

Guidelines for trauma quality improvement programmes



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Sciences Policy, Committee on Military
Trauma Care's Learning Health System
and Its Translation to the Civilian
Sector**

Guidelines For Trauma Quality Improvement Programmes Nonserial Publications:

Guidelines for Trauma Quality Improvement Programmes World Health Organization, 2009 In order to promote greater implementation of effective affordable and sustainable trauma systems globally the World Health Organization and the International Association for Trauma Surgery and Intensive Care have worked collaboratively to produce these guidelines on trauma quality improvement The response to the growing problem of injury needs to include the improvement of care of the injured Quality improvement QI programs offer an affordable and sustainable means to implement such improvements These programs enable health care institutions to better monitor trauma care services better detect problems in care and more effectively enact and evaluate corrective measures targeted at these problems The goal of this publication is to give guidance on ways in which health care institutions globally can implement QI programs oriented to strengthening care of the injured This guidance is intended to be universally applicable to all countries no matter what their economic level These guidelines provide basic definitions and an overview of the field of QI so that those not familiar with this field will have a working knowledge of it Evidence of the benefit of QI in general and trauma QI in particular is then laid out The main part of the publication reviews the most common methods of trauma QI written in a how do to fashion This covers a wide range of techniques The first two of these are especially emphasized as ways in which to strengthen trauma QI in the setting of low income and middle income countries Books in Print ,1991 *Strengthening Care for the Injured* Charles Mock, 2010 Injury accounts for a significant proportion of the world s burden of disease Each year 5 8 million people die from injury and millions more are disabled The response to this global health problem needs to include a range of activities from better surveillance to more in depth research and primary prevention Also needed are efforts to strengthen care of the injured The World Health Organization WHO has responded to this need with a variety of actions It has supported countries in setting up trauma care programmes and in developing their capacity to care for the injured It has also developed in consultation with global experts guidelines to assist with the organization and planning of trauma care such as Prehospital trauma care systems Guidelines for essential trauma care and Guidelines for trauma quality improvement programmes These publications have been used in many countries and have helped to stimulate on the ground improvements and policy changes Through this publication WHO seeks to increase communication and the exchange of ideas among those working in the field of trauma care whether in the prehospital setting in acute care in hospitals or in longer term rehabilitation to increase communication among those involved in planning administering advocating for or directly providing trauma care services and to increase communication among those working in the field of trauma care in different countries worldwide p iii **Guidelines for Trauma Trauma Quality Improvement Programmes** International Society of Surgeon, International Association for the Surgeon of Trauma and Surgical Intensive Care, 2009 **A Systematic Review of Global Implementation of the World Health Organization' Trauma Care Guidelines** Lacey Nicole LaGrone, 2015 Objective Between 2004 and 2010 the World

