

NATIONAL FOUNDATION FOR TRAUMA CARE

"Securing the Future of Trauma Care"

- - THE TRAUMA CENTER CONNECTION - -

Volume V, Issue I

Spring 2007

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New Members 2007

*Army Hospital
Landstuhl, Germany*

*Caritas Holy Family Hospital
Methuen, MA*

*Children's Hospital Los Angeles
Los Angeles, CA*

*Children's National Medical Center
Washington DC*

*Hackensack Univ. Med. Ctr.
Hackensack, NJ*

*Maricopa Integrated Health System
Phoenix, AZ*

*McLeod Health
Florence, SC*

*Regional Medical Center of San Jose
San Jose, CA*

*St. Joseph Regional Health Center
Bryan, TX*

*Suburban Hosp. & Healthcare System
Bethesda, MD*

*University Medical Center
Fresno, CA*

Corporate Members 2007

Adam Williams Initiative

Hutchinson Technology

Letter from Immediate Past Chair, Dr. Ron Anderson

Dear Trauma Care Leaders:

A great deal has been accomplished in the last two years as the National Foundation for Trauma Care successfully separated from Bishop+Associates and pursued an aggressive agenda to advocate for the interest of trauma surgeons, centers and systems throughout our country. We have begun to boldly confront important national issues facing trauma care such as adequate physician compensation, an aging work force, and the problems of subspecialty surgical support for the trauma team effort. We have also begun to address the lack of local, state, and federal support for not only trauma care but the myopic view of disaster preparedness in America. We have tried to advocate for adequate funding for surge capacity and for a better understanding of the impact of terrorism on the entire health care delivery system and especially the trauma centers. We have contributed to an important research effort in collaboration with the CDC on the impact of disasters on trauma centers and their level of preparedness. The results are sobering, but best practices are exciting. The first step to recovery is recognizing that you have a problem! NFCT is highlighting problems, but also pointing out potential solutions.

The NFTC has grown to 235 active members, including 16 state agencies which oversee trauma centers, and two corporate members. This growth has been nothing short of phenomenal and it continues to escalate with very favorable projections for the coming year. We have developed a succession plan for leadership on the Board of the NFTC and successfully moved to Las

Cruces, New Mexico where our small but very dedicated and high quality staff have freed up administrative funds to invest in professional and sophisticated advocacy and public relations campaigns in Washington, DC for 2007-8.

This is an exciting time for NFTC. We have been laying a firm foundation in the last two years. I want to personally thank those who served on my Executive Committee, especially Dr. Don Trunkey who has agreed to serve as the Chairman of the Board of NFTC until our succession to a new board is implemented. Many of the people who have served ably for the last several years have agreed to stay on in leadership roles which is comforting to me because I have come to really appreciate their dedication to this field and their deep and abiding interest in seeing our goals accomplished. Their corporate wisdom is substantial. Thank you for supporting my efforts to create a servant-led organization. I suppose I would close by reiterating the importance of the members' continued support for NFTC on a go-forward basis. An effective voice for trauma providers in this country is desperately needed. We have been and are in the process of creating such an effective voice. I would encourage every trauma center to join NFTC and support its dialogue and efforts to awaken policy makers in the Nation's Capital and in our individual State Capitals to the challenges ahead and how to meet them head on.

Sincerely,

Ron Anderson, MD, MACP
President & CEO
Parkland Health and
Hospital System
Immediate Past Chair



New NFTC Chair Receives Harborview Award



On March 17th at the Salute Harborview Gala, with more than 950 people in attendance, Dr. Donald Trunkey received the prestigious Harborview Mission of Caring Award. This award is bestowed annually to an individual, individuals, community group or corporation whose

leadership in the community epitomizes the spirit of Harborview's mission. Dr. Trunkey, an internationally renowned trauma surgeon, is responsible for training many of the Northwest Trauma surgeons and in particular many who work at Harborview. In 2005, Dr. Trunkey, along with his wife Jane, with their generosity and joined by other generous donors, created a permanent legacy with the establishment of the Jane and Donald Trunkey Endowed Chair in Trauma Surgery based at Harborview.

New Members Join Board of Directors

The NFTC welcomes two new members to the Board of Directors, replacing Surgeons Wayne Meredith and David Hoyt whose terms were completed. We are very grateful to Drs. Meredith and Hoyt for their activism in founding the NFTC as a non-profit organization.



