

Column: Florida doesn't need more trauma centers

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If you suffer a traumatic accident or injury, would you want to go to a trauma center that gives you the best possible chance to save your life?

Seems like an easy decision.

Yet in Florida, a robust public debate is under way about adding more trauma centers to the already outstanding trauma network — and what's lacking in the debate is a careful look at what actually saves lives and produces the best outcomes for patients.

The planned proliferation of trauma centers by the University of South Florida and HCA will not benefit trauma patients.

Proponents say adding centers will save lives, but the clinical data do not support that assertion. A recent peer-reviewed study by faculty from USF and the University of Florida, using data from the Florida Agency for Health Care Administration, shows that mortality from head trauma is 9 percent higher in low-volume trauma centers like those planned by USF/HCA.

Why do high volumes decrease mortality? Surgical teams in high-volume trauma centers see so many trauma cases that they become experts at caring for patients at critical moments — when well-oiled teams are essential, and when every decision must be the right one or people die.

Here's the good news about trauma care in Florida today: The number of trauma patients thankfully has been declining in recent years due to prevention programs led by our state's trauma centers. Trauma patients already have access to existing trauma centers, where they are well cared for by highly skilled personnel.

Florida law requires that the Florida Department of Health take the need for new trauma centers into account before approving them. However, two separate judicial decisions have now found that the department did not consider the required need-based, data-driven criteria when it granted trauma center status to six new low-volume USF/HCA trauma centers.

This lack of hard data on what trauma patients need has also been cited by an independent American College of Surgeons panel commissioned by DOH. In a preliminary report Feb. 5, that panel concluded DOH did not gather the relevant evidence needed to make approvals. The panel recommended an immediate moratorium on approving any new trauma centers.

Adding more trauma centers in Florida now is especially problematic given the state's oft-stated goal of reducing health care expenses. These centers will add more than \$100 million per year to health care costs in Florida — costs that will eventually be borne by all of us in the form of increased insurance premiums. We will be paying more to treat the same (or fewer) trauma patients statewide with, based on ACHA data, no better and often worse clinical outcomes.

It is encouraging that DOH is now convening hearings, including the expert American College of Surgeons panel and



hopefully a newly constituted the Trauma System Advisory Council as recommended, to create a new set of rules to govern the allocation of trauma centers.

Florida's safety net hospitals, which shoulder most of the responsibility for trauma care in our state, applaud these efforts and stand ready to work with DOH toward reaching the best decisions for patients. The goal in all aspects of health care is to improve patient outcomes while lowering costs. Florida's trauma program should share that vision.

Tony Carvalho is president of the Safety Net Hospital Alliance of Florida, which represents the state's leading teaching, children's and public hospitals. He wrote this exclusively for the Tampa Bay Times.

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