

System Report

June 1, 2010 - August 31, 2010

Data Period-Second Quarter 2010 (April-May-June)

Mississippi Trauma Care System

Designated Trauma Care Providers
Working Together to Prevent and Treat Trauma

Prepared for:

Mississippi State Board of Health

September 10, 2010

Introduction

The goal of the Mississippi Trauma Care System is to deliver the *right* patient to the *right* hospital at the *right* time. Research shows that this approach decreases mortality. Trauma remains the leading cause of death for Mississippians age 1 to 44 and Mississippi ranks third in the nation for unintentional injury deaths.

Mississippi began development of a statewide trauma system in 1991. The Mississippi Legislature charged the Mississippi State Department of Health with the responsibility for oversight of trauma system development. Since that time the state has adopted a trauma care plan, established seven designated trauma regions, designated qualifying hospitals as trauma centers, maintains a trauma registry, and disbursed funding to trauma regions, trauma centers, and physicians.

The Mississippi Legislature passed House Bill 1405 during the 2007 Regular Session to revitalize and more fully fund the Mississippi Trauma Care System. Mississippi moved from a voluntary system with indigent reimbursement, to a mandatory system with block grant funding based on participation; the first trauma system of its type in the United States. As suggested by the Mississippi Trauma Care Task Force, this report on the Mississippi Trauma Care System will be submitted quarterly to the Mississippi State Board of Health.



Quarterly Activities

Trauma Registry Meetings

Mississippi Trauma Registry Users' Group Meeting Jackson, Mississippi July 21, 2010

| REGION | HOSPITAL | NAME | ATTENDANCE | |
|---------|--|--|------------|--|
| EC | Rush Foundation Hospital | Alderson, Carla | Х | |
| SE | Jefferson Davis County Hospital Berry, Lisa | | Χ | |
| Central | University Medical Center | Brock, Marjolyn | X | |
| SE | Covington County Hospital | Covington County Hospital Calhoun, Jon | | |
| EC | Riley Hospital | Carter, Margaret | Χ | |
| Delta | Baptist Memorial Hospital-DeSoto | Combs, Susan | Χ | |
| Central | Mississippi Baptist Medical Center | Cox, Betty | Χ | |
| SE | Stone County Hospital | Dearman, Ina | Χ | |
| Delta | Patient's Choice-Humphreys County | Frierson, April | Χ | |
| North | North MS Medical Center-Tupelo | Furtick, Diane | Χ | |
| Central | St. Dominic | Graves, Pam | Χ | |
| Central | University Medical Center | Guthrie, Aleta | Χ | |
| Central | River Oaks Hospital Womans Hospital | Jackson, Leslie | Χ | |
| North | North MS Medical Center-Tupelo | Jacobs, Kristin | Χ | |
| SW | Lawrence County Hospital | Langston, Stephanie | X | |
| SW | Field Memorial Community Hospital | McDaniels, Kim | X | |
| SW | Southwest Trauma Care Region- Administrator | McManus, Jimmy | X | |
| Delta | Greenwood Leflore Hospital | Oestreicher, Martha | Х | |
| Central | University Medical Center | Prystupa, Kesha | Χ | |
| Coastal | Biloxi Regional Medical Center | Sigman, Naomi | X | |
| Central | University Medical Center | Stevens, Courtney | X | |
| Central | J.M. Still Burn, Brandon | Swann, Linda | Χ | |
| North | North MS Medical Center-Tupelo | Terrell, Kim | X | |
| North | North MS Medical Center-Tupelo | Wilson, Lisa C. | X | |
| Total | | | 24 | |

