Michigan Annual Regional Trauma Report

Region 7

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2015

OVERVIEW

The Region 7 Trauma Network was officially recognized by the Michigan Department of Health and Human Services (MDHHS) in August 2014. As required by statewide administrative rules, this annual report documents and highlights Region 7 trauma system development during 2015.

According to the 2013 census, Region 7 has a modest population of 450,000. However, the Region experiences more than 12 million visitor-days per year due to a wealth of natural resources and a thriving ecotourism-based economy. The region, covering 19 counties, has 11 hospitals, 1 freestanding emergency department, 7 Medical Control Authorities (MCAs), 108 Emergency Medical Services (EMS) agencies, and 6 local health departments.

The focus of regional activity during 2015 was threefold. First, and foremost, the region focused on maintaining inclusive representation of all partners on each of the regional boards and committees. Second, the region continued to address each of the unmet objectives in the regional work plan. Lastly, the region's hospitals were, to varying degrees, focused on the inaugural phase of verification and designation as trauma facilities. The regional partners were successful in making a positive impact on each of the aforementioned aspects of trauma system development.

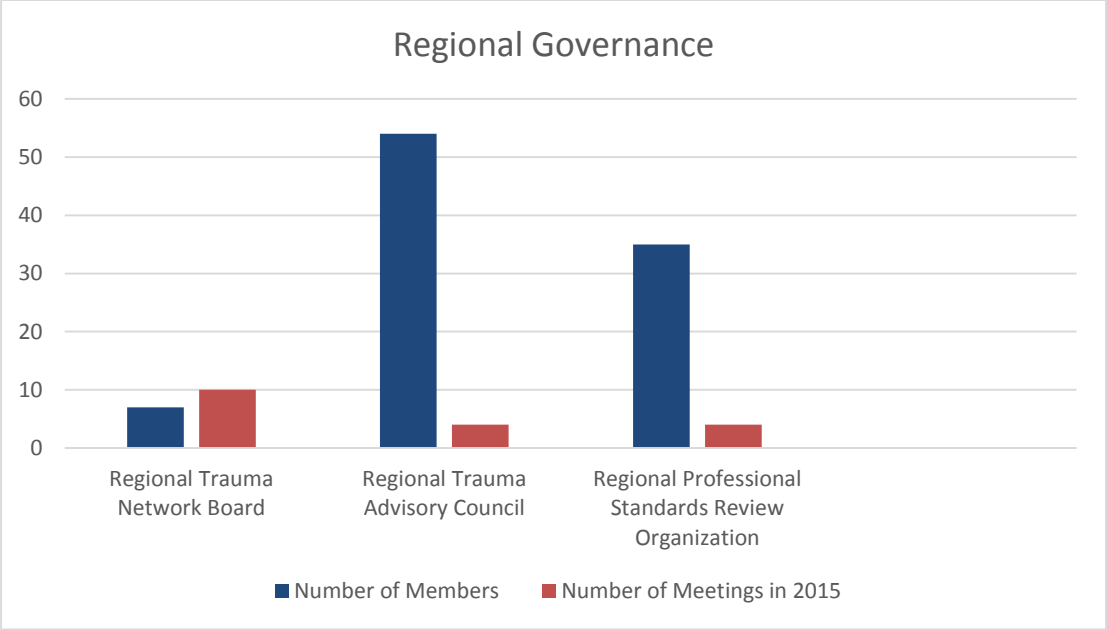
GOVERNANCE

Region 7 continues to have strong and committed participation from all regional partners. State level oversight is provided by the Michigan Department of Health and Human Services, Bureau of EMS, Trauma and Preparedness (BETP), with the advice of the Emergency Medical Services Coordination Committee (EMSCC) and the Statewide Trauma Advisory Subcommittee (STAC).

Bimonthly, the region presented a report of activities to STAC which provided an opportunity for the membership to provide comment and guidance on regional matters. The Quality Assurance Task Force (QATF) was also instrumental in providing guidance on the content and the development of the first regional EMS trauma protocol.

