

NEWS RELEASE

Major Trauma Audit highlights the need for change in provision of trauma services in Ireland

31st January 2018 Dr Conor Deasy, Clinical Lead for Major Trauma Audit (MTA) launched the NOCA Major Trauma Audit National Report 2016 at the NOCA National Conference held today in the Royal College of Surgeons in Ireland.

The MTA National Report focuses specifically on the most severely injured patients in the Irish healthcare system. It presents findings from MTA in 2016, and examines data from 4,426 patients across 26 trauma receiving hospitals in Ireland.

Dr Deasy commented “This report highlights the need for change. Patients with major trauma are not being assessed by trauma teams and senior clinicians on arrival to Emergency Departments. Key investigations and management are being delayed, only one-third of patients with head injuries requiring a CT scan received one within one-hour in line with international best practice standards”. He continued “we have seen the face of trauma change in recent years from younger males with high energy traumas to now, most commonly, older patients sustaining major trauma from falls at home (72%)”.

KEY FINDINGS

- More than 1 in every 4 (28%) patients were transferred for ongoing trauma care because the necessary trauma services were not available on site.
- A significant number of patients with severe head injury (45%) did not receive care at a neurosurgical centre.
- MTA highlights that a high incidence (40%) of major trauma is sustained by older patients age 65 years and older.
- ‘Low falls’ (a fall of less than 2 metres) were the leading cause of injury for 1 in 2 (51%) of all major trauma patients and 77% of patients age 65 and older.
- Forty-seven percent (47%) of patients were injured in the home - 72% of these patients suffered a ‘low fall’.
- Fifty-eight percent (58%) of patients arrived to the Emergency Department between 4pm and 8am outside of ‘normal working hours’.
- Older major trauma patients have more complex medical needs. This report shows that they do not receive the same level of alert or management by senior clinicians. They are more likely to die and suffer higher levels of disability and require more ongoing care in rehabilitation or long term care.
- Thirty-one percent (31%) of major trauma patients had multiple injuries.
- Only 62% of major trauma patients were discharged directly home following their hospital admission.

Dr Deasy commended the work of the Trauma Steering Group established by the Minister for Health, which was informed by the data collected for the Major Trauma Audit. He highlighted that major trauma audit can be used to monitor the impact of re-organisation of trauma care delivery into an inclusive trauma system.

NOCA was established in 2012 to create sustainable clinical audit programmes at national level. NOCA enables those who manage and deliver healthcare to improve the quality of care through national clinical audit. NOCA is funded by the Health Service Executive Quality Improvement Division, governed by an independent voluntary board and operationally supported by the Royal College of Surgeons in Ireland.

ENDS

Copies of the report will be available to download from www.noca.ie/publications

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