

Annual Report Fiscal Year 2010 - 2011

Table of Contents

Letter from the Executive Director
Governing Board6
LERN Organization Today10
Financial Summary14
Building a Comprehensive Statewide System for Trauma and Time-Sensitive Illness



Letter from the Executive Director

My name is Paige Hargrove. In November of 2011, the LERN Governing Board offered me the job of LERN Executive Director. I humbly and enthusiastically accepted. Here are four reasons why.

A most important mission

LERN's mission is to defend the public health, safety, and welfare by protecting the people of the state of Louisiana from unnecessary deaths and morbidity due to trauma and time-sensitive illness. It is a big mission. Traumatic injury is the #1 cause of death in the U.S. for the entire 1-44 years old age group and Louisiana has one of the highest trauma death rates in the nation.

A committed statewide team of experts

LERN is led by a 28-member Board of volunteers and advised by nine regional commissions (over 100 individual leaders) that represent all key trauma care stakeholders, including: hospitals, physicians, EMS providers, rehabilitation providers, medical education providers, emergency preparedness and disaster response agencies, the Department of Health and Hospitals (DHH), and the Louisiana Legislature.

A nationally-recognized model

LERN is an emerging organization (created by the Louisiana Legislature in 2004 and funded since 2006) that is being developed in accordance with the nationallyrecognized model for statewide trauma systems created by the American College of Surgeons (ACS).

A foundation of accomplishment on which to build

In five short years, LERN has gained the voluntary participation and cooperation of most Louisiana hospitals and EMS providers to utilize the LERN protocols and the LERN Communications Center - vital trauma system tools that support the goal of getting trauma patients to the right place at the right time. LERN has also established a fully operational regional commission in each of the nine DHH regions of the State. The regional commissions guide ongoing regional development and improvement of our statewide trauma system. These and other accomplishments have created a solid foundation upon which a more comprehensive statewide trauma system can be built.

This annual report provides a summation of LERN's budget and performance during Fiscal Year 2010-11. It also includes basic definitions of all the major components of a comprehensive statewide trauma model, a brief status report on LERN's developmentto-date relative to this comprehensive model, and a description of LERN's strategic priorities. The LERN Board has established a bold set of strategic priorities to guide the next few years of LERN's development.

Two of LERN's leaders deserve special mention here – the outgoing Chair of the LERN Board, Coletta Barrett, RN, and the incoming LERN Board Chair, Norman McSwain, M.D. Coletta has been instrumental in the establishment of LERN's core operations – serving with great passion and energy as LERN's Board Chair since 2009. Dr. McSwain is a true trauma care pioneer – an internationally recognized trauma surgeon and educator who has advocated for the development of a statewide trauma system in Louisiana for over two decades. We extend much thanks to both of these fine leaders for their ongoing commitment to LERN and the advancement of trauma care in Louisiana. As LERN's new Executive Director, I consider it both an honor and a privilege to now join in that important commitment.



Respectfully submitted,

Paie Hargrove

Paige Hargrove

Governing Board

Executive Committee Members

Norman E. McSwain, Jr., MD Chairman of the Board

Professor of Surgery Tulane University Health Sciences Center Department of Surgery Nominating Entity: Tulane University Health Sciences Center

John P. Hunt, MD

Vice-Chairman of the Board Professor of Surgery Louisiana State University Health Sciences Center – New Orleans Nominating Entity: Louisiana State University Health Sciences Center – New Orleans

Peter Sullivan Treasurer of the Board

Serviceline Administrator for NeuroScience and Orthopedics Our Lady of the Lake Regional Medical Center Nominating Entity: Louisiana Hospital Association – Rehab Constituency Group

Coletta Barrett, RN, FACHE Immediate Past Chairman of the Board Vice President of Mission Our Lady of the Lake Regional Medical Center *Nominating Entity: Louisiana Alliance of*

Information and Referral Systems

William Freeman, MD

Executive Committee Member Director of Emergency Services Louisiana State University – Earl K. Long Medical Center *Nominating Entity: Louisiana American College of Emergency Physicians*

