The Arkansas Trauma System

Act 393 of 2009



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The Beginning



- Arkansas' overall injury fatality rate was 50% higher than the national average.
 (2008 data from the American College of Surgeons)
- Hospital to Hospital transfers could take hours to arrange for trauma patients.
- Arkansas' emergency care system was the worst in the nation.
 (National Report Card of the State of Emergency Medicine, December 2008)
- Arkansas was one of three states without a trauma system and the only state without a designated trauma center.

Trauma System Funding



- For FY23 ADH budgeted \$26,154,931:
 - 52% of funding for Designated Hospitals and EMS
 - 33% of funding for Contracts and Services
 - 8% of funding for Stroke/STEMI System
 - 7% of funding for ADH Trauma Operations

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Trauma System??



- Trauma is the leading cause of death in the patient population of those 46 and younger in the US. (Choi et al., 2021)
- Trauma System is defined as an organized and coordinated plan within a state that is integrated with the local public health system and delivers the full range of care patients with severe or life-threatening injuries.
- Trauma Centers are defined as a hospital which has received designation certification after successfully completing a rigorous site survey to determine, based on resource availability and overall capability, the appropriate level of designation.

The Arkansas Trauma System. ArcGIS StoryMaps. Published December 6, 2022. Accessed May 17, 2023. https://storymaps.arcgis.com/stories/1b04c480b682494b989d8e43778f96c4

Trauma Center Levels



- Level I comprehensive clinical care and community resource (education, research and outreach)
 - Six Level I Hospitals
- Level II comprehensive clinical care
 - · Four Level II Hospitals
- Level III treatment of mild and moderate single system injuries
 - 18 Level III Hospitals
- Level IV stabilization and transfer
 - · 29 Level IV Hospitals

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Arkansas Trauma System Components



- 1. Pre-hospital services (911, ambulances)
- 2. Trauma Communications
 - Arkansas Trauma Communications Center
 - · Trauma Image Repository
- 3. Designated Trauma Centers
 - 57 currently designated trauma centers in Arkansas
- 4. Rehabilitation
- 5. Trauma Registry (collection and analysis of data)
- 6. Quality Improvement
 - · Preventable Mortality Studies
- 7. Injury Prevention Programs
 - · Suicide Prevention/National Suicide Hotline

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Results of the Trauma System Percentage of Total and Frankly Preventable Deaths 16.00% 14 0096 Table 4: Distribution of Decedents Mortality and OFI 12.00% Pre-TS 2009 % Reduction in Preventable Mortality Pre-TS vs Post-TS 10.00% 9% 12 21% 49 8.00% 49 Possibly preventable 61 13%** 8% 5.00% 30% 16% "p = 017 p = 006 4.00% 2.00% 0.00% 2015 2017 2013 Total Preventable Deaths % 14.52% 14.53% 15.11% 10.14% 8.26% 8.984% 5,64% Porter, A., Karim, S., Bowman, S. M., Recicar, J., Bledsoe, G. H., & Maxson, R. T. (2018). 3.23% 1.84% 0.87% 0.19% rankly preventable 1.28% Impact of a statewide trauma system on the triage, transfer, and inpatent mortality of injured patients. The journal of trauma and acute care surgery, 84(5), 771–779. https://doi.org/10.1097/TA.000000000001825

Healthcare Results Table 6: Calculation of Impact of Reduction of Preventable Trauma Deaths Using Value of Life Lost (VLL) Table 5. Percent of Preventable Mortality Pre-TS vs. Post-TS Extrapolated Total Deaths Life Years Value of a Present Value Societal benefit— Post-TS 2013-14 Age Expectancy Prevented Gained Life Year 90 lives saved Total Deaths with Study Selection Criteria in Post-TS Timeframe 42 81.5 79 39.5 \$100,000 \$2,365,151 \$186,846,890 564 169 90 79 42 81.5 79 39.5 \$200,000 \$4,730,301 \$373,693,779

42

81.5

79

39.5

\$300,000 \$7,095,452 \$560,540,669

Maxson, T., Mabry, C. D., Sutherland, M. J., Robertson, R. D., Booker, J. O., Collins, T., Spencer, H. J., Rinker, C. F., Sanddal, T. L., & Sanddal, N. D. (2017). Does the Institution of a Statewide Trauma System Reduce Preventable Mortality and Yield a Positive Return on Investment for Taxpayers? Journal of the American College of Surgeons, 224(4), 489–499. https://doi.org/10.1016/j.jamcollsurg.2016.12.042

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Most Common Preventable Mortality Errors:



- 1. Recognition of injury severity
- Identification and prioritization of treatment for immediate life-threatening injuries
- Rapid decision of need for transportation to a higher level of care / use of ATCC
- Clear communication early on with EMS / Air about quickest transport method to higher level of care
- 5. Proper management of shock, air way/ ventilation, damage control, and head injuries
- Delay in transfer due to unnecessary tests

Porter, A., Karim, S., Bowman, S. M., Recicar, J., Bledsoe, G. H., & Maxson, R. T. (2018). Impact of a statewide trauma system on the triage, transfer, and inpatient mortality of injured patients. The journal of trauma and acute care surgery, 84(5), 771–779. https://doi.org/10.1097/TA.00000000000001825