Health Organization WHO released three publications intended to provide guidance to policymakers in low and middle income countries towards system wide improvements in trauma care We sought to understand the degree to which these guidelines have been implemented globally including understanding location and type of implementation We thus hoped to identify priorities for future implementation and dissemination strategies Methods We conducted a systematic review in which the titles of the WHO trauma care guidelines were used as the search terms Guidelines for Essential Trauma Care Prehospital Trauma Care Systems Guidelines for Trauma Quality Improvement Programmes Nineteen databases were queried validation of results was performed through citation analysis and expert consultation Two reviewers independently scored sources Findings The search returned 112 sources describing 140 implementation events in 51 countries These were divided between those that described needs assessments 45% endorsement by stakeholders 27% educational interventions 14% and incorporation into policy 14% There was evidence of implementation in 40% of low income countries 32% of lower middle and 28% of upper middle income countries Conclusions The WHO trauma care guidelines are widely implemented in meaningful ways However given the substantial disparities that remain in trauma care efforts to bring the standards described in the publications to the remaining 143 WHO member states are needed Particular emphasis should be on serial needs assessments for ongoing monitoring of capacity for trauma care in health systems incorporation of guidelines into formal education of healthcare providers and incorporation of the guidelines into health policy Guidelines for Essential Trauma Care World Health Organization, International Society of Surgery, International Association for the Surgery of Trauma and Surgical Intensive Care, 2004 Injury is an increasingly significant health problem throughout the world accounting for 16 per cent of the global burden of disease The public health burden of death and disability from injury is particularly notable in low and middle income countries These guidelines seek to establish practical and affordable standards applicable to injury or trauma care worldwide whether in rural health posts small hospitals hospitals staffed by specialists or tertiary care centres It sets out a list of key trauma treatment services designed to be achievable in all settings and defines the various human and physical resources required It also includes a number of recommendations for methods to promote such standards including training performance improvement trauma team organisation and hospital inspection **Trauma Center Performance Improvement** Jeffrey S. Young, 2021-03-26 Managing a trauma center involves complex clinical care long nights and days administrative work self examination critical review of patient care and significant regulatory requirements Performance improvement is the key element of trauma center effectiveness No trauma center provides flawless care thus all centers have opportunities to improve A competent performance improvement program is critical to trauma center outcomes This book provides key information on all aspects of trauma PI and program management In some ways PI is an art more than a science so the more interaction program leaders have with strong PI programs the more they can learn about how to improve their processes The book outlines the generally accepted processes for identification of opportunities for improvement which are

the key component of performance improvement This includes rounding with care teams contemporaneous chart review audit filters and voluntary submissions to the trauma program for review This book explains how to triage opportunities for improvement analyze them form corrective actions and finally achieve loop closure The book covers the roles of the personnel in the PI program what is required to dissect the opportunity to determine action plans how to document the entire process and how to keep track of opportunities for improvement to ensure that your program is progressively improving care The final sections of the book deal with specific opportunities for improvement action plans and loop closure through the use of case studies The book serves as a follow up to Dr Jeffrey Young s recently published book Trauma Centers which serves as a quick guide to the key components of trauma center administration management and patient care [Guidelines for Trauma Services](#) Australian Council on Healthcare Standards Staff,1997-01-01 **Guidelines for Essential Trauma Care** World Health Organization,2022 **Trauma Services Guidelines** Australian Council on Healthcare Standards. Evaluation and Quality Improvement Program,1996 *A National Trauma Care System* National Academies of Sciences, Engineering, and Medicine,Health and Medicine Division,Board on the Health of Select Populations,Board on Health Sciences Policy,Committee on Military Trauma Care's Learning Health System and Its Translation to the Civilian Sector,2016-09-12 Advances in trauma care have accelerated over the past decade spurred by the significant burden of injury from the wars in Afghanistan and Iraq Between 2005 and 2013 the case fatality rate for United States service members injured in Afghanistan decreased by nearly 50 percent despite an increase in the severity of injury among U S troops during the same period of time But as the war in Afghanistan ends knowledge and advances in trauma care developed by the Department of Defense DoD over the past decade from experiences in Afghanistan and Iraq may be lost This would have implications for the quality of trauma care both within the DoD and in the civilian setting where adoption of military advances in trauma care has become increasingly common and necessary to improve the response to multiple civilian casualty events Intentional steps to codify and harvest the lessons learned within the military s trauma system are needed to ensure a ready military medical force for future combat and to prevent death from survivable injuries in both military and civilian systems This will require partnership across military and civilian sectors and a sustained commitment from trauma system leaders at all levels to assure that the necessary knowledge and tools are not lost A National Trauma Care System defines the components of a learning health system necessary to enable continued improvement in trauma care in both the civilian and the military sectors This report provides recommendations to ensure that lessons learned over the past decade from the military s experiences in Afghanistan and Iraq are sustained and built upon for future combat operations and translated into the U S civilian system

Continuous Quality Improvement in Trauma Care Florida. Office of Emergency Medical Services,1993

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