

Trauma Performance Improvement and Patient Safety (PIPS) Processes Survey

Prior to initiating survey there will be a radio button selection tool inquiring on the role of the respondent as follows:

Trauma Medical Director (TMD) /Associate TMD/Trauma Program Manager
Trauma Faculty/Trauma Call Panel Attending
Trauma Fellow/Resident
Other _____

Questions in Red font will **only be seen by TMD/Associate TMD or TPM.**

Questions that are contingent upon previous answers have been highlighted in Blue and also marked to the question in reference to make for easier review.

1. Level of Trauma Center

- a) I
- b) II
- c) III/IV
- d) Not accredited

2. Please select which of the following best represent your institutions trauma center designation status

- a) American College of Surgeons (ACS) verified trauma center
- b) State designated trauma center
- c) Both ACS verified and state designated
- d) None of the above

3. Approximately how many trauma patients are admitted per year at your institution?

- a) <1200
- b) 1200-2400
- c) 2400-3600
- d) >3600

4. Type of Institution

- a) Academic or University Affiliated
- b) Community Teaching Hospital
- c) Community Private Hospital

5. Region where your trauma center is located

- a) Northeast (CT, ME, MA, NH, NJ, NY, PA, RI, VT)
- b) Midwest (IA, IL, IN, KS, MI, MN, MO, NE, ND, OH, SD, WI)
- c) South (AL, AR, DE, DC, FL, GA, KY, LA, MD, MS, NC, OK, SC, TN, TX, VA, WV)
- d) West (AK, AZ, CA, CO, HI, ID, NM, NV, OR, WA, WY)

6. Please select which of the following resources have contributed to the structure of your PIPS process (may have more than one response) **(TMD/Associate TMD or TPM Only)**

- a) Resources for Optimal Care of the Injured Patient (i.e. "The Orange Book")
- b) Society for Trauma Nurses (STN) TOPIC course
- c) STN OPTIMAL Course
- d) Trauma Center Association of American Trauma Medical Director Course
- e) "Just Culture" Certification
- f) Lean Six Sigma Certification
- g) Other _____

7. Does your institution incorporate the "Just Culture" philosophy?

- a) Yes
- b) No

8. Regarding the use of the "Just culture" philosophy, is the full algorithm incorporated into the PIPS process? **(ONLY APPLIES TO THOSE THAT RESPOND YES TO Question 7 RE JUST CULTURE USAGE)**

- a) fully incorporated into all cases reviewed at PIPS
- b) only applied to cases where there are errors or deviations in care
- c) selectively applied on case by case basis
- d) unsure
- e) other _____

9. Do you feel the "Just Culture" philosophy has improved the quality of the peer review process? **(ONLY APPLIES TO THOSE THAT RESPOND YES TO Question 7 RE JUST CULTURE USAGE)**

- a) yes
- b) no
- c) in a stage that is too early to tell

10. How frequently is PIPS performed at your institution (i.e. Trauma M&M or Peer Review)

- a) Weekly
- b) Monthly
- c) Other _____

11. In regard to your PI process, how are complications or safety events reviewed? **(TMD/Associate TMD or TPM Only)**

- a) Concurrently
- b) Retrospectively
- c) Combination of choices a&b
- d) Other _____

12. Which of the following are reviewed at your PIPS conferences (select all that apply)
- Near misses or potential for harm
 - All complications irrespective of level of harm
 - Only complications resulting in severe harm
 - All deaths only
 - Only deaths that are unanticipated or anticipated with opportunities for improvement
 - Interesting cases (i.e. complex operative trauma or rare injury)
 - Other _____
13. How are cases identified for PIPS at your institution (may have more than one response)?
- Cases reported by house-staff or other clinical staff (i.e. nursing/APPs)
 - Cases reported by attending staff
 - Trauma Program Manager (TPM) review
 - Trauma Medical Director (TMD) or Trauma attending review
 - Performance Improvement (PI) Coordinator review
 - Other _____
14. What is the highest level of PIPS done at your institution? (TMD/Associate TMD or TPM Only)
- Level 1 (Trauma Divisional Review)
 - Level 2 (Subspecialty Review with Trauma Medical Director Assessment)
 - Level 3 (Multidisciplinary Peer Review)
 - Level 4 (Multicenter Peer Review)
15. Other than the trauma division, which of the following services routinely attends your PIPS conference (may have more than one response)?
- Anesthesia
 - Case Management/Social Work
 - Critical Care
 - Emergency Medicine
 - Neurosurgery
 - Nursing Administration
 - Orthopedics
 - Physiatry/Rehab
 - Other Surgical Services
 - Other _____
16. Which of the following outcomes do you feel are part of your PIPS conference (may have more than one response)?
- Correction/prevention of errors
 - Education/review of current literature
 - Obtaining differing viewpoints on care
 - Assigning Blame
 - Closing the loop with the surgeon/provider

