In the process trauma centers

IU Health’s Ball Memorial Hospital has been designated a trauma center for purposes of the state’s Triage and Transport Rule, the first such facility to be so designated. The action was taken by the EMS Commission, following positive recommendations to do so by the Indiana State Trauma Care Committee and State Health Commissioner William VanNess, M.D.

The action means that, for purposes of the Triage and Transport Rule, Ball Hospital becomes the State’s 10th trauma center and is eligible as a destination for the most seriously injured patients under that Rule.

The Rule defines “trauma centers” as either those verified by the American College of Surgeons (ACS), those designated by other states that wish to be considered part of Indiana’s trauma system or those that are “in the process” of becoming ACS-verified. Ball Hospital falls into that third category. The “in the process” designation was added to the Triage and Transport Rule expressly to enable hospitals working toward ACS verification to receive the patients necessary to show a track record of excellent trauma care required for ACS verification.

Ball Memorial will now have two years to work towards and become ACS-verified or lose its “in the process” status under the Rule.

Hospitals that wish to become considered “in the process of ACS verification” for purposes of the Triage and Transport Rule must complete and submit forms that the EMS Commission has posted on its website (http://www.in.gov/dhs/2367.htm). Applications should be submitted to the Indiana Department of Homeland Security. The Indiana State Trauma Care Committee and the State Department of Health will review these documents, and the State Health Commissioner will make the final recommendation to the EMS Commission, which makes the final decision on “in the process” status.

EMS providers that take seriously injured trauma patients to “in the process” trauma centers will fully comply with the Triage and Transport Rule by doing so. For the most up-to-date information regarding “in the process of ACS verification”, you can also visit: https://indianatrauma.org/. At press time, we are aware of at least one other hospital that has submitted an “in the process” application to the IDHS.
Falls Prevention:
The Indiana State Department of Health will join with the Indiana Falls Prevention Coalition to declare the first day of fall, Sunday, September 22, 2013 as a Falls Prevention Awareness Day. Falls are a leading cause of fatal and non-fatal injuries in Indiana. In 2011, Hoosiers ages 65 years and older suffered 8,276 falls that resulted in hospitalizations and there were 340 fatalities due to falls. Hip fractures due to falls in older adults resulted in an additional 1,062 emergency department visits. Studies show that a combination of interventions can significantly reduce falls among older adults.

Experts recommend:
- A physical activity regimen with balance, strength training, and flexibility components.
- Consulting with a health professional about getting a fall risk assessment.
- Having medications reviewed periodically.
- Getting eyes checked annually.
- Making sure the home environment is safe and supportive.
- New research also suggests hearing loss should be routinely assessed.


Suicide:
Suicide is a major preventable public health problem throughout the United States and Indiana. The 2013 Suicide in Indiana Report has been published by ISDH, which summarizes the status of suicide and suicide attempts in the state from 2006-2011. Suicide is the 11th leading cause of death among Hoosiers and self-inflicted injury contributes to the number of hospitalizations and emergency department visits each year.

The report and additional information about suicide can be found here: http://www.in.gov/isdh/files/Suicide_Report_2013_final.pdf

Fireworks-Related Injury:
All hospitals, medical facilities, and private medical practices are mandated by law to report all firework injuries and deaths to ISDH to be published in an annual report. The 2013 Indiana Firework-Related Injury Report will be assembled and published during the month of October. The reporting cycle for 2013 lasted from September 13, 2012 through September 12, 2013.

Prescription Drug Abuse:
The National Prescription Drug Take-Back Event on October 26, 2013 provides an opportunity to safely, conveniently, and responsibly dispose of prescription drugs at different locations around the state of Indiana. The drop off sites prevent improper disposal of unwanted, unneeded, or expired prescription drugs by providing an alternative to flushing down the toilet, placement in regular trash or leaving them in the home and susceptible to unintended or illegal use. The event also aims to educate the public on the potential for abuse of medications.

This is the seventh Drug Take Back Event in which the Indiana State Police have participated. The April 2013 event collected 742,497 pounds (371 tons) of prescription medications from more than 5,829 locations around the country, of which Indiana locations contributed 11.5 tons.

Information to locate collection sites near you can be found here (after October 1, 2013): http://www.deadiversion.usdoj.gov/drug_disposal/takeback/index.html
ISDH EMS data pilot project

The ISDH Trauma and Injury Prevention program has been collecting pre-hospital data since February 2013 and we now have more than 200,000 runs in our EMS registry. We thank the 29 EMS providers who’ve been generous in working with us and actively supplying data. Those providing data have included Indianapolis EMS, IU Health – Paoli Hospital EMS, Seals Ambulance Service, Decatur Township Fire Department and AMR Ambulance Service from Evansville. EMS providers who have submitted data to the Registry have received their data back, with comparisons to statewide data submitted by other providers.

If you would like to submit EMS data to the Trauma Registry, contact Katie Gatz, Trauma Registry manager, at kgatz@isdh.in.gov, 317-234-7321.

Trauma Registry Rule

The Trauma Registry Rule will require all pre-hospital providers, hospitals with emergency departments, and the State’s seven rehabilitation hospitals to report trauma cases to the ISDH trauma registry. The ISDH Executive Board preliminarily adopted the rule in January 2013, and the public hearing on the Rule was held July 29. The public comment period ended August 16. On September 11, the rule received final adoption by the ISDH Executive Board. If you are interested in receiving training on the trauma registry, contact Brian Carnes, hcarnes@isdh.in.gov, 317-234-2865 or Katie Gatz.

ISDH wants to collect EMS run data because the agency is tasked with establishing a statewide trauma system, and the first phase of that system is obviously fulfilled by the work of EMS providers. Without good data about the performance of EMS provider, we don’t know how good a job is actually being done on behalf of Hoosiers and visitors to our state who suffer trauma. Performance improvement is a very important objective for every statewide trauma system, including Indiana’s.

Rural access to emergency devices (RAED) grant awarded

The Indiana State Department of Health (ISDH) division of trauma and injury prevention would like to congratulate the Richard G. Lugar Center for Rural Health as a recipient of the Rural Access to Emergency Devices (RAED) grant from HRSA. The grant program provides funding to rural community partnerships to expand access to and knowledge of automated external defibrillators.

ISDH Trauma & Injury Prevention Program seeking staff

We are interviewing to fill two positions in the Trauma and Injury Prevention program: a trauma registry data analyst and an EMS data manager.

Optimal Course Information

The Indiana State Department of Health (ISDH) and Indiana Hospital Association (IHA) are hosting Society of Trauma Nurse’s (STN) Optimal Course to provide information to hospitals interested in the statewide trauma system. The course is intended for hospitals that would like to become trauma centers and for those that want to learn more about the system. State trauma officials will attend and offer perspective on the development of the statewide trauma system. The day-long course will be at the Indiana Government Center South on October 11, 2013. More information about the Optimal Course is available at: http://www.in.gov/isdh/24972.htm

Division of Trauma and Injury Prevention:
Brian Carnes—Director
Katie Gatz—Trauma Registry Manager
Jessica Skiba—Injury Prevention Epidemiologist

William C. VanNess II, M.D.—
State Health Commissioner
Art Logsdon—Assistant Commissioner, Health and Human Services