

### Purpose:

The purpose of the trauma registry educational visit is to validate, via inter-rater reliability processes, the data abstracted and submitted by each PA Trauma Registry to the Pennsylvania Trauma Systems Foundation's Pennsylvania Trauma Outcome Study (PTOS).

### Background:

The trauma registry is considered to be the "back-bone" of any trauma program. The on-site registry educational visit provides continuing education to the trauma registry staff, suggestions/ideas for improving the trauma center's registry, as well as assuring consistent and accurate data abstraction to the PTOS across the Commonwealth of Pennsylvania.

Registry data is used in the following ways:

1. Trauma Center performance improvement (PI) initiatives
2. Utilization of services and systems at the institution level and state level
3. Educational programs
4. Research and comparison studies
5. Public policy questions
6. Site Survey accreditation process

The importance of accurate information cannot be over-emphasized. Inaccurate information can falsely reflect unexpected outcomes in the audit filters, and patient care information. Since these are areas reviewed during the site survey process, the educational visits can be an important part of your preparation for internal meetings, PI initiatives and site surveys.

## Preparation for Accredited Trauma Center Visit

In preparation for the educational visit, the trauma program is contacted at least 6-8 weeks prior to the anticipated date of the visit via e-mail. The purpose of this communication is to establish and confirm a date for the educational visit. At least 2 weeks prior to the date of the visit, the facility will be sent a formal letter via e-mail. This letter describes the visit in detail and informs the facility of the ten (10) PTOS records that have been selected for review.

The types of cases that are selected for review will have a common theme each year.

For example:

1. Penetrating Trauma Case
2. Isolated Head Injury Case
3. Burn Case

## Preparation for Pursuing Trauma Center Visit

In preparation for the educational visit, the trauma program is contacted 6-8 weeks prior to the anticipated date of the visit via e-mail. The purpose of this communication is to establish and confirm a date for the educational visit. At least 2 weeks prior to the date of the visit, the facility will be sent a formal letter via e-mail. This letter describes the visit in detail and asks the facility to select five (5) medical records from their most recent data submissions to the PTOS. Selected records should represent all registrars at the facility.

The types of cases that are selected for review are as follows:

1. Pediatric Case
2. Burn Case
3. Death Case
4. Penetrating Trauma Case
5. Isolated Head Injury Case

## Educational Visit Format

### Accession Review for Newly Accredited and Pursuing Centers

On the day of the educational visit, newly accredited trauma centers and centers pursuing accreditation, will begin the day with accession review. The diagnostic index and Emergency Department (ED) log will also be requested to determine how accurately cases are being selected for placement in the trauma registry. Any additional reports/lists used by your facility for identification of PTOS patients should also be presented. Further information regarding these requested documents will be included in the formal letter.

Cases will be chosen from the diagnostic index and from the ED log that appear to be cases which meet the criteria for submission to PTOS. Once the cases are identified, they are compared against the trauma registrar's trauma log, which contains all of the cases submitted by that registrar to the Foundation for inclusion in the PTOS. Any cases that are not matched between the diagnostic index, ED log, and trauma log are researched by the registrar to determine why the case was not submitted to the Foundation. If it is determined that the case qualifies for submission, the registrar will abstract the data and submit it to the Foundation within 42 days of patient discharge or as soon as possible.

### Accession Review for Accredited Trauma Centers

For mature, accredited trauma centers, the diagnostic index and ED logs will be reviewed only if deemed necessary by the Foundation staff or requested by the facility; otherwise, this part of the educational visit is not performed.

### Trauma Log

A trauma log must be maintained by every pursuing and accredited trauma program and must include information for every record entered into the trauma registry. This log can be kept in any acceptable format (i.e. Excel, Word, Access, etc.), but must be stored outside of the trauma registry software. At a minimum, the following information is recommended to be included within the trauma log:

1. Patient Name
2. Medical Record Number
3. Trauma Number
4. Admission Date
5. Discharge Date
6. Discharge Status
7. PTOS Patient (Yes/No)
8. Date Record is Due to the PTSF (this can be auto calculated in Excel)
9. Date Submitted to the PTSF

Additional information for consideration includes:

1. Diagnoses
2. Alert Level
3. Transfer Outpatient (Yes/No)
4. Follow-up Letter Received (Yes/No)
5. EMS Trip Sheet(s) Received (Yes/No)
6. Autopsy Received (Yes/No)

The trauma log will be reviewed by PTSF registry staff during all PTSF Registry Educational Visits. Any deficiencies will be communicated and corrected through this process.

