

Strategic Plan for the Wisconsin Trauma Care System

This document comprises a strategic plan for the Wisconsin Trauma Care System. It reviews its strengths, weaknesses, threats and opportunities; presents a series of fundamental statements relating to the Wisconsin Trauma Care System's vision, mission, and sets out the Wisconsin Trauma Care System's proposed strategies, goals and action programs.

Wisconsin Trauma Care System

In 1990, Congress passed legislation requiring the development of a Model Trauma Care System to serve as a template for statewide trauma system development. The same year, The National Highway Traffic Safety Administration (NHTSA), at the request of the Wisconsin Department of Health and Human Services, evaluated the Wisconsin EMS system. A special Legislative Study Committee on EMS was established to address the NHTSA review. This committee's work was instrumental in passing legislation (1993 WI Act 251). This legislation included preparing ten legislative reports including *Recommendations for a Trauma System: A report that sets forth recommendations, including any necessary proposed legislation, for the development of a statewide trauma system*. This report was delivered to the Legislature in December 1996 and was the driving force behind legislation (WI 1997 Act 154), creating a Statewide Trauma Advisory Council (STAC). STAC was charged with preparing a final report on specific recommendations to develop and implement the trauma system. The *Wisconsin Statewide Trauma Care System Report* was published in January 2001.

Since that time, forward progress has been made. STAC and many members of working sub committees have accomplished the following (but not limited to):

- There are currently nine hospitals in Wisconsin that have been verified as Level I or II trauma centers by the American College of Surgeons, providing the highest capability of trauma care. All other Wisconsin acute care hospitals have self-declared as Level III or IV trauma centers. A State review process has been developed to assure that these facilities are compliant with state trauma standards which are overseen by STAC. These hospitals will have been through the review process once by the end of 2009. The review process ensures that the Wisconsin Trauma Care System functions at the highest possible level. Continuing the review process after 2009 will assure ongoing evaluation to maintain system integrity.
- The State of Wisconsin is separated into nine regions, based on EMS and hospital referral patterns, and organized around the Level I and II trauma centers. Each region has developed a Regional Trauma Advisory Council (RTAC) to provide leadership, guidance, and education for healthcare providers across the continuum of care, including EMS, emergency, critical and acute care, rehabilitation, public health, and injury prevention. The RTACs provide the infrastructure for the Wisconsin Trauma Care System.

- Each RTAC developed and implemented Triage and Transport guideline for EMS services based on minimum guidelines provided by STAC.
- Developed a Statewide Trauma Registry

Trauma Facts:

- Traumatic injuries are the leading cause of death from age one to 44 years of life. During 2005, 3,442 people died of injury in Wisconsin, which makes trauma one of our state's major public health concerns.
- The Wisconsin Department of Transportation (WI DOT) estimates that the economic cost of motor vehicle crashes alone is \$3 billion annually. More productive years are lost to trauma than to cancer and heart disease combined. Based on data provided by WI DOT, an estimated \$64,288,000 could have been saved annually from the economic cost of motor vehicle crashes.
- The experience of states with mature Statewide Trauma Systems suggests that at least 15% of Wisconsin's 3,442 injury deaths in 2005 could have been prevented if a mature Wisconsin Trauma Care System had been in place. In other words, as many as 516 lives annually might have been saved.
- The emotional and financial impacts of traumatic injury can be as far-reaching as they are devastating, affecting friends, families, employers and more.

The Wisconsin Trauma Care System provides for traumatically injured patients from the incident through their entire hospital course until they are reintegrated into the community. It provides a continuum of care to ensure the best possible outcomes for all patients and families.

Initially, the Wisconsin Trauma Care System was developed under the division of Emergency Medical Care. EMS is one of the first needs of a trauma patient and many of the EMS issues regarding trauma care have been addressed. The ongoing educational needs related to trauma care for EMS providers are addressed by the RTAC's. EMS is an integral part of trauma care, but EMS does not encompass the entire continuum of care.

Trauma, as public health issue, has four clearly identified components: injury prevention, prehospital, acute hospital care and rehabilitation. The EMS section, as currently structured, is struggling to meet the needs of the Wisconsin Trauma Care System, because it is appropriately focused on prehospital care, not care across the continuum.

This strategic plan identifies the strengths, weaknesses, opportunities and threats, as well as the major goals and strategic actions to allow the Wisconsin Trauma Care System to reach its goals in providing optimal care of trauma patients.

