

WISCONSIN TRAUMA NEWSLETTER

Wisconsin Department of Health Services
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CONTACT INFO:

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07/2017

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DHS SAYS GOODBYE TO JULIE FORCIER

Bill Oemichen, Director

Office of Preparedness and Emergency Health Care

Julie Forcier departed as manager of the Wisconsin Trauma Program in late May to begin work as a Budget and Policy Analyst at the Wisconsin Department of Administration. During Julie's two-year tenure, the Wisconsin Trauma Program witnessed a number of advances, including: (1) significant work on a major revision of DHS 118, the Wisconsin Trauma Rule, (2) the development of a Statewide Trauma Strategic Plan with the State Trauma Advisory Council (STAC), and (3) the successful evaluation of a number of Wisconsin trauma facilities and the addition of new trauma facility evaluators. The program has already begun the process for finding Julie's replacement and the position is posted. We encourage all interested applicants [to apply](#) by the July 20, 2017 deadline.

In the interim, Caitlin Washburn is working closely with Office of Preparedness & Emergency Health Care Director Bill Oemichen and Trauma Data Registry Manager Eric Anderson to administer the Trauma Program until Julie's successor is hired. Caitlin was awarded her Juris Doctorate (J.D.) degree by the University of Wisconsin-Madison Law School in late May and previously worked on the DHS 118 revision. If you have any program questions, please them direct to:

dhstrauma@dhs.wisconsin.gov

[Go to WiscJob to apply for the Wisconsin State Trauma Coordinator position.](#)

DHS 118 UPDATE

Bill Oemichen, Director

Office of Preparedness and Emergency Health Care

DHS is continuing to work on modernizing DHS 118, the Wisconsin Trauma Rule. DHS 118 currently reflects the 1999 trauma standards by the American College of Surgeons (ACS) and DHS is seeking to bring the trauma standards up to date following early 2015 adoption of 2014 ACS trauma standards. DHS staff have prepared a draft rule and order based on the very hard work of the DHS 118 Trauma Rule Advisory Committee, which included broad representation from across the Wisconsin trauma care facility community. The draft rule is currently being reviewed by the DHS Office of Legal Counsel to ensure it meets drafting standards prior to submission to the Legislative Clearinghouse on Rules. Once the draft rule is reviewed by the Legislative Clearinghouse, it will be scheduled for public rule hearings, which we anticipate will be held later this summer in Madison and Wausau. Additional hearing locations may be added based on public demand. The public hearings will allow the Wisconsin Trauma Care Facility community and other interested parties to either provide oral or written testimony, or both. DHS will consider all public comments before sending the rule to the governor and state legislature for review. While the exact time schedule is subject to revision, DHS anticipates the final rule will be adopted before the end of the year with implementation beginning six months later following a substantial opportunity for trauma care facility education and training.

Through the DHS 118 trauma rule, DHS continues to prioritize including all Wisconsin Trauma Care Facilities in the State Trauma Program and, by doing so, seeks to ensure Wisconsin citizens and visitors will have timely access to an accredited trauma care facility regardless of where they live in the state. This means DHS 118 is being written to encourage maximum trauma care facility participation, regardless of whether the facility is based in the urban, suburban, or rural parts of Wisconsin. Moreover, DHS 118 is intended to ensure a high level of quality is maintained in trauma care facilities without making the regulatory requirements unduly burdensome or costly.

DHS will broadly publicize the DHS 118 rule hearings once they are scheduled. In the interim, questions or comments may be directed to: dhstrauma@dhs.wisconsin.gov.

IMAGETREND PATIENT REGISTRY FREQUENTLY ASKED QUESTIONS

Q: "Why doesn't my record show completed after I check and close the record?"

A: Users with hospital administrator permissions can change the status of a record upon being marked as complete. This is done within the hospital setup tab under the workflow section.

Q: I enter data directly into ImageTrend. How do I submit my record to the state?

A: Once all data entry is completed on the trauma record, hit "Mark as Completed" to submit. Users have the ability to change the incident status after this process.

