Trauma Registry

This section demonstrates compliance with WAC 246-976-420, 246-976-430, and 246-976-700 requirements for trauma registry case selection, data abstraction, data entry, data validation, and submission of trauma registry data to the Department of Health.

The designated trauma facility's responsibilities include:

Level: All

Section Item 1: ☐ All trauma care providers must protect the confidentiality of data in their possession and as it is transferred to the department.

Section Item 2: ☐ Has a person identified as responsible for coordination of trauma registry activities.

Level: I-III, Adult and Pediatric
☐ The registrar has completed the abbreviated injury scale (AIS) course within eighteen months of hire. If this requirement has not been completed, at the end of this section, submit a plan of correction with anticipated course completion date.

Section Item 3: ☐ Report data elements shown in WAC 246-976-430 for all patients defined in WAC 246-976-420.

Section Item 4: ☐ Report patients in a calendar quarter in a department-approved format by the end of the following quarter.

Section Item 5: ☐ All trauma care providers must correct and resubmit records which fail the department's validity tests described in WAC 246-976-420.

Section Item 6: ☐ You must send corrected records to the department within three months of notification.

Respond to the following items:

Insert required documents in the following pages. Label each with the corresponding Section number and Item number.

Response Item 1: Include the trauma registrar (TR) job description, including any training and certifications required (such as collector software, ICD10 coding, AIS coding, anatomy, medical terminology, other software for generating reports, TOPIC, CSTR, CAISS, etc.). This document should include a description of how the TR supports the trauma QI program.

Response Item 2: Include an organization chart showing to whom the TR reports.

Response Item 3: Check the functions that the TR performs:
  - ☐ Case finding
  - ☐ Data abstraction
  - ☐ Data entry
  - ☐ Data validation
  - ☐ Error correction
  - ☐ Record submission
  - ☐ Report writing
  - ☐ QI screening
  - ☐ QI data analysis
  - ☐ Other (limit response to 100 characters): _____

Response Item 4: ☐ Yes ☐ No Trauma registry records have been submitted to the department on-time over the past 12 months. (The standard is to report patients in a calendar quarter in a department-approved format by the end of the following quarter)

Response Item 5: The majority of trauma registry records are completed:
  - ☐ Concurrently (begun while patient is in hospital and finalized within seven days of discharge.)
  - ☐ Within one month of patient discharge
  - ☐ Within two months of patient discharge
  - ☐ Within three months of patient discharge
  - ☐ More than three months after patient discharge

Response Item 6: The trauma registry data is used:
  - ☐ To educate physicians, nurses, and staff
  - ☐ To conduct trauma quality improvement activities
  - ☐ To identify records for enhanced trauma fund payments for physicians
  - ☐ To identify records for enhanced trauma fund payments for the hospital
  - ☐ To prioritize injury prevention education
  - ☐ To support outreach and marketing
  - ☐ To measure resource utilization
  - ☐ To support clinical research
  - ☐ In financial analysis
  - ☐ For strategic planning
  - ☐ Other: (limit response to 100 characters) _____

Response Item 7: Provide a summary of the process that the program uses to validate its registry. Include any details regarding the percentage of records and data points reviewed.