



# MINNESOTA STATEWIDE TRAUMA SYSTEM



## STAC Says Goodbye and Hello

December 31, 2010, was not only the close of the year, but the close of a significant chapter in the history of Minnesota’s Trauma System. The final terms of five charter STAC members ended. **Bill Heegaard, M.D.; Gary Pearson; Marc Swiontkowski, M.D.; Linda Vogel and Mike Wilcox, M.D.** have been pillars in the implementation of the system. Each has served tirelessly on various subcommittees over the years and each has helped chart the future for trauma care in Minnesota. Thank you all for your dedication and passion. You will be missed.

It is now time for STAC’s newest appointed members to take their seats and match the level of leadership of their predecessors. Please join the rest of STAC in welcoming **Peter Cole, M.D.; Dan DeSmet; John Hick, M.D.; Carol Immermann and Mark Paulson, M.D.** Joining them are **Allen Brown, M.D.** and **Ron Furnival, M.D.**, who were re-appointed. All of these appointments are four-year terms.

### Trauma Hospital Designations

In the past six months, 30 hospitals have either designated (14) or re-designated (16) as trauma hospitals.

**New Level IVs:** Albert Lea Medical Center-Mayo Health System, Appleton Area Health Services, Clearwater Health Services-Bagley, Deer River Health Care Center, Fairmont Medical Center-Mayo Health System, Hendricks Community Hospital, Lake City Medical Center-Mayo Health System, Regina Medical Center, LifeCare Medical Center-Roseau, Saint Elizabeth’s Medical Center, Swift County-Benson Hospital, Virginia Regional Medical Center and White Community Hospital.

**New Level III:** Fairview Lakes Medical Center-Wyoming

**Re-designated Level III:** Cuyuna Regional Medical Center

**Re-designated Level IVs:** Cook County North Shore Hospital, Essentia Health Ada, Glacial Ridge Health System, Granite Falls Municipal Hospital, Holy Trinity Hospital, Murray County Medical Center-Slayton, Olmsted Medical Center-Rochester, Ortonville Area Health Services, Paynesville Area Health System, RiverView Health-Crookston, St. Michael’s Hospital-Sauk Centre, Sleepy Eye Medical Center, Springfield Medical Center, Tri-County Hospital, Windom Area Hospital

**Recent ACS Verifications:** The American College of Surgeons (ACS) recently verified HCMC as a Level I Pediatric center; St. Mary’s, Duluth, as Pediatric and Adult Level II centers; and Mercy Hospital, Coon Rapids, as a Level II Adult center.

To date, there are **115 designated trauma hospitals**, not including the four ACS pediatric centers, with five more in process. This foundational work ensures that trained

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provider teams at every one of these hospitals are ready 24 hours a day to provide coordinated emergent care to the most critically injured people. It also means that EMS providers have more local transport options to receive initial life-saving stabilization for their patients. Congratulations to all who have made this commitment, to your communities' citizens and visitors, such a priority.

The current trauma hospitals along with contact information are [here](#). Contact Chris Ballard at 651-201-3841 or [chris.ballard@state.mn.us](mailto:chris.ballard@state.mn.us) for more information or to set up a free consultation.

### **Three new Regional Trauma Advisory Committees (RTAC) Approved**

Applications for three additional RTACs were reviewed at the September and December 2010 STAC meetings. Each received a strong recommendation to then-Commissioner Sanne Magnan for approval.

- **Southwest RTAC** encompasses the state's southwest EMS regional counties. Avera Marshall Regional Medical Center will serve as the administrative and fiscal agent for the RTAC. Angela Chesley is the contact at 507-537-9167 or [angela.chesley@avera.org](mailto:angela.chesley@avera.org).
- **Western RTAC (WESTAC)** encompasses the state's west central and northwest EMS regional counties. Detroit Lakes EMS will serve as the administrative and fiscal agent for the RTAC. Sarah Leucuta is the contact at 218-847-0817 or [sleucuta@trustedcareforlife.org](mailto:sleucuta@trustedcareforlife.org).
- **Northeast RTAC (NERTAC)** encompasses the state's northeast EMS regional counties. The Arrowhead EMS Association will serve as the administrative and fiscal agent for the RTAC. Pat Lee is the contact. He can be reached at 218-726-0070 or [pat@arrowheadems.com](mailto:pat@arrowheadems.com).

