

Illinois EMS for Children Quality Improvement and Indicator Monitoring Report

Title of Project: **Pediatric Head Injury**
 Date of Report: May 9, 2008
 EMSC Region: Region 7
 Facility: All Participating Facilities in the Regional CQI Effort

1. Opportunity / Problem Identification (PLAN)

- Opportunity: Assessment/reassessment of pediatric patients presenting with head injury in the ED
- Problem: Inadequate recording of history of loss of consciousness (81%), GCS on initial assessment (40%), and discharge instructions provided (78%)
- Desired Outcome: improvements in assessment and reassessment

2. Most Likely Causes

- Lack of staff awareness of expectations
- Inadequate documentation
- Lack of existing guidelines, protocols
- Insufficient knowledge re: pediatric head injury assessment/reassessment

3. Solution(s) Implemented (DO)

- Set expectations and follow-up with staff
- Educational presentations
- Reminder materials
- Development/revision of head injury guidelines

4. Data Elements Collected for Evaluation

- Age
- Gender
- History of LOC Documented
- GCS on Initial Assessment/Discharge
- Discharge Instructions Provided
- 30 charts reviewed per quarter of pediatric patients with head injury

5. Results and Data Analysis (STUDY)

- History of LOC Documented: 8% improvement
- GCS on Initial Assessment: 28% improvement
- Discharge Instructions Provided: 9% improvement

6. Conclusions and Recommendations (ACT)

- Conclusion: The emergency departments in Illinois EMSC Region 7 have shown progress toward meeting the desired outcomes for assessment/reassessment of children presenting with head injury. The improvements follow system modifications and educational efforts.
- Recommendations: Continue on-going efforts to maintain and promote awareness of appropriate pediatric head injury assessment and reassessment. Ongoing data analysis.

Region 7 EMSC CQI – Pediatric Head Injury
Regional Totals for 2007
 Note: Error bars represent 95% confidence intervals.

