

## Emergency Medicine Report Card scores Mississippi as best in Southeast

By Jack Mazurak

Mississippi's emergency care environment outranked all other Southeastern states and placed 26th out of 51 overall, according to a report from the American College of Emergency Physicians.

In the report released in February, the state received an overall C minus, a score based on 136 measures in five categories, including access to emergency care, disaster preparedness and medical liability environment.

"As the state's only academic medical center, UMMC is a major driver of the Mississippi's emergency environment in terms of care, preparedness, assets and services, and setting the bar for the profession statewide," said Dr. Alan Jones, professor and chair of emergency medicine.

"We take tremendous pride in the work we do and recognize there's obviously still ground to gain. That's something we, along with other state agencies, private groups and hospitals throughout Mississippi, are working to improve."

The ACEP report, issued in the February volume of the Annals of Emergency Medicine, ranked Alabama 44<sup>th</sup>, with a grade of D; Arkansas 50<sup>th</sup>, with a D minus; Florida 27<sup>th</sup>, with a C minus; Georgia 29<sup>th</sup>, with a D plus; Louisiana 42<sup>nd</sup>, with a D; and South Carolina 33<sup>rd</sup>, with a D plus.

The District of Columbia ranked first and Massachusetts ranked second, each receiving a B minus. No state received an A.

"Our state's relatively high score is due in part to assets at the University of Mississippi Medical Center, including MED-COM, AirCare and our residency program, which has been training new emergency medicine physicians for the state since 1986," said Dr. Richard Summers, UMMC chair emeritus of emergency medicine.

Mississippi's rank improved from 34<sup>th</sup> to 26<sup>th</sup> overall since 2009, the last time ACEP conducted its state-by-state report card.

In the assessment, ACEP researchers analyzed 136 objective measures in five categories of access to emergency care, quality and patient-safety environment, medical liability environment, public health and injury protection, and disaster preparedness.

The report's authors highlighted the capacity of Mississippi's hospitals, which added to the state's access-to-care score. They praised the emergency communications capabilities and existing plans. And noted the liability environment was favorable, with average malpractice payments being the sixth lowest nationally, and that liability insurance premiums are below the national average.

However, the state faces challenges in public health and injury prevention due in part to its high rate of fatal injuries, smoking and obesity, the authors found.

“Most critically,” the authors wrote, “traffic safety in Mississippi is a major concern. The state has the second-highest rate of motor vehicle occupant deaths, the highest rate of bicyclist deaths and one of the highest rates of pedestrian deaths.”

The School of Medicine’s four-year emergency medicine residency program, begun in 1986, is the state’s major source for new emergency medicine physicians. It recently received approval to expand from 36 to 40 positions beginning in July.

Nursing schools, both at UMMC and those around the state, contribute to the supply of emergency-department RNs, B.S.N.s and M.S.N.s.

At UMMC, which houses the state’s only Level 1 trauma center, a newly renovated adult acute care area in the Adult Emergency Department opened Feb. 19, the second part of a three-phase overhaul.

Jones said the renovations improve patient flow and brought state-of-the-art facilities and equipment that will improve care for patients.

Pediatric emergency facilities at UMMC’s Batson Children’s Hospital recently received a much needed renovation and expansion. The Colonel Harland Sanders Children’s Emergency Department and the Selby and Richard McRae Children’s Trauma Unit, a \$5.8 million construction project begun in late 2009, opened in Dec. 2011.

The work tripled the space available in the state’s only Level 1 pediatric trauma area to 16,000 square feet and increased capacity from 15,000 patients per year to 35,000.

MED-COM coordinates day-to-day emergency communications across Mississippi, sending ambulances to the most appropriate hospitals, arranging air-medical flights and patient transfers. Founded at UMMC in the wake of Hurricane Katrina in 2005, MED-COM also serves as a statewide communications center during disasters to connect medical responders, state, local and federal agencies, and law enforcement.

AirCare, UMMC’s helicopter transport program founded in 1996, flies two helicopters, one from UMMC, the second from Key Field in Meridian to serve the entire state.

“Both AirCare and MED-COM are significant resources for Mississippi’s population,” said Jonathan Wilson, UMMC director of emergency services. “Those assets improve emergency and trauma care for Mississippians from the scene of accidents and injuries all the way to the emergency department doors of any of our state’s hospitals.”

UMMC also regularly works with the Mississippi Emergency Management Agency and the Mississippi State Department of Health on disaster planning and response, Wilson said. By collaborating both in simulations and actual disasters, the Medical Center helps improve safety and emergency care for residents across the state.

Jones pointed to the TelEmergency network, which uses live, secure audio and visual connections to link emergency medicine doctors in UMMC's Adult Emergency Department with specially trained nurse practitioners at 19 rural hospitals.

"We're able to provide the care of board-certified emergency medicine physicians, by extension of nurse practitioners, to hospitals that may not otherwise have been able to attract or afford an emergency medicine physician," Jones said.

TelEmergency provides 600-700 consults a month and provides 24-7 coverage.

"Bringing that level of expertise to hospitals helps decrease the number of patients who need to be transferred to larger hospitals and, when patients do need to be transferred, they arrive better stabilized and with a more complete work up," Jones said.

"This is definitely one of the many ways we're improving emergency care in Mississippi."