

# MICHIGAN REGIONAL TRAUMA REPORT

## 1st QUARTER 2020

### Region 6

**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
Holland Hospital	Yes	III	N/A
McClaren Central Michigan Community Hospital	Yes	IV	N/A
Mercy Health Partners, Hackley Hospital	Yes	II	N/A
Mercy Health Partners, Lakeshore Hospital	Yes	IV	N/A
Mercy Health Partners, Mercy Hospital	Yes	IV	N/A
Mercy Health Saint Mary's Hospital	Yes	II	N/A
Metro Health Hospital	Yes	II	N/A
North Ottawa Community Hospital	Yes	IV	N/A
Sheridan Community Hospital	No	IV	Prov
Sparrow Carson Hospital	Yes	IV	N/A
Sparrow Ionia Hospital	Yes	IV	N/A
SH Butterworth Hospital	Yes	I	N/A
SH Reed City Hospital	Yes	IV	N/A
SH Big Rapids Hospital	Yes	IV	N/A
SH Blodgett Hospital	Yes	III	N/A

SH Gerber Memorial Hospital	Yes	IV	N/A
SH Helen DeVos Children's Hospital	Yes	I	N/A
SH Kelsey Hospital	Yes	IV	N/A
SH Ludington Hospital	Yes	IV	N/A
SH United Memorial Hospital	Yes	IV	N/A
SH Zeeland Community Hospital	Yes	III	N/A
UMHS Mid-Michigan Medical Center - Clare	Yes	IV	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 group continues to be very active. Planning upcoming events around STB and Fall prevention to coincide with national awareness days. Updated water and hunter safety materials distributed. A team set up to pursue distracted driving training. Meaghan and Helen will be presenting on fall prevention at the Older Adult Task Force Summit in April.

### Communications

**Indicator(s):** Indicator 302.10: There are established procedures for EMS and trauma system communications for major EMS events or multiple jurisdiction incidents that are effectively coordinated with the overall regional response plans.

**Progress:** The assessment of the preparedness plan, specifically the 800 MHz transition plan is ongoing and hold until after the COVID-19 emergency. The April RTN has been cancelled, but we expect an update from the R6 HCC at the June meeting

### Infrastructure

**Indicator(s):** Indicator 302.2: There is a clearly defined, cooperative, and ongoing relationship between regional trauma physician leaders and the EMS system medical directors in the region.

**Progress:** Further clarification and guidance was provided to some hospitals provided on what involvement in the region's trauma network means. Continue to encourage Level III and IV TMD's to participate in the RTAC and education meetings. Participation is increasing with a 4 or 5 Level IV TMD's regularly participating.

## Regional Performance Improvement

**Indicator(s):** The following project falls under both a PI and an Infrastructure Indicator: Indicator 206.1: The RTN generates data reports to evaluate and improve system performance AND Infrastructure Indicator 303.2: The regional trauma network plan should ensure that the number, levels, and distribution of trauma facilities are communicated to all partners and stakeholders. The RTN should develop procedures to ensure that trauma patients are transported to an appropriate facility that is prepared to provide care.

**Progress:** The first phase of our Regions Diversion/Bypass/Transfer study was completed in January. The study was completed in Newaygo county for the purpose of assessing EMS transports out of the county for the reason “no ortho coverage”. Results are pending; however, the data show potential opportunities. The next step is to study another county and hospital that previously showed high EMS transports out of the county for “no ortho” as recorded in EMResources. This is currently on hold during the COVID-19 emergency.

## Continuum of Care

**Indicator(s):** The regional workplan addresses the integration and participation of rehabilitation services within the continuum of care for trauma patients.

**Progress:** The work on this is on hold until post COVID-19 emergency.

## Trauma Education

**Indicator(s):** Indicator 310.10: As new protocols and treatment approaches are instituted within the regional trauma system; structured processes are in place to inform or educate all personnel of those changes in a timely manner.

**Progress:** At the February RTAC education event we addressed the new STAC guidance related to level IV TMD review of transfers. We were receiving feedback that this requirement would be burdensome to level IV programs and, therefore, the committee wanted to provide ideas for best practices and input from our expert panel. Three level IV hospitals were asked to present their current process for reviewing transfers. The presentations provided the opportunity for discussion and recommendations for improvements. The feedback from the session was positive.

## Other relevant activities information:

The COVID-19 emergency began in March of this quarter during which our emergency preparedness system is being fully tested. We will look for opportunities as they relate to trauma during the post emergency debriefing period. The HCC is invited to attend the Region 6 RTAC/RTN meetings to update the entire council.

## Administrative Rule Requirements:

Yes - Quarterly meeting minutes on shared drive.

No - All MCA's participating in the RTN.

Yes - Performance improvement ongoing.