



# Indiana State Trauma Care Committee

**August 19, 2016**



Indiana State  
Department of Health

Email questions to: [indianatrauma@isdh.in.gov](mailto:indianatrauma@isdh.in.gov)



# Updates

**Katie Hokanson**, *Trauma and Injury Prevention Director*



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# 2016 EMS Medical Director's Conference

- Friday, August 26, 9 – 3:30
- Sheraton Indianapolis at Keystone Crossing
- Presentations include:
  - Stop the bleeding
  - MCI/Autopsy results \*Keynote Speaker\*
  - EMS MDs round robin
  - EMS case reports from EM residents
  - Demystifying EMS-C \*Keynote Speaker\*
  - Ultrasounds
  - Board certifications
  - Inhalation burns



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# Labor of Love Summit 2016

## *Helping Indiana Reduce Infant Death*

- Monday, October 17, 8 – 5
- JW Marriott
- *Success Through Partnerships*
- **\*NEW\*** Training for Emergency Response Professionals
  - Direct On-Scene Education



Labor of Love  
*Helping Indiana Reduce Infant Death*



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# Indiana Injury Prevention Resource Guide App



- Injury Prevention at your fingertips.
- Free download for iOS & Android.
  - phone & tablet capabilities.
- 2014 data available.



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# Prescription Drug Overdose: Prevention for States Grant

## Grant Activities:

1. Enhance and maximize prescription drug monitoring program (INSPECT)

2. Implement community interventions in high-need areas

3. Evaluate impact of policy changes in  
Indiana



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# Prescription Drug Overdose: Prevention for States Grant

- High-burden counties have been identified based on a variety of factors:
  - Rate of opioid deaths.
  - Rate of non-fatal opioid Emergency Department visits.
  - All drug poisoning death rates.
  - Community Need
    - Poverty Rate.
    - Health department capacity.
    - Controlled substance prescriptions filled and entered into INSPECT per person.
    - Inadequate social support.
    - Monthly unemployment rate.

# Prescription Drug Overdose: Prevention for States Grant

- High-burden counties:
  - Blackford
  - Starke
  - Montgomery
  - Lawrence
  - Howard
  - Vanderburgh





# Prescription Drug Overdose: Prevention for States Grant

## *PDO Staff*

Staff Name	Role	Email	Phone
Kayley Dotson	PDO Epidemiologist	<a href="mailto:kdotson@isdh.in.gov">kdotson@isdh.in.gov</a>	317-234-9656
Bonnie Bernard	PDO Community Outreach Coordinator	<a href="mailto:bbernard@isdh.in.gov">bbernard@isdh.in.gov</a>	317-234-1304
Annie Hayden	PDO Records Consultant	<a href="mailto:anhayden@isdh.in.gov">anhayden@isdh.in.gov</a>	317-234-9729

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# Prescription Drug Overdose: Prevention for States Grant

- What will the state be providing to these counties?
  - Provide technical assistance to counties
    - Data
    - Connect to other resources
    - Tools to improve opioid prescribing interventions
    - Tools to enhance the use of evidence-based opioid prescribing guidelines
    - Train-the-Trainer program
    - Support community needs



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# Centers for Disease Control & Prevention (CDC)

## Public Health Associate Program (PHAP)

- Competitive, two-year, paid training program with the CDC.
- Assigned to public health agencies and nongovernmental organizations.
- Work alongside professionals across a variety of public health settings.
- Candidate: Dawn Smith.
- Start Date: October 3.



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# Centers for Disease Control & Prevention (CDC)

## Public Health Associate Program (PHAP)

- Stroke & STEMI state system research.
- Injury surveillance.
- Division communications.
- Injury prevention programming.
- Indiana trauma registry database management.
- Indiana Violent Death Reporting System (INVDRS) support.
- Injury Prevention Advisory Council (IPAC).



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# Council for State & Territorial Epidemiologists (CSTE)



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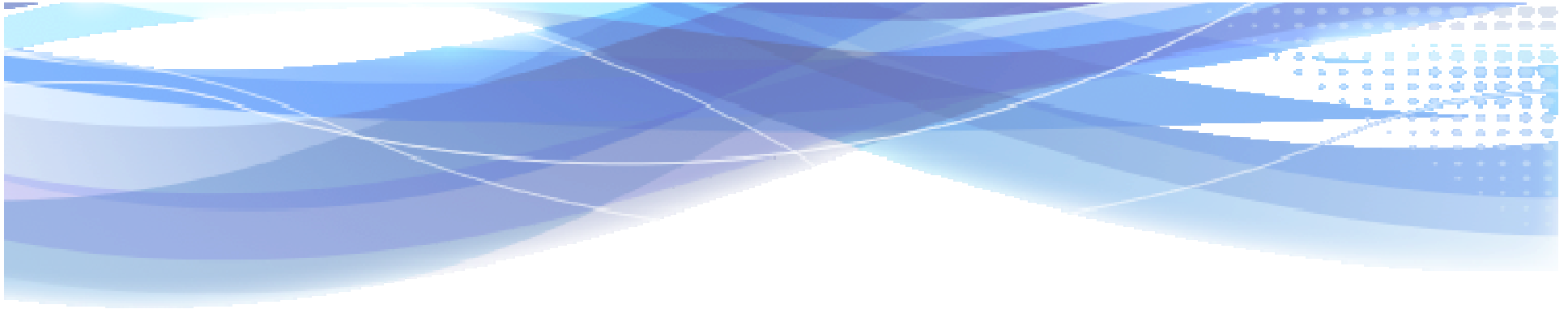
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# ImageTrend Conference



