LOUISIANA
EMERGENCY RESPONSE NETWORK
Right Place. Right Time. Right Care.

Annual Report

FY 2013-2014

Trauma	All Disasters Response
Stroke	STEMI

RS 40:2841-2846

CHAPTER 34. LOUISIANA EMERGENCY RESPONSE NETWORK (LERN)

§2841. Legislative purpose

The legislature declares that in order to safeguard the public health, safety, and welfare of the people of this state against unnecessary trauma and time-sensitive related deaths and incidents of morbidity due to trauma, a comprehensive, coordinated statewide system for access to regional trauma-patient care throughout the state be established. This system shall be compatible and interfaced with the Governor's Office of Homeland Security and Emergency Preparedness.

LOUISIANA
EMERGENCY
RESPONSE
NETWORK

What is LERN?

The Louisiana Emergency Response Network (LERN) is an agency of state government created by the Louisiana Legislature in 2004 charged with the responsibility of developing and maintaining a statewide system of care coordination for patients suddenly stricken by serious traumatic injury or time-sensitive illness (such as heart attack or stroke). It is a system also designated to serve as a vital health care resource in the face of larger scale emergencies and natural disasters.

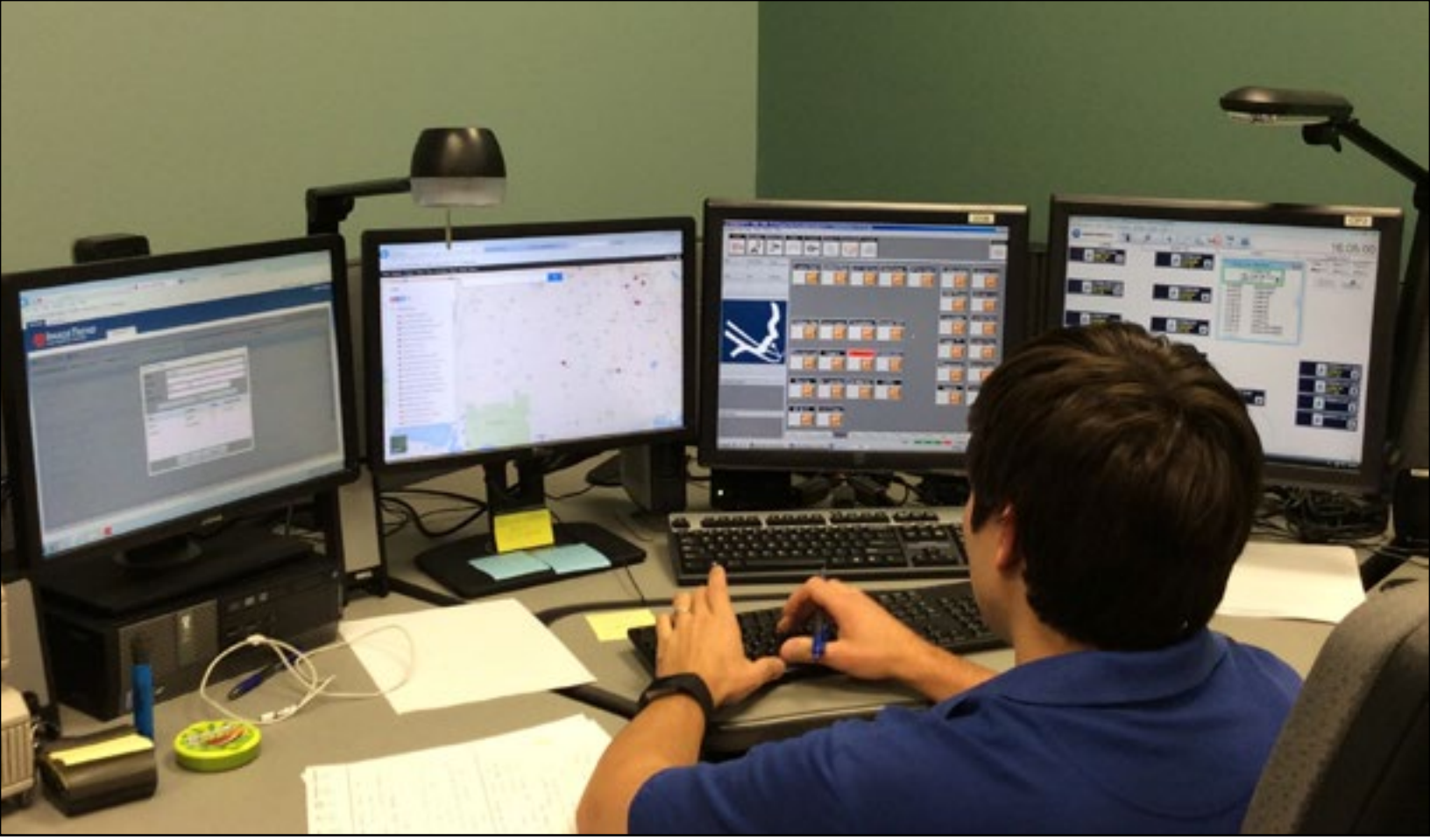
For the patients LERN serves – victims of trauma, heart attack, and stroke, and individuals caught in large scale emergencies and natural disasters – getting to the right place at the right time to receive the right care is a matter of life or death. LERN's mission is to build and continuously improve systems that help make sure Louisiana citizens have timely access to the care they need.

LERN recently completed a significant upgrade of the LERN website. This new website includes a wealth of information about LERN's systems for:

Trauma
All Disasters Response
Stroke
STEMI

The site also includes up-to-date information on the LERN organization, statistics from the LERN Communications Center, and an archive of past LERN Annual Reports and LERN e-newsletters.

lern.la.gov



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Letter from LERN's Executive Director

LERN is now ten years old and as the old saying goes…we have come a long way. LERN was created by the Louisiana Legislature in 2004 after a decades-long effort led by a small group of committed physicians and other key stakeholders from across the state. They spent many years explaining, to anyone who would listen, the benefits of a statewide system designed to coordinate the care available to Louisiana citizens suddenly struck by life-threatening traumatic injury or time-sensitive illness. LERN would not exist today without the leadership and vision of those pioneers, including:

Norman E. McSwain, Jr., MD
Lester Wayne Johnson, MD
Ms. Eileen Mederos, RN
Chris Trevino, MD
Chapman Lee, MD
Fred Martinez
The late Representative Sidney Mae Durand
Senator Francis Thompson
Senator Sherri Smith Buffington
Tom Arnold, MD
Ross Judice, MD
Richard Turnage, MD
Nancy Bourgeois, RN
Jimmy Guidry, MD
Coletta Barrett, RN
Mary O'Brien
Bill Black

Today, LERN serves as a key health care resource in Louisiana supporting statewide and regional coordination of care for Trauma, Stroke, STEMI (the severest form of heart attack), and All Disasters Response. Here is a summary of our progress across the last ten years.

Trauma – Louisiana's total number of state-designated trauma centers in Louisiana has doubled from two to four, including Level I trauma centers in Shreveport and New Orleans, and Level II trauma centers in Alexandria and Baton Rouge. Additionally, LERN is supporting active efforts to establish trauma centers in Hammond, Covington, and Lafayette.

The LERN Communications Center currently works with participating EMS services and hospitals to route approximately 15,000 traumatic injury cases per year to the most appropriate hospital resources available. A key element of our Trauma mission is education. Throughout the year, LERN utilizes some of its resources to offer Trauma-related educational programs (such as the Rural Trauma Team Development Course) to health care providers. Additionally, LERN promotes relevant educational programs offered by other key trauma stakeholders, including trauma symposiums for health care professionals offered by our Louisiana trauma centers.

All Disasters Response – Today, LERN plays a vital role in Louisiana's all disasters response effort. LERN's Communications Center supports the state's Center for Community Preparedness by serving as the "first call" help desk and 24/7/365 information coordinator for unfolding events, including natural disasters (like hurricanes, floods, and pandemics) and

man-made emergencies (like industrial spills and explosions, other large-scale accidents, and terrorist attacks). In this role, LERN provides timely information that helps our hospitals, other health care providers, and relevant stakeholder agencies prepare for and manage response to the emergency events they face.

Stroke – The building of a Stroke System in Louisiana began just a few years ago. LERN's efforts to date have included three basic components: an attestation process whereby Louisiana hospitals identify the level of stroke care they can provide (Level I: Comprehensive, Level II: Primary, Level III: Acute Stroke Ready, or Level IV: Non-Stroke Hospital), development of destination protocols to help guide the delivery of patients to appropriate facilities, and ongoing educational initiatives for health care providers and the general public.

LERN maintains a statewide map of the different level stroke centers as a means of showcasing the investment Louisiana hospitals have made in stroke care. Our stroke map also identifies geographic gaps in available resources – guiding LERN's efforts to further develop Louisiana's Stroke System.

STEMI – The building of a STEMI System in Louisiana also began just a few years ago. STEMI is the deadliest form of heart attack that results from the complete closure of a major coronary artery. LERN's effort to date has included mapping the STEMI care capabilities of Louisiana hospitals statewide, leading a group of STEMI stakeholders in the development of treatment and patient transfer guidelines, and education/outreach efforts that target health care providers and the general public.

The LERN board members and staff can be rightly proud of LERN's first ten years of effort and results. I remain honored to work with such a talented and dedicated group of caring professionals. Nonetheless, I am confident that each board member and staff member would agree there is much more we must do in the coming years to strengthen Louisiana's systems for Trauma, All Disasters Response, Stroke, and STEMI. We remain committed to that task.

Best,

Paige Hargrove

Paige Hargrove
Executive Director
LERN

LERN 2013-2014 Board of Directors

LERN is governed by a 28-member board of directors that represents a diverse set of stakeholders. LERN's enabling legislation specifies a stakeholder organization to nominate qualified candidates (at least four) for each LERN Board seat. Nominees are submitted to the Governor for consideration and appointment to serve a three-year term.

Executive Committee Members

John P. Hunt, MD, MPH, FACS
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

William Freeman, MD
Vice-Chairman of the Board
Chief Medical Officer
C&M Medical Services
Nominating Entity: Louisiana American College of Emergency Physicians

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

Norman E. McSwain, Jr., MD
Immediate Past Chairman of the Board
Professor of Surgery
Tulane University Health Sciences
Department of Surgery
Nominating Entity: Tulane University Health Sciences Center

Coletta Barrett, RN, FACHE
Executive Committee Member
Vice President of Mission
Our Lady of the Lake Regional Medical Center
Nominating Entity: Louisiana Alliance of Information and Referral Systems

Jimmy Guidry, MD
Executive Committee Member
State Health Officer
Louisiana Department of Health and Hospitals
Nominating Entity: Louisiana Department of Health and Hospitals

John T. Owings, MD, FACS
Executive Committee Member
Professor of Surgery, Trauma Medical Director
Louisiana State University
Health Sciences Center – Shreveport
Nominating Entity: Louisiana State University Health Sciences Center – Shreveport

Tracy Wold
Executive Committee Member
EMS Director
Jackson Parish Ambulance Service District
Nominating Entity: Louisiana Rural Ambulance Alliance

Board 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 Emergency Department and Clinical Services
Lane Regional Medical Center
Nominating Entity: Louisiana Hospital Association – Service District Hospital

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
2014 Appointment: John T. Owings, MD, FACS

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
2014 Appointment: Christopher Guilbeaux

Joel Eldridge, DO
Coroner
Franklin Parish
Nominating Entity: Louisiana State Coroners Association

Kenneth J. Gaines, MD
Chairman, Department of Neurology
Ochsner Health Systems, Neurology Department
Nominating Entity: American Stroke Association

Craig C. Greene, MD
Assistant Clinical Professor of Orthopaedic Surgery
Baton Rouge Orthopaedic Clinic
Nominating Entity: Louisiana State Medical Society

Michael Hulefeld
Executive Vice-President and Chief Operation Officer
Ochsner Health System
Nominating Entity: Metropolitan Hospital Council
2014 Appointment: Cindy Nuesslein, RN, MBA, FACHE

Tomas H. Jacome, MD
Trauma Medical Director
Our Lady of the Lake Regional Medical Center
Nominating Entity: Committee on Trauma, American College of Surgeons

Danita LeBlanc
Program Manager
Louisiana Department of Health and Hospitals
Nominating Entity: Louisiana Department of Health and Hospitals

Fred Martinez
Chief Executive Officer
St. Charles Parish Hospital
Nominating Entity: Rural Hospital Coalition
2014 Appointment: Katherine Hebert

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

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 Graduate
of Medical Education
Medical Center of Louisiana
Nominating Entity: Louisiana State Medical Society
2014 Appointment: Dieadra J. Garrett, MD

Other Nominating Entities:
Louisiana Association of EMS Physicians – Medical
Louisiana Medical Association

Minutes from all board meetings are posted on the LERN Website at http://lern.la.gov/organization/governing-board.

