

Stakeholder Update
Building A New
Trauma Registry
Registry Solution Work Group
(RSWG)

November, 2011

What I'll be presenting to you today...

- RSWG purpose, objectives & composition
- **Reports Recommended for the new system**
- Next steps: who are we reaching out to and how to provide input + feedback
- Next steps: upcoming discussion topics

RSW/G Purpose

- **To Provide**
 - * A means for stakeholders to communicate subject matter expertise to DSHS
 - * The interface with other Stakeholder Groups to ensure the new injury registry meets the stakeholder needs

RSWG Objectives

- Completed Objectives
 - Assist with the creation of the RFO (Request For Offer) for new Injury Registry
 - Assist with selecting data elements to be available in the new Injury Registry
- Recent Objective
 - **Recommend reports for the new Injury Registry**
- Future Objective
 - Serve as a continued means for stakeholder involvement in the development and operation of the new Injury Registry system

Composition of RSWG and Stakeholder Groups Represented

- Hospitals: All Trauma Designation Levels & Pediatric
- EMS: Rural and Urban
- GETAC
- DSHS
- TXDOT
- NEMSIS (Invited for data element consultation)
- Traumatic Brain Injury: Department of Assistive & Rehabilitative Services (DARS), Health and Human Services Commission (HHSC)
- Drowning experts: National Drowning Prevention Alliance, entities who report the greatest number of drowning/near-drowning to DSHS

How will Reports Be Created?

- **Consilience Corporation**
 - Will build 10 reports
- **DSHS Injury Program**
 - Will build reports
- **Registered users of the Injury Registry**
 - Will have the capability of creating queries and will be able to save a query and anyone who is a registered user of the system could use the query
 - Queries can be created to analyze data on the facility level that the authorized user has privileges to view
 - Queries can be created to analyze aggregate data that is de-identified for patient and for facility based on county, TSA, or State.

Reports Reviewed by RSWG

- Current Reports existing in the Trauma Registry
- NTDB generated reports
- NEMSIS generated reports
- TBI/SCI reports generated by CDC and other States
- Other: such as Trauma Systems Reports and reports requested by RAC Chairs

**Current Reports
Available in
Trauma Registry**

Current Reports: Hospital

Hospital Reports		Brief Summary	
Alcohol		# of patients with alcohol test, and BAC	
Analysis Audit-Level III & IV		EMS scene times, performance improvement questions	
Cause of Injury		Most common causes of injury by categories	
ISS		Patients by ISS score categories	
Monthly Activity		# of patients, discharge, origin, length of stay, trauma team activation, etc.	
Mortality		# of deceased patients, prehospital factors, protective devices, etc.	

Reports can be run by month, quarter or year

All Reports can be run by **Facility, TSA, and State** level for comparison

Current Reports: EMS

EMS Reports		Brief Summary	
Cardiac Transport Report		Cardiac arrest, chest pain, etc.	
Prehospital Intervention		Types of interventions (BLS, Airway, intubation, etc)	
Cause of Injury		Most common causes of injury by categories	
Response Time		Dispatch, enroute, arrival, scene time	
Total Volume		Run type (911, emergency transfer, etc)	
Outcome		Response type responses (treatment, transport, etc)	
Transport Mileage		Total mileage, average mileage, etc	
Trauma vs. Medical		Call type (medical runs, trauma runs, or both)	

