



What's in it for Me?

One Trauma Network's Journey to Successful Mentorship

October 20, 2020

Stephanie Noll, MSN, RN, CNL – Trauma Program Coordinator, St. Luke's Lehighton Campus

Peter Thomas, DO - Trauma Program Medical Director, St. Luke's University Hospital

Rebecca Wilde-Onia, MSN, RN, CCRN – Trauma Program Manager



Disclosures

- Nothing to disclose



Objectives

- Discuss a successful mentor/mentee relationship between a higher level and a lower level center
- Outline the PI Development Process
- Review the PI Integration Process
- Describe the process of the clinical management guideline development
- Review the mutually agreed upon goals of the mentor/mentee relationship



Mentoring





PTSF Standard of Accreditation

STANDARD 1

Commitment

7. Any care that is provided to trauma patients which exceeds the Level IV standards is required to comply with the Standards of Accreditation applicable to the service and is eligible for review during site survey.
 - A. [Appendix A: Interfacility Transfer and Consultation Requirements for Level III and IV Trauma Centers](#)
 - B. [Appendix C: Admission Guidelines for Level IV Trauma Centers](#)
8. It is the responsibility of the TPMD in collaboration with the TPM and in association with the designated subspecialty liaisons to direct the trauma PIPS program and to integrate it into the institutions overall PIPS program.
 - A. See PIPS Standard for additional details.
9. The Department of Nursing or designated representative of Nursing Leadership for the institution will maintain a formal relationship with the trauma program.
10. The Trauma Program must be actively involved in regional outreach, education and injury prevention.
11. The Trauma Center must show evidence of on-going mentoring, collaboration and education with a Level I or II Trauma Center(s).



SLUHN Overview



12 Hospitals
320+ Outpatient Facilities
225+ Physician Offices
18 Urgent Care Centers
50 Physical Therapy Sites



SLUHN Trauma Program Overview

- Adult Level I Trauma Center - **MENTOR**
 - St. Luke's University Campus



SLUHN Trauma Program Overview

- Adult Level I Trauma Center - **MENTOR**
 - St. Luke's University Campus
- Accredited Level IV Trauma Centers
 - St. Luke's Miners Campus - 2013
 - St. Luke's Upper Bucks Campus - 2016
 - St. Luke's Monroe Campus - 2019



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- Adult Level I Trauma Center
 - St. Luke's University Campus
 - Accredited Level IV Trauma Centers
 - St. Luke's Miners Campus - 2013
 - St. Luke's Upper Bucks Campus - 2016
 - St. Luke's Monroe Campus - 2019
 - Pursuing Trauma Centers
 - St. Luke's Lehighon Campus (Level IV)
 - Geisinger St. Luke's Campus (Level IV)
 - St. Luke's Anderson Campus (Level II)
- Mentees**