Jimmy Guidry, MD

Executive Committee Member State Health Officer Department of Health and Hospitals *Nominating Entity: Department of Health and Hospitals*



Members

Honorable Regina Ashford Barrow

Representative Louisiana House of Representatives Nominating Entity: Louisiana House of Representatives

Patrick C. Breaux, MD

Section Head, Consultative Cardiology Ochsner Heart and Vascular Institute Nominating Entity: Louisiana Chapter of the American College of Cardiology

Honorable Sherri Smith Buffington

Senator Louisiana State Senate Nominating Entity: Louisiana State Senate

Billy Conerly

Director of the Emergency Department and Clinical Services Lane Regional Medical Center Nominating Entity: Louisiana Hospital Association – Service District Hospital Honorable A.G. Crowe Senator

Louisiana State Senate Nominating Entity: Louisiana State Senate

John Dailey, JD, MPA, FACHE

Vice Chancellor for Administration Louisiana State University Health Sciences Center – Shreveport Nominating Entity: Louisiana State University Health Sciences Center – Shreveport

Kevin Davis

Director of Governor's Office of Homeland Security and Emergency Preparedness State of Louisiana Nominating Entity: Governor's Office of Homeland Security and Emergency Preparedness

Joel Eldridge, DO

Coroner Franklin Parish Nominating Entity: Louisiana State Coroners Association



Michael Hulefeld

Chief Executive Officer Ochsner Medical Center Nominating Entity: Metropolitan Hospital Council

Danita Leblanc

Program Manager Department of Health and Hospitals Nominating Entity: Department of Health and Hospitals

Fred Martinez

Chief Executive Officer St. Charles Parish Hospital Nominating Entity: Rural Hospital Coalition

John W. Noble, Jr., MD

Chief Executive Officer The Center for Orthopaedics Nominating Entity: Louisiana State Medical Society

Gary R. Peters

President Louisiana Ambulance Alliance Nominating Entity: Louisiana Ambulance Alliance Honorable Karen Gaudet St. Germain Representative Louisiana House of Representatives Nominating Entity: Louisiana House of Representatives

Kevin M. Sittig, MD

Senior Associate Dean and Chief Medical Officer Louisiana State University Health Sciences Center – Shreveport Department of Emergency Medicine Nominating Entity: Committee on Trauma, American College of Surgeons

Carl J. Varnado, Jr. Deputy Director National Emergency Number Association *Nominating Entity: National Emergency Number Association*

Honorable Mack "Bodi" White, Jr. Senator Louisiana State Senate Nominating Entity: Louisiana State Senate

Kristin Whitty, PhD, APRN

Assistant Professor Southeastern Louisiana University Nominating Entity: Louisiana State Board of Nursing

Christopher W. Wroten, OD

Co-Owner Bond-Wroten Eye Clinic Nominating Entity: Optometry Association of Louisiana

Michele Zembo, MD, MBA

Assistant Dean for Clinical Education Director of Medical Staff and GME Medical Center of Louisiana Nominating Entity: Louisiana State Medical Society

Other Nominating Entities

Louisiana Association of EMS Physicians – Medical Director of an EMS Agency

Louisiana Hospital Association – Representative from a Service District Hospital

Louisiana Medical Association

Performance Indicators

LERN has three state performance indicators – participation of hospitals in the LERN network, agencies/facilities with an above average capability rating to respond to trauma incidents, and transportation of patients to the appropriate care facility within an hour of injury. For FY 2010-11, LERN met its performance targets for each indicator.

Indicator 1: Percentage of hospitals having emergency room services that participate in the LERN network.

Number of Hospitals with Emergency Room Services	115
Number of Hospitals Participating in the LERN Network	94
Percentage of Hospitals with Emergency Room Services in the LERN Network	81.7%

Indicator 2: Percentage of EMS agencies that have participation agreements with the LERN network.

