

**Michigan Trauma Quality Improvement Program (MTQIP)  
2016 Performance Index**

January 1, 2016 to December 31, 2016

Measure	Weight	Measure Description			Points	
#1	10	<b>Data Submission (Partial/Incomplete Submissions No Points)</b>				<b>PARTICIPATION (50%)</b>
		On time and complete 3 of 3 times			10	
		On time and complete 2 of 3 times			5	
		On time and complete 1 of 3 times			0	
#2	20	<b>Meeting Participation-Surgeon</b>				
		Participated in 3 of 3 meetings			20	
		Participated in 2 of 3 meetings			10	
		Participated in 1 of 3 meetings			5	
#3	15	<b>Meeting Participation-Clinical Reviewer or Program Manager</b>				
		Participated in 3 of 3 meetings			15	
		Participated in 2 of 3 meetings			10	
		Participated in 1 of 3 meetings			5	
#4	5	<b>Meeting Participation-Registrars (All Registrars Preferred)</b>				
		At least 1 Registrar participated in the annual Registrar specific meeting			5	
#5	10	<b>Data Accuracy</b>				
		<b>First Validation Visit Error Rate</b>				
		<b>Two or &gt; Validation Visits Error Rate</b>				
		5 Star Validation			10	
		4 Star Validation			8	
		3 Star Validation			5	
2 Star Validation			3			
1 Star Validation			0			
#6	10	<b>Site Specific Quality Initiative (Jan-Dec 2016)</b>				
		Developed and implemented with evidence of improvement			10	
		Developed and implemented with no evidence of improvement			5	
#7	10	<b>Mean Ratio of Red Blood Cells to Plasma in Patients Transfused <math>\geq 5</math> Units In First 4 Hrs (1/1/15 – 6/30/16, 18 Months Data)</b>				
		Tier 1: $\leq 1.5$			10	
		Tier 2: 1.6-2.0			10	
		Tier 3: 2.1-2.5			5	
#8	10	<b>Collaborative Wide Initiative: Inferior Vena Cava Filter Use</b>				
		$\leq 1.5$			10	
		$> 1.5$			0	
#9	10	<b>VENOUS THROMBOEMBOLISM (VTE) Prophylaxis Initiated &lt;48 Hrs After Arrival (Trauma Service Admissions) (1/1/15 – 6/30/16, 18 Months Data)</b>				
		$>50\%$			10	
		$\geq 40\%$			5	
		$<40\%$			0	
Total (Max Points) =				100	<b>PERFORMANCE (50%)</b>	