

MICHIGAN REGIONAL TRAUMA REPORT

3rd QUARTER 2025

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:

Facility Name	Designated	Level of Designation
Corewell Health Dearborn Hospital	Yes	II
Corewell Health Grosse Pointe Hospital	Yes	III
Corewell Health Taylor Hospital	Yes	IV
Corewell Health Trenton Hospital	Yes	II
Corewell Health Wayne Hospital	Yes	IV
Children's Hospital of Michigan	Yes	I
C.S Mott Children's Hospital	Yes	I
Detroit Receiving Hospital	Yes	I
Garden City Hospital	Yes	III
Henry Ford Hospital	Yes	I
Henry Ford Wyandotte Hospital	Yes	III
ProMedica Monroe Regional Hospital	Yes	III
Sinai-Grace Hospital	Yes	II
Henry Ford St. John Adult Medical Center	Yes	I
Henry Ford St. John Pediatric Medical Center	Yes	II
Trinity Health Ann Arbor St. Joseph	Yes	I

Trinity Health Chelsea Hospital	Yes	IV
Trinity Health St. Mary's Mercy Hospital of Livonia	Yes	II
Michigan Medicine Medical Center	Yes	I

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

Complete sections that have progress within the quarter.

Injury Prevention

Objective: SP 2: By December 31, 2024, each Regional Trauma Regional Advisory Council (RTAC) Injury Prevention (IP) committee will report on which injury prevention programs have been implemented in their region.
Progress: Region 2 South resource guide has been updated in July, 2025, with current IP programs. Injury Prevention Specialist continue to focus on region 2S top MOI's to provide robust programs and current educational materials to prevent leading causes of injury.
Objective: Throughout the application period 2024-2026 Region 2 South Network partners will focus on utilizing evidenced based injury prevention programs for the injury prevention initiatives chosen for regional participation.
Progress: With IP specialist collaboration among partners involved in the Regional PI initiatives continues to expand, increasing the number of classes taught and increasing the participation rate.

Communications

Objective: the RTN and Region 2 South Healthcare Coalition effectively coordinated communication procedures for patient transfers with the overall regional response plan during the pandemic.
Progress: All communication objectives have been met.

Infrastructure

Objective: The incident management and trauma systems have formally established linkages for system integration and operational management. This is directed at the Trauma Network's collaboration/integration with the Regional Healthcare Coalition including planning, and participation in exercises.
Progress: The healthcare coalition has decreased operations and downsized equipment storage as the result of SOM budget uncertainties.
Objective: 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.
Progress: The region 2S steering committee is committed to a no diversion policy for the trauma patient.

Regional Performance Improvement

Objective: Collected data from a variety of sources are used to review the appropriateness of all-inclusive regional trauma performance standards from injury prevention through rehabilitation. This should focus on the development of a regional performance improvement process. Data is used to guide strategic plan initiatives, injury prevention projects, and regional workplans, gaps including quality, accuracy and completeness are addressed.

Progress: The planned publication of the public dashboard thus will provide additional data for future IP projects and PI initiatives once shared.

Continuum of Care

Objective: By March 2024, the RTN will obtain a list of the rehabilitation facilities within region 2 South and identify each as one of the following: acute inpatient rehabilitation, subacute rehabilitation (SAR), nursing home with rehab capabilities, nursing home, inpatient hospice unit, TBI rehabilitation unit, spinal rehabilitation unit, burn rehabilitation unit, or pediatric rehabilitation unit.

Progress: Difficult to maintain the directory with accuracy due to closures, downsizing beds and staffing.

Trauma Education

Objective: 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: Completed.

Objective: By January 2025, Region 2 South will have a coordinated information repository in where available evidence-based trauma education and injury prevention can be readily shared with regional trauma partners.

Progress: This has been discussed but there is no formal plan in place to coordinate and develop the repository.

Other relevant information:

Region 2 South trauma subcommittee has become robust and increased participation in 3rd quarter, activity addressing the new objectives, indicators, and the strategic plan indicators. An action plan was developed to address the new indicators and how to meet the goals. Progress has been made on the indicators.

The PI initiatives continue as in prior reporting i.e. Tourniquets, Double transfers and TXA. During the 3rd quarter there were 3 double transfers reviewed by the RPSRO with loop closure. No TXA given in the 3rd quarter.

Tourniquet Data: 1st – 3rd quarter: 78 tourniquets have been used. An additional feature added to the form was disposition of the patient. Data provided supported the need of the tourniquet with disposition as patient admitted.

Administrative Rule Requirements:

- ☐ Yes ☒ No Quarterly meeting minutes on shared drive. (In process)
- ☒ Yes ☐ No All MCA's participating in the RTN.
- ☒ Yes ☐ No Performance improvement Ongoing