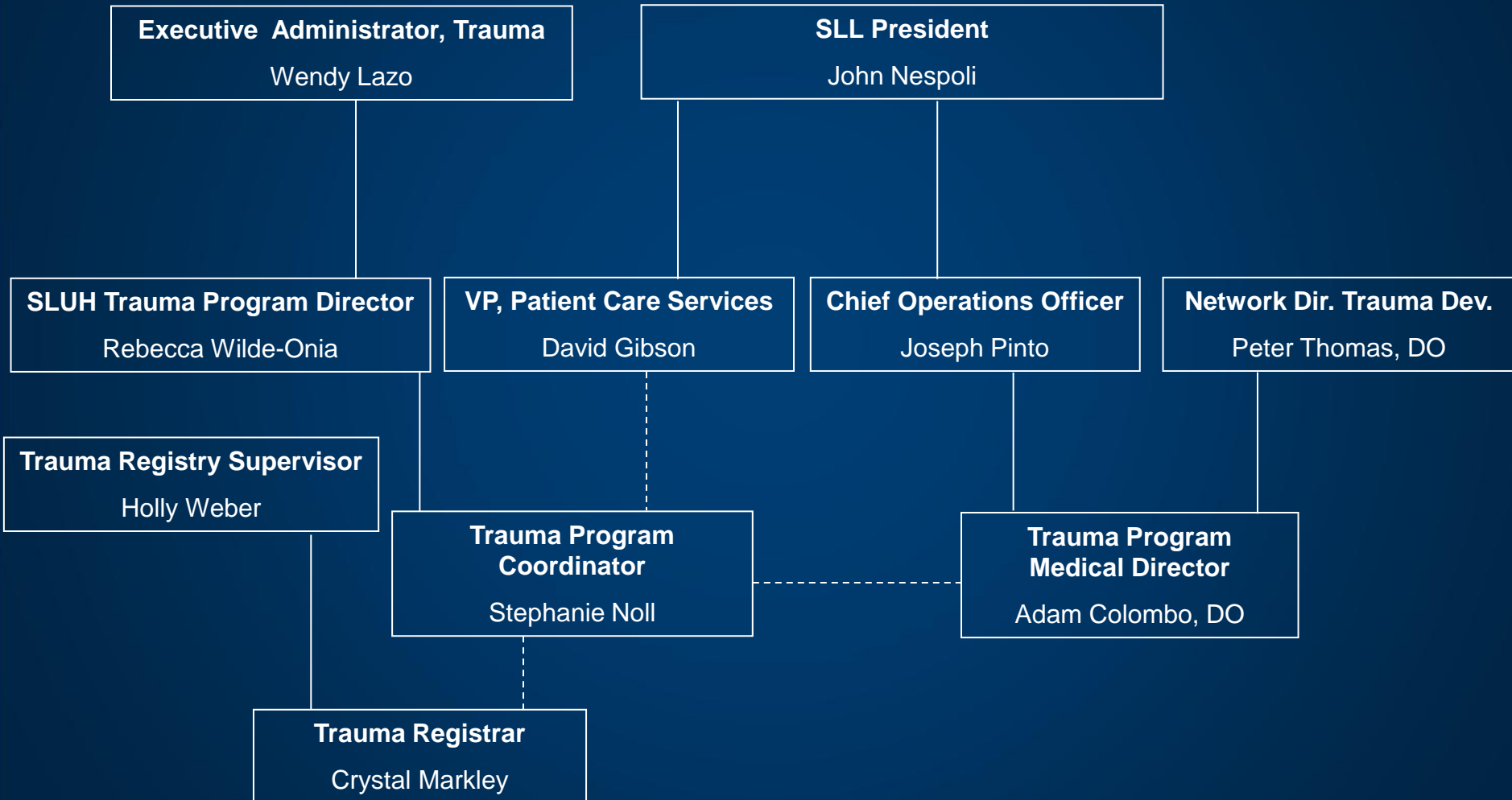


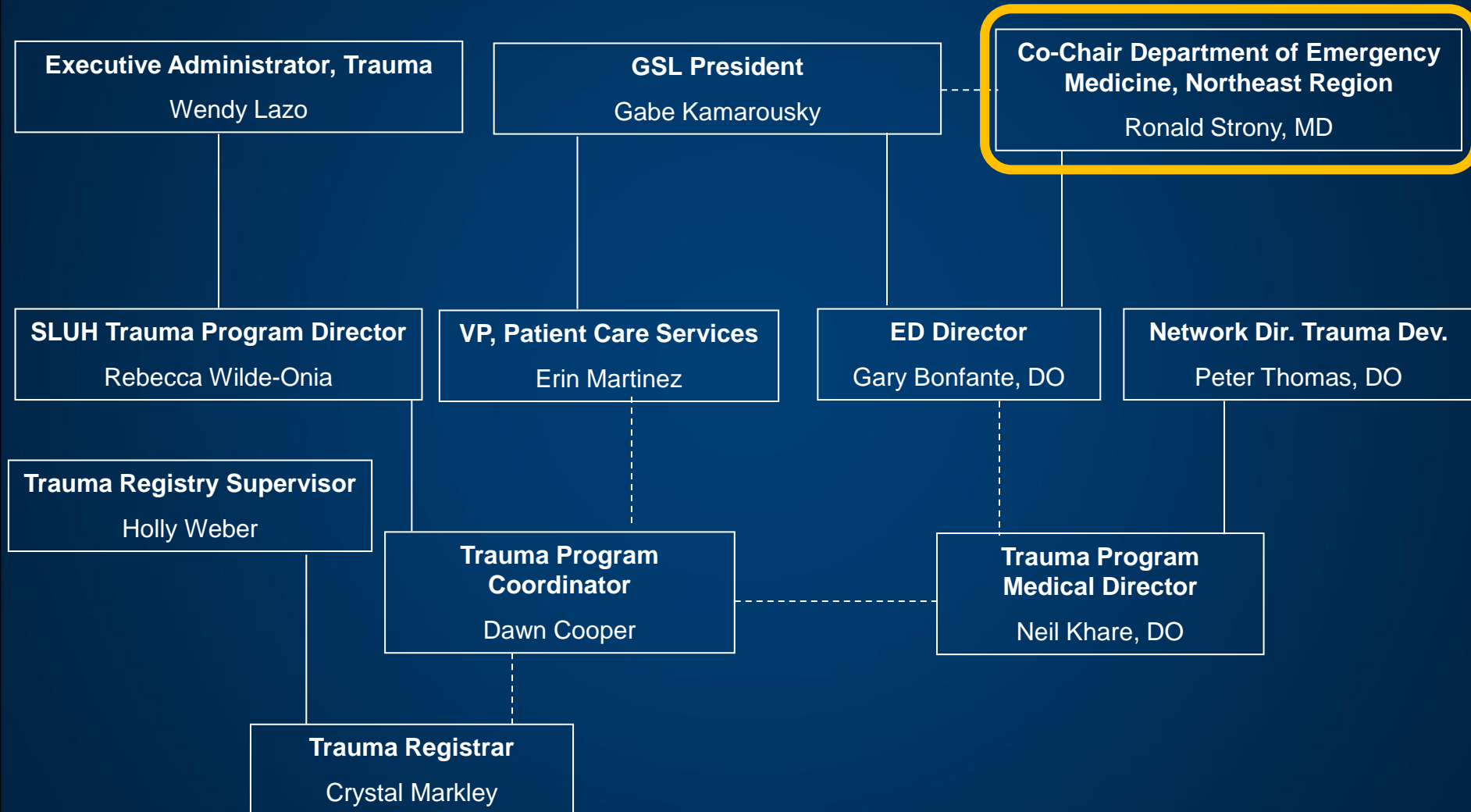
Reverse Mentoring

Mentoring
Questions
influence
Open Ask Advise Listen
Coach
Reverse
Share Encourage
Mind Provide
Feedback reflective Mentor
Experiences