RSWG Recommendations for

Reports Currently Available in the Trauma Registry

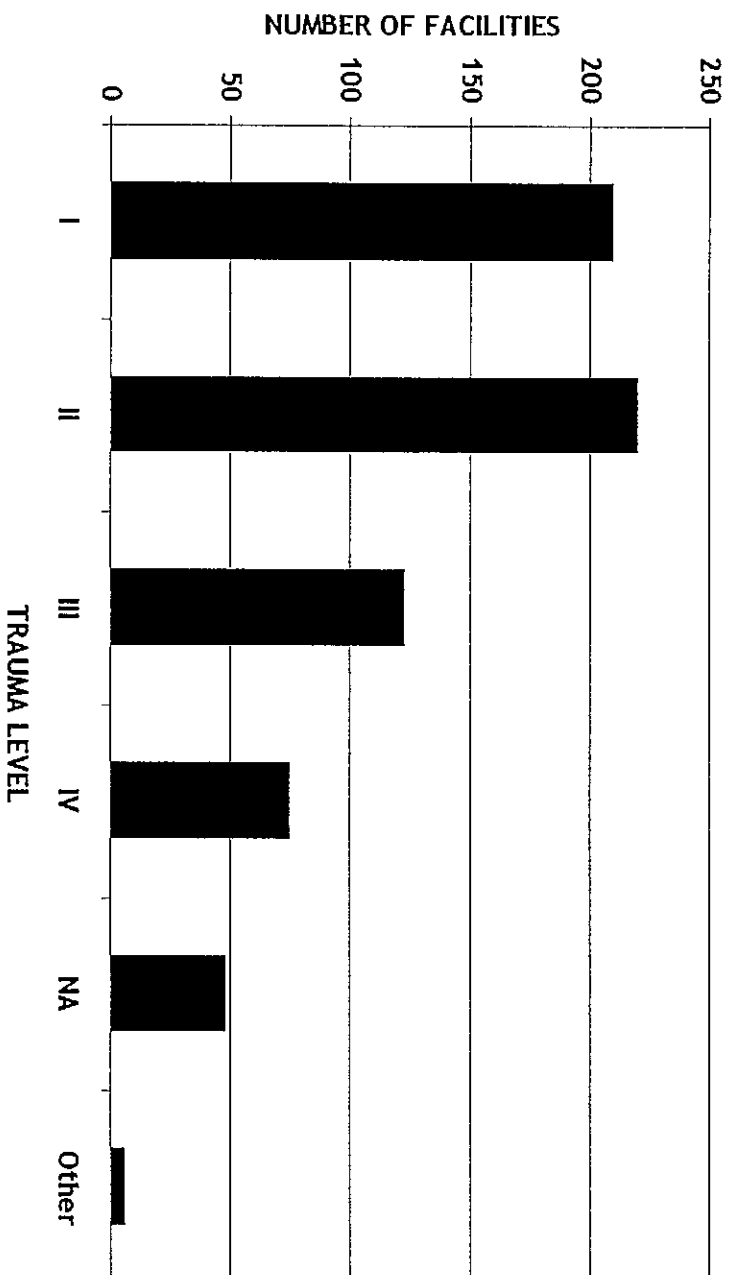
- Keep the current reports so users utilizing them may continue to do so
- Allow hospitals to run comparison statistics by their trauma designation level (aggregate/no identifiers)
- Allow hospitals to run EMS reports and vice versa (aggregate/no identifiers)
- Add national data when possible for state and national comparison