Mississippi Trauma Registry Software Training Jackson, Mississippi August 4 - 6, 2010

| Facility | First Name | Last Name | Aug 4 | Aug 5 | Aug 6 |
|-----------------------------------|------------|-----------|----------|----------|----------|
| Neshoba General Hospital | Tracy | Beasley | | Х | Х |
| Covington County Hospital | Jon | Calhoun | | Х | |
| Tyler Holmes Memorial Hospital | Shannon | Farmer | Х | Х | |
| St. Dominic Hospital | Pam | Graves | X | Χ | Χ |
| Tippah County Hospital | Carol Anne | Hurt | Х | Х | Х |
| River Oaks Hospital | Leslie | Jackson | Χ | | Х |
| Neshoba General Hospital | Brenda | Jayroe | Χ | Χ | Х |
| Regional Med Ctr at Memphis | Sandy | Long | X | Χ | Х |
| Crossgates River Oaks | Christy | Murphy | Χ | Χ | Х |
| Crossgates River Oaks | Rhonda | Price | X | Χ | Х |
| Central Mississippi Med Ctr | Barbara | Smith | X | Х | Х |
| Patient's Choice-Claiborne County | LaShonda | Thomas | X | | |
| Totals | | | 10 | 10 | 9 |

Consultation Trauma Center Visits

There were no visits during this period.

Trauma Center Inspections

There were no inspections during this period.

Trauma Center Designations

The following hospitals were designated as Level IV Trauma Centers effective June 23, 2010:

- Greene County Hospital, Leakesville
- Scott County Regional Hospital, Morton

The following hospitals were designated as Level IV Trauma Centers effective August 24, 2010:

- Covington County Hospital, Collins
- H.C. Watkins Memorial Hospital, Quitman
- Lawrence County Hospital, Monticello
- Tippah County Hospital, Ripley

Applications are pending on the following hospitals:

- Patient's Choice-Humphreys County, Belzoni
- Wesley Medical Center, Hattiesburg
- NWRMC, Clarksdale
- Simpson General Hospital, Mendenhall

Currently, in the Mississippi Trauma Care System, there are: three (3) Level I Trauma Centers (UMMC, Jackson; Regional Medical Center, Memphis; University of South Alabama, Mobile); five (5) Level II Trauma Centers (North Mississippi Medical Center, Tupelo; Baptist Memorial Hospital-Golden Triangle, Columbus; Forrest General Hospital, Hattiesburg; MHG, Gulfport; Singing River Hospital, Pascagoula); ten (10) Level III Trauma Centers; sixty five (65) Level IV Trauma Centers, three (3) non-participating hospitals (Mississippi Baptist Medical Center, Jackson; Gilmore Memorial Hospital, Amory; Trace Regional Hospital; Houston), and three (3) applicant hospitals.

Mississippi Trauma Advisory Committee (MTAC) Activities

The MTAC met on June 15, 2010. The committee voted to adopt the CDC Field Triage Decision Scheme: The National Trauma Triage Protocol. The Trauma Care Regions may amend to protocol to specifically address the destination guidelines for trauma centers within their respective regions, however, the CDC assessments of patient condition will not be amended. The adoption of the CDC protocol will more toward standardization of triage and transport protocols across all of the Trauma Regions.

The next meeting of MTAC is scheduled for September 1, 2010 in the Cobb Auditorium.

Significant committee actions for the period:

Rules and Regulations Sub-committee

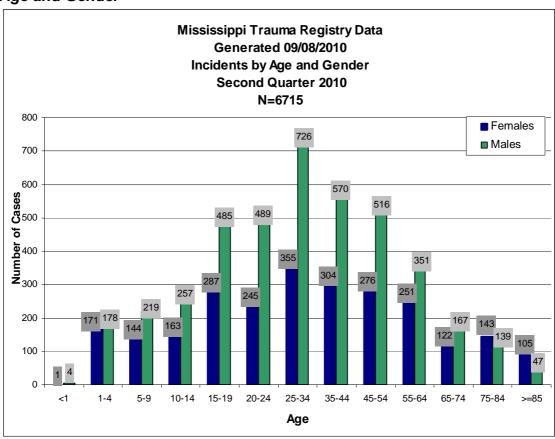
• The sub-committee met on June 4, 2010 and is working on significant chapter revisions. The current Chapter 14 only addresses the Mississippi Burn Care Fund; this chapter will be re-written to include quality of burn care, essentials and desirables, and any other requirements for a burn center similar to the way the regulations are written for trauma centers. A Burn Task Force was formed to re-write Chapter 14; the draft was reviewed by the sub-committee on August

- 19, 2010 and was forwarded to MTAC with a recommendation to approve.
- Chapter 13 is another chapter under re-write. This chapter addresses
 pediatric trauma care. The Department has received a letter of intent
 from Le Bonheur Children's Hospital in Memphis to join the Mississippi
 Trauma Care System and the regulations do not address the
 designation of pediatric-only facilities. A Pediatric Task Force was
 formed and is scheduled to meet on October 29, 2010 to continue on
 the draft.