Number of EMS Agencies in Louisiana	76
Number of Participating EMS Agencies	61
Percentage of Participating EMS Agencies	80.3%

Indicator 3: Percentage of traumatically injured patients directed by LERN that are transported to an appropriate care facility within an hour of their injury.

Number of Patients in LERN System	2,454
Number of Patients Transported to the Appropriate Care Facility Within One Hour of Injury	2,415
Percentage of Patients Transported Within One Hour of Injury	98.4%

LERN Organization Today



A brief description of each element of the LERN organization follows.



LERN Volunteer Governing Board

LERN's 28-member governing board is a diverse group of volunteers nominated by stakeholder organizations and appointed by the Governor. The Board's charge is to establish and maintain a statewide trauma system that includes a network and plan designed to achieve a reduction of deaths and incidents of morbidity in Louisiana that is caused by trauma and time-sensitive illnesses.

LERN Regional Commissions

The nine regional commissions are established and appointed by the LERN Board to provide support to the ongoing development and management of the trauma network in each region of the state. Commission members are volunteers that represent key trauma network stakeholders in each region.

LERN Executive Director

LERN's Executive Director is an unclassified state government position. The Executive Director's role is to oversee trauma network operations, and to be responsible to the LERN Board for the administration and coordination of all LERN activities.

LERN Trauma Registry Director

The Trauma Registry Director is responsible for the development and management of a statewide trauma registry. The statewide registry is a tool for gathering, compiling, and analyzing major trauma case data submitted by the state's designated trauma centers. Trauma registry data is used to improve trauma system performance at the regional and statewide levels.

LERN Medical Director

LERN's Medical Director is a contracted role that includes trauma network leadership, guidance and consultation, and the facilitation of a continuous trauma system and individual trauma center development.

LERN Regional Commissions Support Team

LERN's Regional Commissions Support Team includes three Tri-Regional Coordinators, each tasked with the responsibility of providing medical/trauma expertise and administrative support to three of LERN's regional commissions.

LERN Communications Center

The LERN Communications Center fielded calls for assistance for 10,238 trauma patient cases in fiscal year 2011. Each trauma case requires approximately four to five actual telephone calls to complete all follow up, yielding a total LCC call volume of approximately 50,000 telephone calls.

LERN Communications Center

The LERN Communications Center (LCC) is a key component of the statewide trauma system. When a pre-hospital provider (EMS) or a hospital determines a patient meets major trauma criteria (now referred to as the Standard LERN Entry Trauma Criteria,) the LCC is engaged to match the patient to the appropriate level of care/ hospital resources available within the region. The LCC utilizes LERN's destination protocol to match patients to the most appropriate hospital resources. The LCC is staffed 24/7/365 by nationally registered paramedics with in-depth knowledge of the LERN network design, function, and protocols. The LCC communications infrastructure is designed to interface with the state's current communication technology systems – to support LERN's day-to-day network operations and the statewide interoperability mission in times of disasters.

Designated Trauma Centers

The Louisiana Department of Health and Hospitals (DHH), Health Standards Section is charged with the responsibility of certifying and designating a hospital as a Level I, Level II, or Level III trauma center.

To receive DHH certification as a Level I, Level II, or Level III trauma center, Louisiana hospitals must successfully complete the trauma center verification process of the American College of Surgeons, Committee on Trauma (ACS/COT). Level I is the highest level of trauma center – requiring the greatest commitment of hospital resources. At the end of FY 10-11, Louisiana had two designated trauma centers – both Level I trauma centers (Spirit of Charity – Interim LSU Public Hospital in New Orleans and the LSU Health Sciences Center in Shreveport).

Participating Hospitals

Most Louisiana hospitals (94 of 115) participate in the LERN provider network and the vast majority of those hospitals are not certified and designated as trauma centers. Hospital participation in LERN is voluntary. Through a participation agreement, hospitals define the trauma care resources typically available at their facility and agree to routinely notify LERN of changes in the availability of their trauma care resources using the Resource



Management software.