NTDB Reports

Figure 3

Facilities by Trauma Level

FACILITIES BY TRAUMA LEVEL



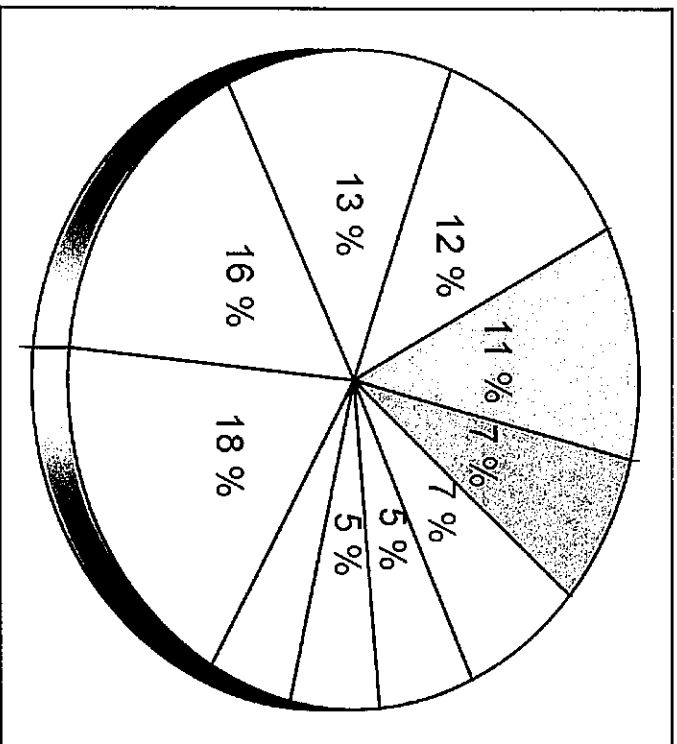
RSWG Recommendations for NTDB Reports

- **Enhance the format of NTDB Reports**
 - Allow comparison of a hospital (based on authorized user's access to view facility level data) to TSA, State and US
 - Aggregate data used for all data that an authorized user does not have access to view: all data de-identified for facilities and patients
 - Examples Include:
 - Your Hospital compared to other hospitals based on Trauma Designation
 - Your Hospital compared to the all hospitals (aggregate group of facilities that are de-identified)