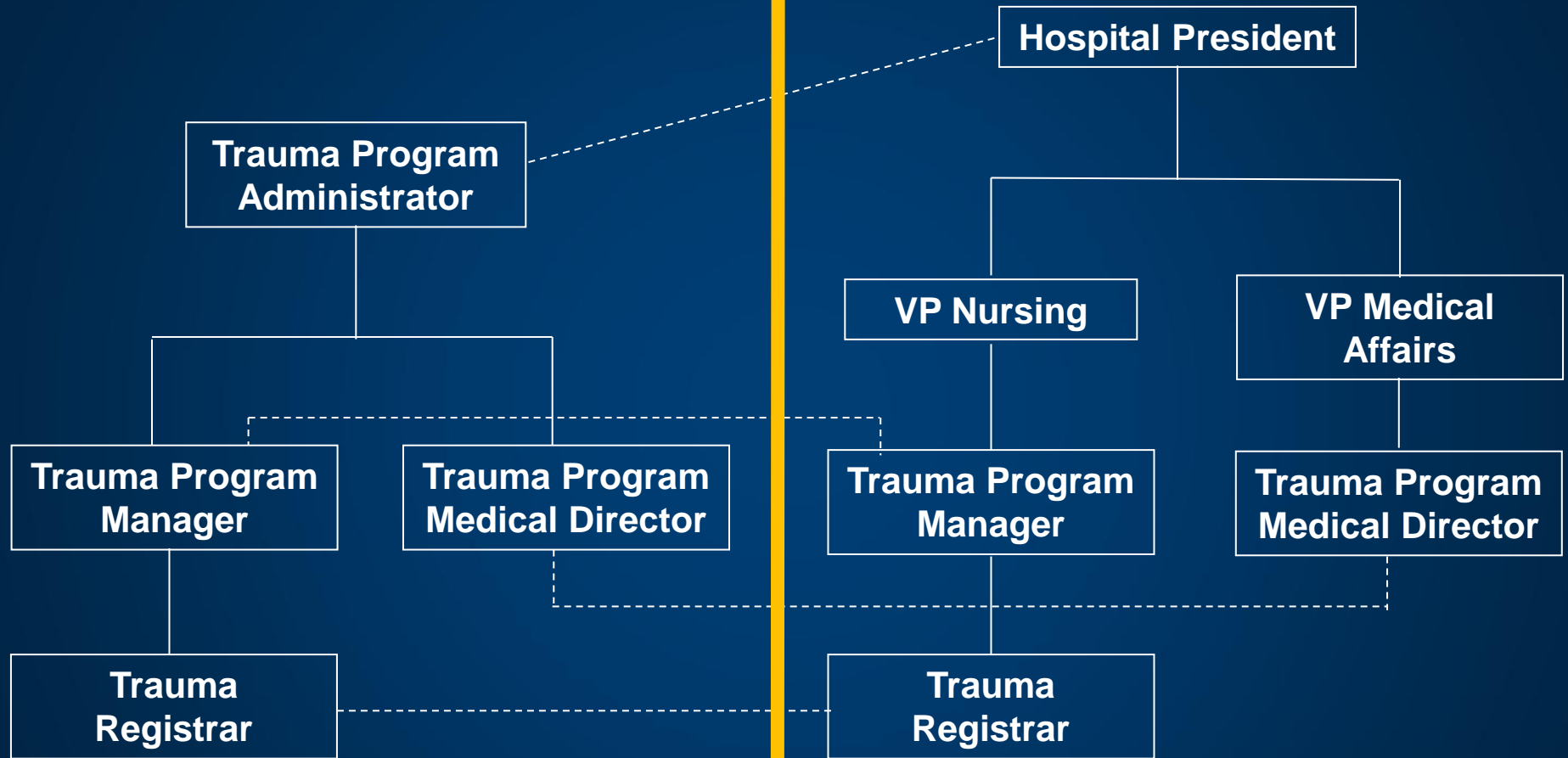
Trauma Organizational Structure







Trauma Org Structure





Mentoring Agreement



Level I Trauma Center Mentoring Agreement

This Level I Trauma Center Mentoring Agreement ("Agreement") is made by and between Saint Luke's Hospital of Bethlehem, Pennsylvania d/b/a St. Luke's University Hospital ("SLB") and St. Luke's Hospital – Lehigh Valley Campus ("SLL") as of May 5, 2020.

Whereas, SLB is an Adult Level I Trauma Center accredited by the Pennsylvania Trauma Systems Foundation ("PTSF");

Whereas, SLL is an Adult Level IV Trauma Center accredited by PTSF;

Whereas, the PTSF Standards of Accreditation for an Adult Level IV Trauma Center require that there be ongoing mentoring, collaboration and education with a Level I or II Trauma Center ("Mentoring Standard of Accreditation");

Whereas, SLL desires that SLB provide assistance necessary to achieve the Mentoring Standard of Accreditation and SLB desires to provide such assistance, subject to the terms of this Agreement.

Now, therefore, the parties, intending to be legally bound, agree to the terms set forth below.

Mentoring

During the Term (as defined below), SLB shall provide the following mentoring to SLL, and SLL shall participate, consistent with the Mentoring Standard of Accreditation:

- Regular meetings with leaders and managers of the SLB trauma department
- Regular conference calls including participation of administration and trauma program leadership of each entity
- Regular meetings with SLB trauma program manager and trauma program coordinator
- Participate in collaborative trauma performance activities with affiliates of SLB and SLL, including without limitation, quarterly performance improvement meetings and EMS outreach to local township officials for education and case reviews
- Conduct routine and referred external trauma case reviews, based on registry criteria
- Provide registry support, education, and inter-rater reliability reports and progress

Collaboration

During the Term, SLB and SLL shall collaborate on the following efforts consistent with the Mentoring Standard of Accreditation:

- EMS operations
- Provide educational opportunities to local EMS providers
- Provide injury prevention programming including without limitation presenting educational needs programming based on the injured population of each entity

Education

During the Term, SLB shall provide the following education opportunities, to SLL, and other entities and individuals, on the following topics/areas, and SLMO shall participate, consistent with the Mentoring Standard of Accreditation:

- Rural Trauma Team Development Course (RTTDC)
- Trauma Nurse Course (TNC)
- Advanced Trauma Life Support (ATLS)
- Trauma Nursing Core Course (TNCC)
- Advanced Trauma Certified Nurse Course (ATCN)
- Emergency Nursing Pediatric Course (ENPC)
- My E-Learning Annual Trauma Nursing Education
- Advanced Trauma Life Support (ATLS)
- Annual Contemporary Issues in Trauma Conference

Insurance Coverage

Each of SLB and SLL shall maintain at its expense during the Term policies of medical/professional liability insurance and commercial general liability insurance, relating to the obligations hereunder, in such forms and amounts as are required by law.

