Governor's EMS and Trauma Advisory Council (GETEC)

Performance Improvement Metrics

GETAC Performance Improvement Metrics

- Well-defined measures that are feasible to collect important, actionable, and scientifically acceptable
- Measures effect:
 - Health outcome/clinical care across the system (prehospital/transfer/hospital, rural and urban)
 - 2) System performance or system efficiency/effectiveness
 - 3) Disparities of degree of equity
 - 4) Captures most priority conditions/diseases: Trauma, cardiac, stroke, Pediatric, maternal/perinatal
- Measures should be framed in the positive, to the extent possible
- May be measured at the patient facility, regional, or state level

GETAC Performance Improvement Metrics

- Evidence-based
- Definition
- Potential data sources
- Calculation
- Goal

GETAC Performance Improvement Metrics *Maternal – Proposed*

Transfer:

Inter-facility transfer to higher level of care by indication

GETAC Performance Improvement Metrics *Maternal – Proposed*

Hospital:

- SMM rate (CDC Definition)
- NTSV rate (JC Definition)

GETAC Performance Improvement Metrics Neonatal – Proposed

EMS:

- Neonatal Temps (EMS initial vital signs and on arrival to ED)
- Apgar Scores of the pre-hospital birth by EMS
- Mode of transport (mother's arms / strapped to stretcher)

GETAC Performance Improvement Metrics Neonatal – Proposed

ED/Hospital:

- ED visits in those < 28 days or < 44 weeks gestational age
- % of readmissions in <2 wks with Dx: Dehydration or Hyperbilirubinemia
- Early onset sepsis risk calculator for those > 35weeks GA