High quality emergency care moves once step closer

The introduction of a regional trauma care system that will see people who suffer major trauma injuries get access to the best possible emergency trauma care moved one step closer, following the approval of the preferred option of three designated adult major trauma centres for the West Midlands and one children’s major trauma centre by the West Midlands Strategic Commissioning Group (WMSCG).

The WMSCG, on behalf of the 17 West Midlands Primary Care Trusts, approved the recommendation for a new regional trauma care system to be introduced from March 2012, at its board meeting on 31/10/11.

The introduction of a trauma care system will give people who suffer major trauma access to specialist medical teams, with all the necessary specialist services available on one hospital site.

The new regional trauma care system will consist of three trauma care networks with a major trauma centre at the heart of each network. The major trauma centres will be supported by trauma units, local emergency hospitals and specialist rehabilitation hospitals.

Three trauma care networks are to be set up in the West Midlands. Each network will have an adult major trauma centre at its heart plus the Birmingham Children’s Hospital will be the regional major trauma centre for children.

The adult major trauma centres are:

- The Queen Elizabeth Hospital, Birmingham
- The University Hospital North Staffordshire
- The University Hospital Coventry and Warwickshire

The children’s major trauma centre is:

- Birmingham Children’s Hospital

Children will usually be treated at their local major trauma centre and will only be transferred for specialist care at the Birmingham Children Hospital for example if they were involved in a road traffic accident in Stoke, they would go to the University Hospital North Staffordshire.

They would only be transferred to the Birmingham Children’s Hospital if they required a special children’s consultant’s expertise for extensive burns or a serious head injury.

They would then be transferred using the West Midlands Paediatric Retrieval Service (WMPRS) and would be escorted by a doctor and/or nurse.
Why do we need a trauma care system?

The NHS in the West Midlands is proposing to transform the care that people receive when they suffer major trauma by introducing improved services that will deliver safe, high quality and accessible trauma care across the region.

The plans will establish Trauma Networks across the region including three Major Trauma Centres, where specialist medical teams will provide treatment for major trauma injuries 24 hours a day, seven days a week with all the necessary specialist services on site to provide the best possible treatment to patients. Major Trauma Centres will be supported by Trauma Units and Local Emergency Hospitals.

The numbers of trauma and major trauma patients are very small. Only a small number of people will be affected - less than 0.1% of accident and emergency patients - approximately 1 to 2 patients per week at a large district general hospital.

The introduction of a Trauma Care System across the West Midlands is mandated as a national requirement in the NHS Operating Framework in England 2011/12. It says 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. Here in the West Midlands we expect to begin implementation of a regional trauma care system no later than March 2012.

How did we assess the options?

An independent organisation Mott MacDonald was commissioned to carry out the Integrated Impact assessment (IIA) of the options for a West Midlands Trauma Care System, and to consider the impacts of each proposed option.

The IIA was used to help the NHS to decide which option would offer the best quality of care available for those people who may be victims of major trauma and also to make sure that the services that are provided offer the best value for money. The IIA helps to identify any potential issues and concerns and address them before implementation.

Option 1 - the Preferred Option

The review of major trauma services across the region considered four options:

Option 1 - Three major trauma centres - University Hospital Birmingham, the University Hospital of North Staffordshire and the University Hospital in Coventry.

Option 2 - Two major trauma centres - one at University Hospital Birmingham and University Hospital of North Staffordshire

Option 3 - Two major trauma centres - one at University Hospital Birmingham, and University Hospital in Coventry.

Option 4 - One major trauma centre at the University Hospital Birmingham

In addition, the Birmingham Children's Hospital would be the West Midlands’ Major Trauma Centre for Children.

A business case has been produced along with an integrated impact assessment. These documents were used as background information to look into the reasons why each option should have been considered and which option provided the best outcomes for patients who suffer major trauma injuries.

These documents support the main aim of the review which is to ensure that patients who suffer major trauma injuries receive the best specialist emergency trauma care possible in the right place at the right time, from highly qualified emergency trauma care experts.
Why choose option 1?

In order to make sure that we choose the best option we have to consider our patients’ needs and identify which option offers the best specialist care for our patients whilst at the same time providing value for money. By taking into consideration all the evidence provided in the business case and the integrated impact assessment it became clear that option 1 met the key aims of the review and will:

- Improve the care and survival of patients suffering major trauma injuries
- Ensure patients get rapid access to the most appropriate treatment
- Improve patients outcomes for example by:
  - Saving up to an extra sixty lives every year
  - Reducing disability
  - Speeding up recovery
- Provides emergency ambulances with the best access to an MTC for major trauma patients because:
  - 93% of the West Midlands populations are within 45 minutes of an MTC
  - 33% are within 15 minutes of an MTC
- Provides the best access for patient’s families and visitors who are travelling by care or public transport
- Reduce the need to transfer patients between major trauma centres and trauma units because the specialist staff and facilities are available on the one hospital site

Option 1 - What will the proposed Trauma Care System look like?

