Appendix I HEMS Trigger Tool Methodology

HEMSTT Methodology

CQI Database Development: Aug 2016 - Present
- Documentation Clerk Prepares Data
- PCR's reviewed independently by 2 Reviewers (on each Team)
- Data Collection Sheet
- Data Consensus Sheet
- HEMSTT Data Collection Process (See Database Development)
- Reviewer 1 & 2 meet to compare findings & discuss
- Consensus agreement on all cases?
- Yes
- No
- Reviewer 3 finalizes cases with disagreement
- Data Summary Sheet
- Generate Summary Report
- Population 100% LifeFlight Cases
- Apply Inclusion Exclusion Criteria
- Code PCR's Unique Trigger No.
- Switch PCR Sample for each Team
- 21 months Retrospective Data Analysis of existing database
- Calculate Outcome Measures
- Cohens Kappa for Inter-rater reliability
- Plot (SPC) Control U-Chart
- Multivariate Analysis
- Publish Measures

HEMSTT Measures:
- Trigger Rate per Patient Encounters.
- AE Rate per 100 Patient Encounters.
- Harm Rate per 100 Patient Encounters.

Special Note:
This study is limited to retrospective data analysis of an existing database. No prospective data collection will be undertaken for the purpose of this study. The Primary Investigator will receive access to a Summary Report of 21 months retrospective data 1st Nov 2016 - 31st July 2018.