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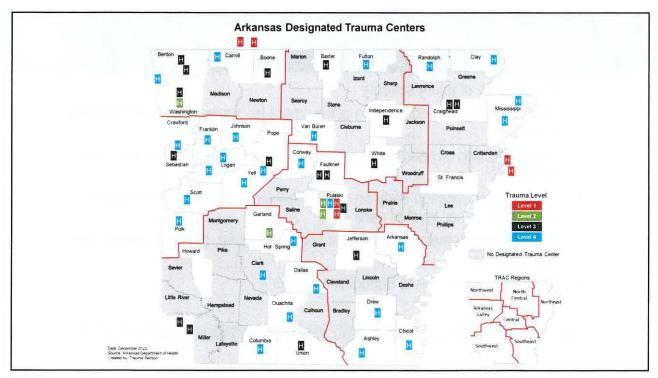
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Hospital Name	City/State	Designation Date	Management and the	0.5.100.5.	Designation
Level (6)*			Hospital Name	City/State	Date
Arkansas Children's Hospital (ACH)	Little Rock, AR	11-Oct-21	Level IV (29)		
CoxHealth	Springfield MO	15-Feb-22	Arkansas Children's Hospital – Northwest Arkansas Methodist Medical Center	Springdale, AR Paragould, AR	13-Jan-23 30-May-12
Le Bonheur Children's Hospital	Memphis, TN	17-Jun-21	Ashley County Medical Center	Crossett AR	22-Feb-13
Mercy Hospital Springfield - Adult Trauma Center Springfield MO		4-Nov-21	Baptist Health Medical Center- Arkadelphia	Arkadelphia, AR	21-Jul-15
			Baptist Health Medical Center - Hot Spring	Malvern, AR	10-Nov-21
Regional Medical Center Memphis, TN		10-Feb-22	County Baptist Health Medical Center – Stuttgart	Stuttgart, AR	7-Oct-19
University of Arkansas for Medical Sciences (UAMS) Little Rock, AR		13-Nov-19	Baptist Health – Van Buren	Van Buren	27-Jun-22
Level II (4)*			CHI St. Vincent Morniton	Momilton, AR	11-Sep-21
Baptist Health Medical Center	Little Rock, AR	29-Mar-22		North Little Rock,	
CHI St. Vincent Hospital Hot Springs	Hot Springs, AR	17-Mar-22	Chicot Memorial Medical Center Dallas County Medical Center	Lake Village Fordyce, AR	14-Feb-22 3-Aug-22
CHI St Vincent Infirmary	Little Rock, AR	14-Dec-23		Dardanelle, AR	5-April-22
Washington Regional Medical Center	Fayetteville, AR	25-Apr-22	Drew Memorial Health System Eureka Springs Hospital Fulton County Hospital Great River Medical Center	Monticello, AR Eureka Springs A Salem AR Biytheville, AR	30-Sept-22 6-May-22 28-Sept-21 10-Oct-22
Hospital Name	City/State	Designation Date	John Ed Chambers Memorial Hospital Johnson Regional Medical Center Magnolia Regional Medical Center	Danville AR Clarksville, AR Magnolia, AR	4-Aug-21 23-Aug-21 8-Dec-21
Level III (18)*			Mena Regional Health System	Mena, AR	11-Apr-22
	Conway, AR	7-Jan-20	Mercy Hospital Booneville Mercy Hospital Ozark	Booneville, AR Ozark, AR	5-Aug-22 27-Oct-21
	North Little Rock, AR	17-Sept-21	Mercy Hospital Daris	Paris, AR	24-Sept-21
	Mountain Home, AR	14-Oct-21	Mercy Hospital Waldron	Waldron, AR	31-Dec-21
	Texarkana, TX	22-Jul-21	Ouachita County Medical Center	Camden, AR	29-Oct-21
	Conway AR	8- Oct-21	Ozark Health Medical Center	Clinton, AR	1-Apr-22
	Pine Bluff, AR	11-Nov-21	Siloam Springs Regional Hospital	Siloam Springs, Al	R 3-July-19 11-Oct-22
	Clarksville, AR El Dorado, AR	23-Aug-21 13-Jul-21	South Mississippi County Regional Medical Center	Osceola, AR	11-001-22
	Fort Smith, AR	1-Aug-22	St Bernards Five Rivers Medical Center	Pocahontas, AR	31-May-23
	Rogers, AR	06-Apr-22			
	Jonesboro, AR	24 –Jun-21			
	Harrison, AR	5-Feb-20			
25 YEAR OLD SAME TO LESS TO SAME TO SAME AND SAME TO S	Bentonville AR	6-Apr-22			
Northwest Medical Center-Springdale	Springdale AR	5-Jan-22			
Saint Mary's Regional Hospital	Russellville AR	24-Aug-21			
St Bernards Medical Center	Jonesboro, AR	22-Jul-19			
Unity Health White County Medical Center	Searcy, AR	01-Oct-21			
	Texarkana, TX	22-Mar-22			
Wadley Regional Medical Center	Tunding in	Za William Za			