



Trauma Managers Council

Goals and Strategic Directions 2013



Goals and Strategic Directions

The **Trauma Managers Council** of the National Association of State EMS Officials is committed to the following vision, mission, and scope of influence.

Vision: To be a national leader in developing and maintaining a fully-integrated and functioning trauma system that assures universal access to high-quality trauma care in all states and territories.

Mission: To promote the advancement of statewide trauma systems through the development of state trauma system leadership and infrastructure.

Scope: To provide a forum for communication, interaction and networking among peers, other national organizations, and federal agencies with similar missions. This forum allows for the sharing of best practices; developing and encouraging mentoring programs; the joint resolution of obstacles and challenges; and the nationwide promotion of evidence-based decision making.

Leadership refers to the role of state EMS offices as “lead agencies” for EMS as well as thoughtful leaders in public policy development. State EMS offices are looked to by the EMS community for guidance and approval, as well as regulation and licensure. NASEMSO works to support EMS officials nationwide in understanding and implementing processes that improve EMS practice and subsequent patient outcomes.

The Trauma Managers Council supports leadership under these principle goals and will undertake tasks and strategies focused on the following:

Goal # 1: Implement a mentorship process for newer state trauma system managers who aspire to leadership roles. This is both laying a foundation and building on the foundation of professional development. The aim is to have a constantly replenishing stream of experienced, knowledgeable, and diplomatically savvy trauma system leaders who are actively engaged in state and national affairs.

Goal # 2: Complete a comprehensive electronic repository of relevant and easily adaptable resources for use in system development and legislative affairs in all states. This will include current system and clinical research.

Goal # 3: Engage membership more deliberatively through an expanded role for Regional Representatives, written communications, teleconferences, and educational webinars. **(Priority)**

Goal # 4: Support the NASEMSO/ACS Joint Operations Committee; including ongoing advocacy for the development of state trauma system standards and quality metrics. **(Priority)**



Systems Development refers to the role of state EMS offices in the development of effective systems of emergency medical care. The growing national awareness of the importance of coordinated systems of care places NAEMSO squarely in a leadership role, demonstrating the need for state offices to coordinate the disparate functions that support effective systems. Such functions include Emergency Medical Dispatch (EMS), communications systems; regional asset coordination in daily operations and in natural and man-made disasters; EMS data collection, analysis and reporting; and ongoing review and refinement of systems operations.

The Trauma Managers Council supports systems development under these principle goals:

Goal #1: Systems Integration and Interdisciplinary Collaboration – regional variances in access to appropriate trauma care, statistical characteristics of a population, and availability of resources all impact health care costs and quality patient outcomes yet trauma managers are routinely confronted to define the value of “trauma input” within components of the state health system (i.e. emergency preparedness, rural health, public health, data and epidemiology, medical direction, education, credentialing, and licensure)

Goal #2: Systems Development – growing evidence demonstrates the effectiveness of regionalized and specialty care systems yet many states continue to struggle to identify resources to help ensure that the right patient is delivered to the right facility at the right time as a means to optimize patient outcomes and reduce morbidity and mortality related to trauma. Coordination and consistency of state activities is challenged by high turnover rate among state (trauma) officials.

Quality Improvement or “QI” is the process of continually reviewing, assessing and refining practices to improve outcomes. The steps of developing an effective cycle of collecting high quality data, reviewing it in proven multidisciplinary processes, identifying strategies to implement needed changes and communicating them to all stakeholders are the key to QI success, and to subsequently improving patient outcomes.

The Trauma Managers Council supports quality improvement under these principle goals:

Goal #1: Using Data to Support Systems Benchmarking and Best Practices – As a component of the state health department, trauma managers are integral to the collection and analysis of comparative data (internal and external) to identify risks and trends, assist in education and



injury prevention efforts, improve field care, and encourage and advance trauma systems nationwide.

Goal #2: Maintenance and Standardization of State Trauma Registries –Statewide trauma registries have proliferated in the last decade, suggesting that information could be aggregated to provide an accurate depiction of serious injury in the United States. In addition, data collection leads to better care for patients and enhanced injury prevention measures by providing effect feedback on injuries and mortality rates.

Goal #3: Funding – reduced reimbursement rates for hospitals and growing expectations of an evolving healthcare system demand focused efforts to reduce injury and improve care. The value of a comprehensive EMS system and inclusion, visibility, and integration of the state trauma program cannot be understated.

PLEASE NOTE: The Trauma Manager Council's 2013 Work Plan will focus on tasks and strategies that support our primary Leadership Goals. We feel these are realistic and achievable in 2013 with the current resources or potential resources to be identified. Secondary goals of the Council have been placed in the Parking Lot. Completion of tasks/strategies focused on Systems Development and Quality Improvement are somewhat complex in nature and have not been fully explored.