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# Regional Updates

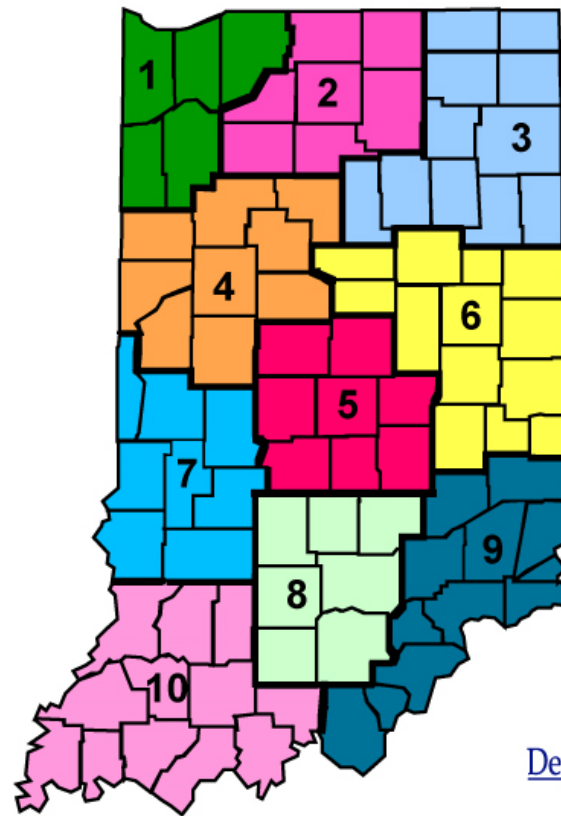


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# Regional updates

- District 5
- District 6
- District 7
- District 10
- District 1



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# Regional Data

**Katie Hokanson**, *Trauma and Injury Prevention Director*  
**Camry Hess**, *Database Analyst*



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# Data Requests from District 1

- Transfer cases.
- Hospital throughput.
- Prolonged scene times.
- Top 3 mechanisms of injury.



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# Transfer Cases

- All patients transferred out from a hospital in district 1.
- Hospital arrival date & time.
- Hospital discharge date & time.
- Nature of injury description.
- Trauma type (blunt/penetrating/other).
- Patient Age.
- Mode of transport from initial facility (air/ground).
- Name of hospital transferred to.
- Reason for transfer delay (if applicable).
- Critical (yes/no).
- Double transfers.



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# Transfer Cases

ED LOS (Minutes)	COI	Trauma Type	Pt. Age	Pt. Age Units	Transport Mode	Hospital Transferred To	Transfer Delay	Delay Reason	Critical	Inter-Facility Transfer	Double Transfer
120	Assault Firearm	Penetrating	25	Years	Ambulance	Memorial South Bend	No	N/A	Yes	No	No
60	MVA Passeng.	Blunt	54	Years	Ambulance		No	N/A	Yes	No	No
200	MVA Driver	Blunt	62	Years	Ambulance	Methodist Northlake	N/A	N/A	Yes	No	No
150	MVA Passeng.	Blunt	19	Years	Ambulance	Methodist Southlake	Yes	Referring Phys. Decision	Yes	No	No



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# Hospital Throughput

- All patients from a hospital in district 1.
- Emergency Department (ED) disposition.
- Unit assigned.
- Hospital arrival date & time.
- Hospital discharge date & time.



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# Hospital Throughput

ED/Acute Care Disposition	ED/Acute Care LOS (Minutes)
OR	100
Transferred	120
Floor Bed	180
Floor Bed	201
ICU	240
OR	150
Transferred	60



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# Prolonged Scene Times

- All patients taken to a hospital in district 1.
- Arrival at scene time.
- Arrival to patient time.
- Arrival at hospital time.
- Overall scene time.
- Any delays (if captured)
- EMS agency name.



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# Prolonged Scene Times

EMS Response Time (Minutes)	EMS Scene Time (Minutes)	EMS Transport Time (Minutes)	EMS Service Name
8	6	12	Prompt
10	4	10	South Haven FD
25	20	15	Keener Township EMS
18	30	24	Porter FD
			Prompt



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# ISDH Concerns

- Identifying specific EMS Services, Hospitals and Rehabilitation Facilities.
- Ability to release identifiable data.
  - Release of identifiable data is subject to Access to Public Records Act (APRA).
  - Using trauma registry data for this purpose.
  - Establishing limits to dataset/data elements.



