Systems Poster # 37

ELECTRONIC DATABASE TO TRACK AND VERIFY TRAUMA PANEL CME
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During the initial Level II American College of Surgeons (ACS) verification visit at Kaiser Permanente Vacaville Medical Center, a Criteria Deficiency (CD) for poor documentation of trauma Continued Medical Education (CME) was identified. As there are 73 members of the trauma panel required to obtain CME, the Trauma Department developed a systems-approach solution to prevent this CD from recurring, as well as, a policy and a mechanism to ensure 100% documentation of verifiable trauma CME. This policy and mechanism were supported by the Medical Executive Committee (MEC) and enforced by the Chief Medical Officer (CMO).

The trauma CME policy is updated annually by the Trauma Medical Director (TMD), vetted by the Trauma Performance Improvement Committee, and approved by the MEC. CME requirements are outlined for all members in this policy. Definitions for what is considered ‘verifiable CME’, resources to obtain CME, mechanisms to submit CME, and corrective actions for not meeting requirements are included in this document.

The development of a computer-based tracking process is a major system improvement highlighted in this presentation. Every member of the trauma panel has a folder stored on a network share in the enterprise server. Within each member’s folder, there is a “CME” folder and a “Credentials” folder. CME certificates are converted to PDF, emailed to the Trauma Department, reviewed and approved by the TMD, and filed into the appropriate annual subfolder within the CME folder. CME is tracked on an individual spreadsheet stored in each personal folder. The total CME is reported through a master spreadsheet that provides a dashboard view, including the status of each member on the trauma panel.

All required CME must be submitted to the Trauma Department 6 months prior to the next verification visit. Members who do not meet this requirement are removed from the trauma panel until the deficiency has been corrected. There are no repetitive warnings prior to removal from the trauma panel as a thorough review of all trauma CME is performed on a quarterly basis with each trauma liaison during the Trauma Performance Improvement Conference.

One hundred percent of required CME were submitted to the Trauma Department, reviewed, and approved by the TMD well in advance of the deadline. This represents a significant systems improvement from previous efforts to document and verify required CME.

Trauma centers could easily implement and benefit from this program as there is minimal setup involved. Working knowledge of Excel is required. The TMD must review every hour of CME to ensure accuracy and that it is verifiable; this should not be delegated to non-physicians. It is advisable to have an administrative assistant who will scan hard copies to be filed into the system. Once established other trauma centers will find this an invaluable tool to record their CME progress and assist with counseling of trauma panel members.