MICHIGAN REGIONAL TRAUMA REPORT 3rd QUARTER 2024

Region 5

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
Ascension Borgess Allegan	No	Not Designated
Ascension Borgess Lee	Yes	IV
Ascension Borgess Medical Center	Yes	II
Beacon Health Three Rivers	No	In Process
Bronson Battle Creek	Yes	IV
Bronson Lakeview	Yes	IV
Bronson Methodist	Yes	I
Bronson South Haven	Yes	IV
Corewell Health Lakeland Niles	Yes	IV
Corewell Health Lakeland St. Joseph	Yes	III
Corewell Health Watervliet	Yes	IV
Corewell Health Pennock	Yes	IV
Oaklawn	Yes	III
ProMedica Coldwater	Yes	IV
Sturgis	No	In Process

Work Plan Objective / Strategic Plan (SP) Objective Progress and Highlights:

Injury Prevention

Indicator: 306.2 - The RTN is active within the region in the monitoring and evaluating regional injury prevention activities and programs and gaps in delivery, including outcome data.
Objective: By June 2024, the Injury Prevention (IP) committee will assess and report on the level of integration of national evidence-based injury prevention programs in Region 5's public health and trauma system by creating an injury prevention tracker form to collect data. The tracker form will be updated and reported annually at the Regional Trauma Network (RTN).
Indicator: SP 3 - The regional IP committee will analyze the number and type of programs that directly address the top 3 injuries programs in their region as reported in the Inventory.
Objective: Annually, Region 5 will analyze the Injury Prevention Tracker to align the Region's goals to address the top 3 mechanisms reported from the bi-annual Regional Inventory.
Indicator: SP 8 - By December 31, 2025, support ongoing, effective collaborations and integration of existing community health programs and injury prevention.
Objective: By June 2024, the IP committee will collaborate with Region 5's public health and trauma system to assess the level of integration of national evidence-based injury prevention programs in Region 5.
Progress: Ongoing/Completed - In February, Region 5's Injury Prevention (IP) committee implemented an injury prevention tracker form that recorded when a program was taught in the region, the number of attendances, prevention area, and any collaborating sites. The Injury Prevention Specialist at each hospital has been recording events, backdating to January 2024. The first report went out to the IP Committee and RTAC this August, showing the Injury Prevention Specialist has addressed the top three mechanisms of injury: fall, car crashes, and exposure to inanimate mechanical forces. Other prevention areas that have been addressed are Stop the Bleed®, PTSD, Sports Safety, Substances use disorder/safe medication storage, and ThinkFirst. Collaborating sites included Senior Centers, Michigan Trauma Coalition, Michigan State Police, Local Health Departments, Local Public Schools, Bronson Children's Hospital, and the American Trauma Society. To this date, the number of participants Region 5 has reached out to is approximately 5,462 people within the region. Region 5 has noted a steady increase in drownings this summer, bringing this to the Injury Prevention Committee's attention. The IP Committee has been working with Kalamazoo and VanBuren's SafeKids coordinators to develop a plan to address the issue. The committee is looking to include other resources within those counties where many drownings have occurred.

Indicator: 203.5 - The RTN has developed implemented and updated a written injury prevention plan. The injury prevention plan is data driven and targeted programs are developed based upon high injury risk areas. Specific goals with measurable objectives are incorporated into the injury prevention plan. The plan reflects the State of Michigan Trauma System Injury Prevention Plan (2021) The plan will address partnerships, integration with national programs, and program evaluation

Objective: By December 2024, the regional Injury Prevention (IP) Committee will update and revise the injury prevention plan, identifying and addressing gaps within Region 5, by establishing new injury prevention goals aligned with administrative rules and departmental guidelines. The IP plan will be used as a guideline to direct the region for the remainder of the application period.
Progress: In progress - In the third quarter, the IP committee has been updating the injury prevention plan, last updated in 2021. The committee plans to review the resources and make changes where they see fit.

Communications

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. This is directed as communications during a Mass Casualty Incident.
Objective: Annually throughout the application period, Region 5 will coordinate with 5th District Medical Response Coalition (5DMRC) with ongoing simulated incident drills, including redundant communication systems and implementing the regional EMS plan. The communications committee will evaluate the communication plan for effectiveness and necessary changes after the communications plan has been implemented in simulated drills.
Progress: In progress – In April 2024, West Michigan AirCare closed its doors, which operated MedCom. The region kept the MedCom number, now a recording with an automated list. EMS agencies in the area have been notified and educated of all changes by their MCAs. 5DMRC is collaborating with Trauma stakeholders to update the region's communication plan.

