



2018 MICHIGAN TRAUMA SYSTEM DEVELOPMENT PROJECT *PARTICIPATION FORM*

PROJECT INFORMATION

The Bureau of EMS, Trauma & Preparedness (BETP) is engaged in trauma system development. This statute driven endeavor is committed to the concept of a regionalized, coordinated and accountable system of care built to ensure injured Michigan residents get the right resources at the right time.

BETP is committed to supporting partners and stakeholders to enhance their efforts in system building. BETP is continuing to support initiatives that fit into the following trauma system building categories: **Injury Prevention, Trauma Education, Performance Improvement, and Trauma Infrastructure**. Partners are encouraged to look at the gaps in programming, resources, and data to determine where they should more finely focus their system building efforts.

This one time funding is dedicated to supporting trauma facilities and initiatives that meet the specific needs of the region, community, agency or facility as they build and support the trauma system. Acute care facilities that have been verified or designated, or are in process, may submit this **Participation Form** to their Regional Medical Control Authority Network (RMCAN), the project fiduciary requesting funding. Qualified facilities will receive reimbursement up to \$8,000 for their program/project.

Contact Information

Organization Name:

Street Address:

City:

State:

Zip code:

Project Contact

Name:

Title:

Phone number:

Email Address:

Project Description

Project Name:

Category:

- Infrastructure
- Injury Prevention

- Performance Improvement
- Trauma Education

Brief Description of Project including identified gaps, need, planned activities, expected outcomes and impact, if project is expansion or continuation of previous project from 2017 please describe:

Funding Request:

Total Program Budget:

Requested amount:

Region(s) impacted (circle): Region 1 Region 2S Region 2N Region 3 Region 5 Region 6 Region 7 Region 8
 Regional Trauma Coordinator sent copy of Participation request: _____

RMCAN fiduciary (RMCAN-f) Contacts

| Name | RMCAN | Region | Email |
|---|---|---------|--|
| Michelle Harper, Manager of Operations | Tri-County | 1 | tcemca@iserv.net |
| Bonnie Kincaid, Executive Director | Oakland County MCA | 2 North | bonnie@ocmca.org |
| Robert Miljan, Executive Director | Wayne County – HEMS | 2 South | mail@hems.org |
| Eric Snidersich, Assistant Director EMS/Saginaw-Tuscola MCA | Saginaw Valley EMS | 3 | eric.snidersich@cmich.edu |
| Dena Smith, Director of EMS | Allegan/Kalamazoo MCA | 5 | dena.smith@med.wmich.edu |
| Sherry Veurink-Balicki, Kent County Emergency Medical Services Board of Directors | KCEMS | 6 | veurinks@mercyhealth.com |
| West Michigan Regional Medical Consortium | West Michigan Regional Medical Consortium | 7 | amandac@wmrmc.org |

Project Contacts:

The Regional Trauma Coordinators will be partnering with the RMCAN's to assist in coordination and will be available to provide technical assistance.

| Name | Title | Email | Phone |
|------------------|---------------------------------|--|----------------|
| Eileen Worden | State Trauma Program Manager | wordene@michigan.gov | (517) 241-3020 |
| Theresa Jenkins | Region 1 Trauma Coordinator | jenkinst4@michigan.gov | (517) 243-8507 |
| Theresa Jenkins | Region 2N Trauma Coordinator | jenkinst4@michigan.gov | (517) 243-8507 |
| Eileen Worden | Region 2S Trauma Coordinator | wordene@michigan.gov | (517) 241-3020 |
| Bob Loiselle | Region 3 Trauma Coordinator | loiseller@michigan.gov | (517) 898-0165 |
| Debra Wiseman | Region 5 Trauma Coordinator | wisemand1@michigan.gov | (517) 897-3334 |
| Helen Berghoef | Region 6 Trauma Coordinator | berghoefh@michigan.gov | (517) 897-5371 |
| Deb Detro-Fisher | Region 7 Trauma Coordinator | detro-fisherd@michigan.gov | (517) 243-8872 |
| Lyn Nelson | Region 8 Trauma Coordinator | nelsonl7@michigan.gov | (517) 243-8975 |
| Emily Bergquist | MCA Coordinator | bergquiste@michigan.gov | (517) 335-0067 |
| Kathy Wahl | Director, EMS & Trauma Division | wahlk@michigan.gov | (517) 335-8489 |

FOR RMCANS USE ONLY

FORMS CHECKLIST

- Participation form
- Budget sheet
- Final Invoice
- Final Report

Date Submitted