Independent Contractors

SLB shall be an independent contractor of SLL. As an "independent contractor," SLB and its employees shall not be agents or employees of SLL in connection with the obligations hereunder and, no employee of SLB shall be entitled to any salary, benefits or other compensation from SLL in connection with the obligations hereunder. Notwithstanding the foregoing, from time to time employees of SLB may provide services to SLL in connection with its trauma programs, and SLB shall be reimbursed by SLL, for the fair market value of such services provided, as mutually agreed upon by the parties.

Term and Termination

This letter agreement shall be effective as of May 5, 2020 and shall continue until terminated as set forth herein by either party (the "Term"). Either party may terminate this Agreement: (1) for cause in the event of a breach of any material term, condition, warranty or representation of this Agreement that remains uncured within fifteen (15) days after written notice of such breach from the non-breaching party to the breaching party; (2) for cause in the event any term or condition of this Agreement is invalid pursuant to any provision of applicable statutes, rules or regulations or would otherwise cause a party to be in violation of the law and the parties are unable to amend the terms of this Agreement in a mutually agreeable manner; or (3) without cause by providing the other party thirty (30) days prior written notice.

No Referrals

SLB and SLL understand and agree that nothing contained in this letter agreement shall in any way require or suggest that either party shall be required to refer patients to each other or any affiliate of any other party at any time whatsoever. SLB and SLL shall each be free to refer patients to any hospital, health care facility, or provider, and nothing contained herein is intended to require and nothing herein shall be construed to require any party to make or influence referrals to, or otherwise generate business for any other party or any affiliate of any other party.

HIPAA

The parties agree to comply with all applicable federal and state laws governing the confidentiality of patient





Regularly Scheduled Meetings

- SLB Manager & Coordinator Meetings
 - Monthly or bi-weekly
 - Formal in-person scheduled meetings
 - TEAMS calls
 - Accessible on a daily basis



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- Network Trauma Meetings
 - TPCs & TPMD



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 - Accessible on a daily basis

- Network Trauma Meetings
 - TPCs & TPMD

- Level IV Coordinator Meetings
 - Monthly
 - Agenda



Monthly Level IV Development Meetings

Network Level IV Trauma Meeting Agenda Items

October 16, 2020 0830-1630

- **0900-1100** Impact Teen Driver Training
- **Policy and CMG Review**
 - STAT scan
 - 20 vs. 30 minutes
 - EMS vs. everyone
 - Activation Criteria
 - Rib fracture admission guidelines/ CMG
- **ATLS Compliance**
 - Tracking grid
 - Trauma H&P
 - Chest and/or pelvis XR/ eFAST/ Documentation
 - How strict do we need to be with pelvis XR?
 - What can be considered compliant?
 - How are we following up?
 - Add to Resuscitation CMG?
- **Trauma Bay Equipment Checklist**
 - All equipment the same
 - Mandatory list from standards
 - Follow up with Mike Malone for ordering, etc.
 - Checklist completed at regular intervals- minimum every 24 hours?
- **Arriving trauma patients anonymously discussion**
- **TNC**
 - Updates
 - Upcoming classes
 - 2021 schedule
 - Coordinate with Nicole Lohrman
 - Network based with 1-2 classes at each smaller campus/year
- **Network Trauma EMS ConED**
- **Stop the Bleed- staff training**
 - Updates from Andrea/Becky about bags for each campus
- **Out of Network Transfers out Update**
 - Any issues with timeliness to transfer out r/t transport issues?
 - SLETS vs. External
- **Site Survey Prep-Miners/Lehighton/ eventually GSL**
 - AFS/Binders
 - Calendar Invites- site survey and mock survey
 - Conference rooms booked, any additional rooms needed?
- **Birthday Treats**



Education

- Physician & Advanced Practitioner
 - ATLS
 - Simulation



Education

- Physician & Advanced Practitioner
 - ATLS
 - Simulation
- Nurses
 - PaTNC
 - TNCC
 - ATCN
 - Ongoing education
 - Rib Fracture Guideline, SBIRT, FIM



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 - Rib Fracture Guideline, SBIRT, FIM
- Ancillary Staff
 - Skills Day
 - C-Collars, T-Pods, CMG & Policy Education



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 - Skills Day
 - C-Collars, T-Pods, CMG & Policy Education
- Annual Education
 - MEL Modules



Performance Improvement Program



Performance Improvement Program

■ Guidelines

- PTSF Standards of Accreditation
- Trauma Operations Performance Improvement Course (TOPIC)