# Subcommittee Update

## Designation Subcommittee

**Dr. Gerry Gomez,** *Trauma Medical Director*

Eskenazi Health



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# Trauma Designation Subcommittee Update

**August 19, 2016**

**Gerardo Gomez, MD, FACS  
Committee Chair**

**Dr. Lewis Jacobson, Dr. R. Lawrence Reed, Spencer Grover, Wendy St. John, Jennifer Mullen, Lisa Hollister, Amanda Elikofer, Katie Hokanson, Ramzi Nimry, Missy Hockaday, Teri Joy, Art Logsdon, Judy Holsinger, Jennifer Conger, Dr. Emily Fitz, Dr. Matthew Sutter, Dr. Christopher Hartman, Ryan Williams**



# **ISDH Trauma Designation** **Subcommittee Meeting Agenda**

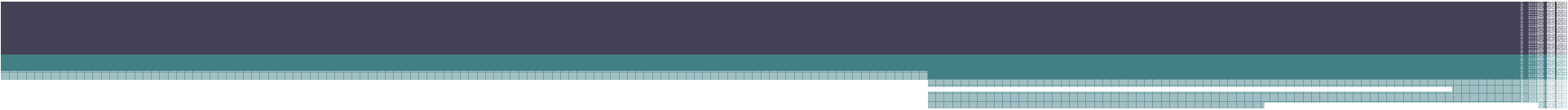
***8/3/2016***

## **1. 1 Year Reviews**

- a. Community Hospital of Anderson – Level III**
- b. Good Samaritan Hospital, Vincennes – Level III**
- c. Franciscan St. Elizabeth East, Lafayette – Level III**

## **2. Application**

- a. Memorial Hospital & Health Care Center, Jasper – Level III**



*All Facilities submitting one year reviews must do so under the format posted online.*

*(after December 12, 2014)*



*Next Steps:*

*Revisions of applications*

# Subcommittee Update

## Indiana Trauma Quality Improvement (InTQIP) Subcommittee

**Katie Hokanson**, *Director of Trauma and Injury Prevention*

ISDH



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# InTQIP Subcommittee

- Met August 12
- Data Sources
- Stakeholders
- Goals of the InTQIP Project
- Engaging new partners
- Next Steps



# Indiana Violent Death Reporting System (INVDRS) Preliminary Suicide Data

**Rachel Kenny**, *INVDRS Epidemiologist*

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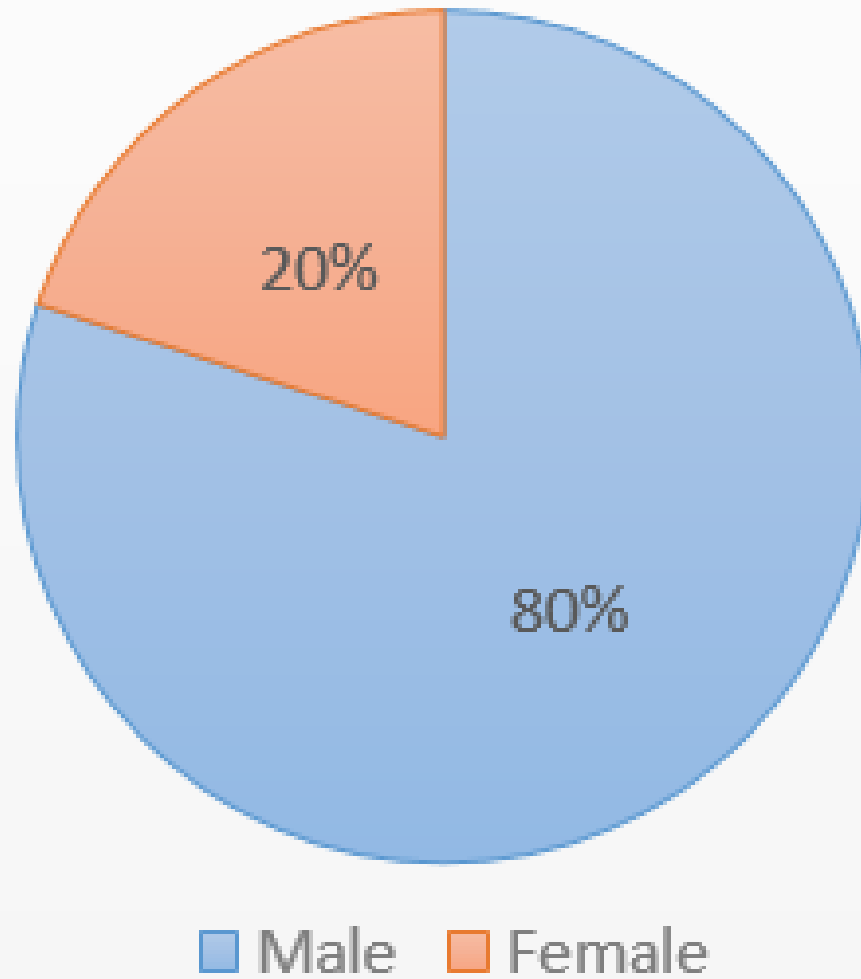
# INVDRS-2015 Overview

- 1575 cases (as of July 2016)
  - **971 Suicides (62%)**
  - 399 Homicides (25%)
  - 181 Undetermined (11%)
  - 24 Accidental or Natural (2%)

