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MEMORANDUM

TO: NC EMS Advisory Council Members

FROM: Nadine Pfeiffer, Assistant Chief, Health Systems
North Carolina Office of Emergency Medical Services

SUBJECT: Staff Recommendations for Carolinas Medical Center – Northeast

DATE: September 30, 2011

Carolinas Medical Center - Northeast in Concord, North Carolina was reviewed on July 29, 2011 with a visit by the North Carolina Office of Emergency Medical Services. The purpose of this visit was consideration of a state designation renewal as a Level III trauma center. This hospital provides trauma care for adults and pediatrics. The findings of the reviewers are as follows:

Strengths:

1. Administrative support is clear and strong.

2. The trauma medical director is dedicated and very involved with the program.

3. The trauma program manager.

4. The trauma nurse specialist.

5. The trauma PI integration with the hospital wide quality program and loop closure mechanism.

6. The physical facilities, especially the ED and O.R.s.

7. The relationship with CMC through trauma and overall.

8. The overall commitment of staff. Having the EMS director as part of ED staff and having ED nurses who were clearly committed to excellence.

9. Neurosurgical involvement.

Deficiencies:

1. 10A NCAC .0903(32)(a). The orthopedic surgery CME documentation for all involved in trauma care was unavailable at the time of the site visit.
   The neurosurgical CME documentation was given during the site visit.

Weaknesses:

1. Trauma oversight and of non-surgical service admission and patients admitted to non-trauma services

2. The review of, monitoring and use of facility specific trauma guidelines to determine their application and effect on patient care.

3. Lack of neurosurgical dedication to the campus when on call.

4. Trauma registry data field omissions and the process for allowing data omission.

5. Although improved, the ED nursing documentation was missing data.

Review Team Recommendations:

1. Closer follow-up of registry patients admitted to non-trauma and non-surgical services with demonstration of involvement in their care to solidify the excellent trauma team as an actual service.

2. Allot a specified time period to correct the CME deficiency for the orthopedic surgeons.

3. Allot a specified time period to correct trauma registry elements omissions (i.e. transferred out patients with helicopter versus ambulance, ventilator days, ICU LOS).

4. Continue to work on nursing documentation.

Staff Recommendations:

A) Staff recommendations are consistent with the reviewers. Carolina Medical Center – Northeast has corrected the deficiency by submitting documentation to the OEMS on September 28, 2011 demonstrating CME hours for the all the orthopedic surgeons on the trauma service to satisfy the requirements of 10A NCAC 13P .0903(32)(a). The hospital is now in substantial compliance with the regulations. Carolina Medical Center - Northeast's designation as a Level III Trauma Center should be renewed.

In addition, the OEMS recommends the trauma registry data field omissions to be completed no later than February 8, 2012 with verification by the State Trauma Registrar via compliance report.