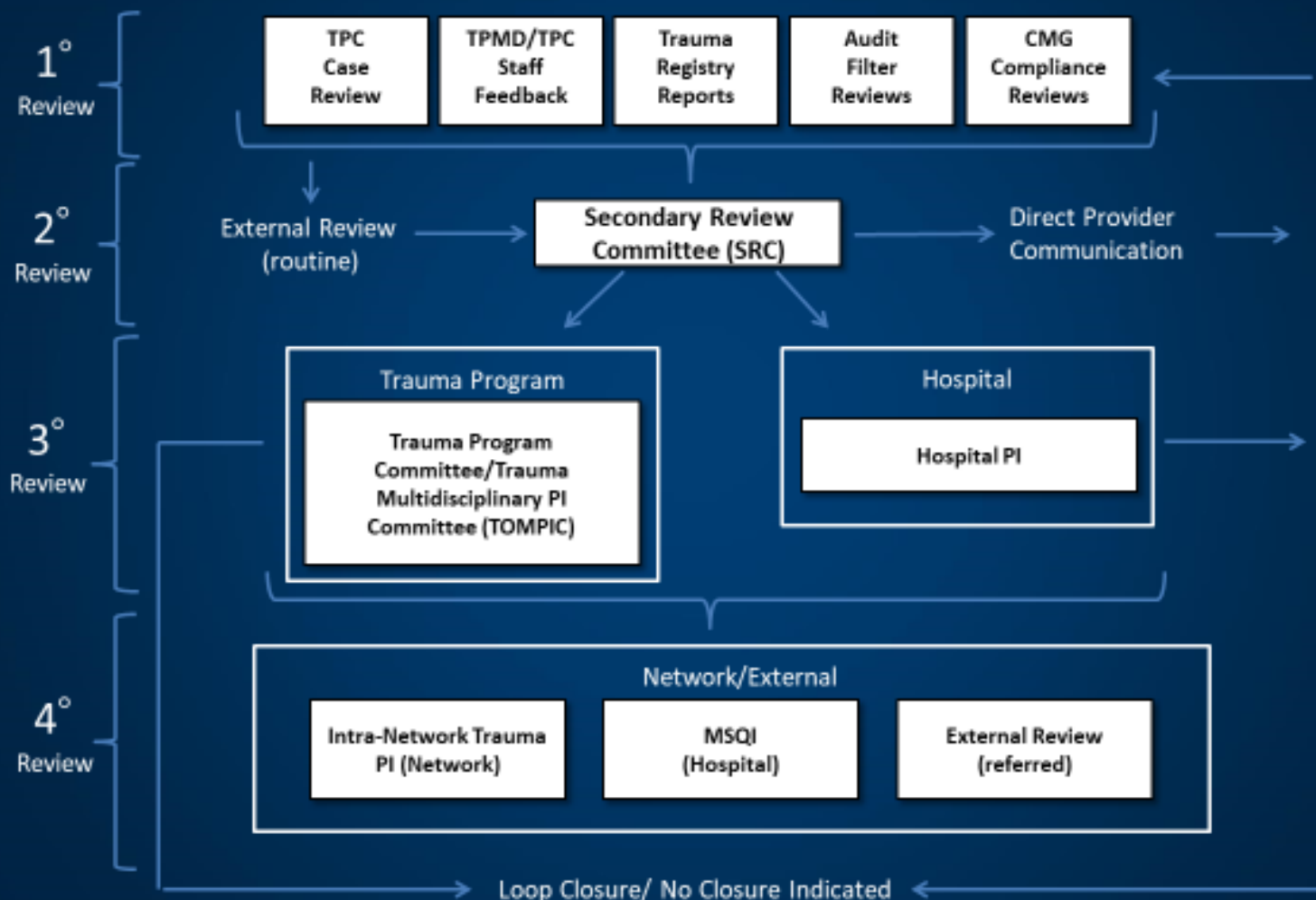
Performance Improvement Program

- Guidelines
 - PTSF Standards of Accreditation
 - Trauma Operations Performance Improvement Course (TOPIC)
- PI Plan



PI Plan Development

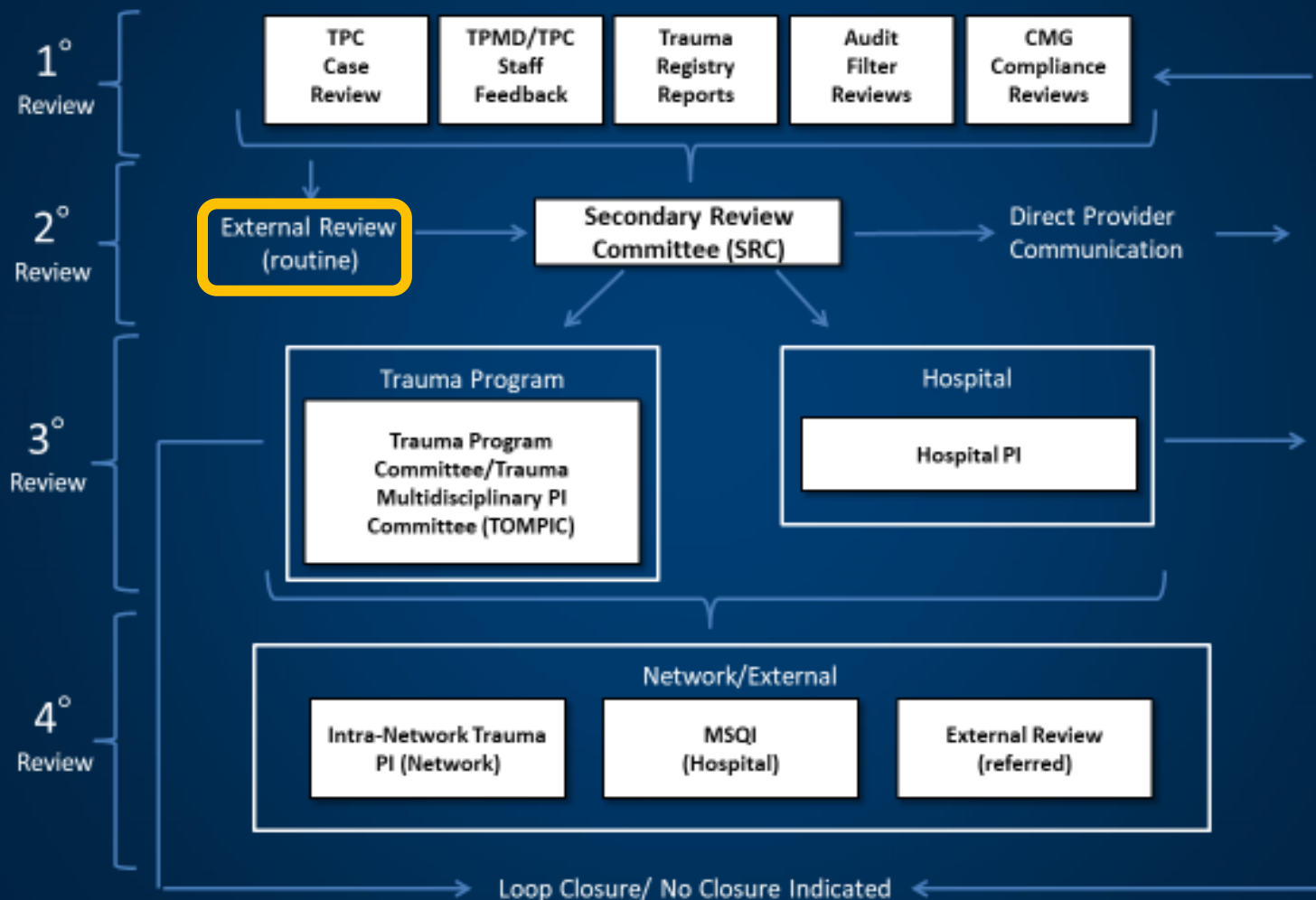
St. Luke's Lehighon Campus – Level IV Trauma Center PIPS Process Flowchart





