

MINNESOTA STATEWIDE TRAUMA SYSTEM



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Why Have a Trauma System?

For a severely injured person, the time between sustaining an injury and receiving definitive care is the most important predictor of survival—the “golden hour.” The chance of survival diminishes with time, despite of the availability of resources and modern technology; however, a trauma system enhances the chance of survival regardless of proximity to an urban trauma center.

What is a Trauma System?

A trauma system is a predetermined and organized response to managing and improving the care of severely injured people. It spans the continuum-of-care; from prevention and emergency care to rehabilitation. Best practices standards guide each stage of trauma care to ensure that injured people are promptly transported to and treated at facilities appropriate to the severity of their injury.

A trauma system also provides a foundation for disaster preparedness and response. As part of its day-to-day activities, a trauma system coordinates the movement and care of severely injured people. Thus, a trauma system expands and contracts based on the needs and resources available at the moment.

Impact of Trauma in Minnesota

Trauma is a tremendous burden on families and communities. In the 1990s, nearly 21,000 Minnesotans died from trauma.

- For Minnesotans, ages 1 to 44, trauma is the leading cause of death. Overall, trauma is the fourth leading cause of death for Minnesotans.
- Trauma is the leading cause of death for all Minnesotans when measured in years of potential life lost.*
- On average, more than 2,400 Minnesotans die from trauma each year. For every injury death, nine people are hospitalized for injuries.
- In 2006, falls were the leading cause of injury death, followed by motor vehicle crashes.

- In 2006, 42 percent of motor vehicle crashes occurred in rural areas. However, 68 percent of the *fatal* crashes occurred in these areas.
- In 2006, the economic cost of motor vehicle fatalities in Minnesota was over \$568 million.**

* “Years of potential life lost” is the number of years between early death from injury and the average age of death at 70.

**Based on the National Safety Council’s economic cost figures.

Benefits of a Trauma System

States with a mature, comprehensive statewide trauma system have experienced:

- A 9 percent decrease in motor vehicle crash deaths
- A 15-20 percent increase in the survival rates of seriously injured patients
- An increase in productive working years
- An improvement in disaster preparedness.

Minnesota’s Trauma System

In 2005, the Minnesota Legislature established a statewide trauma system and charged the Department of Health with implementation. Minnesota’s trauma system recognizes the vital role that rural communities, ambulance services, hospitals and health care professionals play in the care and management of trauma patients.

Participation remains voluntary, but wide-scale involvement will ensure that a statewide, cooperative effort is in place to care for seriously injured people.

Mission

It is the mission of the Minnesota Statewide Trauma System to create a voluntary, inclusive network of currently trained and equipped trauma care



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providers throughout the state ensuring that optimal trauma care is available and accessible everywhere.

Vision

It is the vision of the trauma system that all Minnesota hospitals will participate in a fully-funded trauma system that:

- Is of the highest quality
- Is seamless across the continuum of care (prevention, care delivery, rehabilitation)
- Is safe, timely, efficient, patient-centered and patient-driven
- Uses outcome data and continuous quality improvement to evolve
- Allows many trauma patients to be treated in their own communities
- Eliminates all delays in transfers to definitive care
- Is embraced and valued by citizens and policymakers
- Is fully integrated into the disaster preparedness and public health systems.

Values

The values are such that all Minnesota hospitals will participate in a trauma care system that:

- Is based on obtaining the best outcomes for injured patients
- Is mindful of overall system costs and scarce specialist resources
- Is data-driven, with in-house trauma performance improvement programs that guide trauma care
- Includes a supportive environment, which allows for realistic, affordable and accessible site-based education
- Allows for existing referral patterns
- Believes that over-triage is better than under-triage.

Trauma and Potential Revenue

Federal law allows hospitals to recover certain costs related to the response to and care of a trauma patient. In Minnesota, eligibility for this revenue is limited to trauma hospitals verified by the American College of Surgeons or designated as a trauma hospital by the state.

System Assessment

November 4-7, 2007, the American College of Surgeons Committee on Trauma conducted a comprehensive review of Minnesota's trauma system. The purpose of the review was to provide an analysis of the current system status and make recommendations for system improvements and enhancements.

The Minnesota Department of Health, together with its State Trauma Advisory Council and the EMS Regulatory Board, formed a Joint Policy Committee to analyze the findings of this review, establish priorities and determine what modifications are necessary as the trauma system continues to develop.

Getting Started

- There is no fee associated with becoming a trauma hospital in Minnesota.
- Access to and use of a secure, Web-based trauma registry is provided to all hospitals at no cost.
- Trauma program staff is available to provide consultation, technical assistance and resources to help hospitals pursue trauma designation.

Important Link

The Minnesota Department of Health trauma system Web site contains more information on the governance and structure of the trauma program, along with fact sheets, and numerous resources for hospitals, including an interactive map of currently designated trauma hospitals.

www.health.state.mn.us/traumasystem

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