Trauma System

According to the U.S. Centers for Disease Control and Prevention (CDC), there were 2,362 deaths in Louisiana due to injury in 2012. Unintentional injury is the second highest cause for mortality, second to heart disease, and is the leading cause of death for Louisiana citizens age 1-44. Data from Louisiana Vital Statistics indicate 2,307 deaths due to injury in 2013.

LERN is committed to the continuous development and improvement of Louisiana's statewide trauma system. Crucial elements of this system include the LERN Communications Center, state-designated trauma centers, participating hospitals and EMS providers, trauma education services, injury prevention activities, and the statewide trauma registry.

Louisiana's Trauma Centers

Level I Trauma Center:
LSU Health Shreveport

Level I Trauma Center:
Interim Louisiana Hospital

Level II Trauma Center:
Our Lady of the Lake
Regional Medical Center

Level II Trauma Center:
Rapides Regional Medical Center

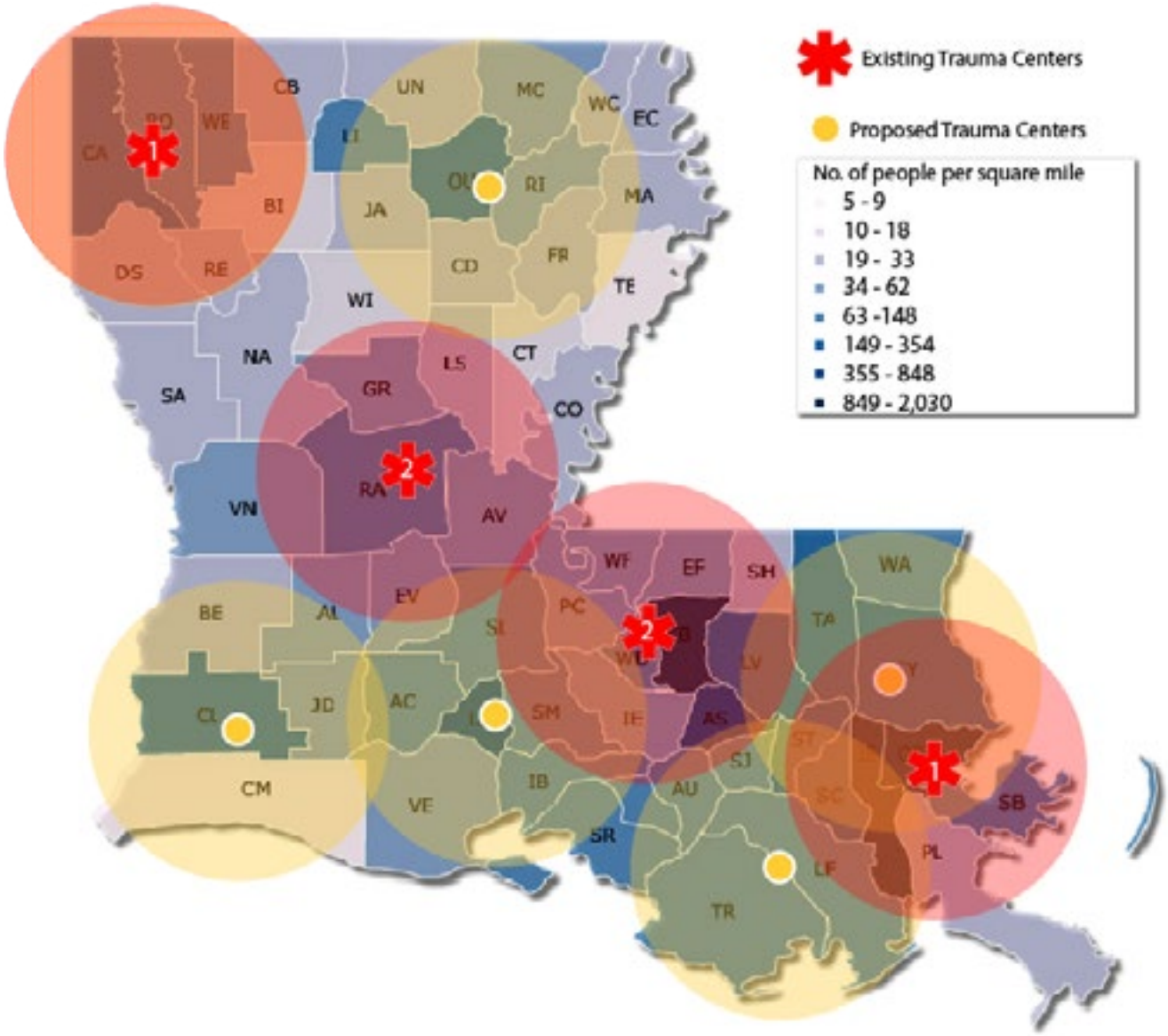
Building a Network of Trauma Centers

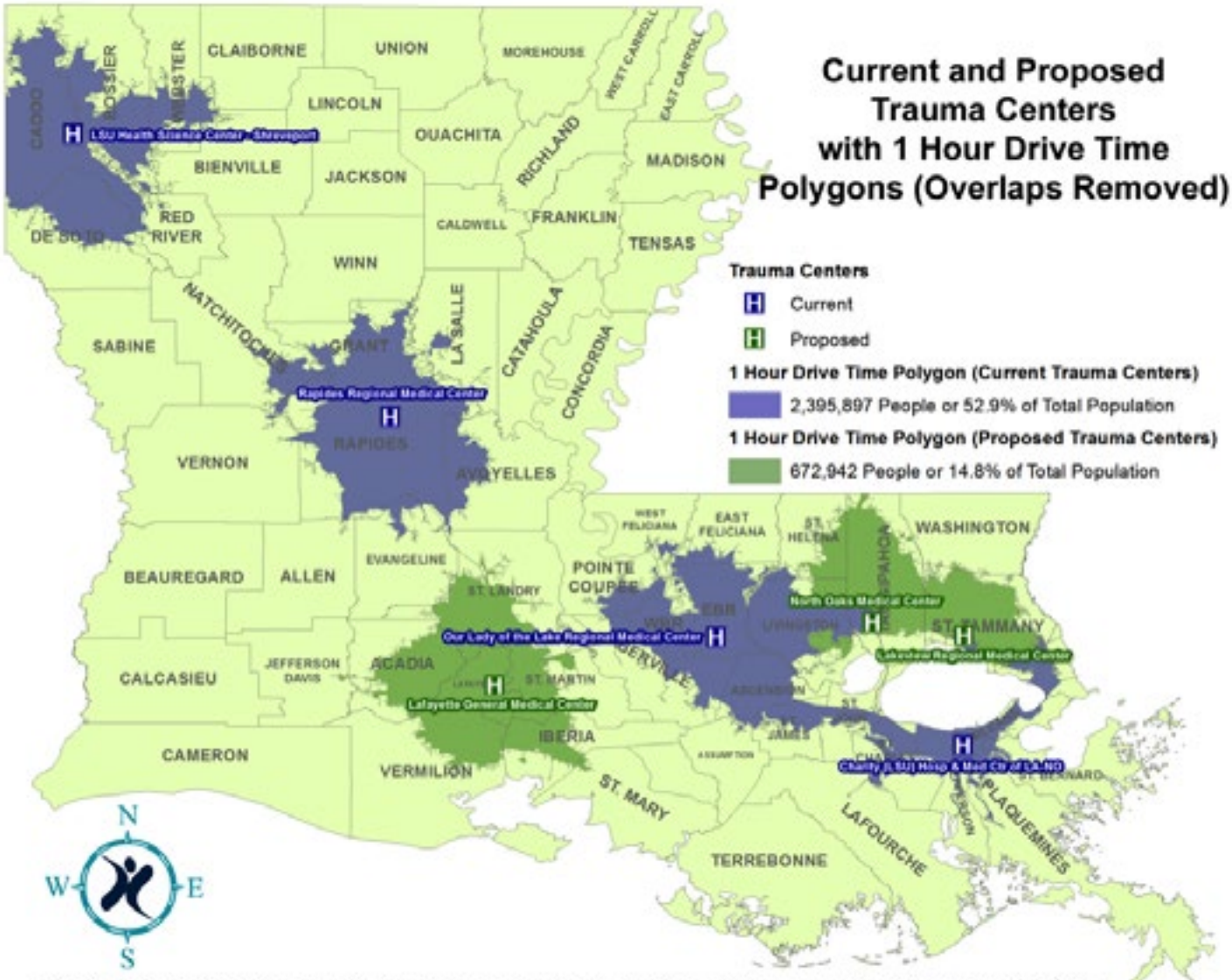
For the first time in Louisiana's history, our citizens are served by a total of four trauma centers. Research shows that mortality is 25% lower for trauma patients who receive care at a Level I trauma center. LERN is currently working with three additional hospitals who are working towards trauma center designation: North Oaks Medical Center (Level II), Lafayette General Medical Center (Level II), and Lakeview Regional Medical Center (Level III). Louisiana is closer than ever to achieving the LERN Board's goal of establishing a trauma center in every region of the state.

The state-designated trauma centers are LSU Health Shreveport (Level I), Rapides Regional Medical Center (Level II), Our Lady of the Lake Regional Medical Center (Level II, working towards Level I), and Interim Louisiana Hospital (Level I).

The 2014 State Report Card by the American College of Emergency Physicians stated that Louisiana had the fewest Level I or Level II trauma centers per capita (0.4 per 1 million people) and that Louisiana has a low proportion of its population living within 60 minutes of a Level I or Level II trauma center. This is also known as the golden hour of optimal care for Louisiana. The golden hours for each trauma center are displayed on the map below.

With the addition of LSU Health Shreveport, now l 52.9% of the population live within a 60 minute drive time to a trauma center. After North Oaks Medical Center, Lakeview Regional Medical Center, and Lafayette General are designated, 67.7% of the population will be within a 60 minute drive time to a trauma center.