PI Plan Development

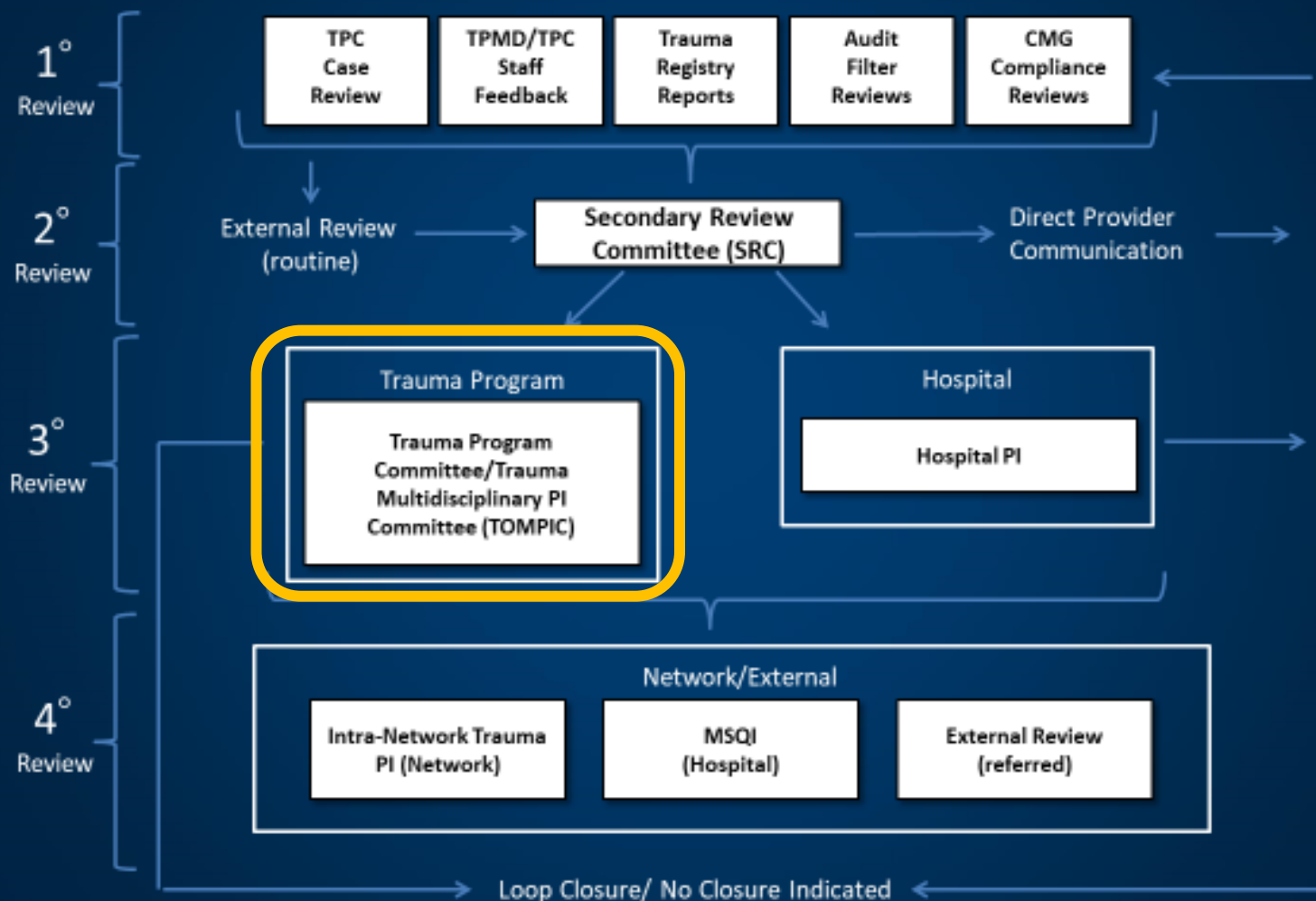
St. Luke's Lehighon Campus – Level IV Trauma Center PIPS Process Flowchart





