

Zero Preventable Deaths: A collaborative military and civilian assessment of the deployed military trauma system

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INTRODUCTION: The military joint trauma system has a mission to improve combat casualty care delivery and optimal patient outcomes. This coordinated effort defines the continuum of care as an integrated trauma system from point of injury through rehabilitation. The 2011 assessment of the deployed military trauma system was the 4th and final such visit during OEF/OIF and the most rigorous. This concept follows a long tradition of utilizing civilian surgeons' expertise to better combat care (i.e. J. Letterman US Civil War, H. Cushing WWI and E. Churchill WWII).

OBJECTIVES: US trauma centers and systems routinely undergo clinical and operational evaluation to ensure optimal care of the injured. This military-civilian evaluation was carried out with the intent of defining optimal elements and rendering strategic recommendations for the joint military trauma system. Objectives included development of a framework for future assessments.



CONCEPT FRAMEWORK: A group of nationally recognized military and civilian trauma experts surveyed five military treatment facilities (MTF); one Role IV located in Germany and two Role III and one Role II in Afghanistan. The two week assessment was funded by the US Air Force, however, the team was selected by the Joint Trauma System. Selection criteria included expertise in trauma care, leadership in US trauma systems development and their integral relationship with military trauma leaders. Applying the core function of a public health model to military trauma system provided a process for enhancement of military trauma systems through a framework that accentuates assessment, policy development and assurance while holding to the highest standards in trauma systems performance. A strategic report which included seven areas of critical observations and strategic recommendations was generated in order to provide a platform for tactical development.

JOINT TRAUMA SYSTEM AUTHORITY

The United States Military Joint Trauma System Assessment:
A Report Commissioned by the US Central Command Surgeon
Sponsored by Air Force Central Command

A Strategic Document to
Provide a Platform for Tactical Development

HRSA Model Trauma Systems Planning and Evaluation

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CRITICAL OBSERVATIONS AND STRATEGIC RECOMMENDATIONS

1. Joint Trauma System Authority
2. Informatics
3. Performance Improvement
4. Communication and System Cohesion
5. Pre-deployment Training and Transition Training
6. Clinical Investigation/Research
7. Clinical Excellence

CLINICAL EXCELLENCE



INFORMATICS AND PERFORMANCE IMPROVEMENT

PREDEPLOYMENT AND TRANSITION TRAINING

Practical Emergency Information for Critical Trauma Care from Military Medical Experts

Joint Trauma System
TCCC GUIDELINES
1 AUG 2018

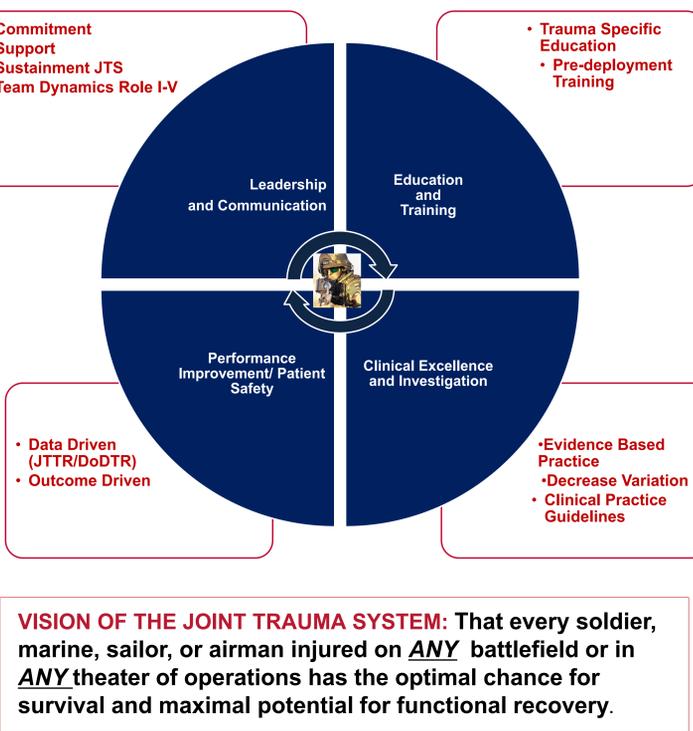
ADVANCED EN-ROUTE CRITICAL CARE DURING COMBAT OPERATIONS

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COMMUNICATION AND SYSTEM COHESION

CLINICAL INVESTIGATION AND RESEARCH

JC2RT provided oversight to all combat zone human subjects research which included protocol development, IRB approval, qualitative and quantitative data analysis, and dissemination of findings.



CONCLUSIONS AND FUTURE DIRECTION

CONCLUSIONS: Civilian-military collaboration with subject matter experts and combat casualty care assessments remain as valuable today as they have been in any prior war. The final assessment explains the critical attributes and rationale for a fully integrated trauma system that responds to the needs of wounded warriors at a moment's notice in support of the combat mission. This assessment was able to generate both a framework for all future assessments and nearly 30 recommendations to enhance the system and improve care. Once fully implemented these recommendations will make it more likely to reach the national goal of Zero Preventable Deaths.

A NATIONAL TRAUMA CARE SYSTEM
Integrating Military and Civilian Trauma Systems to Achieve **ZERO Preventable DEATHS** After Injury

The Vision: A National Trauma Care System

A national strategy and joint military-civilian approach for improving trauma care is lacking. A unified effort is needed to ensure the delivery of optimal trauma care to save the lives of Americans injured within the United States and on the battlefield.

A national learning trauma care system would ensure continuous improvement of trauma care best practices in military and civilian sectors.

"Military and civilian trauma care will be optimized together, or not at all."

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