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April 2, 2013

TO:

The Honorable Laurie Monnes Anderson, Chair

Senate Committee on Health Care and Human Services

FROM:

Melvin Kohn, MD, MPH, Director

Public Health Division Oregon Health Authority MEASURE: \$13 728 EXHIBIT: 5

S. HEALTHCARE & HUMAN SERVICES DATE: 4/2/13 PAGES: 2 SUBMITTED BY: Dr. Melvin fohn

SUBJECT: SB 728-1 - Oregon State Trauma Advisory Board

Chair Monnes Anderson and members of the committee, my name is Dr. Mel Kohn, Public Health Director at the Oregon Health Authority (OHA). I am here today to testify on SB 728. This bill enacts a State Trauma Advisory Board (STAB) into statute and clarifies the roles and responsibilities of the board as well as defines required members. STAB is currently defined in rule with membership requirements slightly different than proposed language in this bill. It does not provide any new responsibilities or mandates for the OHA, nor does it allocate any funding.

In 1985, the Oregon Legislature enacted a trauma system statute which directed the Oregon Health Authority to develop a comprehensive emergency medical services and trauma system. OHA, in conjunction with the STAB and the then nine Area Trauma Advisory Boards (ATABs), developed statewide objectives and standards for the comprehensive care of severely injured patients. In the early 1990's the nine ATABs consolidated into the current seven regional systems we have today. These objectives and standards were adapted from the American College of Surgeons Committee on Trauma to meet Oregon's diverse demographic and geographical needs. These standards were adopted into rule by the Oregon Secretary of State in 1987, making Oregon one of the earliest states in the nation to approach trauma care in a systematic manner.

The Oregon Health Authority currently categorizes trauma hospitals into 4 levels using trauma rules and ATAB plans to outline specific criteria. By adding STAB into statute it allows for better continuity between STAB and

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the seven ATABs. ATABs report their findings, data and area trauma area plans for review and advice to the STAB.

This bill changes the membership of STAB by 9 members and would represent a larger amount of individuals with trauma expertise. Each designated trauma level 1 to 4 as well as, both rural and urban areas is represented. This bill clarifies the roles and responsibilities of the STAB. The STAB will be tasked with advising the Emergency Medical Services (EMS) and Trauma Systems Program with suggested improvements to the EMS and Trauma Systems program. The STAB will help interpret data related to EMS and trauma Systems, seek advice and input from coordinated care organizations, and may establish a quality assurance subcommittee to provide peer review for the ATABs. All of these tasks are important for the growth and stability of Oregon's trauma system.

Thank you for your attention, and I'd be happy to answer any questions you might have.