



# Trauma Care Network News

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## New Monthly Trauma Care Network Newsletter

**The NHS in the West Midlands is proposing to transform the care people receive when they suffer major trauma by introducing an improved delivery model across the region.**

## Welcome and Introduction

As co-chairs of the West Midlands Major Trauma Project Board, we would like to welcome you to the first issue of the new monthly Trauma Care Network Newsletter.

The aim of this newsletter is to keep you up to date on the review of trauma care that is taking place across the West Midlands.

Whilst we already have a network of dedicated highly committed professionals who are saving the lives of major trauma victims evidence shows that we can do even better.

Evidence tells us that having a trauma care system in place will not only save more lives and reduce disability but will improve our patients' long term outcomes and highlights the importance of access to specialised rehabilitation services.

The creation of a system that concentrates the expertise, specialised services and patients into Major Trauma Centres, supported by Trauma Units and Local Emergency Hospitals will bring enormous benefits to patients by increasing survival rates, shortening recovery times and reducing disability from injury.

By working together we aim to ensure that patients with serious and life threatening injuries receive the specialised quality care to enable them to make the fullest recovery possible.



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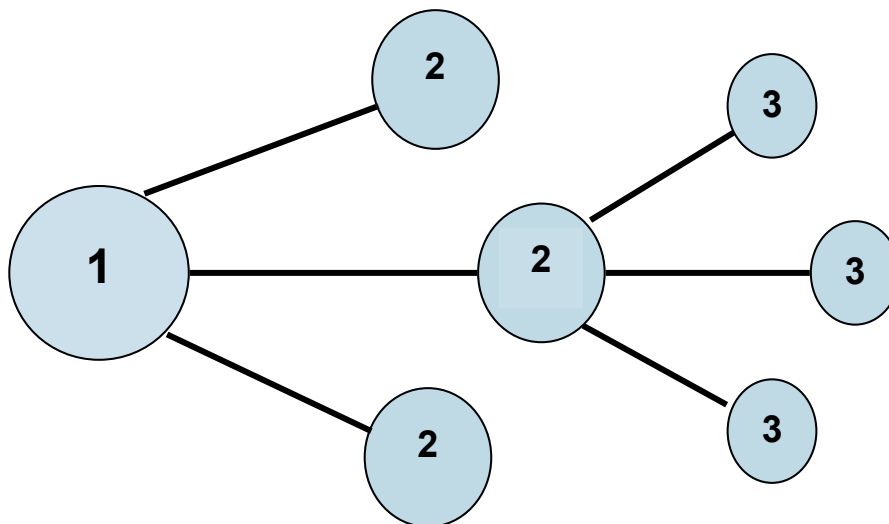
# The Need for Change

The need for change was identified following the publication of several studies that highlighted deficiencies in care provided to severely injured patients in England including the National Confidential Enquiry into Patient Outcome and Death (NCEPOD) in 2007. There is a wealth of evidence that demonstrates the benefits and improved outcomes for patients if dedicated centres with a wide range of specialist staff, facilities and services on one site are made available. Based on evidence from overseas where trauma systems have already been implemented, the West Midlands could expect to save an additional 40-60 patients following a major trauma incident.

It is also a national requirement in the NHS Operating Framework in England 2011/12 that all regions should be moving trauma service provision into regional trauma systems to make significant improvements in the clinical outcomes for major trauma patients.

Sir David Nicholson, the NHS Chief Executive recognising the need for change has asked that all regions begin the implementation of plans for major trauma by the end of March 2012.

## What a Trauma Network would look like



### 1. Major Trauma Centre

Highest level of trauma care, consultant led care

Full range of specialists, services and equipment 24 -7

Education, prevention, research

Expertise and Culture of good trauma care

### 2. Trauma Units

Provides selected trauma care

Works in collaboration with a major trauma centre

Not all specialists and services are available

Transfer agreements to major trauma centre

### 3. Local Emergency Hospitals

Trauma Care

General Accident & Emergency Services

# Benefits for patients cared for in a trauma care system

By introducing a trauma care system across the West Midlands patients with severe/multiple injuries will have a better chance of survival in a major trauma centre and a much better recovery and quality of life for the future.