\*preliminary numbers

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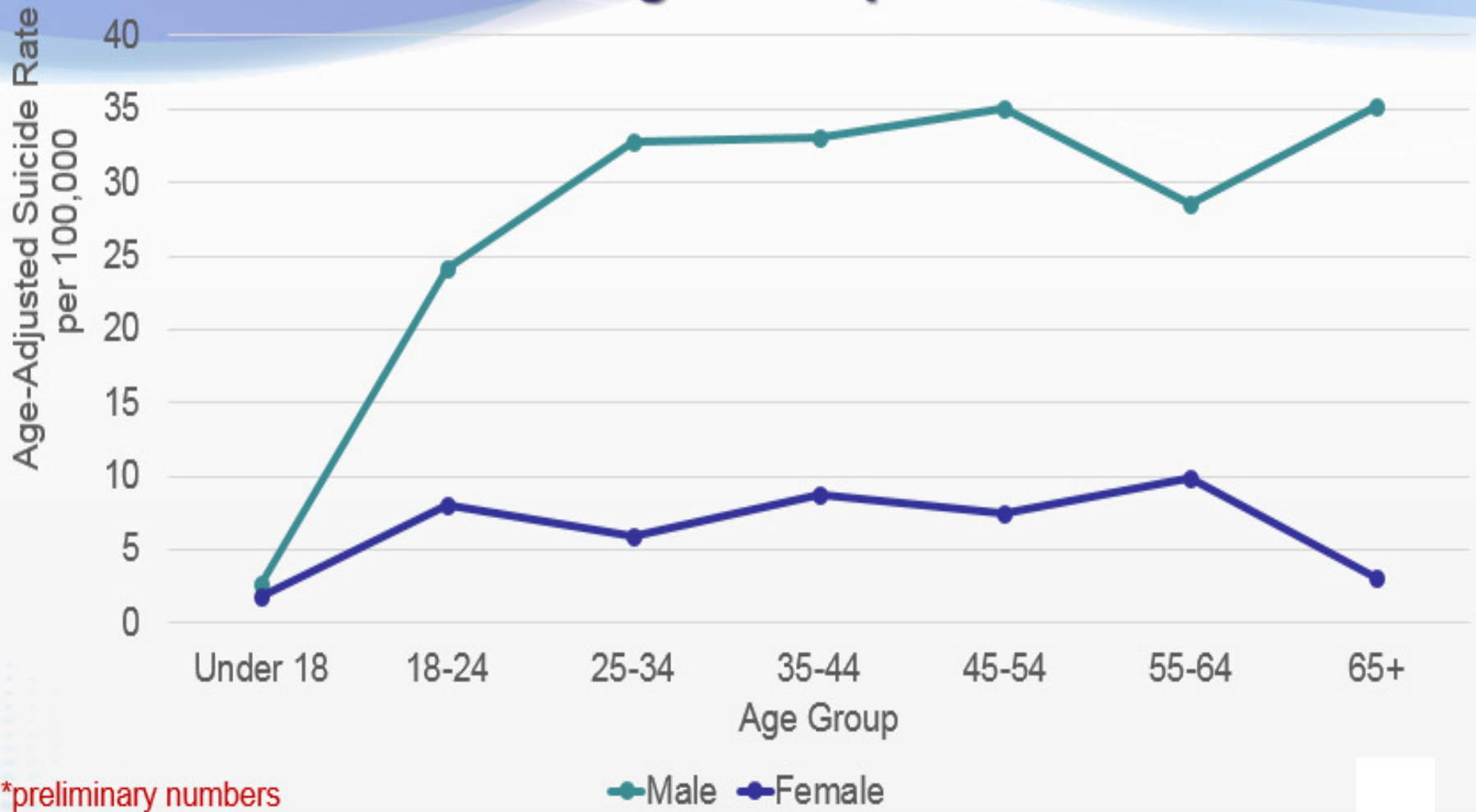
# 2015 Suicide Decedents Sex Distribution



\*preliminary numbers

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# 2015 Indiana Suicide Rates by Sex and Age Group