Map produced December 17, 2014 by the Louisiana Department of Health and Hospitals / Office of Public Health / Section of Environmental Epidemiology and Toxicology (SEET).
Population data is from the 2010 US Census. Census blocks that have their central point (centroid) within the 1 hour polygons were used in the calculations. One hour drive times are approximate.
Disclaimer: SEET cannot guarantee the accuracy of the information contained on these maps and expressly disclaims liability for errors and omissions in their contents.

LERN Trauma Education Initiatives FY 2013-2014:

Trauma Nursing Core Curriculum

- 22 Trauma Nursing Core Curriculum Classes (TNCC) taught
- 134 Nurses certified
- Since calendar year (CY) 2012, LERN has conducted 66 TNCC classes and 730 registered nurses have obtained certification.

Trauma Care After Resuscitation

- The 2014 edition of the American College of Surgeons *Resources for Optimal Care of the Injured Patient* recommends Trauma Care After Resuscitation (TCAR) for acute care, critical care, and perioperative nurses who care for trauma patients. TNCC targets education to emergency department nurses. LERN recognizes that trauma care does not stop at the ED doors. For this reason, LERN worked with their partner hospitals to bring the TCAR course to Louisiana.
- LERN sponsored 73 nurses from the existing and proposed trauma centers.

Pre-Hospital Trauma Life Support

- Developed in cooperation with the American College of Surgeons to promote critical thinking in addressing multi-system trauma and provide the latest evidence-based treatment practices.
- Five courses sponsored by LERN

- 90 paramedics completed the training
- Since CY 2012, LERN has facilitated seven classes and a total of 112 paramedics have completed the training.

Rural Trauma Team Development Course

The Rural Trauma Team Development Course (RTTDC) emphasizes a team approach to the initial evaluation and resuscitation of the trauma patient at a rural facility. With more than 60% of the country's trauma deaths occurring in rural areas, the course assists health care professionals in determining the need to transfer the patient to a higher level of care. Since Louisiana is a rural state and 32.3% of the population does not have access to a trauma center within the golden hour, LERN urges all rural hospitals to engage in this education.

- Five RTTDCs facilitated by LERN this fiscal year
- 148 trauma stakeholders completed the training
- Since 2012, LERN has facilitated 12 RTTDCs across the state. A total of 326 hospital and EMS staff have completed the course. The intended audience includes individuals who are involved in the care of the injured patient, including physicians, nurse practitioners, physician assistants, nurses, pre-hospital personnel, technicians, and administrative support.

Trauma System Education: Community Events

- With support of the LERN Regional Commissions, LERN provided trauma system education at 19 different community events.
- Education provided at regional: Rotary Clubs, Lion's Clubs, nursing associations, churches, chemical industry, Councils on Aging, Bossier Parish Community College paramedic class, Chambers of Commerce, and Local Emergency Planning Committees (LEPC).

Injury Prevention

Sudden Impact

The Sudden Impact Program is a statewide teen injury prevention program for young drivers developed by Interim LSU Hospital, Level I Trauma Center. The program includes a hospital-based seven-hour program for high school sophomores, a mock crash, mock trial, senior session, and parent forums. With the assistance of LERN, the program has expanded to additional areas of the state.

In January 2015, the Sudden Impact Program will have expanded to eight of the state's nine regions.

Participating facilities include:

- Interim LSU Trauma Center
- Touro Infirmary
- East Jefferson General Hospital
- Our Lady of the Lake Trauma Center
- St. Tammany Parish Hospital
- Lakeview Regional Medical Center
- North Oaks Health System
- Women's and Children's Hospital – Lafayette
- Opelousas General Medical Center
- Rapides Regional Trauma Center
- Glenwood Medical Center
- West Calcasieu Cameron Hospital
- Terrebonne Regional Medical Center

The program provides testimony to the ramifications of driving while impaired from a medical, law enforcement, and victim perspective. The data driven program is pre- and post-tested resulting in a significant increase in knowledge and change in behavior among participants.

Seat Belt Use Initiative: Buckle Up America

LERN collaborated with the Louisiana Highway Safety Coalition to distribute "Buckle Up America" signs to health care providers across the state. LERN delivered 177 signs to hospital providers. Statistics from the Louisiana Traffic Records Data Report 2012 indicate that about 20% of the drivers not wearing a seatbelt make up about 60% of fatalities!

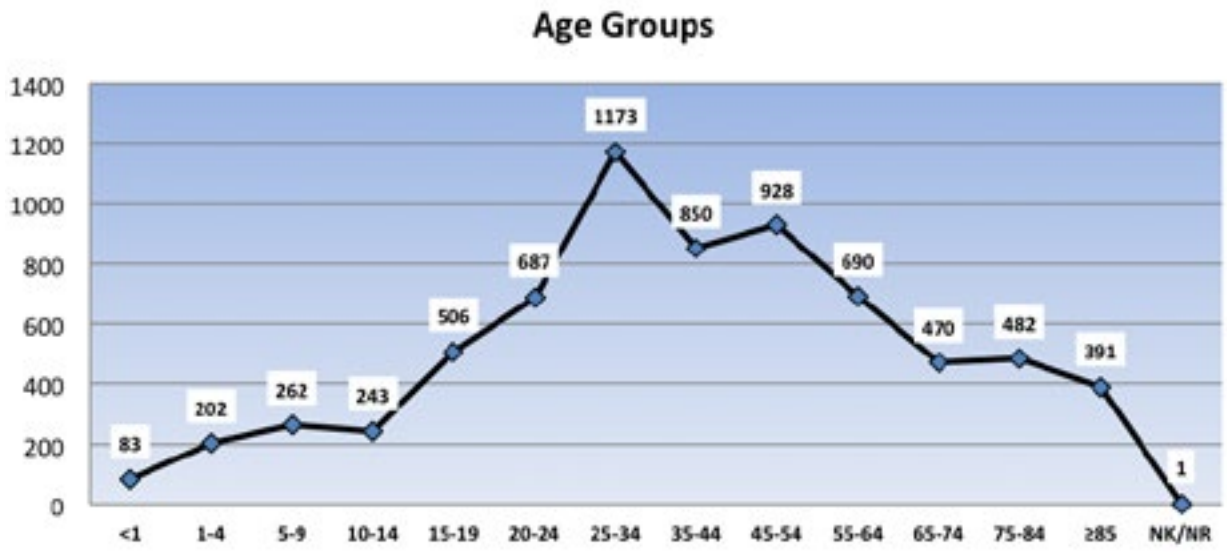
Statewide Trauma Registry

In 2010, the Louisiana Legislature charged the LERN Board to establish and maintain a statewide trauma registry. The purpose is to mine trauma data for what it can tell us – registry data can be coded, compiled, analyzed, and reported. A trauma registry is an important management tool that is used for performance management and improvement, research, and injury prevention.

The following charts and graphs, developed by LERN from the 2013 statewide trauma registry, offer some basic insights relative to trauma patients and trauma care in Louisiana.

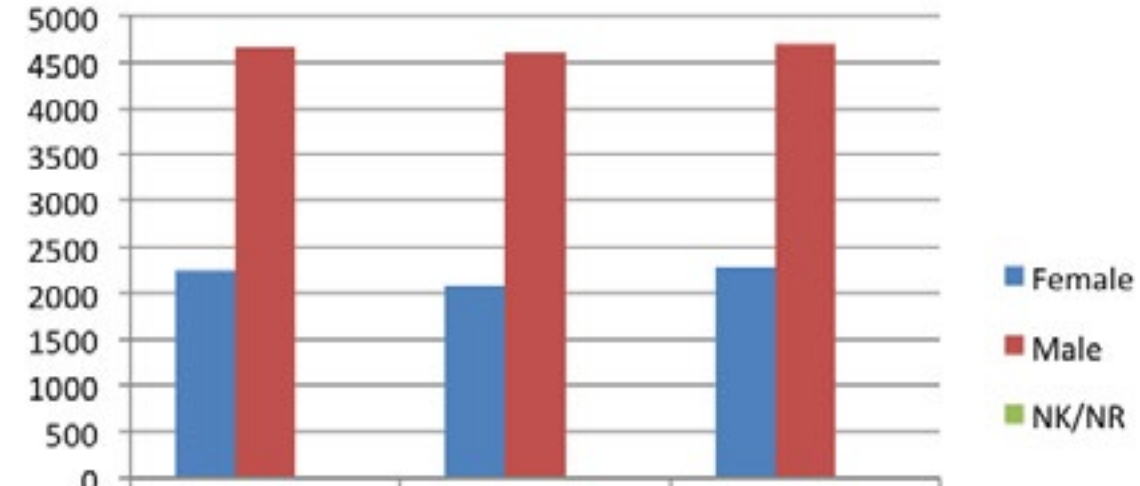
Patients Reported by Age

The highest patient population lies in the age range 25-34 years old. This is also the highest patient population on a national level.



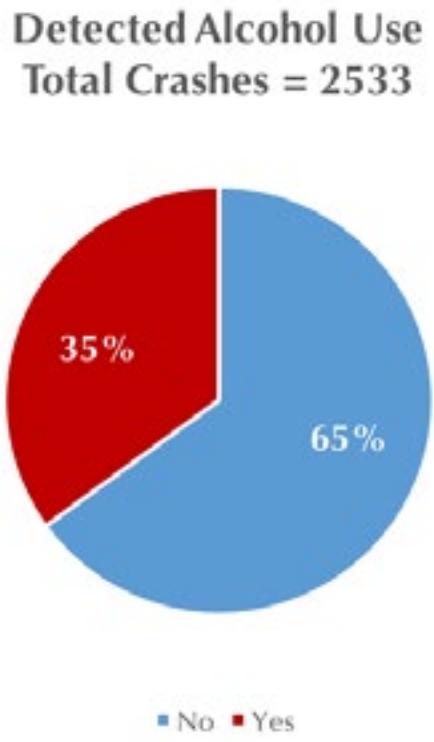
Patients Reported by Gender

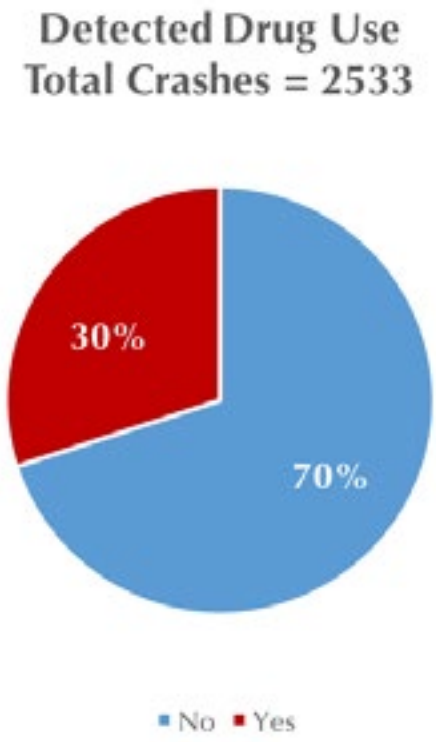
Note: In Louisiana, males accounted for 62% of all incidents up to age 70, compared to 70% on the national level.



