# MICHIGAN REGIONAL TRAUMA REPORT 2nd QUARTER 2021

## Region 8

**Statutory Reference:** R325.132 Rule 8 (3) (a) At least quarterly, a region shall submit evidence of ongoing activity, such as meeting notices, minutes to the department.

# **Resource Update: Facility Designation Status:**

Facility Name	Designated	Level of Designation
Aspirus Iron River	Yes	IV
Aspirus Ironwood	Yes	IV
Aspirus Keweenaw	Yes	III
Aspirus Ontonagon	Yes	IV
Baraga Memorial	Yes	IV
Dickinson County	No	Provisional
Helen Newberry Joy	Yes	IV
Munising Memorial	No	Provisional
OSF St. Francis	Yes	IV
Schoolcraft	No	Provisional
UP Health System Bell	No	Provisional
UP Health System Marquette	Yes	II
UP Health System Portage	Yes	III
War Memorial	Yes	Ш

### **Work Plan Objective Progress and Highlights:**

Complete sections that have progress within the quarter.

#### **Injury Prevention**

**Objective:** By December 2023, the region will support the Michigan Trauma Coalition's trauma system messaging campaign currently in development. With a focus on the messages applicable throughout the region.

**Progress:** The R8TRAUMA Facebook page is the conduit for Region 8 to communicate information from the Michigan Trauma Coalition. Updates are routinely made its Facebook page. All other objectives have been met.

#### **Communications**

**Objective:** Indicator(s): N/A 105.7 By January 2021, hospitals and MCAs within Region 8 will be surveyed to determine the following: 1. How they inform the broad medical community about trauma, 2. Who they inform, 3. When they inform, 4. What is inclusionary to this process and what is disseminated. Survey information will be shared with the Regional Trauma Network. Regional Trauma shall continue to utilize its Facebook page throughout this three-year plan for topics such as injury prevention initiatives, educational notices, national literature, and publication sharing.

**Progress:** This survey was collected from hospital trauma programs and MCAs will be queried next. The results from the trauma programs appear to describe two distinct interpretations of the above listed questions. One is how a trauma program informs the community of its existence, and the other is assuring the broad medical community is aware of the trauma program being the clinical content experts in their area. Predominately, the answers gave the impression of generalized information of why a program exists using websites, social media, and newsletters. The intent of this objective was to look at what is the current situation and then determine routes of development. Those routes might include building bridges with a variety of medical professionals regarding trauma care. The survey results are attached to this report.

#### Infrastructure

**Objective:** 325.132 (3)(c)(ii)(E) 302.1 By January 2021, the hospital trauma program managers and each MCA contact person shall participate in a survey conducted by the Regional Trauma Coordinator on how they assure medical directors collaborate on EMS trauma protocols.

**Progress:** Surveyed the trauma program managers with the following results presented to the RTN in April. The intent is to shore this process up by a regional benchmark rather than its varying conceptual process at each hospital and each MCA that is in existence now. Results are attached to this report.

#### **Regional Performance Improvement**

**Objective:** 325.135 (6) 302.5 Through December 2023, the RPSRO, working with the Region 8 MCA Network, will utilize data reports generated by the State of Michigan, ImageTrend® and Biospatial to provide medical oversight of EMS trauma triage, communications, treatment and transport of trauma patients.

**Progress:** A data project proposal was submitted to the State Trauma office. This project entails the MCAs and the Regional Trauma Coordinator utilizing Report Writer reports that address the EMS patient

reports' trauma data elements by their completeness and accuracy with delineations by MCA and EMS Agency. The MCAs do not have dedicated staff to run these reports and analyze them in Region 8. Thus, this is a collaborative project supported by the MCAs and staffed by the Regional Trauma Coordinator.

#### **Continuum of Care**

Objective: 325.132 (3) (C)(ii) (F) 308.1 By April 2021, the considerations for rehabilitation transfer shall be collected from the trauma program managers within the region for review by the RTAC.

Progress: This has not been completed.

#### **Trauma Education**

**Objective:** Throughout 2020, the RTN will encourage hospitals and MCAs to identify their regularly offered trauma education programs. The RTAC will consolidate a master calendar of scheduled trauma education programs by January of 2021 based on information from hospitals, MCAs, and share/exchange lists with Region 7. The master calendar will include programs open to out-of-health-system employees and may be out-of-region and out-of-state.

**Progress:** Trauma education is occurring in the region and was bolstered for summer opportunities by many successful mini grants for TNCC, PHTLS, Rural TOPIC, and out-of-state ATLS. Multiple attempts have been made to have hospitals and EMS agencies contact the R8 Trauma Coordinator so she can keep a master calendar, but that has not been successful yet.

#### Other relevant information:

Nine of the fourteen (14) hospital trauma programs in Region 8 have experienced trauma program manager and/or trauma medical director changes since January of 2020. The highest-level trauma program in Region 8 is a Level II facility and they have experienced changes in staffing and have not been fully staffed since the fall of 2019. The R8 Trauma Coordinator has concentrated on assuring trauma programs have the resources they need to learn what a trauma program is and be able to sustain the program. Revision of the R8MCAN.org trauma webpage to act as the first step of an orientation for new Regional Trauma Advisory Committee and Regional Trauma Network Board members. Additional verbiage was also added to the webpage for new trauma program managers and trauma medical directors. Numerous trauma education sessions were funded by the mini grants, as was a large Camp 911 for young people to learn bystander care. One of the EMS agencies in R8 received a mini grant for a documentation improvement session by Josh Legler that will directly relate to more accuracy in EMS patient reports. A few pieces of trauma equipment such as fluid warmers, pelvic binders, junctional tourniquets, vacuum mattresses, etc. were also funded.

## **Administrative Rule Requirements:**

$oxtimes$ Yes $\Box$ No	Quarterly meeting minutes on shared drive.
□Yes ⊠ No	All MCA's participating in the RTN. Dickinson County was reminded to please
	have their Executive Board meet and identify a representative for the Board.
$oxtimes$ Yes $\Box$ No	Performance improvement ongoing.



Informing Broad Medical Community Survey January 2021.pdf



Trauma and MCA Medical Director Collaboration Survey April 2021.pdf