# Suicides by month, 2015

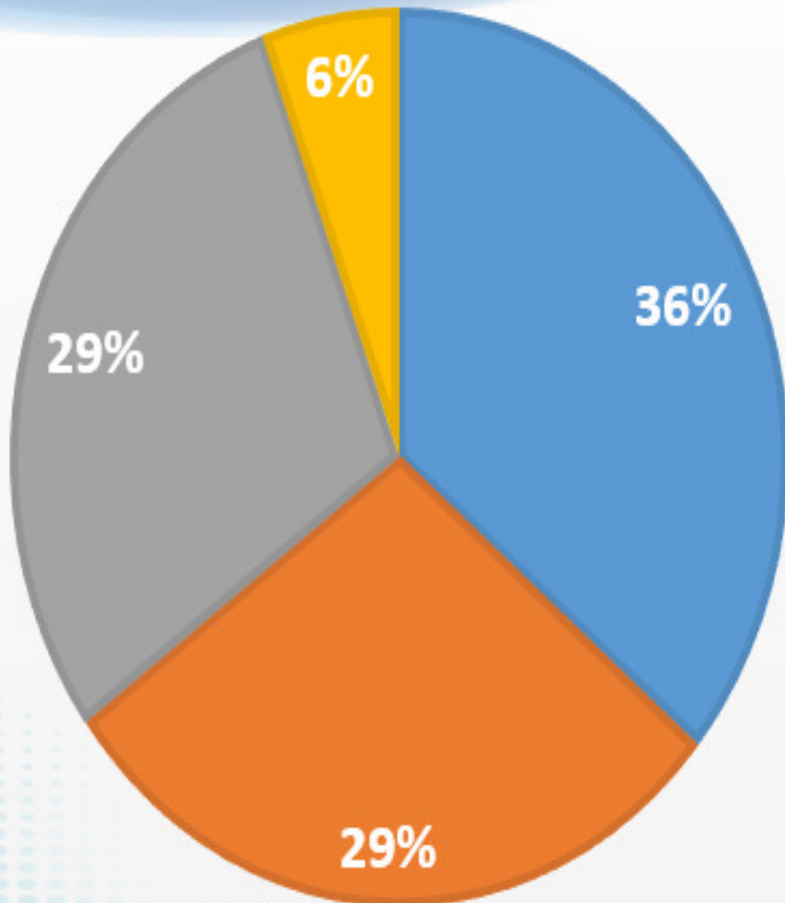


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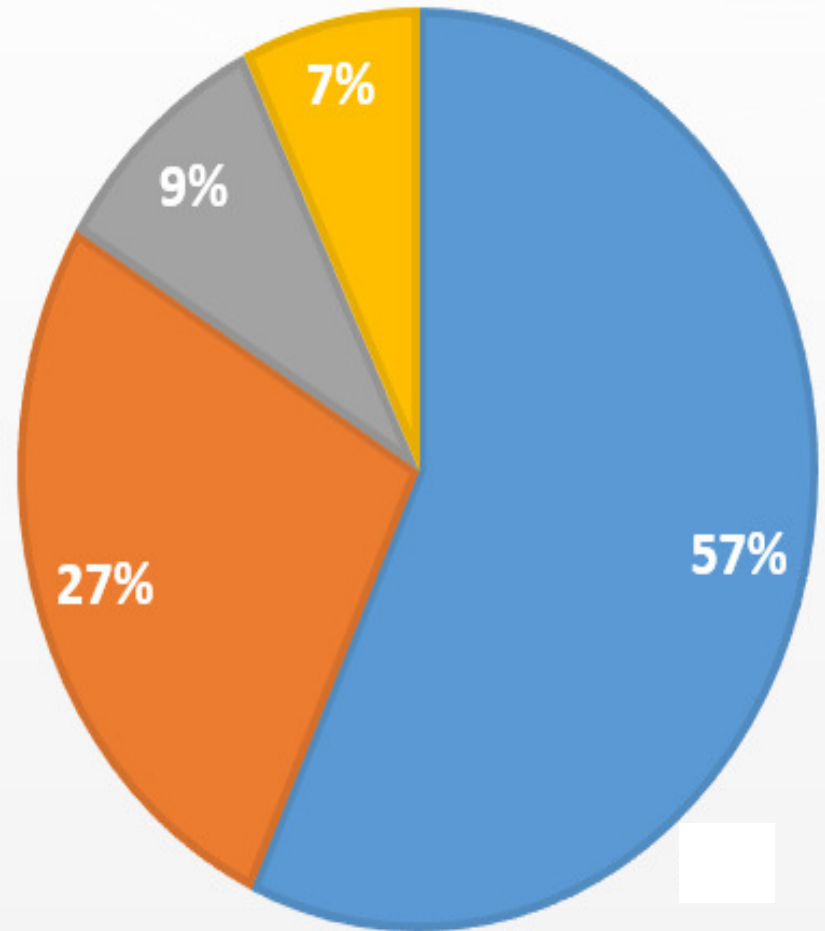
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# Mechanism of Injury by Sex

FEMALE



MALE



- Firearm
- Suffocation
- Poisoning
- Other

\*preliminary numbers

# INVDRS-15 Overview

Total Suicide Cases	971
<b>Cases with at least one Source</b>	<b>*340</b>
Cases with Law Enforcement Data	210
Cases with Coroner Data	246
Cases with Both Sources	116

