

The Trauma Audit & Research Network
Major Trauma Centre Dashboard: Common Data misses: Produced May 2020

Dashboard Measure	Top Data Misses	Review Suggestion
MTC 01a - Data Accreditation	999 Call details/CT details / Doctor grades and times	Pre-hospital system/handover ED documentation for non trauma calls Trauma booklet
MTC 01b - Case Ascertainment	Not applicable	
MTC 02 - BPT Compliance with level 1	BPT is combination of other measures	
MTC 03 - BPT Compliance with level 2	BPT is combination of other measures	
MTC 04a - Number of BOAST: Open lower limb long bone operations where both Orthopaedics + Plastics consultants are present at first debridement	Grade of Doctor missing or missing time. Incorrect selection of Operative procedure (non-BOAST)	Check hospital notes/operation notes/theatre system Need Gustilo grade to avoid incorrect selection Check admission/inpatient coding for procedure details
MTC 04b - MTCs deliver definitive cover of open fractures within BOAST 4 guidelines	Grade of Doctor missing or missing time. Incorrect selection of Operative procedure (non-BOAST)	Check hospital notes/operation notes/theatre system Check admission/inpatient coding for procedure details
MTC 05 - MTC's deliver surgical evacuation of a significant SDH / EDH <4 hours	Incorrect or missing times of incident ,arrival time. Incorrect Operative procedure selected	Check pre-hospital records/ambulance handover, ED system, trauma booklets Check hospital/operation notes Check admission/inpatient coding for procedure details
MTC 06 - MTC's deliver haemorrhage control in theatre / IR <60 mins for patients with an injury associated with significant bleeding which require acute intervention	Incorrect or missing times of incident ,arrival time. Incorrect Operative procedure selected	Check pre-hospital records/ambulance handover, ED system, trauma booklets Check hospital/operation notes/theatre system Check admission/inpatient coding for procedure details
MTC 07 - Proportion of patients with ISS>8 and above with trauma scan <30 minutes	Incorrect or missing imaging or scan details	Hospital imaging system: Helpful to have clear guidance about which dates & times to use (a local process that needs to be confirmed with imaging, depending on which imaging system is in place)
MTC 08 - Proportion of patients with ISS>15 and above with trauma scan <30 minutes	Incorrect or missing imaging or scan details	See MTC07
MTC 09 - Trauma team consists of an orthopaedic and general surgical consultant within 30 mins for patients with an injury associated with significant bleeding which require acute intervention	Grade and/or speciality of Doctor missing. Incorrect and missing times	Use: Trauma booklets, ED system; confirm grades via hospital directory; check with rota office. Caution: Hospital directory is not always accurate for Junior Doctors
MTC 10 – MTC's Reverse transfer <48 hrs after decision to transfer	Missing or incomplete transfer details	Confirm with TU: Check referral paperwork (easier if this an electronic system) or check with trauma coordinators, site/discharge team
MTC 11 - Documented tertiary survey (or consideration of for unfit patients) within 24 hours	New field	Check hospital notes. Check with team responsible for completing tertiary survey (confirm local processes - trauma coordinator, orthopaedics). Some Networks have implemented TTS booklets to capture this

MTC 12 - Orthogeriatrician review of frail patients within 72 hours of admission	Time of arrival missing. Time of CFS missing. Grade and Speciality of assessor	Check hospital/ED system Check admission/HCE/Local Trust paperwork Confirm local processes for where this information might be documented; points of contact for validating information. Some Networks have implemented TTS booklets to capture score and assessor detail.
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General Tips

- 1 - All interventions and investigations should always have a date /time recorded
- 2 - All attendants recorded should always have a date /time/Grade recorded
- 3 - Check all handover points for correct date and time entry
4. Check arrival dates and times are correct and make sense - e.g. Hospital arrive time not before incident
- 5 - All operations procedures need to be checked for completeness - dates/times and all grades and speciality's correctly logged
6. Check arrival dates and times are correct and make sense - e.g. Hospital arrive time not before incident



Imaging Tips

1. Times to x-ray: Take from Trauma booklet if there is one and from Imaging system if there isn't one.
2. Times to CT: Take from imaging system (not the trauma booklet). It is recommended that where possible don't take CT times from CRIS as these are not always accurate but times for X-rays can be taken from CRIS.
3. For the Provisional Report Time use first recorded time not the verified time.
4. The Report review time will usually be written in the report.
5. Remember: We only need to record reviews done by consultants.

How to use this guidance

Dashboards are produced for the qualifying Hospitals by TARN. These reports provide information and analysis information for the Hospitals to help them to manage and monitor performance.

As the Dashboard validation period is no longer operational, this guidance document has been prepared at the request of Network Managers, by reviewing and analysing the most previously requested submission amendments from across the MTC community over the previous quarters.

This document highlights some common data areas to review and potentially address **PRIOR TO DISPATCH TO TARN**, that may help to improve future Data quality and completeness of your hospitals TARN submissions.

It is not intended to replace training but as an aide to review the most common data quality misses and guide process improvement activity.

When reviewing the Dashboards you should also refer to the Dashboard support document available in the resources section of the TARN website.

Remember that the onus is on the Hospital to ensure the data is as accurate as possible prior to dispatch to TARN.