1. Major Trauma Centre
   - Highest level of trauma care, consultant led care
   - Full range of specialists, services & equipment 24 - 7
   - Education, prevention, research
   - Expertise and Culture of good trauma care

2. Local Emergency Hospitals
   - Trauma Care and General Accident and Emergency Services

3. 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
The 3 hospitals chosen to be adult major trauma centres are:

- Queen Elizabeth Hospital in Birmingham,
- University Hospital, North Staffordshire,
- University Hospital Coventry and Warwickshire

The major trauma centre for children will be:
- Birmingham Children’s Hospital

These hospitals are best placed to provide major trauma services because they have all the required specialist services available on the same hospital site. The location of the hospitals is also important so that wherever people are when they are injured they should be within 45 minutes travelling time from the major trauma centre. This gives patients quicker access to specialist staff and equipment including:

- neurosurgeons to treat serious head injuries
- cardiothoracic surgeons who treat heart, chest and lung injuries.
- Specialist scanners used to identify the injuries for example broken arms, legs, internal injuries to organs like kidneys, liver and heart
- General and emergency medicine
- Orthopaedic and spinal surgeons
- Plastic and maxillofacial surgery (face, dental or skull injuries)
- Supporting services like critical care or intensive care
- Specialist rehabilitation services to help the patient to make a speedier recovery and helping to reduce disabilities.

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Which hospitals will be the major trauma centres and why?

We would like to invite you to take part in this workshop. The aim of the day is to look at the West Midlands Trauma Care System and identify how trauma care will be delivered through the three trauma care networks to inform implementation plans.

This event will be of interest to providers of trauma care, specialist rehabilitation services and other key stakeholders, including the ambulance service, major trauma centres, trauma units, local emergency hospitals, commissioners, patient groups, patient representatives, LINks and health overview and scrutiny committees.

To register please contact Stacey Hendrick for a registration form via email stacey.hendrick@westmidlands.nhs.uk or telephone 0121 695 2370

Last day for registration - Monday 5th December 2011
Selection Process for Trauma Units

Trauma Units will also have a key role in the Trauma Care System across the West Midlands.

Trauma Units will ‘optimise’ the clinical condition of patients who have suffered major trauma injuries and who are outside a 45 minute travel time to a Major Trauma Centre (MTC).

This means that if a patient is too unstable to go direct to an MTC, the paramedics will take the patient to the nearest TU where the patient will be stabilised before moving them on to an MTC. An example would be a patient who has breathing difficulties and who might require a tracheotomy in their throat to allow them to breathe before moving them to the MTC.

TUs provide some specialist care for patients who do not have multiple injuries. Patients who have for example a broken arm or leg. TUs also ensure that the patient returns to their local hospital and community services for recovery and rehabilitation following their stay in an MTC.

The TU will also work with other MTCs, TUs and local emergency hospitals by making their specialist services available across the Trauma Network as well as providing ongoing recovery and rehabilitation services.

If a hospital does not wish to be a TU, they will continue to provide accident and emergency services as a Local Emergency Hospital (LEH).

Hospitals in the West Midlands were asked to expressed an interest in becoming a Trauma Unit in September. Following this the hospitals had to undertake a self assessment against the trauma unit designation standards. The hospitals were then advised on their suitability for Trauma Unit status.

The West Midlands Strategic Commissioning Group (WMSCG), who are coordinating the review on behalf of the NHS in the West Midlands, were asked to approve those hospitals that are suitable for Trauma Unit designation at its Board meeting in October 2011.

In the next issue:

- How the trauma care system will be implemented?
- What will the system have in place when it goes live?
- Implementation Workshop - 19th December 2011
- How will we monitor outcomes of the new system?

Go to page 6 to find out which hospitals will be designated as Trauma Units
All the hospitals in the West Midlands were eligible for TU designation. A small number of the hospitals decided not to become TUs at this time. They will support the trauma care system as Local Emergency Hospitals (LEHs).

The hospitals that have expressed a wish to become TUs and meet the required designation standards before the Trauma Care System goes live in March 2012 are:

- Alexandra Hospital, Redditch
- City Hospital Birmingham
- Heartlands Hospital Birmingham
- Hereford County Hospital
- Manor Hospital Walsall
- New Cross Hospital Wolverhampton
- Royal Shrewsbury Hospital
- Russell’s Hall Hospital Dudley
- Sandwell General Hospital
- Worcestershire Royal Hospital

Those hospitals that have decided not to register to become TUs at this time and will continue to have an Accident and Emergency Department and work in an LEH role.

The George Eliot Hospital and South Warwickshire Hospital have not expressed an interest in becoming trauma units because they are already working in an informal network across Coventry and Warwickshire with the University Hospital, Coventry, as the Major Trauma Centre.

The hospitals at Burton and Stafford have also chosen to support University Hospital of North Staffordshire as Local Emergency Hospitals (LEHs).

Would you like to know more?

Over the coming months we aim to keep you informed on the changes taking place to introduce a region-wide trauma care system that will provide high quality, safe and accessible services for victims of major trauma injuries.

If you have any questions queries or comments, please contact:

- your local primary care trust
- Email us at info@wmsc.nhs.uk
- Telephone 0121 695 2369
- Write to us at the address below.