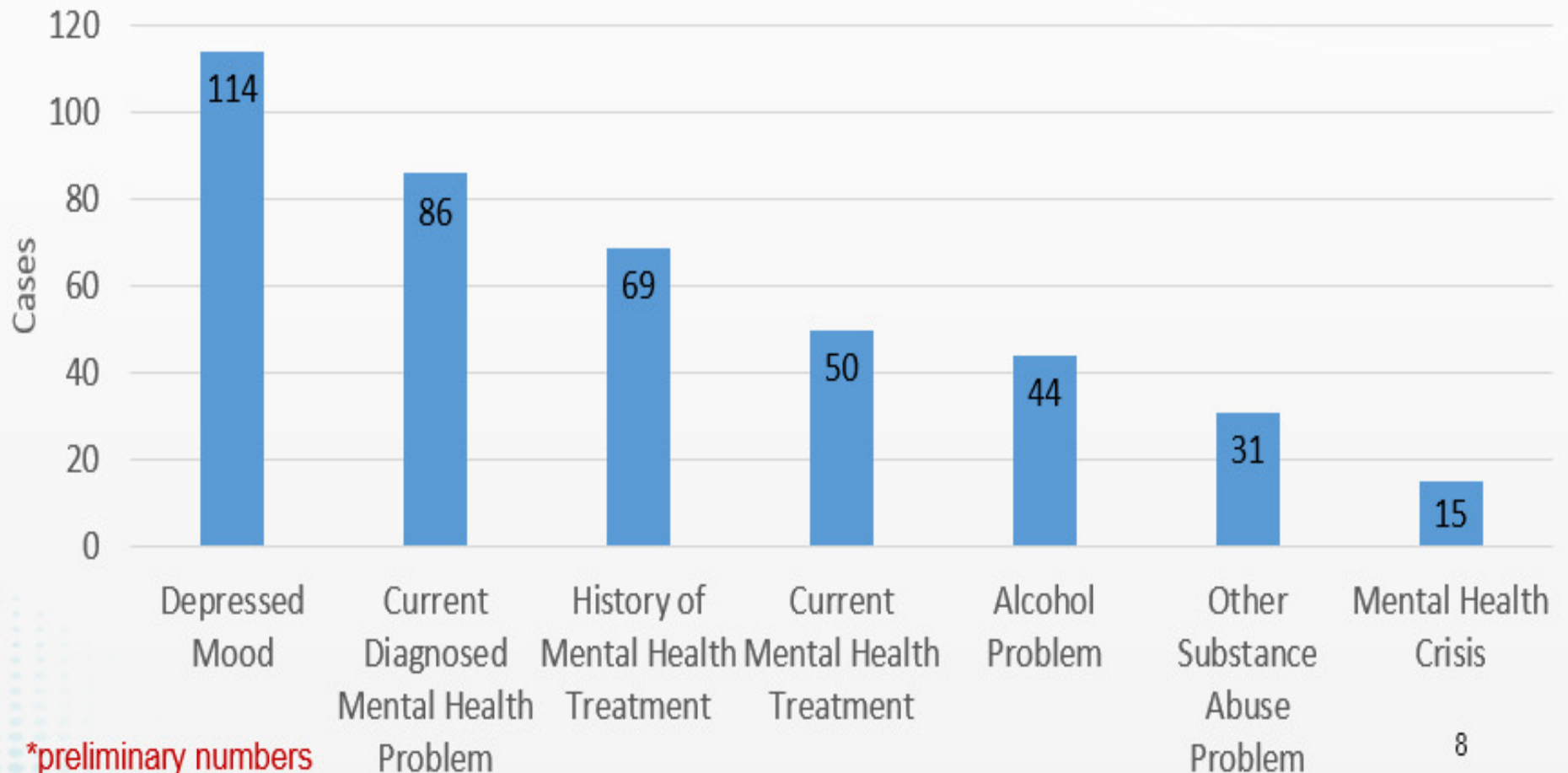
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# Mental Health and Addiction Circumstances

