Inpatient trauma care relies on a multitude of interrelated surgical and medical specialties, diagnostic tests, therapeutic interventions, and allied health services to reduce mortality and morbidity from severe injuries. The complexity of this care can often overwhelm the ability of the primary medical team to ensure that the care is timely, well organized and efficient. A dedicated Trauma Case Manager (TCM) is critical to this trauma team. Having a dedicated TCM has been proposed as a way of ensuring that the myriad of details of care are neither forgotten nor duplicated. The dedicated TCM has been shown to effectively implement trauma clinical pathways on selected patient groups demonstrating improved pain management, skin integrity and physiotherapy. The TCM is a model of care where patient care is overseen and coordinated by a nurse with expertise in trauma. They visit the trauma patient each day, review patient progress, ensure optimal care and that the patient, nursing, and medical staff are all aware of the management plan. The TCM plays a critical role in maintaining quality care for the trauma patient. The TCM is aware of all institutional clinical guidelines and protocols developed and used for the trauma patient, and thus are able to act as a resource to those caring for the trauma patients. The TCM role incorporates providing monthly formal trauma related education to nursing throughout the hospital, as well as many hours of informal bedside teaching and assisting the Trauma Director with other educational projects. The TCM participates in the trauma team rounds focusing on multidisciplinary approach to trauma care and ensuring early referrals are made to the appropriate teams. The TCM spends time following up on results and services, education of staff and informing the trauma surgeons of any concerns regarding each patient. The TCM is also available to support staff and act as a liaison to the medial team and as a resource to staff.

The TCM’s impact on quality and cost is assessed through different measures. A monthly quality and PI dashboards are shared in our Monthly Trauma Committee. With a focus on quality measures such as hospital acquired infections, the TCM assist in the monitoring and management of lines. Another focus is on care for the elderly and providing a thorough cognitive assessment for patients with dementia. This is in an effort to ensure individualized care is provided to this patient population.

Cost effectiveness is measured by the following metrics: LOS (at all levels of care) and Discharge process. The TCM are involved in Injury Prevention and Community outreach events. Quality and patient satisfaction is measured by the following metrics: Patient satisfaction survey and RN satisfaction survey.

The multi-injured patient is complex and requires increased coordination and communication to ensure effective care. The TCM role is very unique and has a tremendous impact on outcomes. In addition, the TCM role assists greatly in identifying opportunities for improvement and staff education.