

# MICHIGAN TRAUMA SYSTEM

## BACKGROUND

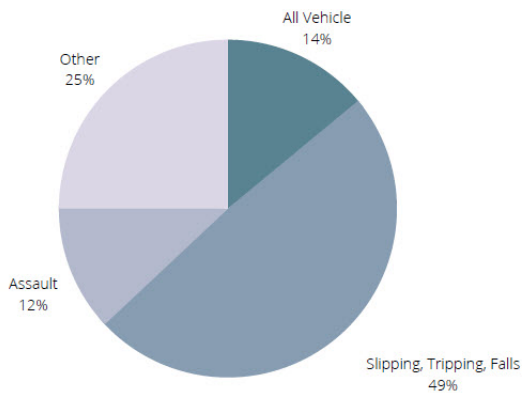
Over the past nine years, Michigan has operationalized a regionally coordinated and accountable system of care to address time dependent injuries. The Trauma System comprehensively provides optimal care for injured patients while incorporating a broad spectrum of services from injury prevention to rehabilitation. Outreach, education, data collection, performance improvement and collaboration are just a few of a trauma system’s components.

## IMPACT

A fully functioning trauma system ensures that injured Michigan residents and visitors get the right care, at the right time and the right place, in order to save lives and return those injured to a productive life.

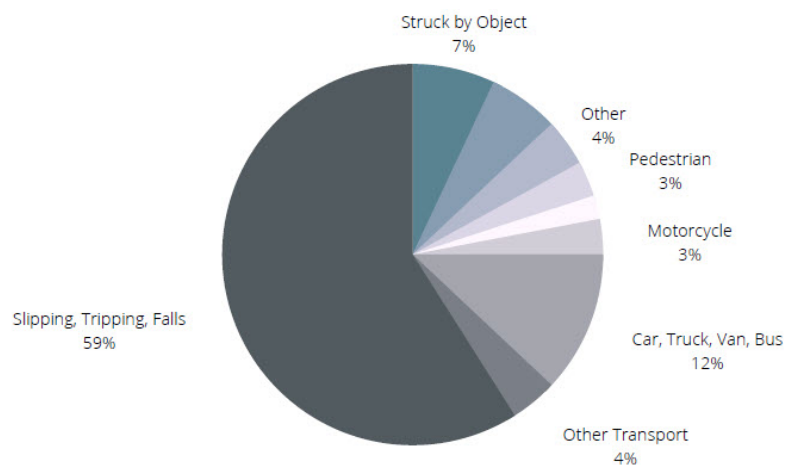


FATALITIES BY INJURY CAUSE CODE<sup>2</sup>



Unintentional injury is the 4th leading cause of death in Michigan and accidents are the leading cause of death age 1-49.<sup>1</sup>

EXTERNAL INJURY CAUSE CODES<sup>2</sup>



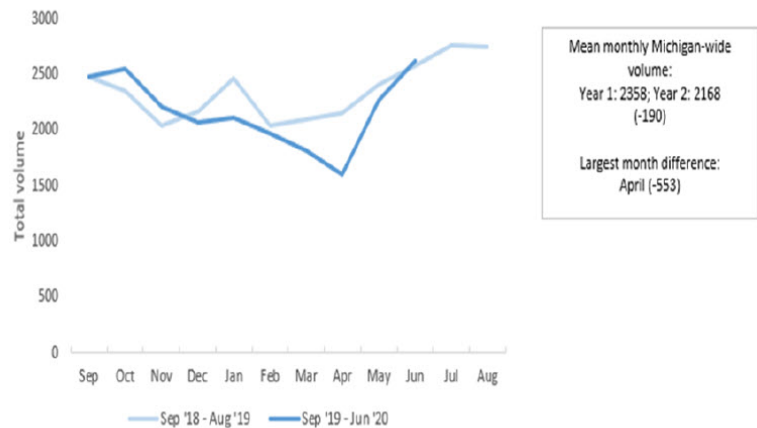
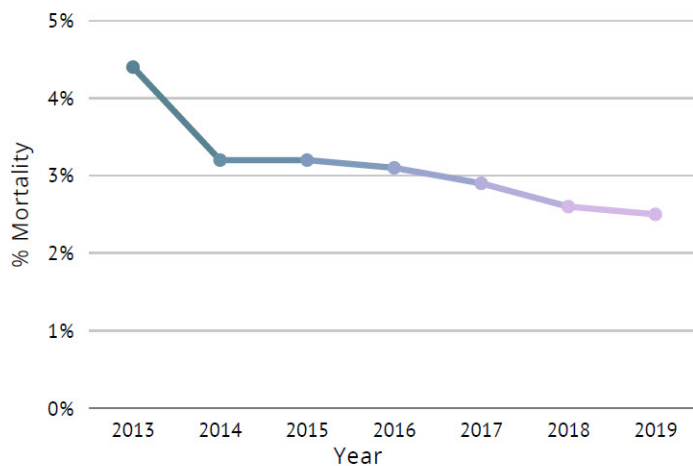
Monitoring and tracking injury patterns drives injury prevention programs decreasing costly injuries.