17. When errors or opportunities for improvement are identified in PIPS conferences, how effective are the corrective actions in leading to significant change?
- Very Effective
 - Moderately Effective
 - Fairly Effective
 - Not Effective
18. Which of the following barriers currently impair your institution's PIPS process (may have more than one response)?
- Physician time commitment
 - Limited institutional resources
 - Environment not conducive to constructive case review
 - Legal concerns
 - Participant engagement
 - Other _____
19. Which of the following best describes your feelings following the presentation of a case you were involved at a PIPS conference?
- I felt embarrassed or guilty over a poor outcome and am unsure of how to avoid future cases.
 - I learned from any potential errors on my part through constructive criticism. Process/system errors were identified with clear plans to correct them.
 - I felt that errors are inevitable and continued to look for ways to avoid them in future situations.
 - I felt as if my colleagues are blaming me and think that I am incompetent
20. Do your PIPS reviews incorporate a standardized template for documentation?
(TMD/Associate TMD or TPM Only)
- Yes
 - No
21. Who is responsible for completing the PIPS template? **(ONLY APPLIES TO THOSE THAT RESPOND YES TO Question 20 RE PIPS TEMPLATE USAGE) (TMD/Associate TMD or TPM Only)**
- Trauma Program Manager
 - Trauma Medical Director
 - Trauma surgeon
 - Other _____

22. Which of the following items are incorporated into your template (may choose more than one)? **(ONLY APPLIES TO THOSE THAT RESPOND YES TO Question 20 RE PIPS TEMPLATE USAGE) (TMD/Associate TMD or TPM Only)**

- a) Complication type
- b) AHRQ Level of Harm Scoring
- c) Adjudication of post traumatic death (i.e. anticipated, unanticipated)
- d) Joint Commission Patient Safety Event Taxonomy
- e) Plan of Action

23. How are your standardized PIPS templates utilized (may have more than one response)? **(ONLY APPLIES TO THOSE THAT RESPOND YES TO Question 20 RE PIPS TEMPLATE USAGE) (TMD/Associate TMD or TPM Only)**

- a) For PIPS projects or Root Cause Analysis (RCA)
- b) Tracking/review of error processes
- c) For multi-institutional collaboration
- d) Documentation for verification review

24. Does your center use trauma video review (TVR) as part of the PIPS process?

- a) Yes
- b) No

25. Please select which of the following best describes your trauma video review process. **(ONLY APPLIES TO THOSE THAT RESPOND YES TO Question 24 RE TVR USAGE)**

- a) All trauma activations are recorded
- b) Only highest tier activations are recorded
- c) When the system is manually turned on, activations are recorded

26. How are videos selected for TVR? **(ONLY APPLIES TO THOSE THAT RESPOND YES TO Question 24 RE TVR USAGE)**

- a) Videos are selected by TMD
- b) Videos are selected by TPM
- c) Videos are selected by faculty in charge of TVR program
- d) Any faculty can recommend videos for review
- e) Other _____

27. How is feedback from Trauma Video Review provided (select all that apply)? **(ONLY APPLIES TO THOSE THAT RESPOND YES TO Question 24 RE TVR USAGE)**

- a) Educational/Quality Improvement Conference
- b) Individual or small group feedback
- c) No formal feedback provided, videos available for review on request
- d) No formal feedback, videos not available for review
- e) Other _____

28. Please select how video review is used in your PIPS process (may have more than one response). **(ONLY APPLIES TO THOSE THAT RESPOND YES TO Question 24 RE TVR USAGE)**To identify flow disruptions

- a) To identify communication errors
- b) To identify patient management errors
- c) To evaluate clinical performance

29. Does your institution participate in the Trauma Quality Improvement Program (TQIP) **(TMD/Associate TMD or TPM Only)**

- a) Yes
- b) No

30. Please describe how you utilize your TQIP reports (may select more than one item). **(ONLY APPLIES TO THOSE THAT RESPOND YES TO QUESTION 29 RE TQIP USAGE). (TMD/Associate TMD or TPM Only)**

- a) Reviewed by TPM or PI coordinator only
- b) Reviewed by TMD only
- c) Summary of reports presented at PIPS conferences
- d) Reports used to “drill down” on problematic areas or create PIPS team projects

31. Does your institution participate in any TQIP collaboratives? **(ONLY APPLIES TO THOSE THAT RESPOND YES TO QUESTION 29 RE TQIP USAGE) (TMD/Associate TMD or TPM Only)**

- a) Yes
- b) No

32. Please describe how you utilize your TQIP collaborative reports (may select more than one item). **(ONLY APPLIES TO THOSE THAT RESPOND YES TO QUESTION 29 RE TQIP USAGE) (TMD/Associate TMD or TPM Only)**

- a) Regional collaborative PIPS projects
- b) Standardization of regional best practices/guidelines
- c) Collaborative research projects
- d) Data validation/Troubleshooting

33. Are autopsy reviews incorporated into your PIPS process?

- a) Yes, all deaths referred to medical examiner (ME) for consideration
- b) Yes, select cases referred to ME
- c) No

34. Who is responsible for ME reviews? **(ONLY APPLIES TO THOSE THAT RESPOND YES TO QUESTION 33 RE ME REVIEWS)**

- a) TPM or PI coordinator only
- b) TMD only
- c) Reports reviewed at PIPS meetings
- d) Other _____