N=340



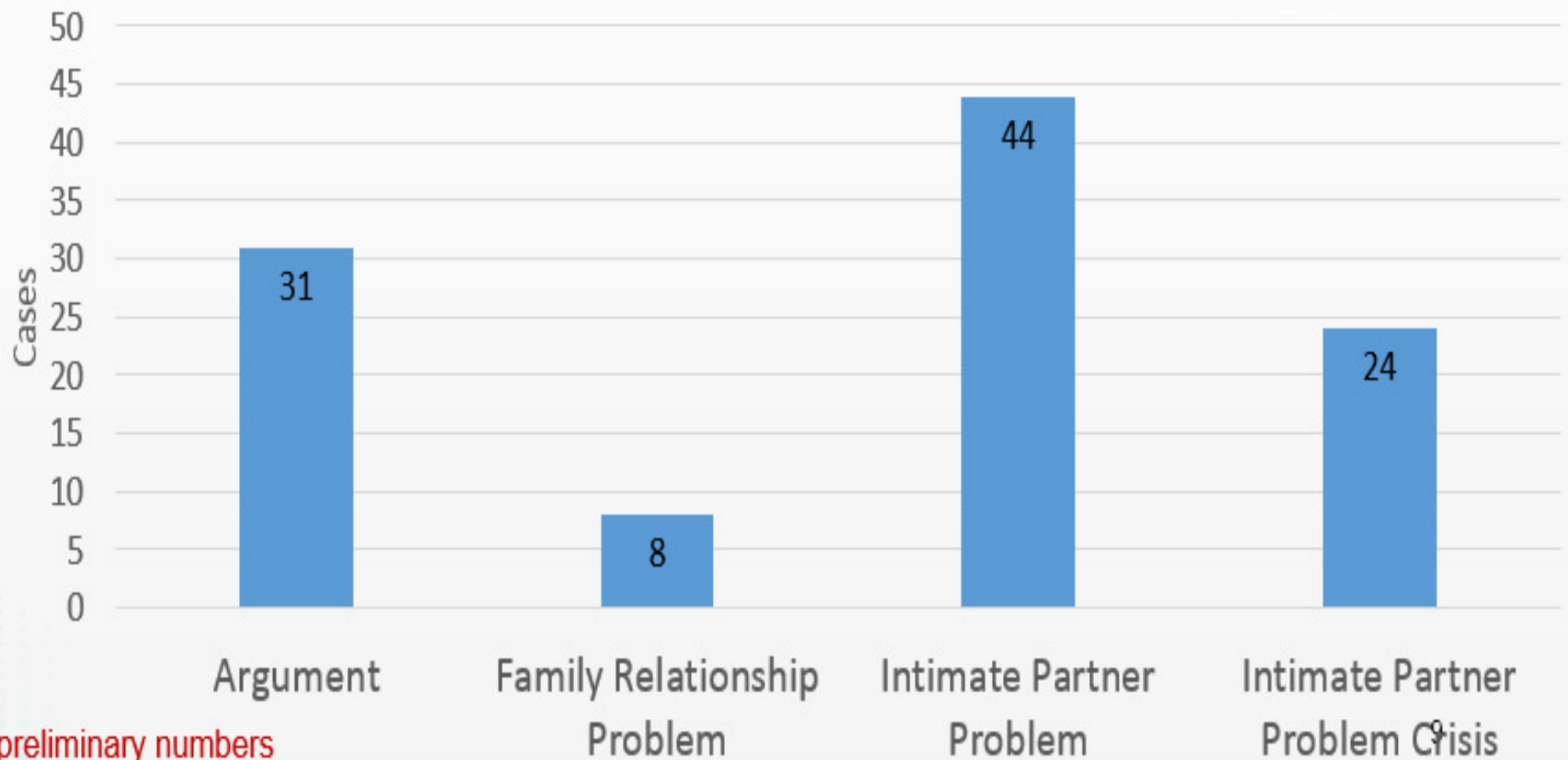
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# Relationship Circumstances