Susan Briggs, MD, FACS, Trauma Surgeon at Massachusetts General Hospital and Professor of Surgery at Harvard School of Medicine brings to the NFTC not only her dedication to trauma care but a wealth of experience and knowledge about disaster medicine. As a consistent and active member of the CDC Grant Advisory Committee, Dr.

Briggs not only assisted in the composition of the report to the nation on "US Trauma Center Preparedness for a Terrorist Attack in the Community," she also conducted one of the Validation Visits to a Highly Prepared Trauma Center. Dr. Briggs is the Editor of the *Manual for Providers for Advanced Disaster Medical Response (2003)* and the recently launched *American Journal of Disaster Medicine*.

The NFTC has a long-standing relationship with Dr. Samir Fakhry, whose expertise in the field of trauma surgeon billing and CPT coding has assisted many physicians toward a more sustainable trauma practice. He has led annual breakfast sessions and breakouts at national meetings for trauma surgeons as well as conducted many lectures on these topics and others at the NFTC Annual Trauma Medical Director's Course. Dr. Fakhry assisted the NFTC to attain the UB-92 68x Trauma Response revenue code by attending several NUBC meetings on your behalf. He has been working with the Reimbursement Committee for several years to gain acceptance for a new AMA Current Procedural (CPT) Code for surgical care associated with trauma resuscitation.



Both Drs. Briggs and Fakhry were elected through a NFTC member vote by an overwhelming majority. We welcome their insights and enthusiasm for our mission to improve trauma care access nationwide and trauma center sustainability.

NFTC Advocacy Agenda

The NFTC is in both a strong fiscal position so that funds can be allocated toward national advocacy campaign for trauma centers and to develop a professional public relations campaign using highly regarded professional firms based in the Washington DC area.

The Board of Directors approved at its January 2007 meeting to send out Requests for Proposals (RFP's) to contract with a select lobbyist firm with proven experience and contacts in healthcare, public safety, and public health or disaster medicine. As a result, the NFTC multiple letters of intent to submit proposals as well as proposals. On March 26, the Advocacy Selection Sub-Committee of the Board of Directors decided to continue its relationship with the well-known Washington DC based firm Holland+Knight through October 2007. The firm has a longstanding relationship with the NFTC and its Advocacy Committee, chaired by David Jaffe, and is highly knowledgeable about the fiscal and other constraints facing trauma centers.

Along with the decision to contract for lobbyist services, the Board approved selection of a Public Relations firm to develop both short and long term deliverables to support the advocacy goals of increasing public as well as elected and appointed officials awareness of trauma centers role in public health and disasters. Their goal is also to develop a branding/image building campaign to support trauma care as an important public health service as fire, EMS, police, etc. This is needed because, despite over 25 years of trauma center and system development, 8 out of 10 persons interviewed in a Harris poll conducted in 2005, considered having an ER the same as having a trauma center in

their community. The NFTC strongly believes that advocacy alone will not be successful unless we change both public and legislators' understanding of the essential role of trauma centers within the public health structure and in disasters of all types.

This year's ambitious agenda includes:

- Seeking opportunities for trauma center funding under "PL 109-417: Pandemic Influenza and All Hazards Preparedness"
- Enhancing CMS funding for the NFTC sponsored UB-92 code 68x, "Trauma Response"
- Follow-up on recommendations from the NFTC report "U.S. Trauma Center Preparedness for a Terrorist Attack in the Community" (CDC Grant Number 1 R49 CE000792-01)
- Lobbying, in collaboration with other healthcare organizations, to curtail Medicaid cuts that will disproportionately impact safety net hospitals and trauma centers
- Seeking trauma center opportunities under the "Trauma Care Planning and Reauthorization Act", emphasizing the interstate and borderless nature of trauma care and disaster medicine
- Establishing a basis for improving trauma surgeon reimbursement for initial care of the injured patient through a multi-institutional survey of workload and surgeon billing
- Developing a branding/image building campaign that can be used at both a grass roots level in trauma centers and systems to build support for public funding for trauma care as well as at a national level for legislators, governors and agencies so that funds are allocated to support a national system of trauma care

New Trauma System Member Services

The NFTC Systems Committee has recognized the detrimental impact of the loss of HRSA funding on trauma system management education. At least three trauma systems have been unable to renew their NFTC membership this year because they lack funds. In addition, the NFTC had to cancel the Trauma System Management Course in Dallas in February because system members could not afford tuition and travel funds.

