TRAUMA SYSTEMS COMMITTEE

**June 9, 2025**

***Bureau of Health Care Safety and Quality Massachusetts Department of Public Health***

Meeting Agenda

* Department Reminder – Open Meeting Law
* Trauma Registry Update
* Prehospital Blood Transfusion Discussion and Vote
* Discussion about Future Trauma Systems Committee Meetings
* Public Comment (if time allows)

Open Meeting Law: G.L. c. 30A, §§ 18-25

* The purpose of open meeting law (OML) is to ensure transparency in the deliberations on which public policy is based.
	+ This requires that meetings of public bodies be open to the public.
* All meetings of a public body must be open to the public.
	+ A meeting is any deliberation by a public body with respect to any matter within the body’s jurisdiction.
	+ A deliberation is a communication between members among members of a public body.
* A public body is any multi-member board, commission, committee or subcommittee within the executive or legislative branches (except the Legislature) of state government
	+ This includes any body created to advise or make recommendations
* Under OML the public is permitted to attend meetings.
	+ Individuals in meetings may not address the public body without the permission of the chair.
	+ Public participation is allowed at the discretion of the chair.
* For more information on Open Meeting Law, please visit:
	+ https://[www.mass.gov/the-open-meeting-law](http://www.mass.gov/the-open-meeting-law)

Massachusetts Trauma Registry Updates

* All data through Calendar Year (CY) 2024 Quarter 4 were due March 16, 2025
* Quality improvement activities are ongoing
* CY 2025 data specifications will be posted after review

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| **Quarter** | **Reporting Period** | **Data Submission Deadline** |
| CY 2025 Q1 | January 1-March 31 | July 13 |
| CY 2025 Q2 | April 1-June 30 | September 12 |
| CY 2025 Q3 | July 1-September 30 | December 12 |
| CY 2025 Q4 | October 1-December 31 | March 13 |

\*All dates are subject to change by the Department.

Trauma Registry Data Submissions from Community Hospitals

* Community Hospitals continue to receive support from DPH and the vendor ESO to improve reporting
* Nearly all community hospitals that have submitted data have completed submissions
* 2 community hospitals have historic data to be submitted to the Trauma Registry for FFY2021 through CY2023
* 4 community hospitals have not completed successful data submission to the Trauma Registry for CY2024

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| Count of Community Hospital Trauma Registry Submissions by Year |
| Year | Number of Facilities | # Community Hospitals Missing All Data for Time Period | # Community Hospitals Reporting some Quarters | # Up to Date |
| FFY 2021 | 44 | 2 | 0 | 42 |
| FFY 2022 | 44 | 2 | 0 | 42 |
| CY2022 Q4 (10/1/2022- 12/31/2022) | 44 | 2 | 0 | 42 |
| CY 2023\* | 44 | 2 | 2 | 40 |
| CY2024 | 44\*\* | 4 | 2 | 38 |

\*Signature Brockton Hospital exempt from CY2023 Q2 through CY2024 Q2 due to Feb 2023 fire

\*\*Melrose Wakefield Hospital became designated trauma center Jan 2024,

\*\*North Adams Regional Hospital became community hospital June 2024 Data Source: Massachusetts Trauma Registry, extracted 06/02/2025

Trauma Registry Data Submissions from Designated Trauma Centers

* All Massachusetts Trauma Centers have successfully submitted data to Trauma Registry CY2024 Q1 through Q4
* CY2024 Q4 (10/01/2024-12/31/2024) data submission were due March 16, 2025
* Submissions are being reviewed for data quality

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| Count of Trauma Center Registry Submissions by Year |
| Year | Number of Facilities | # Trauma Centers Missing All Data for Time Period | # Trauma Centers reporting some Quarters | # Up to Date |
| CY 2024 | 18 | n/a | n/a | 18 |

Data Source: Massachusetts Trauma Registry, extracted 06/02/2025

**Prehospital Blood Transfusion Discussion**

* Low Titer Type O+ Whole Blood (LTOwB) or Packed Red Blood Cells (PRBC) Transfusion Protocol
* Requires a level of oversight not typical of other medical director option protocols.
* Implementation of this protocol will require a specific letter of approval from the Office of Emergency Medical Services.
* Assessment of a proposed program for approval will include assessments of blood bank participation, storage protocols training content and availability as a regional resource.

**Discussion about Future Trauma Systems Committee Meetings**

* What are the two biggest problems you see for trauma care in MA over the next two years?
* What are the two best ways you can think of to improve trauma care in MA over the next two years?
* Keeping in mind that the Trauma Systems Committee is an advisory committee, what do you envision as the potentially

biggest contributions of the Committee over the next two years?

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