Landmann-Jungman Memorial Hospital Avera and Scotland EMS

Julie Davis, RN, DON, Trauma Coordinator

October 2, 2018
Nursing Background

• Trauma nurse at Level II Trauma Center in Boise, ID
• Nurse Corps Loan Repayment to work in rural healthcare
  • 3 years
  • $100,000 grant
• Experience in large trauma center with Code Teams
• LJMH Rural Hospital in Scotland, SD
Rural Health Experience

• 2 Registered Nurses – total care
  • Med Surg
  • Skilled Swing Bed
  • 24/7 ER
• On-call provider
• E-ER
• Volunteer EMS crew
  • BLS certified
Asking questions

• Better collaborate with EMS
  • Gave me the job of trauma coordinator

• Began to work with Rebecca Baird
  • Revamped our trauma program
  • Inclusion of EMS in trauma program
Trauma Designation Requirements

(h) A collaborative involvement in pre-hospital care protocols; and

As trauma coordinator I...
• Attended EMS monthly education for 3 months
• After 3 months was asked by EMS leader to be their educator
Scotland EMS

• Initial Assessment
  • Basic knowledge level
  • Comfort with various disease processes
  • Ability to care for patients in the field
  • Their training concerns/wants/needs
  • How can the hospital better aid the EMS crew?

• Trauma Registry requirements
  • Activating trauma team
  • Vital signs required

• Call before arriving
  • Patient status and estimated time of arrival

• Collaboration with hospital to improve patient outcomes
Activate the Trauma Team

• Must call hospital prior to arrival
• State “Activate the Trauma Team”
• Brief SBAR
• Estimated time of arrival
### Trauma Registry

<table>
<thead>
<tr>
<th>Field</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Transport Mode</td>
<td>Ground Ambulance</td>
</tr>
<tr>
<td>Agency</td>
<td>20122</td>
</tr>
<tr>
<td>Agency Other</td>
<td></td>
</tr>
<tr>
<td>Dispatch Date/Time</td>
<td>06/08/2018</td>
</tr>
<tr>
<td>EMS Unit Scene Arrival Date/Time</td>
<td>06/08/2018</td>
</tr>
<tr>
<td>EMS Unit Scene Departure Date/Time</td>
<td>06/08/2018</td>
</tr>
<tr>
<td>Trauma Team Requested by EMS</td>
<td>Y</td>
</tr>
<tr>
<td>Scene Delay</td>
<td>17</td>
</tr>
<tr>
<td>SBP</td>
<td>90</td>
</tr>
<tr>
<td>Respiration Rate</td>
<td>20</td>
</tr>
<tr>
<td>Oxygen Saturation</td>
<td>2</td>
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<tr>
<td>GCS: Eye</td>
<td>4</td>
</tr>
<tr>
<td>Verbal</td>
<td>3</td>
</tr>
<tr>
<td>Motor</td>
<td>6</td>
</tr>
<tr>
<td>Total</td>
<td>15</td>
</tr>
<tr>
<td>RTS</td>
<td></td>
</tr>
</tbody>
</table>
Monthly Education
Lance Iversen – HUGE THANK YOU!

• Triage – Scene Size Up
  • Disaster Preparedness
  • Yankton County Paramedic
• STOP THE BLEED – Tourniquets
• Narcan Training
• Cardiac /Stroke
  • Lifepak AED, EKG, LUCAS, Medications
• Primary Assessment/Secondary Assessment
• Airway Management, Ventilation, Oxygenation
• Musculoskeletal Emergencies

• PPE and Medical Drug Scenarios
  • Joe Erickson Yankton Police Department
• OB Emergencies
  • Rose Marie Hoiten, Certified Nurse Midwife
• Pediatric Emergencies
  • Corolla Lauck, SD Emergency Medical Services for Children
    • HUGE THANK YOU!!!!
    • EMS Feedback – “Best Pediatric Training we have ever received!”
Disaster Preparedness Collaboration with LJMH
Accomplishments

• Implemented Trauma Activation Fee
• ALS Ambulance Fee for Nursing staff
• 100% trip reports left at time of visit
  • 33% previous trip reports left at time of visit
• 100% trauma activation on all possible traumas
• PI all EMS trips
2016 Community Health Needs Assessment

- Findings and Community Needs that were prioritized
  - Blood Pressure Screenings
  - Shortage of trained EMTs
  - Diabetic Education Sessions
  - Health related information for public knowledge
Next Steps

• Recruit EMS crew
  • Creative ideas being discussed
• Continue monthly education
• Quarterly State Performance Improvement involvement
• Airway Training
  • Increase usage of various airway equipment
• Medication training
  • Aspirin
  • Nitroglycerin
  • Epi Pens
Questions?

Thank you!