The agreement also requires hospitals to utilize LERN entry criteria and destination protocols, coordinate with the LERN Communications Center, provide relevant data, and participate in LERN's efforts to manage and improve the quality of the trauma system.

Participating EMS Providers

Most Louisiana EMS providers (61 of 76) participate in the LERN provider network – utilizing LERN's pre-hospital protocols and collaborating with the LERN Communications Center to efficiently deliver trauma patients to the hospitalbased resources that can best address their specific injuries.

EMS participation in LERN is voluntary. Through a participation agreement, EMS providers agree to utilize LERN entry criteria and destination protocols, coordinate with the LERN Communications Centers, provide relevant data, and participate in LERN's efforts to manage and improve the quality of the trauma system.





Financial Summary



During FY 10-12, LERN expended approximately \$2.8 million in state general funds to support LERN's statewide operations.

- Central Office Salary and Benefits \$257,293.00
- Salary in Support of Regional Efforts \$314,470.00
- Medical Leadership and Support \$75,174.00
- Tri-Regional Physicians \$198,921.00
- Staffing of Communications Centers \$955,446.00
- Professional Services \$453,945.00
- Capital Expenditures \$6,993.00
- General Operating Expenses \$569,128.00

Total Operating Expenses FY 2010 - 11

\$2,831,370

Building a Comprehensive Statewide System for Trauma and Time-Sensitive Illness



These eight components are the building blocks of a comprehensive statewide system for trauma and time-sensitive illness. A summary of LERN's progress in developing each component follows.



Statewide Network of Designated Trauma Centers

- There are three designated trauma centers in Louisiana today:
 - Level I: Louisiana State University Health Sciences Center – New Orleans
 - Level I: Louisiana State University
 Health Sciences Center Shreveport
 - Level II: Rapides Regional Medical Center - Alexandria
- Our Lady of the Lake Regional Medical Center in Baton Rouge will secure Level I trauma center status in the next few years as part of their agreement with the state and LSU.
- LERN's Medical Director, Dr. Robert Coscia, is visiting with hospitals around the state to raise awareness and interest in trauma center designation.

Statewide Trauma Registry

- LERN has purchased registry technology that can accommodate hospital and EMS data.
- LERN completed a Data Dictionary for the trauma registry. Typical data dictionaries include: A) summary description of goals and objectives

for the statewide trauma registry; B) identification of all data elements to be collected from each level of trauma center/hospital; and C) comprehensive descriptions of data collection agreements with providers, data collection cycles and rules, data collection processes, data compilation, and reporting processes.

- Start-up of the statewide trauma registry is anticipated in 2012.
- Additionally, the Louisiana Rural Ambulance Alliance, in partnership with LERN and the Louisiana Healthcare Quality Forum, has been awarded a \$900,000 federal grant to fund the Electronic - Rural Health Information Technology (E-RHIT) Network. Through this grant, LERN will collaborate with EMS agencies to upload information from the electronic medical record into the State EMS Registry. Over a threeyear period, the E-RHIT Network will develop a pre-hospital Electronic Patient Care Record which can be integrated into existing electronic patient systems currently used by critical access hospitals, federally qualified health centers, physician practices, and support

access to the statewide patient registry that is focused on trauma, stroke, STsegment elevation myocardial infarction (STEMI), and burn cases.

Statewide Processes and Protocols for Patient Transport

- LERN has established statewide protocols to facilitate transport of trauma patients to the most appropriate facility. These protocols are used by the LERN Communications Center (LCC), participating hospitals, and the participating EMS providers across the state.
- LERN owns two complete communications technology infrastructure sets – one in Baton Rouge and one in Shreveport. LERN provides communications center services from both locations. LERN's communications infrastructure provides a level of redundancy needed to avoid service interruption.
- LERN recently surveyed participating hospitals and EMS providers to measure the value these key stakeholders place on LERN Communications Center services. Results of the survey are being used to improve LERN Communications Center services.