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2013 Workplan Goals, Objectives and Action Steps

Goal 1: Development of a mentoring toolkit for State Trauma Managers

Objective/Strategy:

This toolkit is meant to be utilized as a resource for new and existing trauma manager's nationwide and seeks to serve both Leadership Goals 1 and 2 of the council's 2012 goals & strategic directions

Task	Responsibility	Due Date	Done	Budget
Identify workgroup members			X	\$0
Develop list of topics/outline			X	\$0
Identify companion resources	Council Leadership/NASEMSO			\$0
Compile info	Council Leadership/NASEMSO			\$0
Review/revise toolkit	Council Leadership/NASEMSO			\$0
Distribute resource	Council Leadership/NASEMSO			\$0

Task	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	done
Identify workgroup members													X
Develop list of topics/outline													X
Identify companion resources													
Compile info													
Review/revise toolkit													
Distribute resource													

Goal 2: Develop an electronic repository/database of resources for use in system development

Objective/Strategy:

The completion of an electronic repository of relevant and easily adaptable resources for use in system development and legislative affairs in all states. This will include current system and clinical research.

Kathy to refine based on previous discussions surrounding national trauma center database.

Task	Responsibility	Due Date	Done	Budget
Identify workgroup members	Council Leadership/NASEMSO			
Develop project proposal for funding	Council Leadership/NASEMSO			

Task	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	done
Identify workgroup members													
Develop project proposal for funding													



Goal 3: Engage membership more deliberatively through an expanded role for Regional Representatives

Objective/Strategy:

Engage membership more deliberatively through an expanded role for Regional Representatives, written communications, teleconferences, and educational webinars

Task	Responsibility	Due Date	Done	Budget
Identify Regional Trauma Reps	Elected/Appointed at Annual Meeting		Y	\$0
Integrate new members into the council through contact from regional council leadership	Chair/Regional Leadership	Ongoing		\$0
Regional council chairs to engage membership within their region for trauma systems dialog and any problem solving assistance that may be needed	Chair/Regional Leadership	Ongoing		\$0
Suggested meeting once per quarter as appropriate	Chair/Regional Leadership	Ongoing		\$0

Task	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	done
Identify Regional Trauma Reps													X
Integrate new members into the council through contact from regional council leadership			Ongoing										
Regional council chairs to engage membership within their region for trauma systems dialog and any problem solving assistance that may be needed			Ongoing										
Suggested meeting once per quarter as appropriate			Ongoing										

Goal 4: Serve as a resource to the JOC on issues related to trauma systems development and improvement

Objective/Strategy:

Support the NASEMSO/ACS Joint Operations Committee; including ongoing advocacy for the development of state trauma system standards and quality metrics.

Task	Responsibility	Due Date	Done	Budget
Maintain communication with Council reps to JOC	Council Leadership/NASEMSO	Ongoing		\$0
Garner support for one face to face meeting per year	Chair/NASEMSO	12/12		

Task	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	done
Maintain communication with Council reps to JOC			Ongoing										



Garner support for one face to face meeting per year			Projected											

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Parked Issues – Numerous issues and strategies are on the council's radar, but are currently parked due to various reasons – awaiting completion of dependant activities; currently no champions to assign this to; limited funding, etc.

As practical, these will be moved up into the 2014 workplan or carried into the next year.

Goal 1P: Identify model rules, collaboration with other organizations that support the concepts of system development i.e. ACS, NCSL, UPenn, others

Objective/Strategy: [Objective #1]

Description of the objective and expected outcome, short description – no more than several sentences.

Task	Responsibility												Due Date	Done	Budget
Not necessary until objective becomes active															
Task	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	done		
Cut and paste tasks from above													Y		

Goal 2P: Maintain the state trauma systems monograph

Objective/Strategy: [Objective #1]

Description of the objective and expected outcome, short description – no more than several sentences.

Task	Responsibility												Due Date	Done	Budget
Not necessary until objective becomes active															
Task	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	done		
Cut and paste tasks from above													Y		

Goal 3P: Encourage the use of NEMSIS to measure quality and advise policy development, as well as the development of suggested audit filters

Objective/Strategy: [Objective #1]

Description of the objective and expected outcome, short description – no more than several sentences.

Task	Responsibility												Due Date	Done	Budget
Not necessary until objective becomes active															
Task	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	done		
Cut and paste tasks from above													Y		



Goal 4P: Recommend standardized inclusion criteria, variable definitions, and coding conventions to enhance the usability of state trauma data

Objective/Strategy: [Objective #1]

Description of the objective and expected outcome, short description – no more than several sentences.

Task	Responsibility												Due Date	Done	Budget
Not necessary until objective becomes active															
Task	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	done		
Cut and paste tasks from above													Y		

Goal 5P: Monitor and support national and legislative initiatives that promote inclusive trauma systems

Objective/Strategy: [Objective #1]

Description of the objective and expected outcome, short description – no more than several sentences.

Task	Responsibility												Due Date	Done	Budget
Not necessary until objective becomes active															
Task	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	done		
Cut and paste tasks from above													Y		