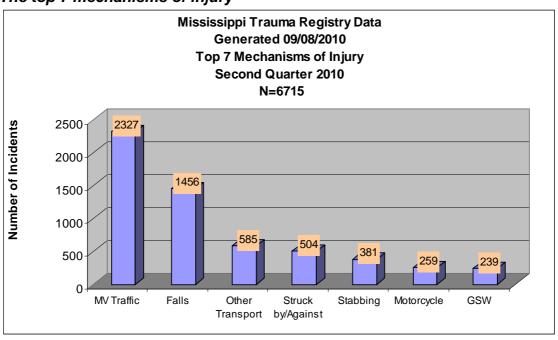
Functionality Sub-Committee

- The sub-committee met on June 4, and August 19, 2010, in conjunction with the Rules and Regulations Sub-committee.
- The sub-committee discussed the expansion of trauma center designations from Level I –IV to Level I-V. Due to the complexity of this issue, the sub-committee recommends forming a task force to look at this topic in detail.
- Another topic was the need to standardize trauma activation criteria across the regions. Some regions use Alpha/Bravo, while others use Level I/II. Additionally, some regions allow EMS to call activations from the field. A task force has also been formed to address this issue.
- There was discussion of Physician Extender/Mid-Level Provider training. Currently, physicians have ATLS and nurses have TNCC as required training, but Physician Assistants and Nurse Practitioners do not have any required training. The Sub-committee recommended that the Level IV E&D chart be changed to allow physicians take ATLS once every 10 years, vice the requirement of maintaining currency in ATLS (once every 4 years). A task force will be formed to review training requirements for all practitioners.

