Class I filters – provide detailed hospital summary, List invites and imaging.	Provide as much inform	nation as possible.	Consider using a template such as the one below which can be copied into each note.
NOTES		Trauma Data Editor         emographic       Injury       Prehospital       Referring Fa         IA Items       DA Tracking       Notes         ** Please clean up summary and remove verbiage         rauma Code      : Criteria         '' rauma Alert @      : Criteria:         UMMARY: This includes summary from the scen         OTALS MTP: PRBC      FFP         EATH?       Contributing factor         WITES:	acility ED/Resus Patient Tracking a that is not needed including this com a that is not needed including this com a circle a circ	Providers       Procedures       Diagnoses       Out         nent ****	Icome QA Tracking Memo Custon Section Complete