

# STATE OF COLORADO

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Colorado Department  
of Public Health  
and Environment

## Colorado ACS Trauma Task Force Final Report

March 26, 2010

### Trauma System History

In 1995, the State of Colorado passed comprehensive, state-regulated, voluntary and inclusive trauma system legislation. This legislation identified the Colorado Department of Public Health and the Environment as the lead agency for trauma system development throughout the state. With the passage of this legislation came rules regarding trauma center designation, trauma and EMS data collection and mandatory triage and transfer of severely injured patients to designated centers. The rules governing the trauma system have been updated from time to time, and the system has been maturing; however, an outside review of the trauma system that focused on next steps for system improvement had not been conducted prior to the American College of Surgeons (ACS) Trauma System Consultation visit in May 2009.

In late 2008, the department received a grant from the Caring for Colorado Foundation to conduct an ACS trauma system consultative visit. The purpose of the visit was to provide guidance to Colorado in the further development of the statewide trauma system. The ACS site visit was conducted on May 17-20, 2009. Subsequently the ACS site review team released a report on the findings and recommendations from that visit. The recommendations were broken down into four broad categories:

- Assessment, 10 recommendations
- Policy Development, 38 recommendations
- Assurance, 52 recommendations
- Focus Questions, 25 recommendations

(See [http://www.cdphe.state.co.us/em/traumaconsultation/ACS\\_Recommendations.pdf](http://www.cdphe.state.co.us/em/traumaconsultation/ACS_Recommendations.pdf) for a complete listing of the 125 recommendations.) The entire report from the Trauma System Consultation visit can be found on the EMS and Trauma Services Section website at <http://www.cdphe.state.co.us/em/traumaconsultation/index.html>.

## **Prioritizing Recommendations**

Following the trauma system site review, the Colorado Department of Public Health and Environment, with advice from the State Emergency Medical and Trauma Services Advisory Council (SEMTAC) convened a Trauma Task Force (TTF) to review and prioritize the recommendations contained in the ACS Consultative Report. The department requested participation on the TTF from a broad base of constituents representing all phases of trauma care including representation from urban, rural and frontier communities (see list of appointed members

[http://www.cdphe.state.co.us/em/traumaconsultation/Members\\_Contact\\_List.pdf](http://www.cdphe.state.co.us/em/traumaconsultation/Members_Contact_List.pdf)). Other interested trauma system partners were also encouraged to attend and participate. The TTF worked through each of the recommendations, discussed the ramifications and possibilities related to the recommendations, and with a focus on improving patient outcomes, has developed this report to provide guidance and direction to the department, SEMTAC, RETACs and the Colorado EMTS stakeholders.

The TTF realizes that this report is designed to be a starting point for future development of the Colorado trauma system. Understanding that continued system development consists of many activities and efforts, the “top 10” recommendations developed through this report are not ranked between themselves. The TTF recognizes that addressing trauma system improvements will inherently become a process of simultaneous steps and initiatives. However, the TTF also recognizes that in order for the system to continue its maturation process, the “top 10” recommendations contained herein are the foundation of this initiative. It is important to note that the TTF does recognize that the development of a “multidisciplinary trauma committee” within the EMTS advisory structure is one of the initial steps necessary to guide future system improvements.

The objective of the TTF was to review the ACS consultative visit report and distill all 125 recommendations in a manner that will allow the department and stakeholders to address system improvements into the future. It is important to understand that the TTF considered all 125 recommendations throughout its deliberations, and although there is a perceived “order of importance,” no recommendations were “dropped” or disregarded throughout this deliberative effort. It will be important to ensure that all of the recommendations contained within the report be considered as the effort to further develop the Colorado EMTS system moves forward into the future.

The TTF and constituents have been meeting since September 2009 in an effort to analyze and prioritize report findings and recommendations. A spreadsheet (grid) of the recommendations was prepared and presented to the TTF to ease the task of ranking the recommendations and compiling them into a priority list. Recommendations were weighted based on public input, reviewed, discussed as to meaning and clustered with similar recommendations to form a final grid

(<http://www.cdphe.state.co.us/em/traumaconsultation/index.html>). This report presents the final findings and prioritized recommendations from the TTF.