 - By TSA
 - by Disaster Response Group
 - By Hospital size (# of beds)
 - Injury Rates
 - Ventilator Days

NEMESIS Reports

Sample NEMESIS report

- **Top 10 Patient Complaint Categories**



Top 10 Complaints	Percent	Total
Sick Person	18 %	123,645
Breathing Problem	16 %	110,035
Traffic Accident	13 %	87,035
Fall Victim	12 %	80,992
Chest Pain	11 %	77,744
Unconscious/Fainting	7 %	50,591
Unknown Problem Man Down	7 %	46,606
Transfer/Interfacility/Palliative Care	5 %	36,595
Convulsions/Seizure	5 %	34,298
Traumatic Injury	5 %	32,051

Cases selected: 679,592 †

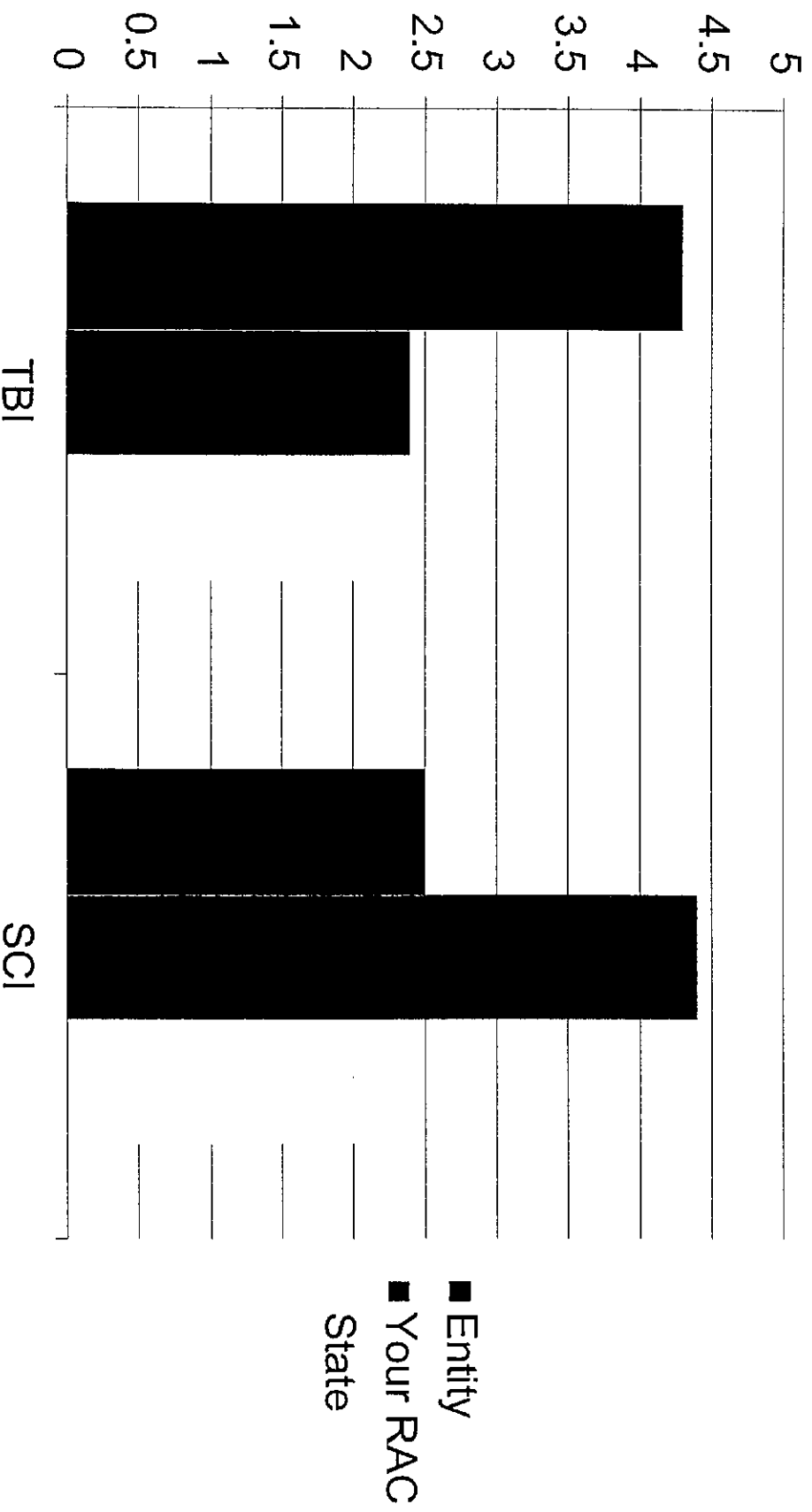
RSWG Recommendations for NEMESIS Reports

