

Status:

- Arkansas does not presently have a centralized and coordinated statewide trauma care system.
- Such hospital designation can facilitate coordination of trauma victim transportation from accident sites and remote health care facilities to other facilities equipped for appropriate treatment.
- The leading cause of death in the United States and Arkansas under the age of 44 is trauma.
- Arkansas has the third highest motor vehicle death rate in the United States and has the seventh highest unintentional injury death rate in the United States, with unintentional injury as the leading cause of death for Arkansans ages one to 34.
- For most injury types, Arkansas rates are roughly 40% above the national average.

Program:

Implement a statewide trauma system to decrease the number of trauma-related deaths in the state and reduce the number of unnecessary hospital transfers for patients experiencing traumatic injuries.

Impact:

- A statewide trauma system can reduce trauma mortality by 9% to 30%, which causes not only a human impact but also an economic impact.
- Generates an additional \$219 million in economic output each year due to lives saved, assuming that average trauma system performance results in 10% mortality reduction.
- Reduces the level of disability associated with a traumatic injury.

How it Works:

- Arkansas can join other states by dedicating funds to provide financial incentives for hospitals to serve as trauma centers.
- With the funding to implement a statewide trauma system, “Dashboard” is the first step toward a coordinated trauma system.
- Add components such as a statewide trauma registry and limited number of trauma-designated hospitals with a plan for geographic distribution of centers.

Administration/Oversight: Funding will provide financial incentives for hospitals, physicians, ambulance services and rehabilitation facilities to participate in a statewide trauma system. State trauma system funding will be allocated for hospital participation on level designation, with additional funds to support prevention and training, specialty centers, volume adjustments for those receiving more/less of the trauma burden, and operations for the registry and oversight.

Through appropriation of funds by the Arkansas General Assembly, the Arkansas Trauma Registry Dashboard and System will be housed at the Arkansas Department of Health.