Congratulations to all who were part of the formation of these RTACs. You are crucial partners in improving regional trauma care through quality improvement and injury prevention initiatives.

On a related note, designated leaders from each RTAC have committed to meet together quarterly to network, share best practices, and identify common initiatives to coordinate resources. These meetings occur the morning of each quarterly STAC meeting.

For more information about these meetings, contact John Osborn, administrator for the Southern Minnesota Regional Trauma Advisory Committee, at 507-255-6478 or [osborn.john@mayo.edu](mailto:osborn.john@mayo.edu).

### **212 Medical Center Discussion**

In September and December, the STAC heard from Ridgeview Medical Center, Waconia, about their new stand alone emergency department in Chaska. It is considered an extension of the hospital and operates under the same license. Ridgeview Medical Center, a designated level III facility, asked that the new Chaska site be allowed to apply for a level IV designation. MDH has determined that it is legally permissible to designate this site if it meets all the criteria. STAC approved the request.

### **System LPN Training Criteria**

The STAC is currently examining if separate training criteria are needed for licensed practical nurses (LPN) providing care to critical trauma patients at designated hospitals. Currently, there is no distinction between LPNs and RNs in the criteria. STAC member Jane Gisslen will chair an ad-hoc work group to discuss this issue further and develop options for STAC consideration. For more information or to offer input, contact Chris Ballard at 651-201-3841 or [chris.ballard@state.mn.us](mailto:chris.ballard@state.mn.us). Work should be completed before the March 2011 STAC meeting.

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## State-level Trauma Performance Improvement (PI) Getting Started

At its December 2010 meeting, the STAC set a process in place to embark on state-level PI. It was decided that the STAC as a whole will review PI reports and data, and a charge for these activities was developed. These reports and data, however, will initiate from a small team with specific expertise in using trauma data and analysis. The executive committee is currently working to identify individuals for this small team and to benchmark from other organizations with experience in clinical and system PI. This will soon become a core function of the state trauma system, aligning with phase 2 of the system's development, presented in the Trauma System Implementation and Recommendations: 2010 Report to the Legislature.

## Trauma Data Update and AIS Scoring Clarification

A STAC work group has been meeting for a year to review the required data that trauma hospitals must submit. The work group's recommendations were presented in September and approved in December, with the contingency that a final approval is still needed after a data dictionary is developed and reviewed alongside each data element. A time line for implementation will be discussed after this preliminary work is completed.

A clarifying point related to AIS scoring is needed. The approved data set does require AIS to be reported by level III and IV trauma hospitals, but only in those rare cases when the trauma patient is not transferred to a level I or II. Further, there is a tool in the online registry to help with this scoring, so no formal training of staff will be necessary.

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Further information about the Statewide Trauma System is [online](#) or contact Tim Held at [tim.held@state.mn.us](mailto:tim.held@state.mn.us) or 651-201-3868.

## EMS Update

EMS Regulatory Board (EMSRB) Executive Director Kathy Burke Moore has retired from state government work, effective January 1, 2011. She was a strong advocate for traffic safety initiatives over the course of her career—initiatives that share common interests with trauma system goals. Congratulations, Kathy, on a long and meaningful career. The EMSRB is in the process of finding a replacement. Questions related to this should be directed to Cindy Greenlaw Benton at [cindy.benton@state.mn.us](mailto:cindy.benton@state.mn.us).

### Is your designation about to expire?

Trauma hospital designations are valid for three years. Plan to re-apply for your level 3 or 4 trauma designation about six months prior to its expiration. The re-application process is similar to that of the initial application: Simply complete the level 3 or 4 application and mail it with attachments. There is not a separate application for re-designation. Applications can be downloaded from the trauma system website: <http://www.health.state.mn.us/traumasystem/hospresources/index.html>.

Level 3 applicants will have a site visit before the State Trauma Advisory Council considers the application. Level 4 designees will receive their site visit after successfully completing the re-designation process on paper. Re-designation decisions will focus on the progress made toward the findings from prior site visits as well as continued compliance with statewide trauma system criteria.

Direct questions about the re-designation process to the designation coordinator, Chris Ballard at [chris.ballard@state.mn.us](mailto:chris.ballard@state.mn.us) or 651-201-3841.