



Right Care. Right Place. Right Time.

Time Critical Diagnosis System Trauma Work Groups

The Department of Health and Senior Services (DHSS) will continue to support work groups implementing tasks to advance the trauma arm of the Time Critical Diagnosis System. Work groups to date have reviewed the regulations for trauma center designation and protocols for triage and transport of Trauma patients. We will be calling together workgroups for professional education, public education and quality assurance. Each work group will primarily use webinars and conference calls to complete their work starting the first of 2010 with a statewide face-to-face meeting for all of the work groups tentatively planned for fall 2010. Specific tasks that each group will do are detailed below.

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Please complete the contact information (please print and make sure your information is legible) and check (✓) the work group (s) on which you want to participate.

Name/Title: _____

Facility _____

Address _____ State _____ Zip _____

E-mail: _____ Day-Time Phone number _____

Professional Education Work Groups:

Please check which group you want to participate in:

Trauma-Hospital based professionals

Trauma-Out of Hospital based professionals

Tasks to Complete

1. Identify professionals groups and professional education content areas for each group to obtain or update knowledge, skills and competencies for care of trauma patients.
2. Compile core training, continuing education and continuing medical education content recommendations for each of the professional groups.
3. Identify appropriate communication strategies and implement to improve understanding of the TCD system among the impacted professional groups.
4. Identify existing options available for each respective group to obtain continuing education units (CEUs) and continuing medical education (CMEs). Compile listing of training options for each professional group. Identify options that are available at low and minimal costs and are easily accessible (conducted in multiple locations or available on-line).
5. Determine if there are any gaps in availability of continuing education by region. Compile recommendations for filling gaps and work with existing educational avenues (e.g., professional associations and colleges, universities, American Heart Association, prospective Level I & Level II centers) to take on that charge.
6. Identify if there are needed resource tools to support training. Compile listing of available resources and make recommendations for new tools and resources needed.
7. Determine if hospitals and EMS agencies want guidance on assessment or credentialing process for assuring staff trauma skill and competency levels. If needed, identify appropriate experts or existing group and method to compile.
8. Implement a mechanism to track continuing education opportunities available on local, regional and state level.
9. Determine approaches to update professional development plan when evidence-base and best practices change or quality assurance process identifies training weakness areas.

Public Education Work Group

Please check if you want to participate

_____Public Education Work Group

This group will subdivide as needed to tailor messages and research existing campaigns and materials for Trauma.

Tasks to Complete

1. Identify target audience(s) and subsets of audiences for the public awareness campaign to increase awareness of the TCD system and when specialized care is needed for injury, importance of calling 911 when appropriate.
 2. Review market research on target audience and subsets to identify best strategies and approaches for public education campaign. Identify factors that contribute to patients delay in calling 911 or seeking timely care. If funding available use services of public relations/market research firm to assist with this research.
 3. Compile listing of key messages for each communication track. Test existing TCD messages for public campaign. If service available, work with public relations to craft and test all messages.
 4. Review existing campaigns on injury and injury prevention and 911. Identify which have been most effective and support Missouri key messages. Establish Missouri plan to develop or adapt existing public awareness campaign.
 5. Implement plan that includes campaign strategies, messages and approaches that unify and coordinate partner efforts to inform public about injury, injury prevention, and importance of calling 911 when appropriate. This plan will address how to make campaign materials and resources easily accessible and available to all Trauma centers and all other partner groups.
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Quality Improvement Work Groups

Please check if you want to participate

_____Quality Improvement Work Groups

An outside contractor with expertise in statewide health data management systems will assist with the work of this group. QA process will look at the continuum from prehospital through hospital to rehabilitation stages of care.

Tasks to Complete

1. Contractor will complete review of existing systems on a national and state-by-state basis and review Missouri State and local data systems currently in place. Contractor will provide overview to work group.
2. The contractor will provide advice to DHSS as it creates or expands an existing platform for the data management system based on the work group recommendations and plan. DHSS will strive to a) build on current successful approaches to capture and link data across the system, b) ensure compatibility with data reporters, and c) establish realistic procedures that are not redundant with other reporting requirements.
3. The contractor and work group will identify current performance measures, benchmarks, indicators and outcomes collected and to be collected for Missouri data management system.
4. The work group and contractor will complete plan for data management system to support pre-hospital and hospital agencies within the TCD system. The plan will address means to establish statewide data management system that is reliable, valid and timely to support quality assurance, assessment and evaluation functions. Will also recommend data elements, quality improvement functions and benchmark measures in order to identify what is to be incorporated into Missouri system-wide data management program.

Please return to beverly.smith@dhss.mo.gov or fax to 573-751-6041