	CY 2011	CY 2012	CY 2013
Female	2256	2084	2278
Male	4654	4602	4690
NK/NR	5	22	0

Patients Reported by Alcohol and Drug Testing (for Motor Vehicle Crashes)

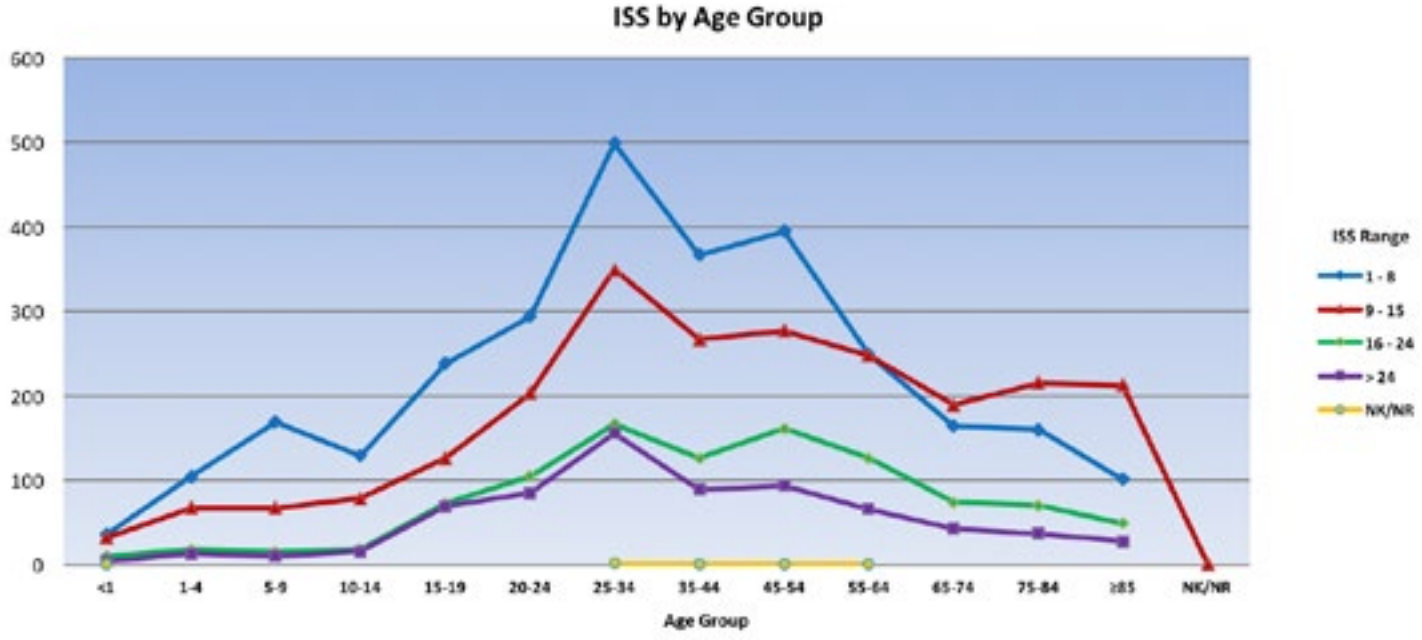




*No includes confirmed by test, not tested, N/A, and not known responses.

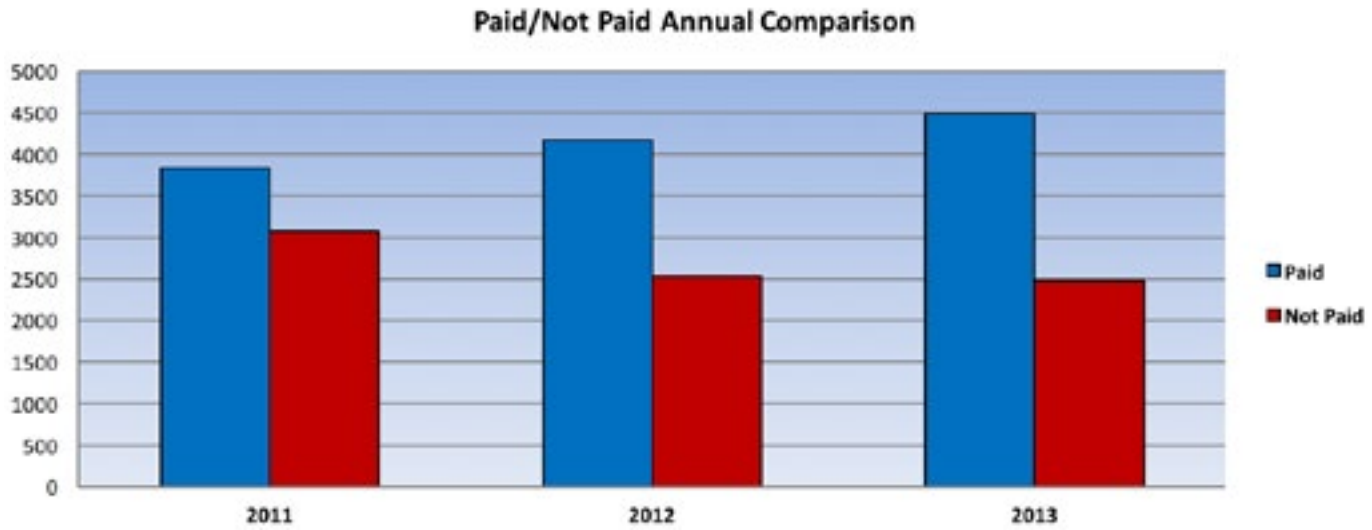
*No includes confirmed by test, N/A, not known, and not performed.
*Yes includes illegal and prescription drugs

Patients Reported by ISS (by Age)
Patients reported by age group and Injury Severity Score (ISS) score. ISS is a system for numerically stratifying injury severity. The ISS system has a range of 1-75 and risk of death increases with a higher score. NTDB categorizes ISS 1-8 as Minor; 9-15 as Moderate; 16-24 as Severe; and greater than 24 as Very Severe. Louisiana data shows **41.69%** of patients with an ISS in the 1-8 (minor) range and **10.19%** in the >24 (very severe) range. National data shows **47.05%** in the 1-8 (minor) range and **7.78%** in the >24 (very severe) range.



Patients Reported by Paid / Not Paid (Annual Comparisons)
Paid compared to not paid for years 2011-2013. Not paid is inclusive of patients primary payment listed as Other, Not Known, Self-Pay, or Not Billed. Self-Pay is pay that is not otherwise paid by insurance/ Medicaid/Medicare, etc. Other is anything that does not fit in the other categories.

Paid/Not Paid	2011	Percent	2012	Percent	2013	Percent
Paid	3841	56%	4173	62%	4489	64%
Not Paid	3074	44%	2535	38%	2479	36%
Total	**6915**	**100%**	**6708**	**100%**	**6968**	**100%**

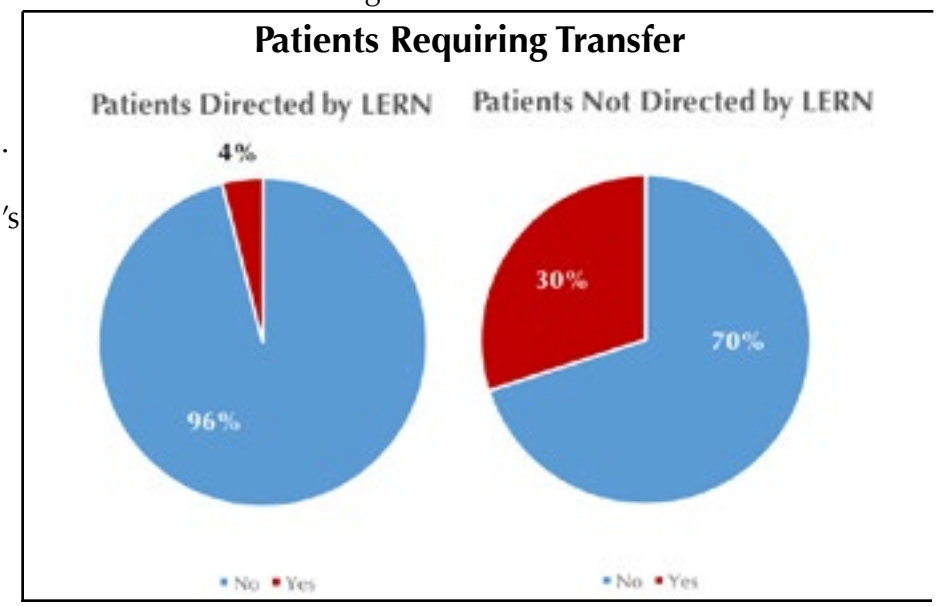


LERN Communications Center

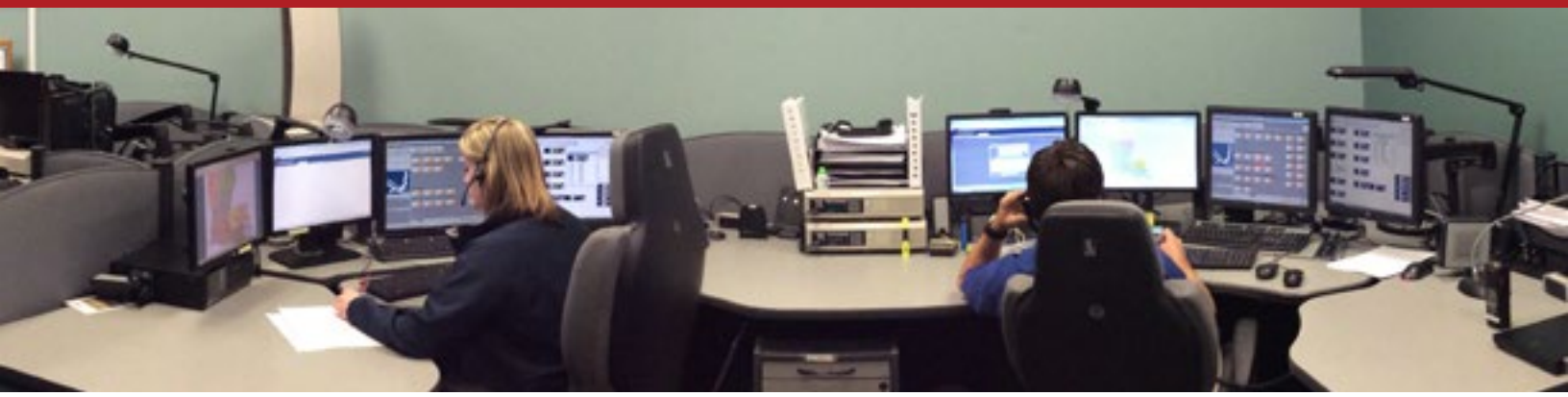
The LERN Communications Center (LCC) is a key component of the statewide trauma system. When a pre-hospital provider (EMS) or a hospital determines a patient meets major trauma criteria (as identified in the LERN destination protocol), the LCC is engaged to match the patient to the most appropriate level of care/hospital resources available.

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 infrastructure is designed to interface with the state's current communication technology systems to support both LERN's day-to-day network operations and the statewide interoperability mission in times of disasters.