- **Enhance the format of NEMESIS Reports**
 - Allow comparison of an EMS (based on authorized user's access to view facility level data) to TSA, State and US
 - Aggregate data used for all data that an authorized user does not have access to view: all data de-identified for facilities and patients
 - Examples Include:
 - Your EMS compared to TSA, State or US by Types of Delay
 - Your EMS compared to TSA, STATE or US by Top 10 Patient Complaints

TBI/SCI Reports

Sample TBI/SCI Report

Rates of TBI/SCI by Entity, RAC, and State



Rates are per 100,000 of the population

RSWG Recommendations for TBI/SCI

- **Compare Data between Facility, TSA, State and US**
 - Allow comparison of data (based on authorized user's access to view facility level data) to TSA, State and US
 - Examples Include:
 - Your Facility compared to the all facilities (aggregate group of facilities that are de-identified)
 - Cause of TBI/SCI
 - Work Related
 - TBI/SCI by Trauma Designation

Other Reports

Trauma Systems Reports and
reports requested by RAC Chairs

Sample Other Report: Trauma System Committee Report

Table 3: The Four Most Frequent Non-Fatal Injury E Codes

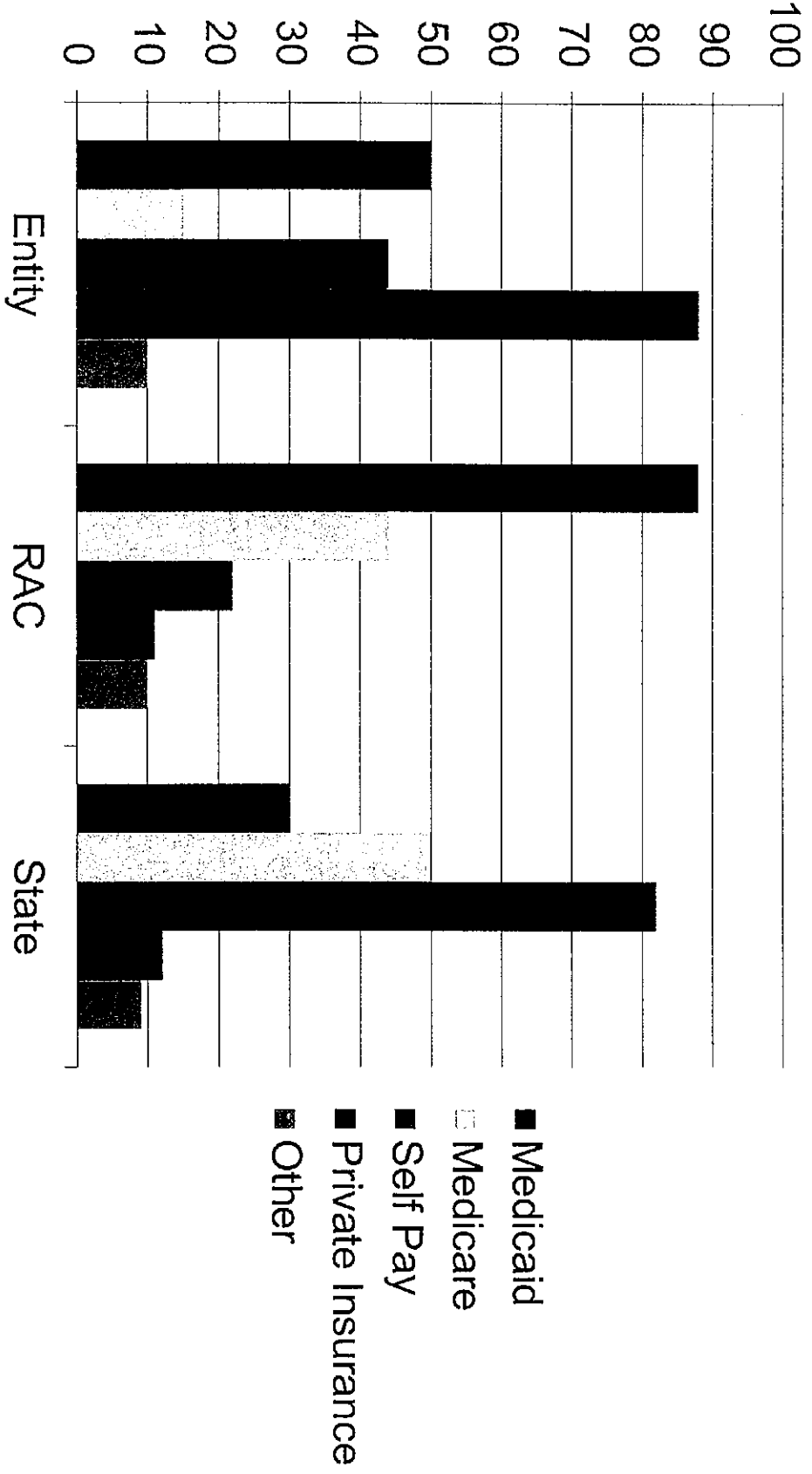
E Code	Description	Frequency	Percent
1 885.9	Fall from other slipping, tripping or stumbling	14,898	17.43
2 888.9	Unspecified fall	4,877	5.71
3 812.0	Other motor vehicle traffic accident involving collision with motor vehicle	3,840	4.49
4 884.9	Other fall from one level to another	3,167	3.71