Education

- LERN has developed the following list of education priorities. Efforts are underway to identify and secure funding needed to provide priority education services.
- Advanced Trauma Life Support (ATLS) The ATLS course teaches a systematic, concise approach to the early care of the trauma patient. This course is vital to guiding care for the injured patient in emergency department trauma rooms.
- Rural Trauma Team Development Course (RTTDC) – More than 60% of the trauma deaths in America occur in these remote geographic segments of the country. RTTDC was developed by

the ad hoc Rural Trauma, committee of the American College of Surgeons, Committee on Trauma to help rural hospitals with development of their trauma teams. The course improves the quality of care in communities by developing a timely, organized, rational response to the care of the trauma patients and a team approach that addresses the common problems in the initial assessment and stabilization of the injured.

- Trauma Nursing Core Curriculum (TNCC) – Trauma nursing as a discipline refers to the process and content of all the different roles nurses have in the care of the trauma patient. The purpose of TNCC is to present core-level knowledge, refine skills, and build a firm foundation in trauma nursing.
- Pre-Hospital Trauma Life Support (PHTLS) – PHTLS promotes excellence in trauma patient management through global education of all providers involved in the delivery of pre-hospital care. PHTLS courses improve the quality of trauma care and decrease mortality. The program is based on a pre-hospital trauma care philosophy, stressing the treatment of the multi-system trauma patient as a unique entity with specific needs. PHTLS promotes critical thinking as the foundation for providing quality care.
- Site Verification/American College of Surgeons – In Louisiana to be designated a trauma center by the Health Standards Division of DHH, hospitals must first be verified by the American College of Surgeons (ACS). LERN would like to support hospital efforts in reaching trauma center designation by financing the cost of the ACS verification visit (\$10,000 to \$11,000 per hospital).

Trauma System Performance Improvement

- LERN's current performance improvement efforts include the quality management program for the LERN Communications Center (LCC) and informal regional efforts by the LERN Regional Commissions to build and improve the trauma system.
- Start-up of the statewide trauma registry in 2012 will allow LERN to begin development of additional performance improvement efforts.

Injury Prevention

- Louisiana's Injury Research and Prevention Program traditionally resided in DHH's Office of Public Health (OPH). This program includes analysis and reporting of injury data and support for prevention efforts that address selected injury categories/types.
- OPH and LERN are discussing opportunities for moving elements of the state's injury prevention effort to LERN. The rationale for this move is straightforward – the national model for statewide trauma systems includes an injury prevention component.
- LERN is currently collaborating with DHH to facilitate implementation of the Louisiana Youth Concussion Act (ACT No. 314 Regular Session 2011). LERN's website is the central resource for governing authorities of schools, athletic clubs, recreational facilities, and athletic leagues to learn about the requirements of the Act.

Time-Sensitive Illness Network

- Until recently, LERN has been focused exclusively on the development of a statewide trauma system.
- Encouraged by several LERN Regional Commissions, the LERN Governing Board has authorized two time-sensitive illness work groups – one to study stroke and the other to study STEMI infarction), commonly known as a heart attack.

 These two work groups include LERN staff, Board members, and Regional Commission members. The goal of the work groups is to create initial recommendations for LERN's development of time-sensitive illness networks and support systems. Both work groups will present their findings and recommendations to the LERN Board in 2012.

Partnership with State ESF-8 Systems for Daily Operations and All Hazards Response

- The LERN Communications Center serves as the "information coordinator" for unfolding events in Louisiana on a 24/7/365 basis.
- LERN has a formal memorandum of understanding (MOU) with the state's Emergency Support Function #8 – Public Health and Medical (ESF-8) to provide application support for hospitals and EMS users; to assist in incident management and messaging; and to assist in the ongoing management of the ESF-8 Portal suite.
- There is a dedicated LERN view in the ESF-8 Resource Management application for trauma resource availability.
- Plans are in development for a dedicated time-sensitive illness (Stroke and STEMI) views in the ESF-8 Resource Management application.



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