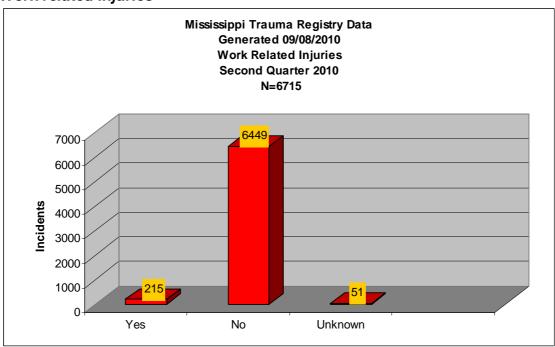
Trauma Data Age and Gender



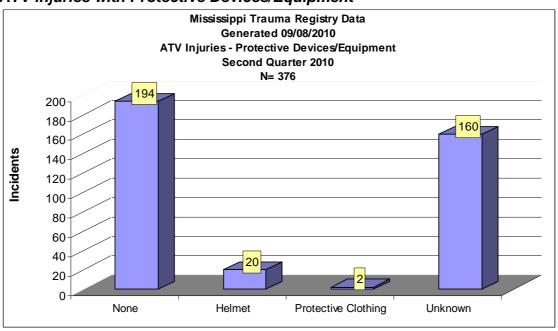
The top 7 mechanisms of injury



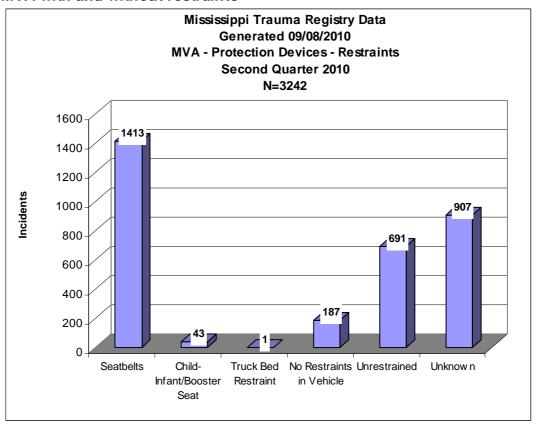
Work related injuries

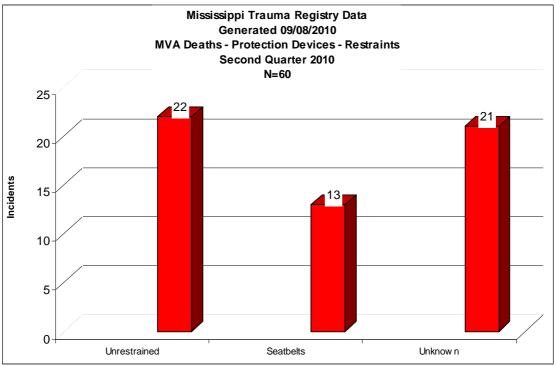


ATV injuries with Protective Devices/Equipment



MVA with and without restraints

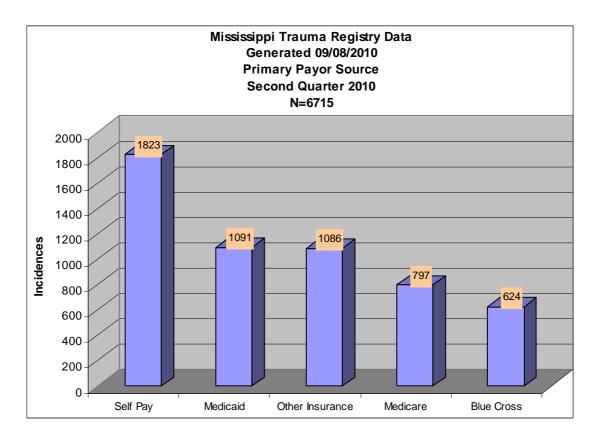




Performance Improvement Programs

The State PI Committee met on August 16, 2010. The State PI Plan Task Force presented the first draft of the state PI Plan, comprised of an Introduction/Overview, and individual chapters covering state-level, region-level, hospital, and pre-hospital PI activities. The plan was accepted by the PI committee, and the Task Force has been charged with developing appendices which will further define the PI indicators each organization will collect and review. The next scheduled meeting of the State PI Committee is January 10, 2011.

Financial Data



Trauma Care Trust Fund

Fund Balance - May 31, 2010

\$ 1,281,503.92

| Month | Moving Violations | Interest | Tag Fee | ATV/Motorcycle Fee | Play or Pay | Total Collected |
|--------|----------------------|-----------|--------------|-----------------------|-------------|--------------------|
| June | 800,579.51 | 15,087.23 | 1,091,144.00 | 80,570.00 | | 1,987,380.74 |
| July | 562,966.60 | 6,665.84 | 891,260.00 | 83,600.00 | | 1,544,492.44 |
| August | 1,148,654.09 | 11,300.49 | 892,696.00 | 79,775.00 | | 2,132,425.58 |
| Total | 2,512,200.20 | 33,053.56 | 2,875,100.00 | 243,945.00 | | 5,664,298.76 |

Total Fund Balance – August 31, 2010

\$ 7,345,802.68*

*Includes \$1,779,719 of May 2010 TCTF distribution to Delta Trauma Care Region being withheld pending outcome of audit.

TCTF Fiscal Year 2010 Recap

Distribution of the Trauma Care Trust Fund for FY2010 was \$24,680,000.00.

Level I-III Trauma Centers \$20,400,000.00 (Minimum of \$6,120,000.00

further distributed to physicians supporting the

trauma program, as determined by the

hospital)

Level IV Trauma Centers \$680,000.00 (\$10,000.00 per year stipend)

EMS providers \$3,600,000.00 (Distribution based on county

census)

Uncompensated Trauma Care Audits

June 14-18, 2010 Ocean Springs/Singing River Hospital

July 17, 2010 King's Daughters Medical Center, Brookhaven August 18-20, 2010 BMH-Golden Triangle/Oktibbeha County Hospital August 30-31, 2010 South Central Regional Medical Center, Laurel