In an innovative move, the Systems Committee, led by Mary Beachley, Hospital Program Specialist for Maryland, has

developed a schedule of free monthly conference calls for NFTC System Members. The conference calls will alternate an Education Program with an Open Forum for members to discuss their issues and gain advice of other State or regional systems. NFTC staff will act as a clearinghouse for documents and other materials as requested by members. The calls will be recorded for those who cannot be present. Topics for the bi-monthly educational calls include: Federal Lobbying/Advocacy, Alcohol and Drug Screening & Brief Intervention/UPPL, ACS "Green Book" Standards Update, and Injury Prevention Resources.

NFTC Adds Corporate Memberships

The Development Committee, led by Patrick Michaelis, RN, and the NFTC Board has developed criteria for a new membership for Corporations that provide trauma centers with products and services. These memberships, newly acquired by Hutchinson Technology and the Adam Williams Initiative Foundation, support trauma care through their subscription dues and by disseminating information about the importance of trauma centers and systems as they promote their products and services.

NFTC provides Corporate Members with a national list of Levels I through II trauma centers. The list includes the trauma center's name, address, and Program Manager's contact information.

Corporate Members receive free exhibitor space at the NFTC Annual Conference and their logo will be displayed on all NFTC materials. Their websites will be linked on www.traumafoundation.org to assist them in their efforts to improve trauma care through their products and services.

We thank our first two members and encourage NFTC trauma center and system members to inform vendors and other service providers they encounter that this opportunity exists to support our national efforts such as lobbying and public education through our affordable Corporate Membership.

Hutchinson Technology, Inc.

In February, Hutchinson Technology, Inc. (HTI) became the first Corporate Sponsor under the NFTC's new corporate sponsorship program. According to Brian Kane, Hutchinson's Director of Marketing, "HTI is honored to be among the first corporations to help sponsor the NFTC's many initiatives. We see the opportunity as an important, on-going means of learning from, and contributing to, the trauma community."

Founded in 1965, Hutchinson Technology is an acknowledged world leader in precision design and manufacture of close-tolerance products that require chemical, mechanical, and electronic technologies. The technology platforms used to develop HTI's medical device products include optical metrology, and specifically, near infrared spectroscopy. Coupled with HTI's world leadership in precision engineering, these technologies provide a powerful foundation for innovation in health care. In 1996, recognizing the need for precise, real-time measurement in healthcare monitoring, HTI assembled a team of experts in these areas to form the Hutchinson Technology BioMeasurement Division. A *Trauma Advisory Board* was established to ensure the technology addresses real and unanswered medical needs.



HTI's patented technology, the **InSpectra™ StO₂** Tissue Oxygenation Monitor, received FDA clearance in July 2006, and provides a reliable, continuous, and noninvasive measure of tissue oxygen saturation (StO₂) for health care providers. The **InSpectra™ StO₂** Tissue Oxygenation Monitor, designed and tested for trauma use, provides a direct, absolute

measurement of StO₂ using near infrared spectroscopy and a patented algorithm to directly measure tissue oxygen saturation in muscle tissue below the skin. It is indicated for use in monitoring patients during circulatory or perfusion examinations of skeletal muscle, or when there is a suspicion of compromised circulation. The **InSpectra™ StO₂** System consists of a monitor, an optical cable and a single patient use sensor that is easily applied to the thenar eminence (the muscle at the base of the thumb).

This device gives hospital trauma teams the ability to noninvasively and continuously measure compromised tissue oxygen saturation (StO₂) associated with hemorrhagic shock and monitor it during resuscitation. "Other means of assessing tissue oxygenation in patients with hemorrhagic shock are snapshots of the past and are indirect or invasive, or both," said Christina Temperante, President of Hutchinson Technology's BioMeasurement Division. "In contrast, our device is noninvasive and provides an immediate, direct and continuous measurement, filling a critical and widely recognized information gap in the monitoring of trauma patients."

Long term, HTI's BioMeasurement Division is committed to Advancing Better Therapies by applying its engineering and manufacturing expertise to address significant technological needs within the clinical health care community.

For more information on Hutchinson Technology, Inc., contact Brian Kane, Director of Marketing at (320) 587-1571 or brian.kane@hti.htch.com.



Adam Williams Initiative

Establish a Higher Standard of Care for Traumatic Brain Injury.



The Adam Williams Initiative is helping trauma teams nationwide increase quality traumatic brain injury (TBI) outcomes.

The Adam Williams Initiative provides free training and capital equipment to Level I and Level II trauma centers across the United States to treat severe traumatic brain injuries.