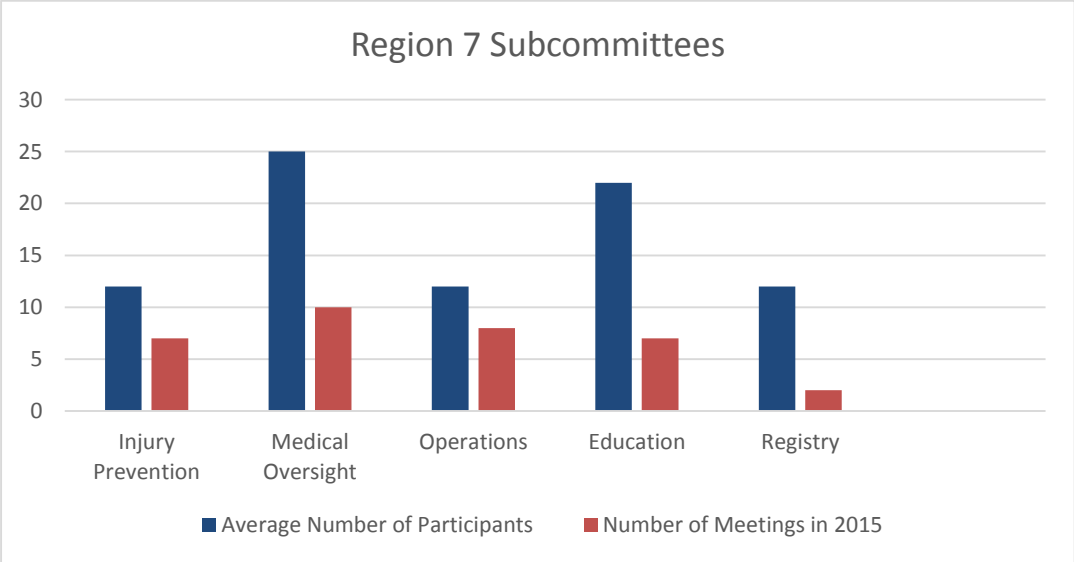
Regional governance, structure, and organization was derived from administrative rules and described in the Region 7 trauma network application submitted in 2014. Each MCA in the region is allotted one seat on the Regional Trauma Network (RTN) board. Unique to Region 7, the membership of the RTN consists solely of full-time hospital administrators. This board was instrumental in ensuring inclusive membership in each of the region's trauma network committees.

The following chart illustrates member participation in the three Region 7 governing bodies: the RTN, Regional Trauma Advisory Committee (RTAC), and the Regional Professional Standards Review Organization (RPSRO).



2015 REGIONAL NETWORK DEVELOPMENT PROGRESS

Region 7 partners actively supported and furthered the regional work plan elements as evidenced by their participation in the region's subcommittees.



One notable work plan accomplishment was the development and subsequent approval by the QATF of the first EMS "Destination and Bypass Protocol" based on the "Guidelines for Field Triage of Injured Patients", (Centers for Disease Control, 2011). Another work plan objective completed in 2015 was the adoption of a regional transfer guideline for hospitals based on criteria as outlined in the "Resources for Optimal Care of the Injured Patient", (Committee on Trauma, American College of Surgeons, 2014). These guidelines, as with all regional policies and procedures, will be monitored through regional quality improvement processes and periodically amended as appropriate. Also, the region established recommended standards for trauma focused continuing education for physicians, mid-level providers, nurses, and EMS personnel.

Region 7 has focused efforts on supporting trauma program development and facility verification and designation. Of the 11 hospitals in the region, only 1 is currently verified and designated as a trauma facility (see table below). In 2015, the remaining ten hospitals began the process of soliciting letters of intent stating the level of trauma facility designation they will seek, appointing trauma program staff, and completing the first draft of their State of Michigan "Pre-Review Questionnaire". In addition, detailed timelines were shared with hospital administration and support groups for trauma program managers and registrars from hospitals seeking Level III and IV verification and designation were organized.

Facility	Designated	Proposed or Current Level of Designation
Alpena Regional Medical Center	No	III*
Kalkaska Memorial Hospital	No	IV*
Mackinac Straights Hospital	No	IV*
McLaren Northern Michigan	No	II*
Munson Healthcare Cadillac Hospital	No	IV*
Munson Healthcare Charlevoix Hospital	No	III*
Munson Healthcare Grayling Hospital	No	IV*
Munson Medical Center	Yes	II
Otsego Memorial Hospital	No	IV*
Paul Oliver Memorial Hospital	No	IV*
West Shore Medical Center	No	IV*

**Provisional status is granted by a local Medical Control Authority to a hospital actively engaged in the trauma verification process.*

SUMMARY

In conclusion, 2015 was a busy and productive year for the region. Region 7 partners made a considerable contribution to the trauma system through participation in the State of Michigan "Trauma Band Pilot Project" which was designed to demonstrate deterministic linkages through the use of a unique identifier. Several Region 7 EMS agencies also agreed to coordinate a series of Prehospital Trauma Life Support (PHTLS) courses, funded by the BETP, Trauma Section. These trainings were also intended to encourage the development of a sustainable bank of instructors for subsequent PHTLS courses. The year culminated in over 75 persons attending the region's third biennial trauma summit in December which included, in addition to a host of speakers, breakout sessions where the region's 2016 work plan goals and objectives were refined.

Looking forward, a major initiative for 2016 will be the preparation of the region's hospitals for trauma center verification and designation. Preparation activities will include identifying the need for, and the provision of, technical assistance to the trauma program managers and trauma registrars. A second major initiative will focus on the collection of patient trauma data. Another major initiative will be to complete at least 90% of the regional work plan objectives by year end. This will include the adoption of a regional auto-launch protocol. Last, but not least, the region will continue its efforts to strengthen partnerships with dispatch centers, emergency management, and the Region 7 Healthcare Coalition.