Sample Other Report: Trauma System Committee Report

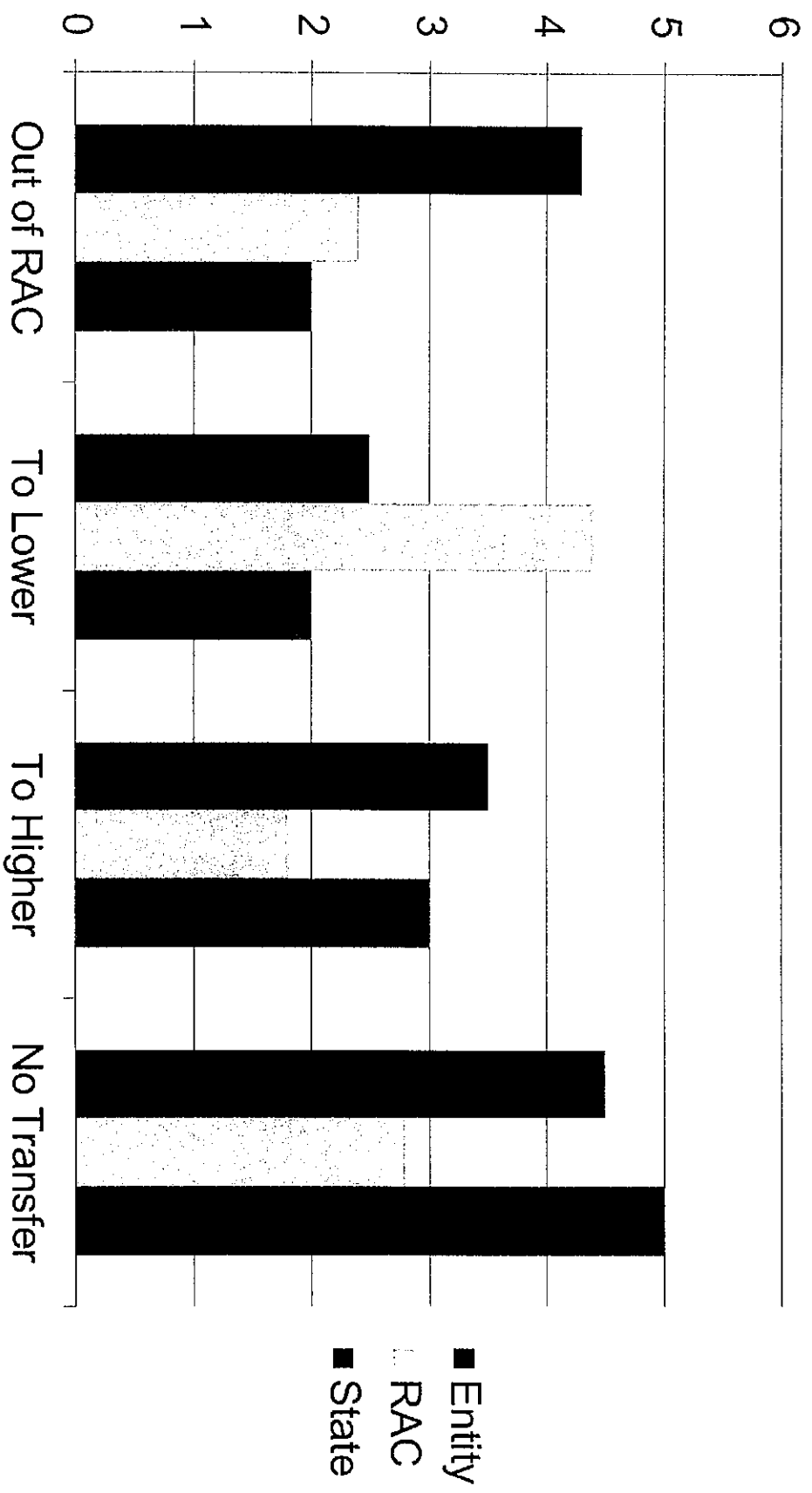
Table 4: The Top Five Non-Fatal Injury
Categories

Injury Type	Frequency	Percentage
¹ Fall – Accidental	39,050	48.49
² Motor Vehicle Collision	18,955	23.54
³ Assault	7,725	9.59
⁴ Other Transportation	5,722	7.11
⁵ Struck by, Against	3,425	4.25
¹ Fall – Accidental includes E Codes: 880 - 886, 888, and 987 ² Motor Vehicle Collision includes E Codes: 810 – 819 ³ Assault includes E Codes: 960 – 969 ⁴ Other Transportation includes E Codes: 800-807, 820-838, 840-848 ⁵ Struck by, Against includes E Codes: 916-917		

Sample Other Report: Method Of Payment



Sample Other Report: Transfers



RSWG Recommendations for Other Reports

- Annual Reports for EMS, Hospital, RAC
 - Example: Trauma System Committee Report
 - Provides an overview of trauma in Texas for the year for each RAC
- Stakeholder Requested Reports
 - Example: OEM/TS RAC Chair Survey
 - Asked RAC chairs for suggestions and received ideas not currently in system such as method of payment, transfers, and farm/ranch injuries

Next Steps

- Though many reports are beginning development it is an ongoing process
- DSHS will seek stakeholder input from injury prevention coordinators and drowning experts
- DSHS will offer webinars to seek more stakeholder input for types of needed reports, Webinars are scheduled for Nov. 29 and Nov. 30, 2011
 - Resulting FAQ from webinars will be created and posted to the DSHS website
- Email notifications will inform stakeholders of the dates and times of webinars, how to register for the webinar, location of documents and how to provide feedback

Contact Information

- Manager: Tammy Sajak
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- www.dshs.state.tx.us/injury
 - Webinar Information is on the DSHS Injury Website