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. This indicator is directed at the process for diversion of a trauma patient from a hospital.
Objective: 1.Throughout the application period, RTAC will monitor the updates of the Region 5 interactive map, ensuring the proper American College of Surgeons (ACS) and State of Michigan (SOM) trauma designation levels are up to date, along with trauma expiration dates. **2. By January 2026**, the RTN will coordinate with Region 5 Medical Control Authority Network (R5MCAN) on creating awareness and the utilization of state diversion protocols for local EMS agencies. Medical Control Authorities (MCA) will be responsible for notifying their local EMS agencies when a change has occurred in state diversion protocols.

Progress: In progress - The regional interactive map was updated with names of hospitals, addresses, current State of Michigan Trauma designation levels, and additional information to include stroke and STEMI. At the August RTAC meeting, a decision was made to include the surrounding counties, including Indiana, to show the additional resources and pediatric trauma hospitals around the areas. The RTAC also discussed that the region has avoided diversions unless there is a catastrophic event. If there were a diversion from a hospital, the MCA would be responsible for notifying their local EMS agencies. The committee also brought up hospitals are to update their EMResource daily, this will provide users with notifications of any diversions. Lastly, the MCAs discussed any protocol change by the State of Michigan is to be brought up at R5MCAN meetings, and from there, the MCAs are responsible for educating their EMS agencies. Another option is to include the online education portal Moodle.

Regional Performance Improvement

Indicator: 302.6 - There are mandatory system-wide prehospital triage criteria to ensure that trauma patients are transported to an appropriate facility based on their injuries. These triage criteria are regularly evaluated and updated to ensure acceptable and system-defined rates of sensitivity and specificity for appropriately identifying the major trauma patient.This indicator is directed at the process for prehospital triage of trauma patients. RTN uses data reports to evaluate and improve system performance. This refers to any data reports and the RPSRO inventory, and a comprehensive system inventory that informs the RTN on system functioning.
Objective: 1. Ongoing and throughout the application period, R5MCAN will ensure prehospital entities' utilization and collaboration with State protocol, “Adult/Pediatric Trauma Triage, 2-1,” for prehospital triage criteria. 2. By January 2025, attachments highlighting trauma centers, hospitals’ specialties, and pediatric centers within 40 miles of the designated MCA response area will be available with protocol “Adult/Pediatric Trauma Triage, 2-1,”
Indicator: 303.4 -There is a regional trauma bypass protocol that provides EMS guidance for bypassing a trauma care facility for another more appropriate trauma care facility.
Objective: By January 2026, the Region will coordinate with Region 5 Medical Control Authority Network (R5MCAN) on creating awareness, utilization, and collaboration of state protocols, “Transport Destination and Diversion 8-3,” and “Adult/Pediatric Trauma Triage 2-1,” to guide EMS agency to the most appropriate trauma facility.
Progress: Ongoing - At the August RTAC meeting, the interactive map was shown to the region, showing the extra resources it could provide. The region decided to include surrounding counties and their resources to help EMS in the decision-making of transporting a patient to the correct facility the first time. The region requested to include Stroke, STEMI, and Pediatric Hospitals. Currently, the map is located on 5DMRC’s website for stakeholders’ access.

Continuum of Care

Indicator: 308.1 - The lead agency has incorporated, within the trauma system plan and the trauma center standards, requirements for rehabilitation services, including interfacility transfer of trauma patients to rehabilitation centers. The regional work plan addresses the integration and participation of rehabilitation services within the continuum of care for trauma patients. Metrics that capture functional outcomes are reported.
Objective: By December 2026, Region 5 will identify a representative from a local rehab facility to participate in RTAC. Rehab personnel will support the goal in developing metrics to capture and report functional outcomes within Region 5.
Progress: In Progress –No further progress for the third quarter of 2024.

Trauma Education

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.
Objective: 1. By January 2026, Region 5 will publish new protocol updates on Region 5's website. RTC will notify TPMs of published updates and share with appropriate staff. 2.Throughout the application period, EMS will continue using Moodle for protocol updates.
Progress: In Progress - Region 5 formed a new committee to help build a functioning website for the region. The committee plans on placing information such as resources, meetings, plans, protocols, interactive map, contact information, etc. The committee also discussed having a section for the MCAs to place specific items on their page for their counties. Lastly, the website will start with trauma resources but eventually will evolve into Systems of Care website that has resources across all continuums of care for Region 5. Currently, the committee is in the process of finding funding for the website.

Other relevant information:

In the third quarter of 2024, the RTC participated in an ACS Re-verification for an Adult Level III and continues participating in the review process for in-state re-/verification.

The region has been looking at revising the structure of each committee. Injury Prevention now consists of TPMs or Injury Prevention Specialists from each hospital. The RTAC committee has representatives from each hospital, MCA, and EMS agencies. Lastly, the RPSRO structure will be an item on the RTN agenda in November to discuss.

Region 5's interactive map will be posted on 5DMRC's website until the trauma website is up and running.

Administrative Rule Requirements:

☒Yes ☐ No Quarterly meeting minutes on shared drive.

☒Yes ☐ No All MCA's participating in the RTN.

☒Yes ☐ No Performance improvement ongoing.