RAC-U REGIONAL TRAUMA PLAN

PERFORMANCE IMPROVEMENT PLAN

Mission Statement

Trauma Service Area U is dedicated to the provision of quality healthcare. It provides accessible, comprehensive, quality healthcare to all trauma patients regardless of age, race, religion, sex, nationality or ability to pay.

The purpose of a performance improvement plan is to provide assessment and improvement activities designed to monitor and evaluate the quality of patient care through system analysis, to identify and pursue opportunities to improve patient care, and to sustain improvement over time.

Goals/Objectives

The Trauma Service Area U Performance Improvement plan is designed to achieve the following goals:

- 1. To facilitate improvement in patient care and services provided by establishing mechanisms to identify opportunities to improve.
- 2. To provide a framework for a planned, systematic approach for monitoring and evaluating the quality, appropriateness and effectiveness of trauma patient services provided within the region.
- 3. To pursue opportunities for improving patient care by evaluating systems and addressing educational issues.
- 4. To centralize the flow of information through the committee structure to prevent duplication of effort and to facilitate early awareness of problems or opportunities of improvement.
- 5. To create a structure which will provide for coordination, integration and accountability of quality management activities commensurate with established standards.
- 6. THIS PROCESS IS NOT SUBJECT TO DISCOVERY PURSUANT TO TEXAS REVISED CIVIL STATUTES ART.4495b. NO PI DOCUMENTS WILL BE REMOVED FROM MEETING ROOM.*

Performance Improvement Committee Description (from the existing bylaws)

- 1. Performance Improvement
 - A. The Performance Improvement Committee may conduct both open and closed meetings.

- B. The committee members for meetings shall consist of the chair and members of the board, and any other members present or alternates appointed by the committee chairperson with the advice and consent of the Board of Directors. Decisions will be made by consensus of all present.
- C. Issues of concern that are brought to the committee for discussion and recommendation will be discussed in closed meetings.
- D. The chair of the committee will appoint additional members as needed based on the issue with the approval of the Board of Directors

Functional Authority

The final authority and ultimate responsibility for a flexible and integrated performance improvement plan shall rest with the Regional Advisory Council

Organization and Collection of Data:

Data shall be collected and organized for review under the direction of the Performance Improvement Chair. Participation in the Performance Improvement by supplying data is a requirement for participation in CBRAC-U. Consideration for collection will be given to:

- Who will collect data
- What data is to be collected
- Frequency of data collection
- How data should be collected
- Sources for data collection

Data Evaluation: The Performance Improvement Committee will analyze the data and determine if there are areas where improvement can be identified. When identified, causes will be established and recommendations made to achieve improvement. The evaluation of key functions includes analyses of trends and patterns in data collected.

When evaluation identifies an opportunity for improvement, actions shall be directed toward the root cause with the overall goal of improving the quality of service. This may be through education, system analysis, or other committee recommendations. Statistical analysis will be utilized to determine whether actions taken have been successful in improving care or services. The Performance Improvement Committee will communicate the results of monitoring and evaluation to the members of the CBRAC. The results of these activities will be available for review by the Texas Department of State Health Services.

A standardized reporting mechanism (issue referral form) will be utilized. Participation by all agencies will be required to be compliant in CBRAC participation.

Confidentiality

All documents generated concerning the Performance Improvement Plan within the region shall be confidential and used only in the exercise of designated functions of the Performance Improvement Plan.

Conflict of Interest

No practitioner or other individual involved in Performance Improvement shall be required to review any case in which they are professionally involved but shall be given the opportunity to participate in the review.