

MICHIGAN REGIONAL TRAUMA REPORT

1st QUARTER 2020-2021

Region 2S

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: (Provisional = Prov)

Facility Name	Designated	Level of Designation	Provisional
Beaumont Grosse Pointe Hospital	Yes	III	N/A
Beaumont Dearborn Hospital	Yes	II	N/A
Beaumont Trenton Hospital	Yes	II	N/A
Beaumont Taylor Hospital	Yes	IV	N/A
Beaumont Wayne Hospital	Yes	III	N/A
C.S. Mott Children's Hospital	Yes	I	N/A
Children's Hospital of Michigan	Yes	I	N/A
Detroit Receiving Hospital	Yes	I	N/A
Garden City Hospital	No	III	N/A
Henry Ford Hospital	Yes	I	N/A
Henry Ford Wyandotte Hospital	Yes	III	N/A
ProMedica Monroe Regional Hospital	Yes	III	N/A
Sinai-Grace Hospital	Yes	II	N/A
St. John Hospital-Ascension Medical Center	Yes	I	N/A
St. John Hospital- Ascension Medical Center Pediatric	Yes	II	N/A
St. Joseph Mercy Hospital – Ann Arbor	Yes	I	N/A

St. Joseph Mercy Chelsea Hospital	No	IV	Prov
St. Mary's of Michigan Hospital	Yes	II	N/A
University of Michigan Medical Center	Yes	I	N/A

Work Plan Objective Progress and Highlights:

complete sections that have progress within the quarter

Injury Prevention

Indicator(s): 203.5: The RTN has developed a written injury prevention plan. The injury prevention plan is data driven and targeted programs are developed based upon injury risk areas. Specific goals with measurable objectives are incorporated into the injury prevention plan.

Progress: The Regional Trauma Injury Prevention Committee has requested all Region 2 South hospitals to provide top three injuries from their trauma registry. This was due by Feb 6th, 2020. This information will be used by the committee to target and prioritize injury prevention programs that align with regional injury patterns.

Communications

Indicator(s): 302.9: There is a procedure for communications among medical facilities when arranging for inter-facility transfer including contingencies for radio or telephone system failure.

Progress: The Healthcare coalition has a monthly exercise on the redundant radio communications. Cell phone, 800-megahertz radio, and satellite radio are used. The RTN has establish a designated member to attend the healthcare coalition. This individual will keep the RTN informed about communication exercises and drills.

Infrastructure

Indicator(s): 303.1: The Regional trauma plan has clearly defined the roles, resources and responsibilities of all acute care facilities treating trauma, and of facilities that provide care to specialty populations such as burn, pediatrics, global injuries and reimplantation.

Progress: The RPSRO review all double transfers of patients in the Region to ensure the patient arrives at the correct facility. A letter will be developed and sent to the RPSRO in that referring region if a system issue or care issue has been identified.

Regional Performance Improvement

Indicator(s): 303.4: When injured patients arrive at a medical facility that cannot provide the appropriate level of definite care, there is an organized and regularly monitored system to ensure the patients are expeditiously transferred to the appropriate system defined trauma facility.

Progress: The RPSRO has developed a real time and retrospective data tracking process to identify and evacuate multiple transfers of patients. Pediatrics, Orthopedics, Burns and Global eye injuries continue to be reviewed with multiple transfers.

Continuum of Care

R2S Trauma Coordinator: Denise Kapnick

January 1, 2020 to March 31, 2020

Indicator(s): 308.1: The Regional work plan addresses the integration and participation of rehabilitation services within the continuum of care for the trauma patients.

Progress: The Regional Trauma Coordinator started to develop a list of rehabilitation centers that are used routinely by Region 2 South Facility

Trauma Education

Indicator(s): 310.3,4,6: The regional trauma network establishes and ensures that appropriate levels of EMS, nursing and physician trauma training courses are provided on a regular basis.

Progress: The regional trauma education plan has been updated, distributed on Jan 24th, 2020 and recommended adoption. The Education Subcommittee has compiled a list of recommended standards for trauma center personnel education. As an unfunded mandate, the region cannot require training to this level. The new education plan will be sent to RTAC for approval.

Other relevant activities information:

Monroe County has a new MCA: Dr. Daniel Kemple. Sherri Minchlla is the new Trauma Program Manager at Henry Ford Main. ATLS classes are being held at Beaumont Trenton on the following dates: March 5th & 6th, May 28th & 29th, September 24th & 25th, November 19th & 20th. Actively working on the new trauma application and objectives. STB is being scheduled for DMTB in Detroit area and Allen Park school.

Administrative Rule Requirements:

- Yes - Quarterly meeting minutes on shared drive.
- Yes - All MCA's participating in the RTN.
- Yes - Performance improvement ongoing.