

**Michigan Trauma Quality Improvement Program (MTQIP)
2015 Performance Index**

January 1, 2015 to December 31, 2015

Measure	Weight	Measure Description			Points Earned	PARTICIPATION (60%)
#1	10	Data Submission				
		On time and complete 3 of 3 times			10	
		On time and complete 2 of 3 times			5	
#2	20	Meeting Participation-Surgeon				
		Participated in 3 of 3 meetings			20	
		Participated in 2 of 3 meetings			10	
		Participated in 1 of 3 meetings			5	
#3	20	Meeting Participation-Trauma Program Manager or Registrar				
		Participated in 3 of 3 meetings			20	
		Participated in 2 of 3 meetings			10	
		Participated in 1 of 3 meetings			5	
#4	10	Surgeon Lead Presents MTQIP Reports at Hospital Board, Administrative and or Trauma QI Meetings (signed attestation required at year end)				
		Presented at 3 meetings			10	
		Presented at 2 meetings			8	
		Presented at 1 meeting			5	
#5	10					
		Data Accuracy	First Validation Visit Error Rate	Two or > Validation Visits Error Rate		
		5 Star Validation	0-4.5%	0-4.5%	10	
		4 Star Validation	4.6-5.5%	4.6-5.5%	8	
		3 Star Validation	5.6-8.0%	5.6-7.0%	5	
#6	10	Site Specific Quality Initiative Using MTQIP Data (Feb 2015-Feb 2016)				
		Developed and implemented with evidence of improvement			10	
		Developed and implemented with no evidence of improvement			5	
#7	10	Mean Ratio of Packed Red Blood Cells (PRBC) To Fresh Frozen Plasma (FFP) In Patients Transfused \geq5 Units RBC In First 4 Hrs (18 Months Data)				
		Tier 1: \leq 1.5			10	
		Tier 2: 1.6-2.0			10	
		Tier 3: 2.1-2.5			5	
#8	10	Admitted Patients (Trauma Service-Cohort 2) With Initiation Of Venous Thromboembolism (VTE) Prophylaxis <48 Hours After Arrival (18 Months Data)				
		>50%			10	
		\geq 40%			5	
<40%			0			
Total (Max Points) =				100	PERFORMANCE (40%)	