

PURPOSE:

The purpose of this policy is to establish the general requirements for trauma center quality improvement.

AUTHORITY:

Health and Safety Code, Division 2.5, Sections 1797.220, 1798, 1798.162, 1798.163, 1798.164, 1798.165, 1798.168, 1798.170, and 1798.172. California Code of Regulations, Title 22, Division 9, Chapter 7.

DEFINITIONS:

- A. "SJCEMSA" means the San Joaquin County Emergency Medical Services Agency.

POLICY:

- I. The designated trauma centers shall establish and maintain a trauma service quality improvement (QI) program to include structure, process, and outcome evaluations which focus on improvement efforts to identify root causes of problems, to intervene to reduce or eliminate these causes, and take steps to correct the process.
- II. The trauma QI program shall include:
- A. A detailed audit of all trauma related deaths, major complications, patient transfers and all in-house ICU pediatric admissions;
 - B. A multi-disciplinary trauma peer review committee that includes all members of the trauma team;
 - C. Participation in the San Joaquin County EMS Agency trauma audit committee;
 - D. A written policy establishing a process for patients, parents/legal guardians of minor children who are patients and immediate family members to provide input and feedback to hospital staff regarding the care provided to the patient;
 - E. Compliance with American College of Surgeons Committee on Trauma recommendations for Performance Improvement and Patient Safety (PIPS).
- III. Designated trauma centers and trauma personnel shall cooperate with the SJEMSA in developing and implementing trauma system QI and trauma audit committee by-laws, policies, practices and standards of review.

Effective: December 1, 2012
Revised:

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Approved: Signature on file
Medical Director

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EMS Administrator