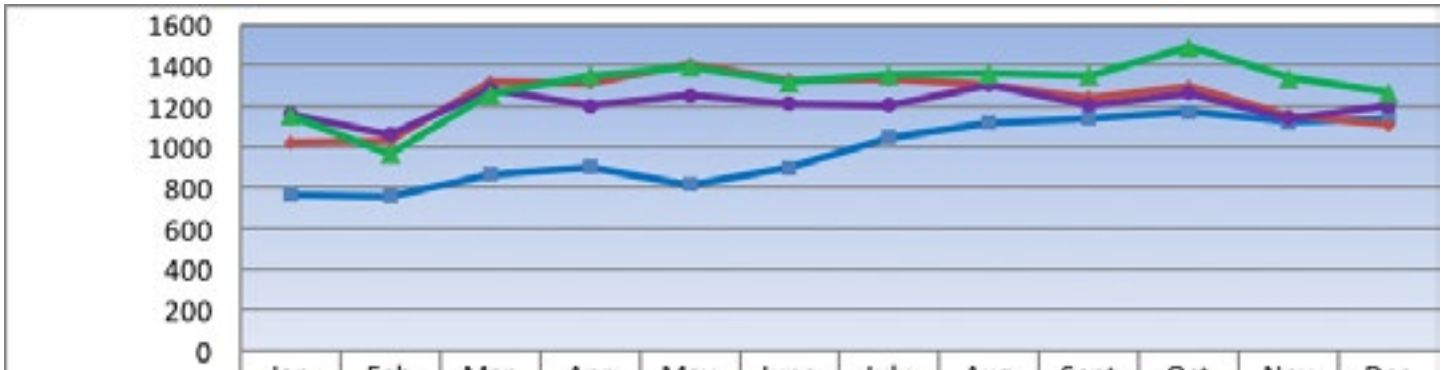
These charts demonstrate the value of LERN's destination protocol and communication center function. For the second consecutive year, only four percent of LERN directed patients required transfer.



– LCC # of trauma patients: 14,935
– Total number of calls: 70,176
– Avg # calls/patient: 4.5



LERN Patient Monthly Volumes by Calendar Year



	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec
CY 2011	763	758	867	901	815	898	1046	1119	1139	1174	1124	1139
CY 2012	1020	1029	1319	1313	1404	1329	1332	1303	1241	1297	1153	1106
CY 2013	1161	1062	1285	1203	1253	1213	1205	1305	1204	1262	1139	1200
CY 2014	1153	965	1261	1350	1392	1316	1355	1362	1349	1492	1341	1266

2011 - 11,743 **2012 - 14,846** **2013 - 14,492** **2014 - 15,602***

***2014 Volume Includes Stroke and STEMI**

A Message from
Robert Coscia, MD, FACS
LERN's Medical Director for Trauma

I proudly announced a year ago the addition of a state-designated trauma center, bringing Louisiana's total to three trauma centers. Again this year, I can announce another addition. Our Lady of the Lake Regional Medical Center is now the fourth state-designated trauma center in Louisiana's trauma care network. This addition helps create a substantial geographic "spine" of trauma centers that runs from Shreveport in the northwest to Alexandria in the central part of the state to Baton Rouge in south central to New Orleans in southeast Louisiana.

However, as Louisiana's trauma network map clearly shows, we still have some geographic coverage holes to fill. LERN is working persistently with hospitals and other stakeholders in the northeast and southwest corners of our state to build a critical mass of support for the development of trauma centers in those areas. I can also report that serious trauma center development efforts are already underway on the Northshore and in Lafayette.

Building a sustainable statewide trauma system is a long-term project. One of the measures of success is the ability to keep moving forward year-to-year. We are focused on maintaining the forward momentum that has been created by our EMS, physician, nurse, hospital, and community partners across Louisiana.

All Disasters Response

LERN's role within Louisiana's All Disasters Response infrastructure is to facilitate the readiness of health care providers and the timely delivery of needed medical care when disaster strikes. LERN fulfills this role through a variety of ongoing activities, including:

- Serving as the "first call" help desk and 24/7/365 information coordinator for unfolding events. In this role, LERN provides timely information that helps hospitals, other health care providers, and relevant stakeholder agencies prepare for and manage response to the emergency events they face.

- Assisting EMS at the scene of an incident by directing patients to area emergency departments based on resources at the scene, patient triage, and resources available at surrounding hospitals.

- Relaying event information and patient movement to the State's Emergency Operations Center, appropriate hospital and EMS Designated Regional Coordinators (DRCs), and the state's Emergency Support Function 8 (ESF-8) officials.

- Serving as the "first call" help desk for users of the state's ESF-8 portal – a suite of applications used to support ESF-8 and its partners in daily operations and in times of declared emergencies.

- Participating in mass casualty training exercises, educational programs, and drills across Louisiana – including everything from paratrooper night jump exercises at Fort Polk to Acadian Ambulance's Mass Casualty Incident (MCI) Boot Camp to active shooter drills in high schools.

LERN is the Information Coordinator for Unfolding Events in Louisiana

- Participates in regional activities to integrate LERN into region-specific protocols for event management and support.
- Serves as the primary coordinating entity for messaging and notifications regarding events and incidents as they occur. In CY 2014, the LERN Communication Center assisted in 169 ESF-8 support calls and sent 296 alerts.
- Maximizes regional assets by coordinating patient flow/transport.

Completed Activities

- Provided instructors for Acadian Ambulance MCI Boot Camp
- Participated in 14 disaster response drills
- Region 2: Active Shooter Drills at Central Middle, Catholic High, LSU; Plane Crash Drill at Baton Rouge Airport; Terrorist Drill at River Bend Nuclear Plant
- Region 3: Active Shooter Drill at RK Smith Middle
- Region 5: Hurricane Drill
- Region 6: MCI Drill at Cabrini Hospital, MCI Drill with Cabrini and England Air Park/Plane Crash
- Region 8: Plane Crash Drill in Monroe, Ruston Fire Hazmat Drill
- Region 9: Active Shooter Drill at Springfield Middle
- Statewide Hurricane Drill
- Statewide ChemPack Drill

Education

- One of LERN's Tri-Regional Coordinators is tasked with Mass Casualty Education throughout the state. In conjuction with LERN's Administrative Director, they provided 27 classes in CY 2014. A total of 678 students have completed the education. Without all of these collective efforts, Louisiana will not be prepared to adequately respond to the various needs of its citizens during an actual event.
- Developed MCI Procedure cards and distributed to EMS agencies across the state.

LERN Supports Hemorrhage Control Education

During the 2013 Boston Marathon terrorist bombing, the use of tourniquets to control bleeding was essential in saving lives according to hospital staff members.

In July 2014, LERN partnered with the Spirit of Charity Trauma Center to support hemorrhage control training for state police and local police officers. The training included the issuance of tourniquet kits. Officers received training in an effort to prevent deaths in severe accidents by stopping uncontrolled bleeding. This training has the potential to save a life when deputies are called to the scene of an auto accident, a shooting, or other situations where a victim is bleeding.

Staff members from the Level I Trauma Center at Interim LSU Hospital in New Orleans met with the Sheriff's deputies, who were issued tourniquets and given instructions about their use and importance.

To date, LERN has supported the training of 250 state troopers. This support continues in FY 2015.

LERN Provided Education for ULL's College of Nursing and Allied Health Professions

University of Louisiana at Lafayette's College of Nursing and Allied Health Professions invited LERN to speak at their continuing nursing education program entitled "Disaster Preparedness: Are You and Your Healthcare System Ready?" Ted Colligan, LERN Tri-Regional Coordinator, was one of four speakers of the day. He provided education to 83 students regarding LERN's role in coordination of care for disaster victims.

LERN Participated in East Baton Rouge Active Shooter Drill

On February 26, 2014, at the old Central Middle School, members of local law enforcement, fire departments, EMS, and LERN joined together for active shooter/mass casualty training. Teachers and students from the Central School System and the East Baton Rouge EMS Explorer group volunteered to help with the drill by acting as live victims injured in the simulated attack. The training focused on inter-agency cooperation, command and control,location and apprehension of suspects, and the rapid triage, treatment, and transport of victims.

Each practice scenario involved careful execution as law enforcement personnel entered the building to secure the scene. Additional resources from the Central Fire Department and East Baton Rouge EMS responded to the scene to provide triage, treatment, and transport for the injured. Baton Rouge EMS also responded with their new Mass Casualty Response Vehicle with supplies to care for several patients in this type of event. The LERN Communications Center alerted area hospitals using the state's ESF-8 Portal and provided patient distribution to each facility in coordination with EMS. At the conclusion of the exercise, each agency conducted individual briefings with their staff followed by a joint briefing for all participants to identify lessons learned and the positive work performed by all.

LERN has participated in several similar drills throughout the state. These drills provide valuable experience and are crucial to emergency preparedness efforts. For LERN, it is an important opportunity to coordinate with local agencies in managing quality patient care for our communities. If your community is interested in or is hosting a drill, please contact the LERN office at (225) 756-3440.

LERN Participated in Acadian Ambulance MCI Boot Camp

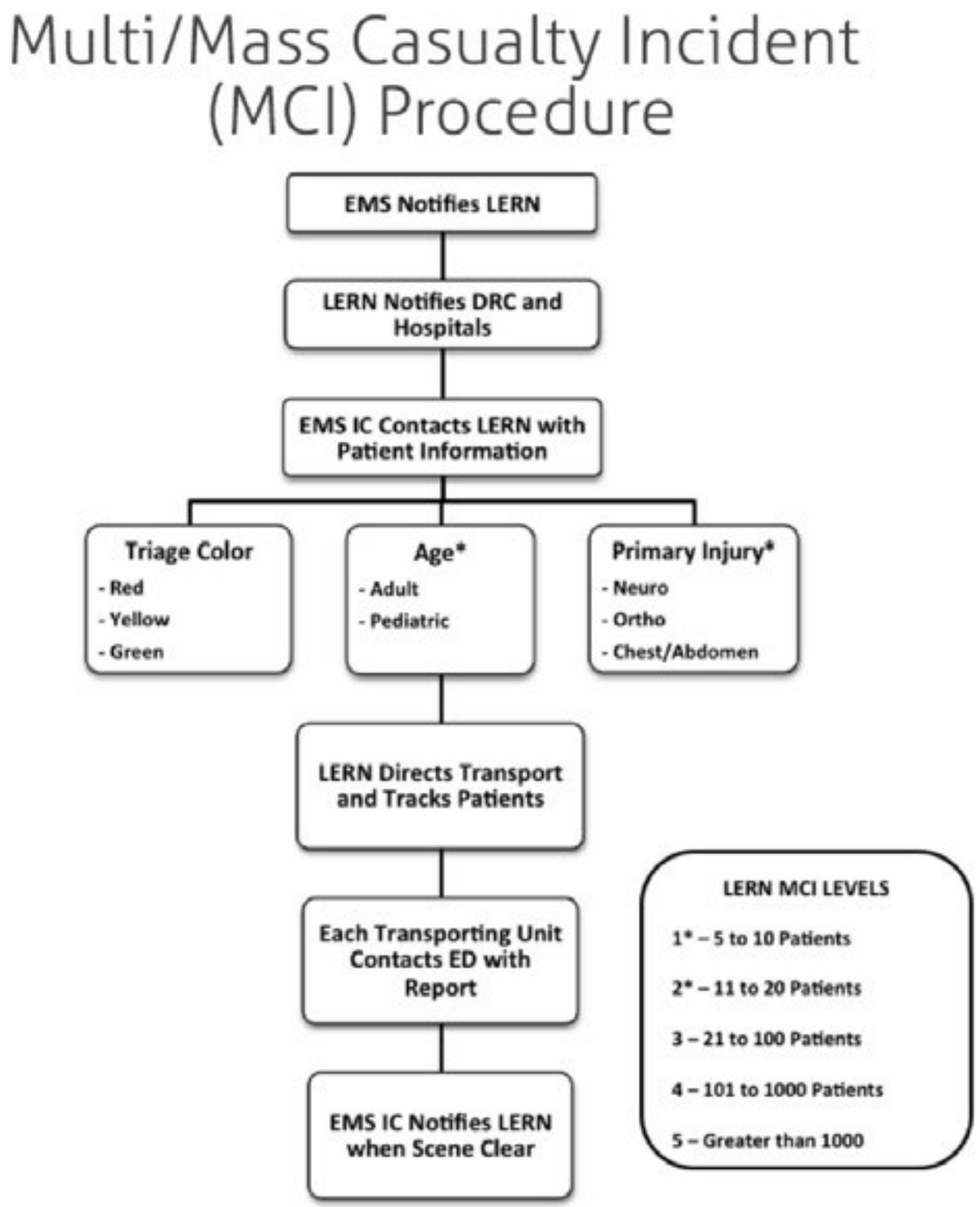
For the third consecutive year, LERN staff assisted Acadian Ambulance Service with training approximately 130 of their medics in MCI scene management. The training included classroom instruction, as well as hands-on scenarios.

