

**State Board of Emergency Medical Services  
2012 Dashboard-Trauma**

*Last updated: August 21, 2012*



**Color Key:**

- Blue = Completed
- Green = Significant Progress, On Schedule
- Yellow = Slow Progress, Delayed
- Red = No Progress, Significant Issues

Strategies	Key Actions for <i>Ohio EMS 2015</i>	Measure	Start Date	Assigned Completion Date	Key Process Owner	Current Month	Previous Month
<b>Goal 4: Prehospital Care</b>							
<i>Evaluate and maintain guidelines specific to the transport of trauma patients that result in timely and safe delivery to trauma care.</i>							
<b>4.1:</b> There is a well-defined trauma system with medical oversight integrating the specialty needs of the trauma system with the medical oversight for the overall EMS system.		Formal, written procedure exists delineating the responsibilities and relationship of the state trauma medical director and the state EMS medical director. In cooperation with the prehospital certification and licensure authority, guidelines exist for prehospital personnel for initial and ongoing trauma education and training; including trauma-specific courses and those courses that are readily available throughout the State.			Ross		
	<b>4.1.1 Review state trauma medical director position descriptions</b>	Position descriptions reviewed	Done	Done	Ross		
	<b>4.1.2 Develop a position description and justification for trauma system medical director, including all relevant training, credentials and experience</b>	Position description written	8/1/12	2013	Ross		
	<b>4.1.3 Submit position description to Goal 1 workgroup for inclusion in future legislation</b>	Submission made	2013	2013	Ross		

<p><b>4.2:</b> The trauma system medical director is actively involved with the development, implementation, and ongoing evaluation of EMS system protocols to ensure they are congruent with the trauma system design.</p>	<p><b>[Strategy dependent on 4.1]</b></p>	<p>Development of EMS / Trauma system protocols, with clear collaboration between the trauma system medical director and the state EMS medical director, with protocols congruent with the trauma system plan. Local, regional and state medical oversight exists. Effective performance improvement process of the EMS system for trauma triage, communications, treatment, and transport is in place. Sufficient and well-coordinated transportation resources exist to ensure EMS providers arrive at the scene promptly and expeditiously transport the patient to the correct hospital by the correct transportation mode.</p>					
<p><b>4.3:</b> There is clearly defined, cooperative, and ongoing relationship between the hospital trauma medical directors and local / regional EMS directors.</p>		<p>A formal organizational structure exists at the local and regional level, supporting the collaboration and medical oversight of trauma triage, education, communication, treatment and transport.</p>			<p><b>Ross</b></p>		
	<p><b>4.3.1 Consult with RPAB Chairs to plan process for routine meetings between trauma medical directors and EMS directors</b></p>	<p>Plans created</p>	<p><b>7/1/12</b></p>	<p><b>12/31/12</b></p>	<p><b>Ross</b></p>		
	<p><b>4.3.2 Conduct introductory/informational meetings between trauma medical directors and EMS directors</b></p>	<p>Meetings held and introductions made</p>	<p><b>2013</b></p>	<p><b>6/30/13</b></p>	<p><b>Ross</b></p>		
	<p><b>4.3.3 Establish schedule of routine meetings between trauma medical directors and EMS directors</b></p>	<p>Regular meetings scheduled</p>	<p><b>2013</b></p>	<p><b>Ongoing</b></p>	<p><b>Ross</b></p>		