## **Charting a New Course**

Key findings from the consultative visit suggested that while Colorado has made much progress in the area of system development, there is still much to be done. The site visit report emphasized the need to move forward with a more patient-centered and patient-focused system that uses data for tracking system performance, patient outcome, prevention, education and quality/process improvement. While the report recognized Colorado's national leaders in trauma care, it also encouraged developing a broader integrated system whereby advisory/planning committees and trauma center leaders work collaboratively across multidisciplinary and geographic boundaries to improve patient outcomes.

Recognizing the goal to be a more patient-focused system, the TTF adopted a set of guiding principles ([http://www.cdphe.state.co.us/em/traumaconsultation/guiding\\_principles.pdf](http://www.cdphe.state.co.us/em/traumaconsultation/guiding_principles.pdf)) to enhance its discussions and continue the focus of putting the injured patient first in prioritizing the recommendations. The recommendations have been prioritized with two (2) listed as philosophical statements, eight (8) recommendations already in progress and the remaining 115 listed as "Top 10" or "All Others." Among the "Top 10" and "All Others," a number of the recommendations are clustered (similar themes). The key recommendations from the ACS consultative report as identified by the TTF are:

### **Key Recommendations:**

- Creation and implementation of a multidisciplinary trauma advisory committee
- Assisting rural facilities in providing great trauma care
- Critical care transport
- Data collection and use
- Development and implementation of state trauma plan
- Enforcement of trauma rules
- Protection of data
- Statewide needs assessment
- Statewide performance improvement
- Triage and transfer guidelines

As described previously, these ten key recommendations have been identified by the TTF as foundational components of system improvements into the future. However, the remaining recommendations in the report are of significant importance, and it will be the responsibility of those stakeholders who will work on implementing change over the next 10+ years to ensure that all of the recommendations receive appropriate consideration.

During the prioritizing process, no recommendations were dropped from the list and all recommendations were vetted. The TTF used a consensus process to assess and prioritize

recommendations that would have the greatest impact on improving patient outcome and furthering system development in accordance with the overall guidance from the ACS site visit report and its own guiding principles.

### **Setting the Agenda for Future Trauma System Activities**

This final report of the TTF represents a new direction in trauma system development for Colorado. With a prioritized list of recommendations the Emergency Medical and Trauma Services Section along with the State Emergency Medical and Trauma Services Advisory Council, the Regional Emergency Medical and Trauma Advisory Councils and other interested constituents can focus on a plan to enhance the trauma system throughout the state. There is a defined list of projects, a renewed effort on patient-centered systems of care and a more universal and integrated approach to an inclusive trauma system.

The resources, personnel and equipment to accomplish the list of prioritized recommendations were not part of the system prioritizing process. The TTF recognizes the limited resources currently available and seeks to work with the department in identifying how best to implement the recommendations and improve patient outcomes.

This report is to be considered the final product of the TTF in achieving the goal set forth by the department and the SEMTAC. The report represents the first step in implementing a broad range of activities that will improve outcomes for Colorado's trauma patients. In accordance with the established procedures of the department, the SEMTAC is expected to consider this report and in concert with the Emergency Medical and Trauma Services section, develop the policies and procedures to begin the implementation of recommendations accordingly.

The breadth and scope of the ACS report and associated recommendations are immense and the report will serve as a roadmap for the continued development of Colorado's trauma system for many years to come. However, the dedication and energy contributed by stakeholders to this first step is evidence that Colorado's emergency medical and trauma community is up to the task.

The department wishes to thank the many individuals who gave of their time and expertise to engage this important first step towards the Colorado EMTS system of the 21<sup>st</sup> century. Their time and energy in this effort is greatly appreciated.

Respectfully Submitted to the SEMTAC on April 8, 2010.