Students from the Lafayette High School's Academy of Health Careers served as victims in motor vehicle crash scenarios where medics simulated response and incident command procedures. Once patients were triaged, medics contacted the LERN Communications Center for patient transport direction.

LERN's hope is that the success of these drills will serve as a prime example of the collaboration between LERN, EMS, and hopitals accross the state.

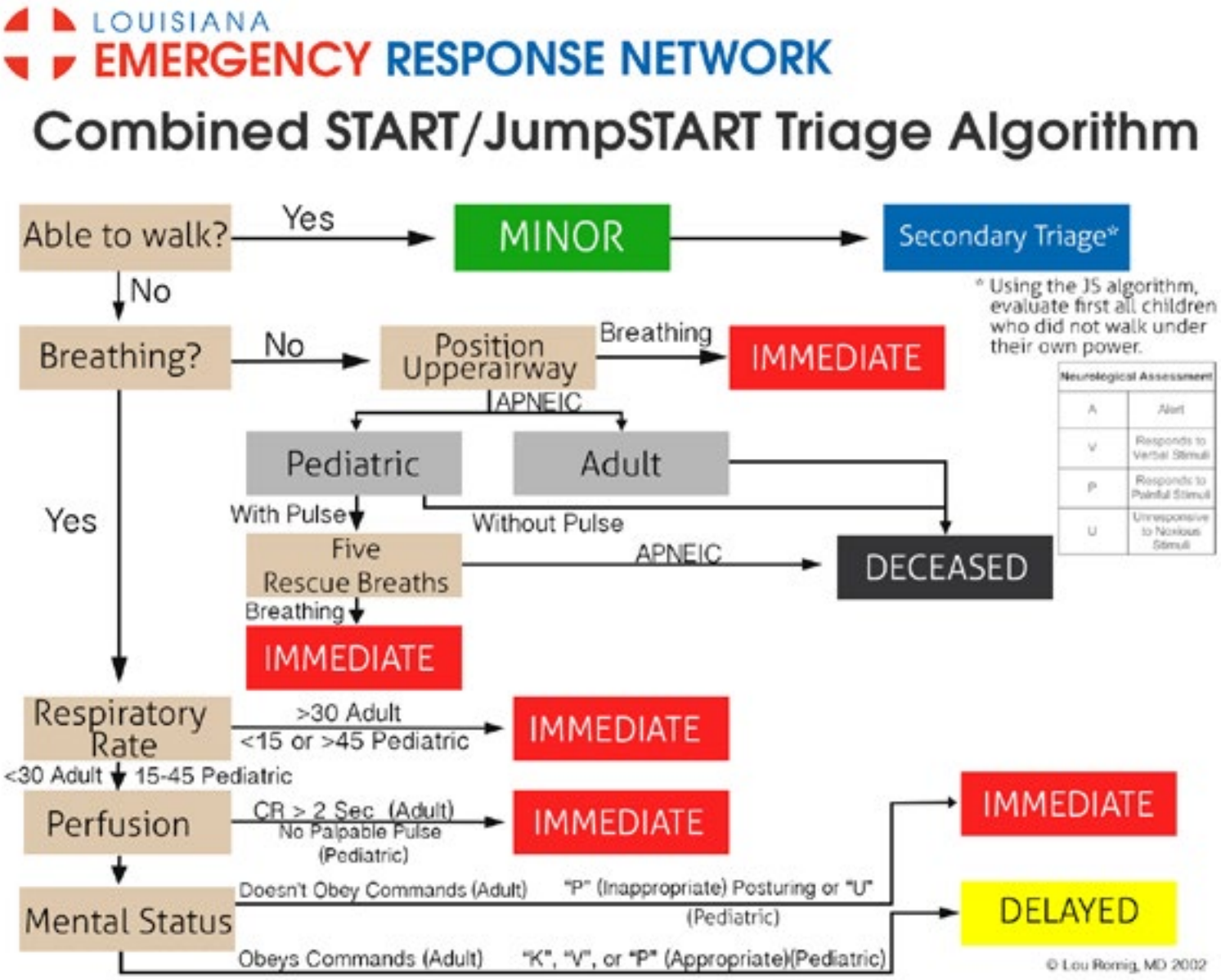
MCI Communications Procedure

The following communications flowchart was developed by LERN to guide critical communications between LERN and EMS personnel responding to a multi/mass casualty incident.



MCI Educational Tools

As the "first call" information coordinator for all disasters, LERN supports responder education and training efforts through the distribution of a variety of MCI triage educational tools, including this combined (adult and pediatric) triage algorithm.



A Message from
Jimmy Guidry, MD
DHH State Health Officer & LERN Board Member

Louisiana's successful ability to respond to disasters of any kind, natural or manmade, relies on a few basic elements – preparation, cooperation, and communication. LERN's role in All Disasters Response embodies all three of these imperatives. LERN participates continuously in a wide variety of preparatory drills and exercises across the state. LERN also serves as a medical communications hub when disaster strikes anywhere in Louisiana – working side by side with state, regional, and local partners to make sure that when our citizens need us most, we deliver the coordinated care they need.

Stroke System

The U.S. Centers for Disease Control and Prevention ranks Louisiana as the ninth highest state for stroke deaths (2009). Stroke is the fourth highest killer of Louisiana residents, and stroke affects an estimated 700,000 people each year across the nation. Today, the optimal care settings to address incidents of stroke are Advanced Comprehensive and Primary Stroke Centers certified by agencies such as The Joint Commission or Healthcare Facilities Accreditation Program (HFAP). These organizations are responsible for maintaining national standards for health care organizations and programs.

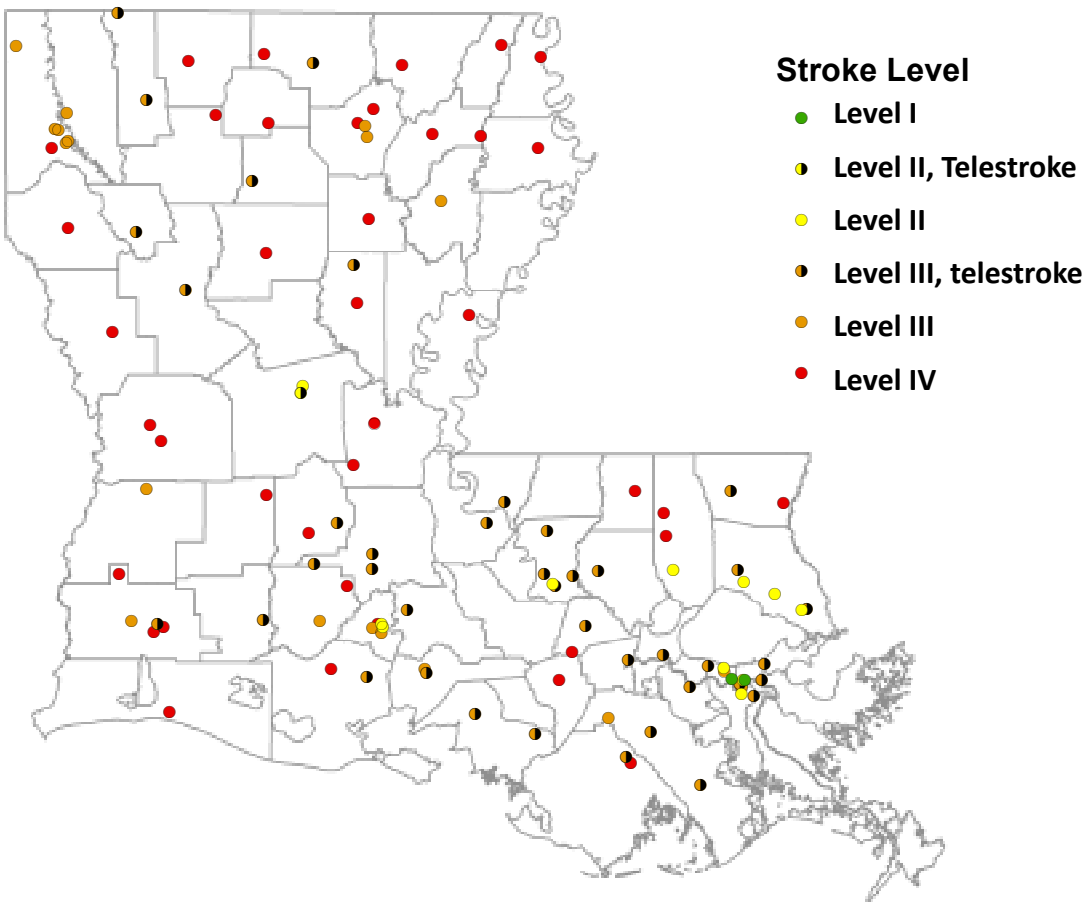
Currently, Louisiana is actively developing a system of care to comprehensively treat incidents of stroke. In 2014, the LERN Communications Center facilitated the routing of 602 stroke patients to definitive care.

Presently, only two Advanced Comprehensive Stroke Centers and 12 Advanced Primary Stroke Centers exist in Louisiana, many of which are geographically maldistributed within our borders. LERN is utilizing a framework of best practices and lessons learned from other states to promote and facilitate the development of an ideal stroke system of care.

Stroke Hospital Attestations

LERN has established four hospital levels of stroke care as part of Louisiana's "hub and spoke" model which includes Comprehensive Stroke Center and Primary Stroke Center hubs, and spoke hospitals connected by telemedicine.

Louisiana hospitals were asked to complete an attestation form to describe their stroke level of care (Level I, II, III, or IV). A Level IV hospital is considered a Non-Stroke Hospital. EMS should not bring patients exhibiting signs or symptoms of stroke to a LERN Level IV Hospital except for instances where the clinical situation requires stopping at the closest emergency department



This map reveals the geographic distribution of the different stroke care levels.

Since 2013, there has been tremendous growth in the state stroke system. The expansion includes four Primary Stroke Centers and seven hospitals moving from Level IV to Level III stroke centers. There are also 41 "spoke" hospitals in the state today - expanding access to stroke care and neurological expertise for Louisiana citizens.

A Message from
Sheryl Martin-Schild, MD
LERN's Medical Director for Stroke

Our state has made significant advances over the last year towards our goal of implementing a statewide system of care for providing access to time sensitive treatment for stroke. Changes in attestations are rapidly being made as more centers are leaping forward from Level III (Acute Stroke Ready Hospital) to Level II (Primary Stroke Center) and a few centers have made steps towards Level I (Comprehensive Stroke Center) designation. We are in the process of evaluating the stroke core measure data submitted by Level III hospitals and currently have 17/58 confirmed centers.

Relationships are developing between Level III and Level I/II centers to facilitate secondary transfers, when indicated. A tissue plasminogen activator (tPA) Transfer Guideline was developed by expert stakeholders across the state in order to fill a gap in care and documentation for post-thrombolytic stroke patients to improve the safety for these patients. In the next year, statewide education will be provided for EMS paramedics to improve implementation of the tPA Transfer Guideline.

