

## **Developing a Trauma Operational Plan Guideline**

Each designated trauma facility must develop a written Trauma Operational Plan. This plan provides an overview of the trauma program's organizational structure and reporting in the facility, as well as the scope of service, and trauma care capabilities, capacity, and resources integrated into the facility's trauma program. Please review the items listed below for inclusion in your trauma operational plan. Each of the areas listed should have a documented overview that defines and describes your facility's resources, capabilities available, and expectations to meet the trauma patient population's needs. If your facility does not provide a service that is listed, then you will not include that section.

An example, if you provide ICU care for the trauma patient population, you would include the number of ICU beds, the medical director's and manager's role in trauma care and the trauma performance improvement process. You would include the scope of care provided in the ICU for trauma, and the education and credentialing for the nurses. It is recommended that you use the trauma center verification and designation requirements for the ICU as a guide to ensure you address all pertinent issues for the ICU in the documented description of services available.

If your facility does not provide the service, then you skip that section or make a statement, "our facility does not provide ICU care or ICU resources for trauma care".

### **Trauma Scope of Service**

- Commitment

- Level of designation
- Description of the trauma program and trauma service to include the authority and oversight of the trauma program
- Overview of the roles of the trauma administrator, medical director, and program manager

### **Trauma Resources and Services**

- Trauma population evaluated and treated by the facility to include those that are routinely admitted and those routinely transferred out
- Detailed description of the scope of services available for the continuum of care for trauma patient population and description of the services they provide to include their capacity and capabilities, to include the orientation process, education and credentialing requirements, and access to continuing education (ED, Radiology, OR, PACU, ICU, General Units caring for trauma patients, Pediatric units)
- Support services capabilities, resources, and hours of service available for the trauma patient population to include Lab, Blood bank, Radiology, Interventional Radiology, Respiratory Therapy, Social Services, Chaplain Services, Security, Rehabilitation, and Psychosocial Services.
- Disaster management capabilities and how the trauma program is integrated into the all hazard disaster response
- SBIRT and abuse/neglect screening
- Injury Prevention resources, priorities, and capabilities
- Outreach education services, priorities, and capabilities

### **Trauma Patient Management Standards of Care**

- Overview for how the trauma protocols and standards of care for physicians and nursing are defined, approved, implemented, and monitored
- Trauma activation guidelines and transfer plan for patients being transferred out of the facility (include in an appendix)
- Trauma Standards of Care to include any Evidence-based Guidelines or Best-Practice Guidelines (include in an appendix)

- Diversion and bypass (include in appendix)
- Protocol for trauma patient transfers (include in an appendix)
- Protocol for EMS trauma patient follow-up (include in an appendix)
- Protocol for SBIRT Screening and Intervention (include in an appendix)
- Protocol for abuse screening and reporting (include in an appendix)
- Measures to ensure transfer facility follow-up occurs within thirty days
- Measures to provide EMS patient follow-up
- Processes to ensure all trauma designation requirements are monitored for compliance

### **Trauma Performance Improvement and Patient Safety Plan (TPIPS)**

- Provide a brief overview of how the TPIPS plan is developed, approved, and revised
- Provide an overview of how it is integrated into the hospital Quality and Safety Program
- Performance Improvement and Patient Safety Plan (include in appendix)
- Provide an overview of how the trauma registry data is captured, entered, validated, and submitted to the State, NTDB, and TQIP (if appropriate)
- Provide an overview of the management of the trauma registry, resources available, registrar orientation, education, training, and support for continuing education
- Trauma Registry Protocols (include in appendix)
- Benchmarking capabilities - TQIP integration (included in an appendix)
- Data Management – Confidentiality and HIPAA-up
- Brief overview of the purpose and responsibilities of the Trauma Operations (Systems) Committee to include the institutional reporting structure

- Brief overview of the Multidisciplinary Trauma Peer Review Committee to include the structure of case reviews and institutional reporting structure for this committee

### **Trauma Program Staffing**

- Trauma program manager, trauma PI nurse, injury prevention, outreach education, and registrar staffing model, to include their educational requirements and annual credentialing requirements
- Trauma surgeons, liaisons, medical staff, and advanced practice providers, the trauma credentialing process for participation in trauma, how it is tracked and monitored, and the requirements to participate in trauma care
- Process for daily patient rounding and continuum of care follow-through to monitor compliance to standards of care
- Process for integration with EMS and EMS protocol development and performance improvement
- Process for integration with regional advisory council and relevant committees
- Process for ensuring the facility is updated on activities of the Governor's EMS / Trauma Advisory Council and Committee

### **Research Support**

- Staff
- Resources

### **Succession Planning**

- Trauma Administrator
- Trauma Medical Director
- Trauma Program Manager
- Trauma Registrar