N=340

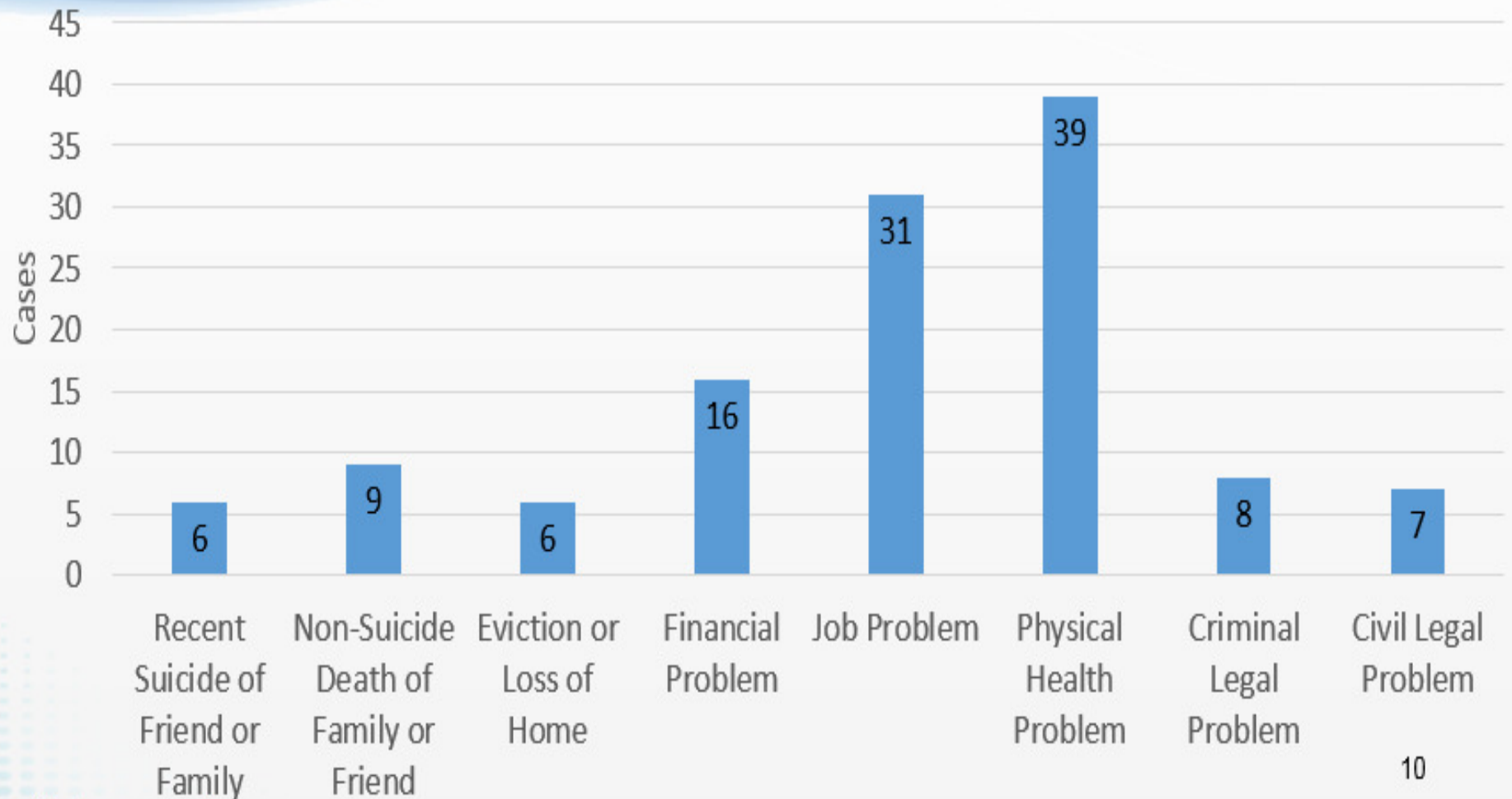


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# Other Life Stressors

N=340

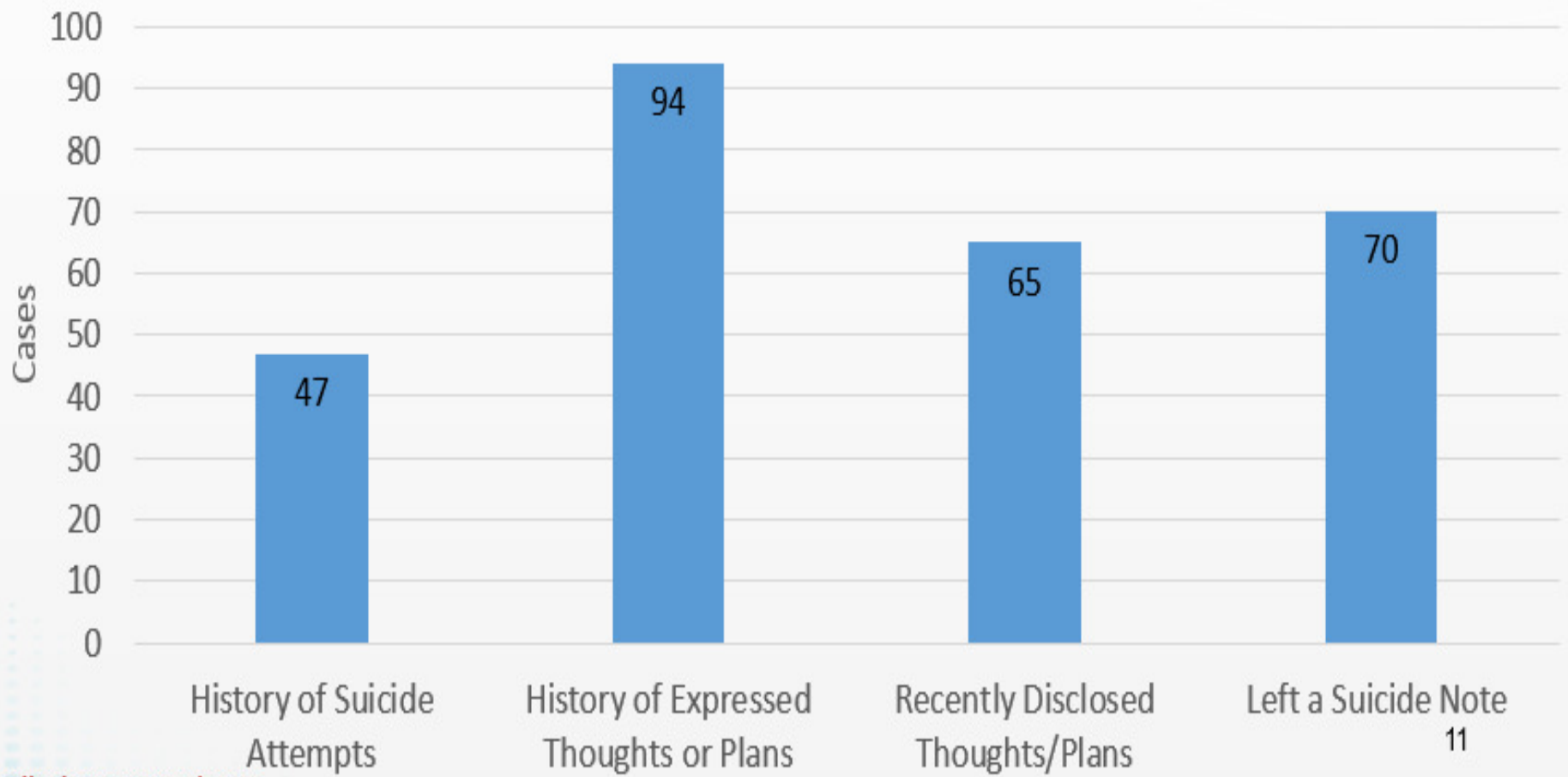


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# Suicide History and Disclosure

N=340



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# Other Business



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# Committee Meeting Dates for 2016

- October 21
- December 16



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# Committee Meeting Dates for 2017

- February 17
- April 21
- June 16
- August 18
- October 20
- December 15



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