Over **11,500** patient cases have successfully uploaded from hospitals utilizing third-party vendors! If your facility uses a third party vendor and has not entered 2016 data to the ImageTrend registry, contact [the trauma registry data manager](#).

IMAGETREND PATIENT REGISTRY QUICK TIPS TO IMPROVE RECORD VALIDITY SCORE

→ Fill in both the discharge order written date/time and the date/time of physical discharge from the ED and, if applicable, the hospital.

Discharge Information

Discharge Status: Alive Dead *

Hospital Admission Date: 03/31/2017 Time: 0845 (HHmm)

Hospital Discharge Order Date: 04/07/2017 Hospital Discharge Order Time: 1555 (HHmm)

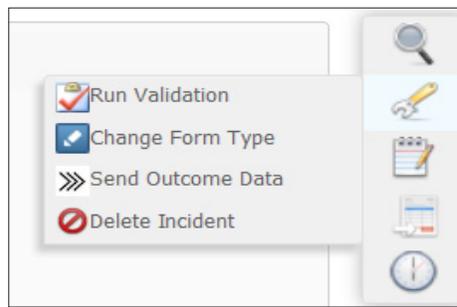
Hospital Discharge Date: 04/07/2017 * Hospital Discharge Time: 1557 (HHmm) *

Hospital Length of Stay - Calendar Days:

Total ICU Days: 1

Total Ventilator Days: 2

→ Run record validity often! This can be found in the action icons located on the right side of the data entry form. Navigate to the wrench icon and select run validation.



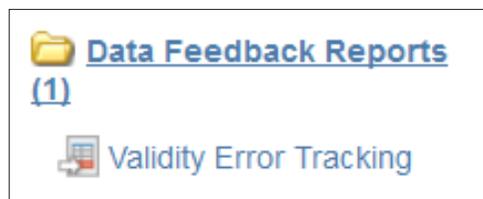
→ Always hit “Add” (common on ICD-10 and vital signs) and “Save” every tab to ensure the data is entered.



→ Keep the data dictionary close! The current data dictionary can be found at <https://www.dhs.wisconsin.gov/publications/p01117-18.pdf>. Be sure to add the current year’s data dictionary as a quick link on your dashboard.



→ Identify common areas of data entry errors. This can be done with a report titled “Validity Error Tracking,” which is available within the report writer application.



RECOGNIZING FACILITIES WITH OUTSTANDING RECORD COMPLETENESS

Eric Anderson, Trauma Registry Data Manager

Active involvement by Wisconsin trauma care facilities during the recent transition in registry vendors has been crucial to developing a robust, user-friendly system. To recognize those trauma care facilities with exceptional dedication to consistent and high-quality data entry, DHS performed an analysis of record completeness throughout each of the seven trauma care regions. DHS would like to recognize the following trauma care facilities for their exceptional completeness of trauma records submitted to the Wisconsin Trauma Registry.

Region 1: HSHS St. Joseph's Hospital

Region 2: Aspirus Riverview Hospital

Region 3: Bay Area Medical Center

Region 4: Black River Memorial Hospital

Region 5: St. Clare Hospital

Region 6: Ascension St. Elizabeth Hospital

Region 7: St. Agnes Hospital*

*Of these seven Trauma Care Facilities, St. Agnes Hospital in Region 7 was specially recognized for achieving the highest record completeness amongst all Wisconsin Trauma Care Facilities. Congratulations to all of the facilities recognized.

Moving forward, DHS will continue to recognize Trauma Care Facilities going above and beyond to submit complete trauma records. We encourage users with questions regarding the new ImageTrend Trauma Registry to contact [Eric Anderson](#) for support.

JOB POSTING

To apply for the State Trauma Coordinator position at the Department of Health Services, please visit the [WiscJobposting 17-01675](#).

UPCOMING EVENTS

For up to date information on upcoming trainings, conferences, and events, see <https://www.dhs.wisconsin.gov/trauma/education.htm>.

For Statewide Trauma Advisory Council (STAC) meeting minutes and agendas: <https://stac.wisconsin.gov/>