## STAKEHOLDER COMMITMENT IS IMPACTFUL

- The annual cost to stay ready to care for the injured in a Level II trauma facility is \$2,333,113.00. There are 25 Level II trauma facilities in Michigan, investing more than 58 million dollars annually in trauma care.<sup>3</sup>
- 129,683 trauma incidents were added to the state trauma registry (October 2018—September 2020).
- More than 600 physicians, nurses, EMS providers, injury prevention specialists and others have committed time outside of clinical care to their Regional Trauma Networks and trauma system operations.
- More than 100 system building grants have been awarded to partners and stakeholders, supporting education, injury prevention, best practices and cutting edge initiatives.

## THE TRAUMA SYSTEM IS MAKING A DIFFERENCE FOR MICHIGAN RESIDENTS AND VISITORS

Hospital trauma incident volume decreased January through April 2020 related in part to the COVID-19 response, then resumed normal trends.<sup>4</sup>



The percent of Michigan residents who died from their injuries has been decreasing since the trauma system was operationalized.<sup>4</sup>

## THE IMPACT OF A REDUCTION TO THE TRAUMA SYSTEM FUNDING IN MICHIGAN

- The state would not designate trauma facilities undermining the ability of EMS, residents, and visitors to find the closest trauma ready facility.
- States with poor Trauma Center access have more pre-hospital deaths contributing to higher overall injury mortality.<sup>5</sup>
- The system could not effectively and expeditiously care for victims of crime as data indicates these incidents are increasing. There were a total of 11,084 EMS runs for assaults last year, of those intimate partner violence rose from 9,507 EMS runs to 10,507 in one year.<sup>6</sup>
- Assaults make up 12% of the fatalities in the state trauma registry.<sup>2</sup>
- Critically injured patients who need specialized care will not be transferred in a systematically coordinated process, thereby creating gaps, inefficiencies, and potentially poor outcomes.

## REFERENCES

1. 2018 Geocoded Michigan Death Certificate Registry. Division for Vital Records & Health Statistics, Michigan Department of Health & Human Services
2. Michigan Trauma Registry, October 2019—September 2020. Note: registry data includes patients injured, admitted, transferred or died.
3. Ashley DW, Mullins Rf et.al. (2017). What Are the Costs of Trauma Center Readiness? Defining and Standardizing Readiness Costs for Trauma Center Statewide AmSurg, 2017 Sept;83(9):979-990 <https://www.ncbi.nlm.gov/pubmed/28958273>
4. Michigan Trauma Quality Improvement Program State of Michigan Trauma System Report Statistical Summary, January 2020.
5. Z. Hashmi, M Jarman et.al. (2018). Access Delayed is Access Denied: Relationship between Access to Trauma Center Care and Prehospital Death. Journal of the American College of Surgeons, 228, 9-20. <https://doi.org/10.1016/j.jamcollsurg.2018.09.015>
6. Michigan EMS Information System v 3.4 (February 12, 2021)