The protocols were created from the Brain Trauma Foundation (BTF) / American Association of Neurological Surgeons (AANS) guidelines and cutting edge technology. Since establishing working protocols at Mission Hospital, Mission Viejo, CA, in 1997, TBI outcomes have improved dramatically. The number of patients able to function normally increased 300%, mortality rates were reduced by 66%, and vegetative state was reduced by half.

Yet, a recent survey done by the Brain Trauma Foundation elicited that only one-third of the trauma centers across the country have implemented the BTF/AANS TBI guidelines in any form, and of those, only a marginal fraction have implemented the guidelines to the full extent.

In 2001 Mission Hospital won the prestigious JCAHO's Codman Award for their full implementation and improvement of the protocols and consistent increases in quality outcomes. The Adam Williams Traumatic Initiative was established to disseminate these protocols, train clinical staff, and provide capital equipment used in these protocols at no cost to the receiving hospital. The AWI team has trained dozens of Level I and Level II trauma centers in the United States and all are trending towards the same level of improvement. The Initiative aims to help establish a higher standard of care for traumatic brain injury patients.

For more information on the Adam Williams Initiative, contact Blain Tomlinson at (562) 714-5151 or blain@awtbi.com.

NATIONAL FOUNDATION FOR TRAUMA CARE

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www.traumafoundation.org

NFTC Education Calendar

Trauma Center Designation Course
Regions Hospital, St. Paul, MN
May 18-19, 2007

Trauma Site Surveyor Workshop
Regions Hospital, St. Paul, MN
May 20, 2007

**Terror and All-Hazards Preparedness:
Are We Really Ready?**
Audio Web Conference
June 12, 2007

**Trauma Center Finance:
Are We Doing Better?**
Audio Web Conference
September 18, 2007

**EMTALA and Non-Emergent
Transfers: What Does the Law Really
Require?**
Audio Web Conference
October 23, 2007

**Managing/Improving a Trauma Program
Using Lean Principles**
Audio Web Conference
December 11, 2007

**Trauma Finance & Business
Planning Course**
March 6, 2008
Dallas, TX

**Trauma Center
Leadership Conference**
March 7, 2008
Dallas, TX

Trauma Medical Director Course
March 7-9, 2008
Dallas, TX

For more information on education and events,
please contact Michelle@traumafoundation.org
or call (505) 525-9511.

Trauma Center Designation / Verification Course May 18-19, 2007



The Trauma Center Designation / Verification Course is designed to assist those facilities that have made the commitment to join the trauma system and achieve trauma center verification / designation or are facing re-designation. The course will provide a lessons-learned approach to navigating the complex processes to a successful site survey, including tips on new ACS standards. Individuals who are seeking verification / designation or re-verification / designation are the targeted participants. Participants should include trauma program administrators, trauma medical directors, trauma program managers, trauma registrars, trauma case managers, performance improvement staff, managers of trauma units, and financial managers.

Trauma Site Surveyor Workshop May 20, 2007

The Trauma Site Surveyor Workshop was developed to build a pool of in-state surveyors for trauma facilities and guide trauma system managers in overseeing those surveys. The participants will interact with expert surveyors to gain a lessons-learned approach to preparing for the survey, reviewing the application, conducting a "facility walk-through review," medical records review, and time management. Participants will review the concepts of completing, an exit conference, a written summary report, and learn critical factors for defining the facilities weaknesses, strengths, potential criteria deficiencies, and recommendations.



Participants should identify their local and state agencies requirements for becoming a trauma center site surveyor to define the criteria for credentialing of surveyors. This course is designed to provide a general overview and hands-on approach to becoming a surveyor. However, only the oversight agency or state has the authority to credential surveyors.

Regions Hospital, St. Paul, MN

These programs are hosted by Regions Hospital's Trauma Program. Select hotels in the St. Paul area honor a Regions Hospital corporate rate. The Embassy Suites (651) 224-5400 has dedicated a group of rooms for the NFTC at the rate of \$139/night.

Annual Conference 2008

The NFTC Education Committee is seeking suggestions for topics and faculty at the next Trauma Center Leadership Conference in Dallas, Texas, March 7, 2008. Please send an email to michelle@traumafoundation.org with any topics you would like addressed at the course as well as suggested speakers.

The Finance and Business Planning Course has been scheduled for March 6, 2008. The Trauma Medical Director Course will be March 7-9, 2008. All will be held in Dallas, TX; hotel to be determined.

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