## Benefits include:

- Improved survival rates by 20% - saving an additional 45 - 60 lives each year
- Speedier recovery for patients
- Severity of patient disability reduced
- Patients able to live more independently following their recovery
- More patients are able to return to work
- Specialist major trauma care available 24 hours a day, 7 days a week
- Specialised staff, services and facilities available on one site
- Access to specialised rehabilitation services
- Quality improvement programmes ensuring continuous improvement of high quality care



# Improving trauma care services

Major trauma is defined as serious injuries which threaten life including: above the knee amputation; major head injuries; multiple injuries, both internal and external; spinal injury which could lead to paralysis and severe knife and gunshot wounds.

Patients with serious multiple injuries (major trauma) require emergency access 24 hours a day 7 days a week, to a wide range of clinical services and specialist staff. Major trauma patients are usually helped by a 999 emergency ambulance and are taken to the nearest hospital emergency department for treatment.

Major trauma only concerns the most serious injuries. Trauma includes all other types of injuries such as a fractured hip or other bones and minor head injuries, these cases will continue to be treated at Trauma Units and Local Emergency Hospitals.

## Introducing a Trauma Care System across the West Midlands

A Trauma Care System is the name given to the partnership working between hospitals which will deliver the Trauma Care Services via a Trauma Network, in a given geographical area, for us this will be the West Midlands region.

### What is a Trauma Network?

At the heart of the Trauma Network is the Major Trauma Centre(s) (MTC). A Trauma Network should include all providers of trauma care including:

- Ambulances and the air ambulance
- Other hospitals who receive acute trauma patients (Trauma Units) and
- Rehabilitation services

The Trauma Network will also have links into social care and the independent sector.

Where there is more than one Trauma Network in place within a region as is the case when there is more than one Major Trauma Centre, the networks will join together to form a regional trauma system.

### What is a Major Trauma Centre?

A Major Trauma Centre (MTC) is a hospital that offers many different services (multi-specialty) on a single site, led by consultants who provide major trauma care, managing all types of severe trauma injuries.

### What is a Trauma Unit?

A Trauma Unit (TU) is a hospital in a trauma network that provides some specialist care for patients who do not have multiple injuries, for example a patient who may have broken an arm or leg. The Trauma Unit also ensures that the patient returns to their local hospital and community services for rehabilitation.

The Trauma Unit may also move patients who are severely injured to an MTC that can manage their injuries and will work with other centres, units and local emergency departments making their specialist services available across the network.

### What is a Local Emergency Hospital?

A local Emergency Hospital (LEH) will offer a full Accident and Emergency service however patients assessed with major trauma injuries would not be taken to the LEH but taken directly to the appropriate specialist centre for treatment. It should be noted that this applies to 1 or 2 patients a week.



# Key milestones and next steps

Milestones	Completion Date
Development and agreement of PID in reflection of revised scope and milestones.	April 2011
Model of Care finalised and Implications agreed by Project Board, Steering Group and Clusters	May 2011
Specification for Integrated Impact Assessment (IIA) and Pre-Consultation	End of May 2011
Completion of IIA and plan for Pre consultation	End of July 2011
Pre Consultation Phase	August/September 2011
Completion of Business Case	September 2011
Multi-Cluster Trauma Unit Selection Panel	8th September 2011
Project Board Appraisal of Trauma system options	End of September 2011
Appraisal document to Clusters, Steering Group & Stakeholders	Early October 2011
SCG preferred option recommendation for consultation	End of October 2011
Stage 1 Gateway Review	October 2011
Public Consultation (subject to HOSCs)	November - February 2012
Final Decision by SCG and Four Tests Review by SHA	February 2012
Commence Implementation	Mid Feb 2012 onwards

## Would you like to know more?

Over the coming months we aim to keep you informed on a regular basis particularly people such as young drivers, motorcycle enthusiasts and horse riders who are more likely than most to suffer major trauma on the changes taking place.

If you have any questions queries or comments, please get in touch;

- Email us at [info@wmssc.nhs.uk](mailto:info@wmssc.nhs.uk)
- Telephone 0121 695 2369
- Write to us at the address below.

### In the next issue:

- **The Options**
- **Integrated Impact Assessment findings and actions**
- **Selection process for Trauma Units**
- **Rehabilitation update**
- **Decision making process for the West Midlands Trauma Care System preferred option**