PI Plan Development

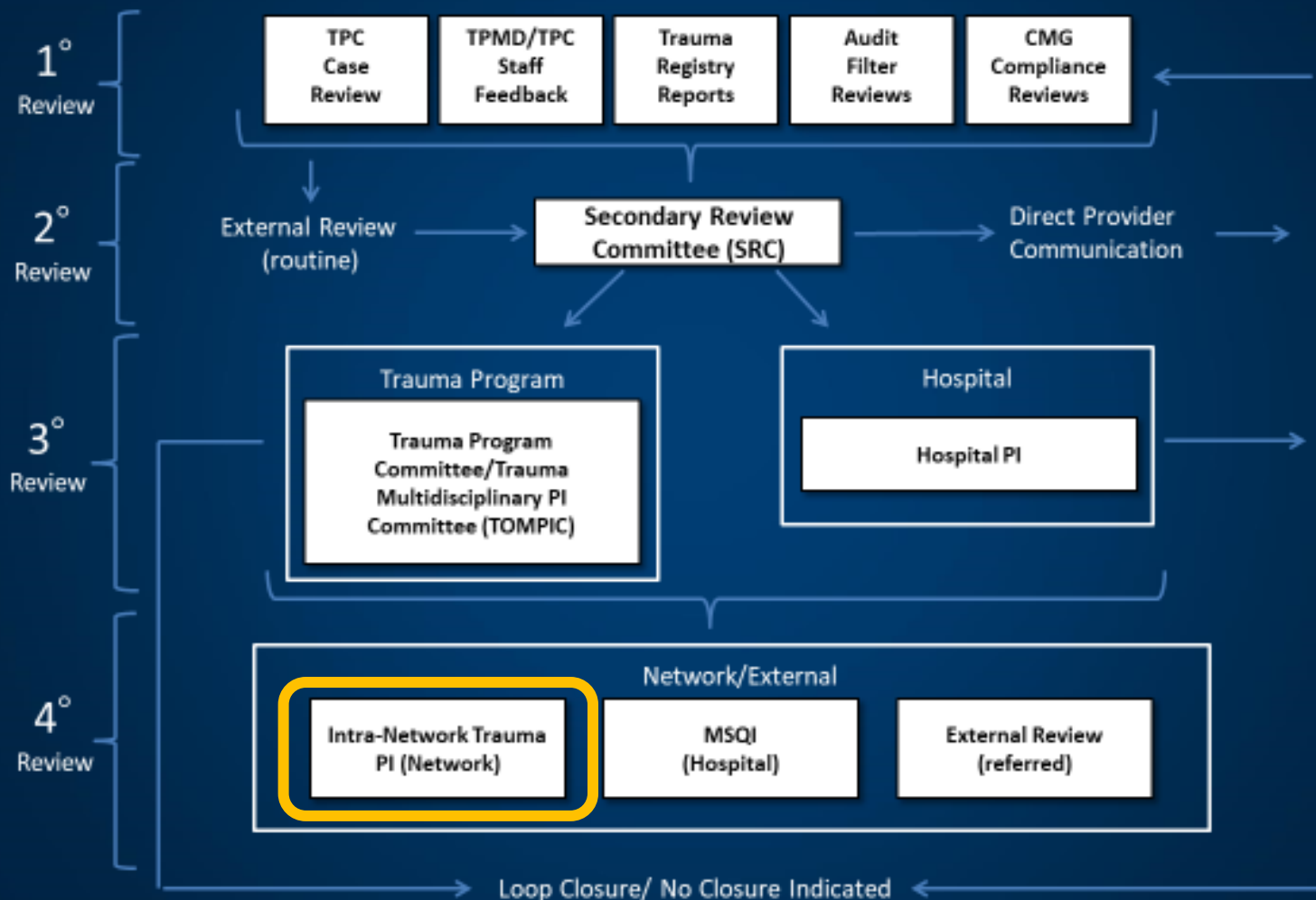
St. Luke's Leighton Campus – Level IV Trauma Center PIPS Process Flowchart





PI Plan Development

St. Luke's Lehighon Campus – Level IV Trauma Center PIPS Process Flowchart





Performance Improvement Program

- Guidelines
 - PTSF Standards of Accreditation
 - Trauma Operations Performance Improvement Course (TOPIC)
- PI Plan
- Trauma Policy
 - Standards
 - Hospital / Network Policies



Policy Development

- Meets PTSF Standards



Policy Development

- Meets PTSF Standards
- Needed



Policy Development

- Meets PTSF Standards
- Needed
- Useful



Policy Development

- Meets PTSF Standards
- Needed
- Useful
- Meaningful



Policy Development

- Meets PTSF Standards
- Needed
- Useful
- Meaningful
- Financially responsible



Policy Development

- Meets PTSF Standards
- Needed
- Useful
- Meaningful
- Financially responsible
- Achievable outcomes for both mentor and mentee



Performance Improvement Program

- Guidelines
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 - Standards
 - Hospital / Network Policies
- Clinical Management Guidelines
 - Standards
 - Best Practice



Clinical Management Guideline Development

- CMG and Policy standards are the same for Level I/II and Level IVs



Clinical Management Guideline Development

- CMG and Policy standards are the same for Level I/II and Level IVs
- Is your Mentor from the same system?



Clinical Management Guideline Development

- CMG and Policy standards are the same for Level I/II and Level IVs
- Is your Mentor from the same system?
- What are you starting with?
 - Are the Mentor's CMG/Policies up to date?
 - When were they last updated?
 - What are the resources at the Level IV compared to the Level I



Clinical Management Guideline Development

- Anti-Coagulation reversal
 - Timeliness of PCC



Clinical Management Guideline Development

- Anti-Coagulation reversal
 - Timeliness of PCC
- Massive Transfusion
 - # pRBC
 - # FFP, amount of Thawed FFP
 - # Platelets and Cryoprecipitate
 - PCC
 - TXA



Clinical Management Guideline Development

- Anti-Coagulation reversal
 - Timeliness of PCC
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- Timeliness of Response
 - Neurosurgery, Interventional Radiology, Surgery, Orthopedics



Clinical Management Guideline Development

- Anti-Coagulation reversal
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- Massive Transfusion
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 - PCC
 - TXA
- Timeliness of Response
 - Neurosurgery, Interventional Radiology, Surgery, Orthopedics
- Traumatic Brain Injury
 - Neurosurgery



Rib Fracture Clinical Management Guideline

- Admission Protocol
 - Age > 14
 - Oxygen Saturation > 93% on Room Air
 - Minimal hemothorax
 - Pneumothorax (isolated injury and asymptomatic)
 - Development of a Rib Fracture CMG



Rib Fracture Clinical Management Guideline

- 3 or more rib fractures
- Bilateral rib fractures



Rib Fracture Clinical Management Guideline

- 3 or more rib fractures
- Bilateral rib fractures
- Age 55 or older with any number of rib fractures