Strengths, Weaknesses, Opportunities & Threats

This strategic plan addresses the following key strengths, weaknesses, threats and opportunities which apply to Wisconsin Trauma Care System now and in the foreseeable future:

Strengths:

- Ten years of commitment, development, and implementation of our current state trauma system by trauma experts from within the state of Wisconsin.
- State Trauma Advisory Council
- Regional Trauma Advisory Councils (RTAC) and their coordinators
- Designation Review Committee and hospital review process
- Hospital's Trauma Program Managers/Directors
- Alliance of trauma coordinators/ managers, registrars, and RTAC coordinators
- Collaboration with other health care providers in the state including, EMS, Fire, Public Health, Trauma and Emergency physicians, hospital administrators, flight crews, rural and urban care providers as well as relationships with Bioterrorism, and the Wisconsin Hospital Association
- NHTSA directives requiring state trauma system development
- Injury prevention initiatives
- Dedicated professionals that participate in and attend STAC, RTAC and many other trauma system related and subcommittee meetings in an effort to promote and strengthen the statewide trauma system.

Weaknesses:

- Pursuant to the 2001 NHTSA recommendations, no secure sustained funding.
- Non compliance with 2001 NHTSA recommendations to seek ACS trauma systems consultation visit
- Vacancy of the State Trauma Program Manager position
- Non-existent State Trauma Registrar
- Immature statewide performance improvement process due to the absence of integral components to the State Trauma Registry, including performance improvement and reporting software
- Over extended EMS section trying to keep current with trauma needs
- Lack of recognition of stature within the DHS
- Lack of understanding of the Trauma System within DHS/public/legislature

Opportunities:

- Secure sustained funding to support all functions of the State Trauma System
 - Trauma Program Manager
 - Trauma Registrar
 - Additional registry software
 - RTACs
 - Site review process
- Raise the stature of the State of Wisconsin Trauma System within DHS
Education of all stake holders on the importance of a trauma system and the public's willingness to fund a trauma system as demonstrated by the Harris Poll

Threats:

- Lack of federal DOT funding as a result of non-compliance with 2001 NHTSA recommendations
- Lack of independent administrative standing within DHS or the EMS Section
- Collapse of the current State Trauma System.

Wisconsin Trauma Care Vision

The vision of the Wisconsin Trauma Care System is to ensure that all trauma patients in the state of Wisconsin receive comprehensive trauma care.

Mission Statement

The Wisconsin Trauma Care System is dedicated to reducing the death, disability and suffering that result from traumatic injuries and mass casualty events by providing a comprehensive and integrated system of statewide prevention and trauma care resources throughout the continuum of care.

Major Goals and Strategic Actions

Goal:	Action:
Secure sustained funding, to support all functions of the State Trauma System <ul style="list-style-type: none">• Trauma Program Manager• Trauma Registry• Trauma Registrar• Regional Trauma Advisory Councils• Ongoing system development and support	<ul style="list-style-type: none">• Develop a committee to investigate and make recommendations for consistent / stable funding.• Identify and recruit legislative support• Consider: Increase consumption tax , increase in drunk-driving ticket fees, surcharge to vehicle fees
Build the Wisconsin Trauma Care infrastructure. This includes identification of Trauma as an equal partner with Emergency Medical Services and Emergency Preparedness. This could be accomplished in two ways: <ul style="list-style-type: none">• Transition of Trauma to a State Program with independent fiscal responsibilities utilizing current funding sources• Alignment of Trauma with Disaster Preparedness	<ul style="list-style-type: none">• Collaborate with trauma care partners (HRSA / WI Hospital Emergency Preparedness, WHA, STAC, DHS, EMS, trauma coordinators and physicians) for support to make the transition.• State consultation visit from the American College of Surgeons• State Membership in the National Foundation for Trauma Care• Procure a full-time Master's prepared State Trauma Program Manager
An ongoing, sustainable site review process	<ul style="list-style-type: none">• Continued recruitment and education of qualified physicians and nurses as site reviewers• Evaluation of the site review and DRC process to assure timeliness, consistency, and accuracy of information
A functional performance improvement program	<ul style="list-style-type: none">• Procure a trauma registrar• Evaluate trauma registry vendors• Purchase software that will support the State performance improvement goals.• Develop a long term State performance improvement plan
Increase awareness of the state trauma system among all stakeholders	<ul style="list-style-type: none">• Education/lobbying effort for the public and the legislature to increase awareness of the importance of the trauma system.• Develop lobbying committee inclusive of STAC Members, Trauma Care Partners listed above, and Trauma Care Facility lobbyists from Level I and II ACS verified centers in the state.

References

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