We are delighted that stroke champions from Regions 6 and 7 are emerging. I anticipate that these leaders will facilitate communications and work with the Stroke Workgroup on developing initiatives in education and systems of care. We are confident that LERN's collaborative workgroup of physicians, nurses, and other stakeholders will continue to provide the expertise and leadership necessary to grow and strengthen Louisiana's capacity to provide state-of-the-art stroke care for its citizens.

STEMI System

ST-segment myocardial infarction (STEMI) is the deadliest form of a heart attack. It results from the complete closure of a major coronary artery. STEMI strikes nearly 250,000 citizens in the United States per year. When STEMI strikes, opening the artery is of paramount importance using either mechanical (primary PCI) or pharmacologic therapies. Unfortunately, approximately 30% of patients in the U.S. suffering from STEMI never receive either therapy. Of those that manage to receive primary PCI, only 40% do so within the recommended 90-minute timeframe.

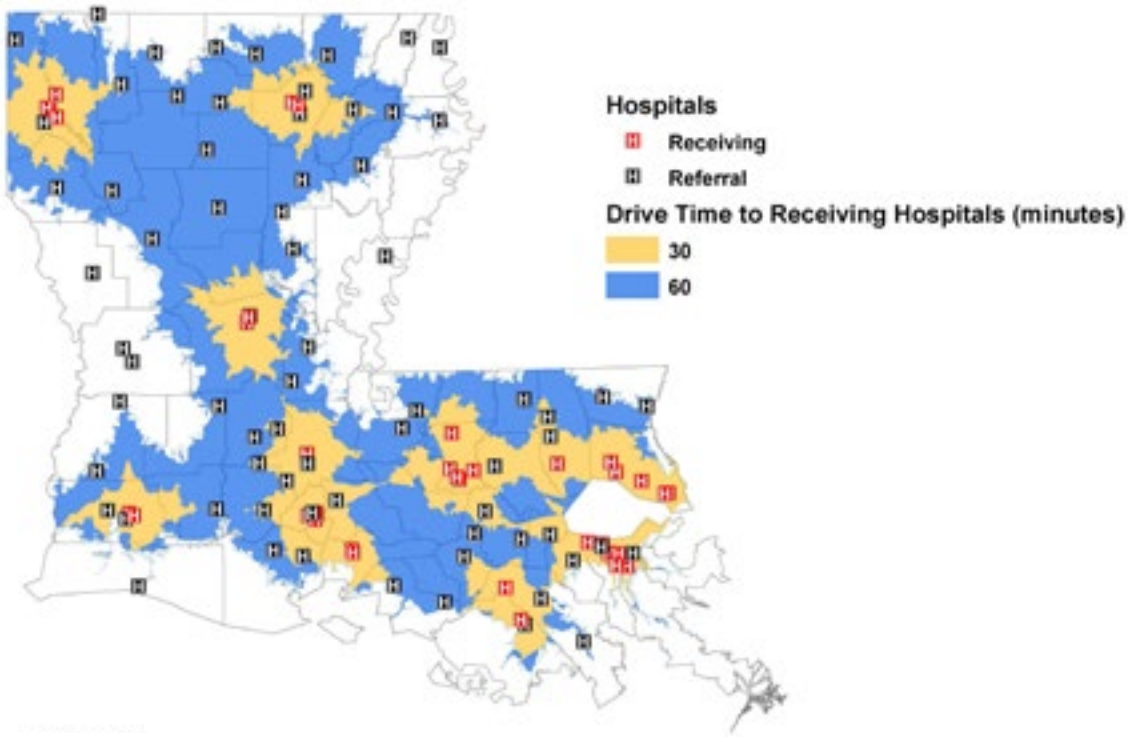
In an effort to provide a more comprehensive system of care within its various regions that will hopefully counter these alarming medical statistics - LERN, in conjunction with engaged cardiologists nominated by the Louisiana Chapter of the American College of Cardiology (ACC), have undertaken efforts to create a statewide system of care for this time-critical illness.

To date, LERN's data shows the gap in care under the current systems of care, and this data has helped identify the areas of greatest system improvement need. While not changing clinical paradigms, LERN is attempting to implement best practices as established by ACC through the Door-to-Balloon Alliance and the American Heart Association through Mission: Lifeline.

LERN provided 12-Lead EKG Education Courses in North Louisiana for more than 300 nurses, who earned continuing education credits. LERN will begin providing this course in South Louisiana in 2015. LERN Communications Center facilitated the transport of 65 STEMI patients. LERN also continues to map STEMI resources statewide.

STEMI Hospital Attestations

LERN's development of a statewide STEMI system of care is based on guidelines established by the American Heart Association's Mission: Lifeline and successful systems across the country. This system includes delineating hospital capabilities so that people experiencing STEMI symptoms are identified and transported to destinations that provide appropriate STEMI care. Louisiana hospitals were asked to complete an attestation form to describe their STEMI level of care (Receiving or Referral Center). This map reveals the geographic distribution of STEMI Receiving and Ref



A Message from
Murtuza Ali, MD
LERN's Medical Director for STEMI

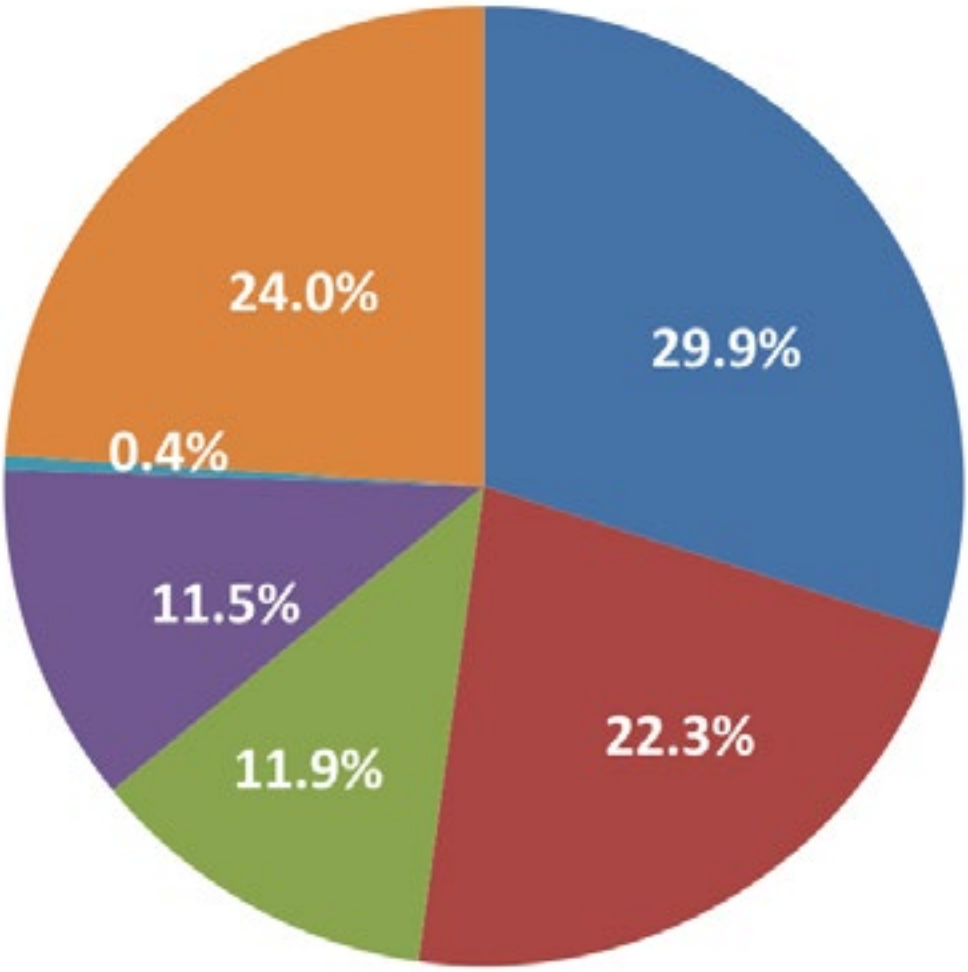
Louisiana continues to make progress toward our goal of an organized system of care for ST-elevation myocardial infarction (STEMI), the deadliest from of heart attacks. LERN leadership, in conjunction with the Tri-Regional Coordinators and volunteer physician champions from across the state, has made strides in identifying those hospitals with primary angioplasty capabilities (STEMI Receiving Centers) and those with thrombolytic reperfusion strategies (STEMI Referring Centers).

In addition to identifying the most capable hospitals, LERN continues to work with prehospital providers to adopt protocols that bring patients to Receiving Centers, preferentially when they are located within an appropriate geographic distance (60 minute drive time). In collaboration with the American Heart Association, distances and drive times from STEMI Receiving Centers have been delineated to guide appropriate triage. A map of Receiving and Referring Centers, based on self-declared attestations and verified by LERN personnel, and drive-times from Receiving Centers, can be found above. More information can be found at www.lern.la.gov under the STEMI tab.

In conjunction with colleagues at partner hospitals, efforts at local EKG education centers are ongoing. To date, EKG education classes have been offered in a number of regions across the state, with plans to offer these modules throughout the state. Response from prehospital providers has been overwhelmingly positive.

LERN continues to advocate for statewide data collection for patients with STEMI in an effort to further improve the quality of care provided in the state. We are working with participating hospitals to establish a voluntary shared-data platform. We are hopeful that such a shared data review process is in place by next year.

Finances



- **Central Office Salary and Benefits:** $455,646.44
- **General Operating Expenses:** $365,300.00
- **Salary in Support of Regional Efforts:** $339,124.45
- **Medical Leadership and Support:** $181,090.43
- **Professional Services:** $174,639.62
- **Capital Expenditures:** $7,070.08

Total Operating Budget: $1,522,871.02

Performance Indicators

In FY 13-14, LERN reported three Performance Indicators in the Louisiana Performance Accountability System (LaPAS). These indicators are part of LERN's Quality Measurement System. They are tied to the participation by health care providers in the pre-hospital and hospital settings and the ability of LERN to direct traumatically injured patients to definitive care.

Before going "live" in a region, LERN obtains signed agreements of understanding with regional hospitals and EMS agencies to ensure compliance with LERN protocols as set forth by the LERN Board of Directors.

Performance Indicator 1:

This indicator reports the percentage of hospitals having emergency room services that participate in LERN:

- 113 (hospitals participating)/116 (total number of hospitals) = **97.4%**

Performance Indicator 2:

This indicator reports the percentage of EMS agencies that participate in LERN:

- 30 (EMS participating)/54 (total number of EMS agencies) = **55.6%**

Performance Indicator 3:

This indicator reports the percentage of time where traumatically injured patients that were directed by LERN to an Emergency Department for definitive care did not require transfer to another facility for higher level resources:

- Total patients directed by LERN = **12,666**

- Total patients transferred = **576**

- Percent of LERN directed patients not requiring transfer = **95.4%**

Regional Commissions

LERN is organized into nine geographic regions, and efforts in each region are guided by a Regional Commission – a regional advisory board of key trauma and time-sensitive illness stakeholders. Regional Commission meeting dates can be found on the LERN website.

