Top Reasons Why Hospital Fail

1. PI plan
	* Written plan with Indicators (EMS, ED, Inpatient)
	* Flow diagram PI process
	* Levels of Review (Primary, Secondary, Tertiary)

\*\*In depth review

 \*\*Physician involvement with written documentation, dates and signatures

* + Written documentation
1. Inpatient PI plan- concurrent rounding /tracking
	* Documentation of concurrent review
2. Mortality Review
	* Trauma Mortality Review or incorporation of trauma with hospital review
3. Multi-Disciplinary Meetings ( Case review and Systems)
	* Minimal Quarterly
	* Membership
	* Minutes with case review documentation
4. Loop Closure-Documentation
5. ATLS
	* Surgeons (Level III)
	* Non-ABEM boarded Emergency Department MD
	* Trauma Medical Director
	* Level IV facilities can be current in CALS
6. Trauma Surgeon response time- meet 80% for highest level of activation
7. Activating the Trauma Team based on minimal criteria
	* MD discretion does not mean don’t activate
8. Trauma Registry Not Current
9. Inclusion of minimal ACS/ State activation criteria