Rib Fracture Clinical Management Guideline

- 3 or more rib fractures
- Bilateral rib fractures
- Age 55 or older with any number of rib fractures
- Any patient with at least 1 rib fracture and any of the following:
 - Minimal hemothorax and/or an occult pneumothorax
 - Sternal fracture or manubrial fracture
 - Scapular fracture



Rib Fracture Clinical Management Guideline

- Rib Fracture Order Set
 - Respiratory Consultation
 - Vital Capacity within 2 hours of admission



Rib Fracture Clinical Management Guideline

- Rib Fracture Order Set
 - Respiratory Consultation
 - Vital Capacity within 2 hours of admission
 - Nursing Interventions
 - Incentive Spirometry and pulmonary hygiene
 - Early mobilization in all patients unless contraindicated
 - Out of bed within 12 hours of admission
 - Out of bed for all meals



Rib Fracture Clinical Management Guideline

- Rib Fracture Order Set
 - Respiratory Consultation
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 - PT/OT within 24 hours of admission



Rib Fracture Clinical Management Guideline

- Rib Fracture Order Set
 - Respiratory Consultation
 - Vital Capacity within 2 hours of admission
 - Nursing Interventions
 - Incentive Spirometry and pulmonary hygiene
 - Early mobilization in all patients unless contraindicated
 - Patients out of bed within 12 hours of admission
 - Out of bed for all meals
 - PT/OT within 24 hours of admission
 - Continuous pulse ox



Rib Fracture Clinical Management Guideline

- Rib Fracture Order Set
 - Anesthesia/Pain Service Consultation
 - Consideration of epidural catheter



Rib Fracture Clinical Management Guideline

- Rib Fracture Order Set
 - Anesthesia/Pain Service Consultation
 - Consideration of epidural catheter
 - Multimodal Pain regimen
 - Narcotics
 - Anti-inflammatories
 - Muscle relaxants
 - Tylenol
 - Lidocaine Patch



Rib Fracture Clinical Management Guideline

- Rib Fracture Order Set
 - Anesthesia/Pain Service Consultation
 - Consideration of epidural catheter
 - Multimodal Pain regimen
 - Narcotics
 - Anti-inflammatories
 - Muscle relaxants
 - Tylenol
 - Lidocaine Patch
 - Chemical and DVT prophylaxis
 - SQH if considering epidural, otherwise Lovenox



Performance Improvement Program

- Guidelines
 - PTSF Standards of Accreditation
 - Trauma Operations Performance Improvement Course (TOPIC)
- PI Plan
- Trauma Policy
 - Standards
 - Hospital / Network Policies
- Clinical Management Guidelines
 - Standards
 - Best Practice
- Chart Reviews



Chart Reviews

- Standardized Registry Abstraction
 - Monthly Network Registry Workgroups
 - Registrars
 - Trauma Program Coordinators



Chart Reviews

- Standardized Registry Abstraction
 - Monthly Network Registry Workgroups
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- PTOS Manual



Chart Reviews

- Standardized Registry Abstraction
- PTOS Manual
- Electronic Health Record Navigation



Chart Reviews

- Standardized Registry Abstraction
- PTOS Manual
- Electronic Health Record Navigation
- Monthly Reviews
 - 2 Charts for PI
 - Site Survey Ready
 - Reviewed by TPM
 - 2 Charts for Routine External Review
 - Reviewed by Level I Physician





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- Chart Reviews
- Data
 - Collector Report Writer
 - V5 Report Writer



Data Review / Report Writing – Monthly

- Trauma Volumes
 - Activations
 - Alerts & Evals



Data Review / Report Writing – Monthly

- Trauma Volumes
 - Activations
 - Alerts & Evals
- Admissions vs Transfers



Data Review / Report Writing – Monthly

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Data Review / Report Writing – Monthly

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- Vital Signs & Neuro Check Compliance



Data Review / Report Writing – Monthly





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Collector / V4



Data Review / Report Writing – Monthly

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- Triage Rates
 - Drill downs on the under-triage – using V5 report




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 - Drill downs on the under-triage – using V5 report
- PI Completeness
 - Issues report



Data Review / Report Writing – Monthly

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Transfer Process

STRATEGIES FOR APPROPRIATE TRAUMA TRANSFERS





Can We Keep It --- Should We?

- Admission vs Transfer Decision
 - PTSF Mandatory Transfer Out Criteria
 - Hospital Specific Admission Policy
 - Resources



Can We Keep It --- Should We?

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 - Resources
- Transfer agreement
 - Receiving physician communication
 - Priority transfer process



Can We Keep It --- Should We?

- Admission vs Transfer Decision
 - PTSF Mandatory Transfer Out Criteria
 - Hospital Specific Admission Policy
 - Resources
- Transfer agreement
 - Receiving physician communication
 - Priority transfer process
- Transfer follow-up in real time
 - Direct Feedback to TPC from Accepting Hospital



Why did we do all of these things?
What's the purpose?
What's in it for me?



ARE YOU PREPARED?



PTSF Site Survey Visit



Site Survey Preparations

- To Do Lists



Site Survey Preparations

- To Do Lists
- Policy Review



Site Survey Preparations

- To Do Lists
- Policy Review
- Clinical Management Guideline Review



Site Survey Preparations

- To Do Lists
- Policy Review
- Clinical Management Guideline Review
- Chart Reviews = PI Files



Site Survey Preparations

- To Do Lists
- Policy Review
- Clinical Management Guideline Review
- Chart Reviews = PI Files
- Data Analysis



Site Survey Preparations

- To Do Lists
- Policy Review
- Clinical Management Guideline Review
- Chart Reviews = PI Files
- Data Analysis
- Mock Survey



Site Survey Preparations

- To Do Lists
- Policy Review
- Clinical Management Guideline Review
- Chart Reviews = PI Files
- Data Analysis
- Mock Survey
- **THE BIG DAY – PTSF SITE VISIT**



YOU DID IT!





Questions?