### Record Review

The majority of the day involves the inter-rater reliability process, or medical record review as follows:

1. Five (5) records that were chosen by the facility will be reviewed in detail by Foundation staff for pursuing trauma centers.
2. Note, it is not always possible for PTSF to review all five (5) records in the time dedicated for the educational visit.
3. At a minimum, two (2) records will be reviewed in their entirety.
4. Five (5) of the ten (10) records that were chosen by the Foundation will be reviewed in detail by Foundation staff for accredited trauma centers.

The data that the registrar has submitted for the cases selected is downloaded into the Foundation's Educational Visit Software prior to the day of the visit and is utilized for the inter-rater reliability review. The facility must provide a registrar, or other appropriate staff member, to navigate the medical record for Foundation staff during the inter-rater reliability review. With the help of the chart navigator, Foundation staff verifies each data element with the documentation contained in each medical record for accuracy and completeness. PTSF staff may dismiss the chart navigator at any time during the inter-rater review. Foundation staff assures that the data definitions for each data element in the PTOS Operational Manual are being followed. If discrepancies are noted between what the registrar has submitted and what is contained in the record,

they are presented to the registrar during the summary session. During this meeting, the registrar and Foundation staff review the discrepancies and resolve any issues. Any discrepancies that remain are corrected by the registrar and re-submitted to the Foundation. The summary meeting is also a time for the registrar(s) to ask questions pertaining to the abstraction of data to be included in the PTOS, and often times other members of the trauma program, such as the Trauma Program Manager/Coordinator and Trauma Program Medical Director, are present during the summary meeting. At a minimum, PTSF recommends that the trauma program manager/coordinator and all registrars attend the summary meeting.

### Post Visit Process

Once the educational visit has concluded, the trauma program receives a written report and report card from Foundation staff detailing the findings from the visit. These reports are sent via e-mail within two weeks of the registry educational visit summary meeting.

### Educational Visit Frequency and Accuracy

In accordance with Policy No. AC-130, trauma centers pursuing accreditation for the very first time are required to complete the [Trauma Registry Orientation](#) course in the fall the year prior to survey and schedule a full day educational session in the spring during the year of survey for their trauma registry and associated staff. This will take place at the hospital or virtually. Please note that pursuing centers are required to pay an educational fee. Information regarding educational fees for pursuing centers can be found [here](#).

Hospitals seeking accreditation that have been in pursuit for over a year are required to have a registry educational visit once a year until they have a successful site survey and are accredited as a practicing trauma center. Once accreditation has been established, a registry educational visit will be conducted a year later.

Registry educational visits are conducted either at the hospital or virtually. Visit format will be determined and coordinated at the time of scheduling.

If a data accuracy score of 96% and above is achieved, accredited trauma centers will not be required to have another registry educational visit until five years later. It is important to note here, that an educational visit may be requested by a facility at any time.

The following criteria were developed to determine if a mature, accredited trauma center will require a visit within two years of their previous visit, or if the visit will be five years from the previous visit. No facility will go more than five years without a visit. The criteria are as follows:

1. Two-year visit: report shows less than 96% accuracy.
2. Five-year visit: report shows greater than or equal to 96% accuracy.
3. An action plan will be required in the following instance, the educational report shows less than 96% accuracy.

Action plans should specifically address the issues and provide a timeline and means of resolution. An action plan template can be found [here](#).

If an action plan is required, a formal letter will be sent to the Trauma Program Manager/Coordinator and Trauma Registrar(s) following the Registry Educational Visit summation. Action plans are due to the PTSF within 60 days from the date of this letter.

If the action plan is deemed unacceptable upon review by the PTSF Director of Trauma Registry, the Trauma Program Manager/Coordinator will be required to submit a revised action plan within two weeks of notification.

If the required action plan and/or revised action plan is not received by the stated deadlines or is deemed unacceptable, the Trauma Program Medical Director and hospital President/CEO will be notified.

### **Significant Issues**

Any accredited trauma center that receives a registry related significant issue from the PTSF Board of Directors is required to schedule an educational visit for the following year. An educational visit is not required for any accredited center that receives a registry related opportunity for improvement from the PTSF Board of Directors; however, a visit is recommended in these situations.

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Approved by PTSF Board of Directors and/or Executive Committee:

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