

## London Trauma System and the Linkages with Major Incident Planning

***London's trauma services are not organised systematically in a way that best support major incident handling.***

### *Major Incident Plan*

NHS London currently has well established plans to manage health related major incidents that occur within London.

### *Current Major Trauma Care*

Currently major trauma cases are in most instances delivered to the nearest A&E without considering the capability of that A&E to deliver the best possible treatment. This current system is not compatible with providing the best trauma care in London on an everyday basis or during a major incident.

***A London Trauma system is proposed to enable those suffering major trauma in London, and potentially outside of London, to receive definitive treatment in the shortest possible time.***

London's trauma system will be made up of a number of trauma networks. Each network will have a major trauma centre to provide treatment to those who have suffered the most severe injuries within the network. It is planned for the London Trauma System to be operational from April 2010. The system will have an overarching governance structure, which will be mirrored at network level.

***London's ability to respond to a major incident will be enhanced by the ability to uplift the everyday trauma system to provide a coordinated system that delivers emergency life saving treatment more rapidly to a large number of patients.***

This will be achieved through:

1. Better coordination and communication through the proposed London Trauma System and its networks via:
  - A pre-existing, clearly defined trauma pathway for all trauma patients, from triage through to rehabilitation and appropriate social care or return to work,
  - A single point of control and accountability for trauma across London in the role of the London Trauma Director,
  - Improved co-ordination within and across trauma networks during a major incident through pre-existing and well-used communication channels between trauma service providers, networks and retrieval teams,

- Ability of the London Trauma Director and the Trauma Network directors to identify step-up capacity in the System rapidly,
  - A systematic approach to managing trauma workloads across Trauma Networks, designed with due consideration to major incident planning and the capability and capacities of each network,
  - Identifiable centres to concentrate resources, e.g. blood and blood products, during a major incident.
  
  - System level management of specialist services (e.g. burns, paediatrics, spinal cord surgery),
2. More effective triage at the scene leads to patients being delivered to appropriate treatment more quickly via:
- A pre-existing and tailored triage system, where retrieval is structured to transport the patient to the most appropriate hospital, depending upon the severity of injury,
  - Specific trauma triage training for paramedics to ensure accurate assessment of patients' injuries,
  - Pre-existing communication mechanisms as part of the triage system which allows for surge capacity to be considered when deciding on where to deliver patients,
  - Establishment of MERIT teams in a co-ordinated way across networks ensuring better co-ordination of response,
  - Police services able to readily identify and manage access routes to reduce transportation time to Major Trauma Centres.
3. Better treatment of all injured patients via:
- Treatment in the right place at the right time of those suffering trauma,
  - An increase in the number of hospitals with specialist trauma management skills,
  - Continued upgrading of clinical skills in specialist trauma care at all trauma centres (not just major trauma centres) through training rotations within each network,
  - An increased number of clinicians able to deal with major trauma cases through training rotations within each trauma network,
  - Improvement in the treatment of acute specialist injuries.