

Regional System Development Subcommittee Recommendations

Evolve the current State Trauma Advisory Council (STAC) and Regional Advisory Council (RAC) system to a participating inclusive system addressing quality management and performance improvement

STRATEGY	TIME FRAME	LEAD	PARTNERS	FUNDING IMPLICATIONS
Enhance and evolve the current OEMS structure for trauma to include additional FTE's for a State Trauma Nurse Coordinator, Trauma Registrar, Trauma Medical Director, Disaster/Bioterrorism Coordinator and necessary support personnel	2009-2014	OEMS	NC Hospital Assoc STAC NCCOT NC Legislature	Contingent upon funding
Define and regulate state-wide hospital (non trauma center) and EMS participation in the current established legislated trauma system including requirements for participation, liaison personnel, and penalties for non-participation.	2009-2014	OEMS	NC Hospital Assoc STAC NCCOT NC Legislature Leadership subcommittee Department of Insurance	May require funding to facilitate hospital participation
Define standard RAC composition and funding requirements and establish a process for periodic evaluation of human resource needs.	2008-2014	STAC		Can be accomplished with current structure for submission with trauma system funding proposal
Define roles and responsibilities of current established STAC/RAC system through the development standardized regional trauma system plans addressing governance, data collection, performance improvement including peer review protection operationalized at the individual RAC level.	2009-2010	OEMS	STAC NCCOT	May be accomplished with current funding but will be greatly enhanced by achievement of above strategies
Standardize, evolve and coordinate at a STAC level the RAC subcommittee structure to include Performance Improvement, Emergency Medical Services, Injury Prevention, Disaster Preparedness, and Aero medical Transport	2009-2014	STAC	RAC's NCCOT OEMS	May be accomplished with current funding but will be greatly enhanced by achievement of above strategies
Facilitate Pre-trauma-center Care through development of clear guidelines (including general trauma, EMS-C and burns) for triage and transport, and defining the responsibilities of hospitals participating in each RAC	2009-2014	STAC	RAC's NCCOT OEMS EMS Directors EMS Medical Directors ED Directors ED Medical Directors Aeromedical Unit Directors Pre-hospital subcommittee	May be accomplished with current funding but will be greatly enhanced by achievement of above strategies

Measures of success:

- Improved regional and state-wide partnerships for trauma care.
- Improved regional and state-wide resources for advancing trauma care.
- Legislation to require participation and fund an inclusive regionalized state-wide trauma system.
- Evidence of a more defined, standardized, productive STAC/RAC system.

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