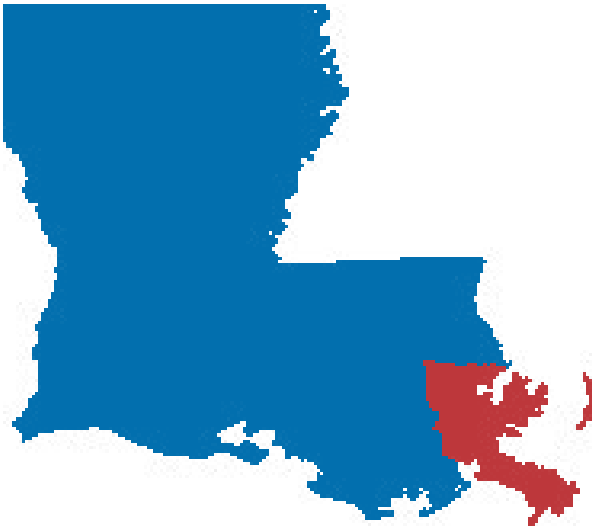
LERN Tri-Regional Coordinators
Each region has an assigned LERN Tri-Regional Coordinator who serves as a resource to its commission and a liaison to the LERN staff, medical directors, and Board of Directors.

For more information about Regional Commissions, please contact the LERN Tri-Regional Coordinator listed.

Region 1

Yvette Legendre
Tri-Regional Coordinator
(yvette.legendre@la.gov)

Officers
Joseph F. Uddo Jr., MD
Chairman
Jeffery Elder, MD
Vice-Chairman
Stephen J. Gordon, ENP
Secretary



Members
Murtuza Ali, MD
Cindy Davidson, JD
Peter Deblieux, MD
Frank Graff, III, NREMT-P, LEM
Mike Guillot, NREMT-P
Charles E. Hudson, LEM
Cindy Magg, RN
Alan Marr, MD, FACS
Sheryl Martin-Schild, MD
Gina Meyer, LEM, EMT
Roland S. Waguespack, III, MD, MBA, FAAEM, FACEP
Paolo Zambito, RN

Region 2

Ted Colligan
Tri-Regional Coordinator
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James Rhorer, MD
Vice-Chairman
Anthony Summers
Secretary

Members

Joseph Acosta, MD
Tammy Armand
Sadye Batts
Jeremy Dedeaux
Connie DeLeo
Chris Fitzgerald
Beverly Grimes
Chad Guillot
Johnny Jones, MD
Lance LaMotte, MD, FACC
Ernest Mencer, MD
Chad Olinde
Marilyn Reynaud, MD

Region 3

Yvette Legendre
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Vice-Chairman
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Mark Boudreaux
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Chad Davis, NREMT-P
Earl Eues, Jr.
Michael Gary, RN
Teresita McNabb, RN
Vinod Nair, MD
Beth Norris, RN
Ken Rousseau, MS-HCM, NREMT-P

Region 4

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Vice-Chairman
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Members

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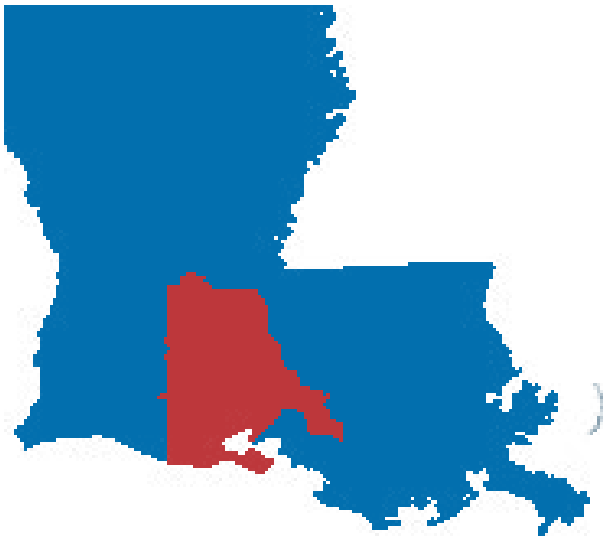
Colonel Prescott Marshall
Jude Moreau
Steve Quebedeaux
John Simar
Tina Stefanski, MD



Region 5

Ted Colligan
Tri-Regional Coordinator
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Officers

Fredrick Dent
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Vacant
Vice-Chairman
Ruth Carnes
Secretary

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Annette Belcher
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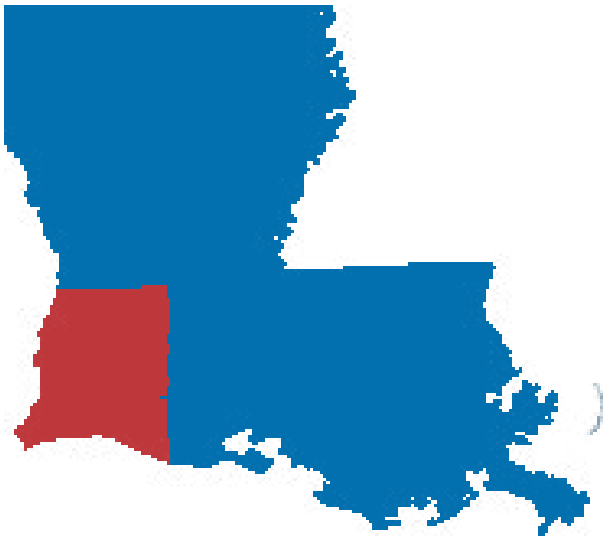
Bertrand Foch, MD
Liz Harmon
Richard McGuire
Thomas Mulhearn, IV, MD, FACC
Joseph O'Donnell, MD
Van Snider, MD
Chris Stanley
Billy Vincent



Region 6

Deb Spann
Tri-Regional Coordinator
(deborah.spann@la.gov)

Officers

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Chairman
Jeff Pogue
Vice-Chairman
Mary Tarver
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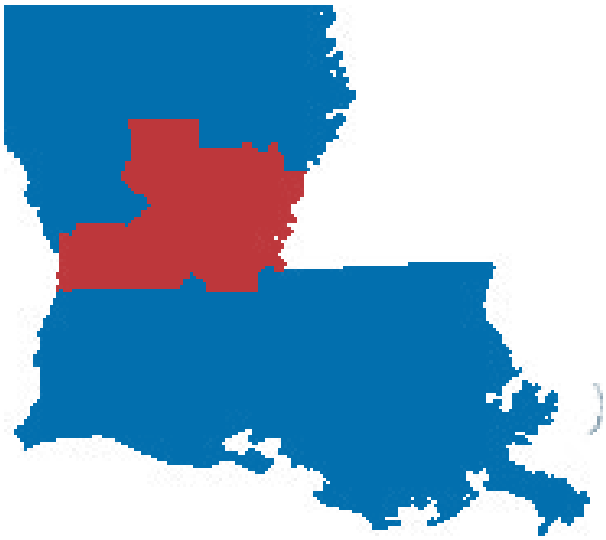
Donna Lemoine
Philip Lindsay, MD
Larry Parker, MD
Brenda Smith
Vickie Stagg, RN
Sonya Wiley
Octavia Williams



Region 7

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Tri-Regional Coordinator
(deborah.spann@la.gov)

Officers

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Chairman
Susan Cash, RN
Vice-Chairman
Martha Carter
Secretary

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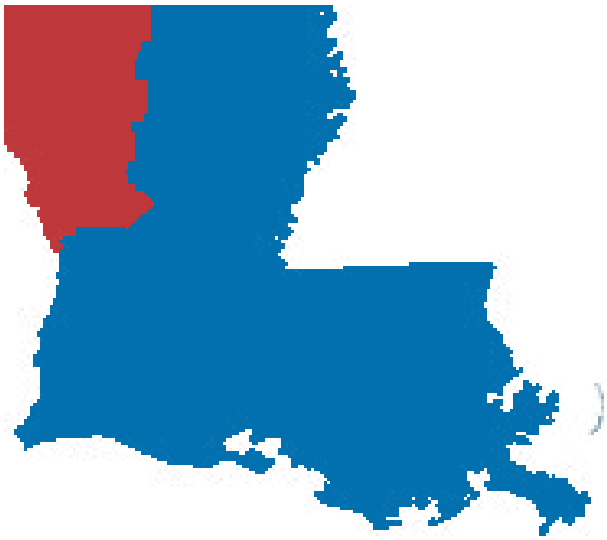
Sgt. Kris Wooster



Region 8

Deb Spann
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(deborah.spann@la.gov)

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Richie Allen, NREMTP
Vice-Chairman
April S. Winborne, RN, CHPN
Secretary

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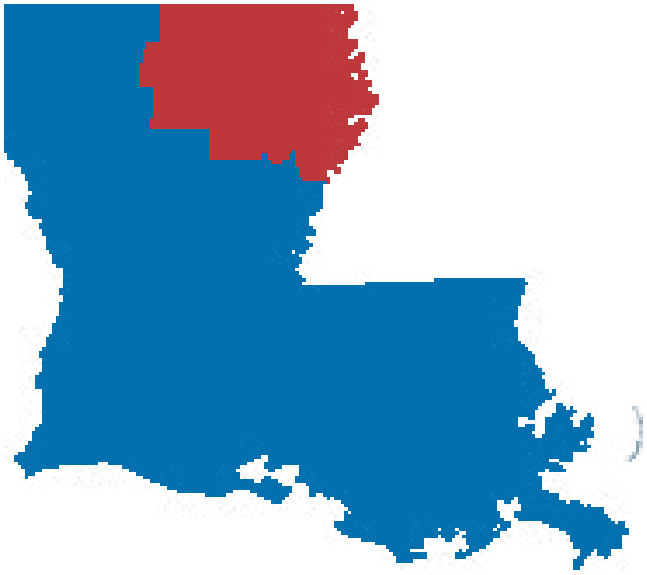
Mike Brame
Thomas Causey, MD, FACC
Shelly Jones, MD
Patrick King, RN
Craig Lott
Janice Posey



Region 9

Yvette Legendre
Tri-Regional Coordinator
(yvette.legendre@la.gov)

Officers

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Jay Smith, MD
Vice-Chairman
Keith Peek
Secretary

Members

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Vasanth Bethela, MD
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Juan Duchesne, MD
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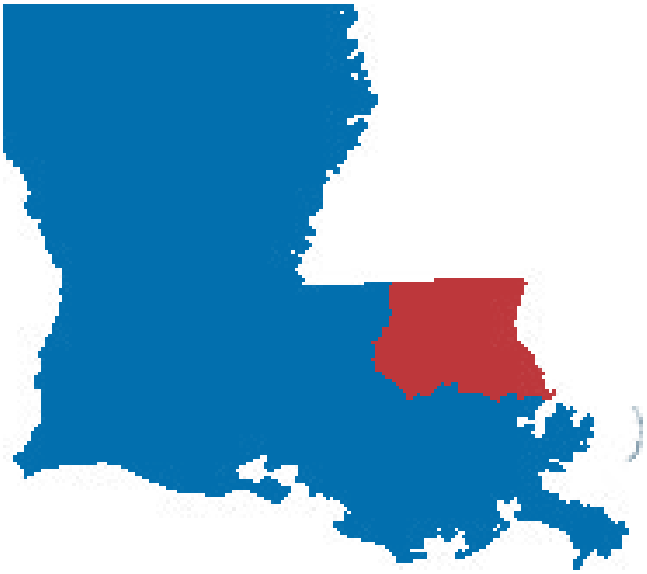
Rodney Hart
Gina Lagarde, MD
Ben Lott, RN
David Marcus, NREMT-P
Rebecca Smith
John P. Taylor, NREMT-P
Tommy Thiebaud
Brinette Thompson, RN



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