NCTTRAC
NORTH CENTRAL TEXAS
TRAUMA REGIONAL ADVISORY COUNCIL

Medical Advisory: Timely Transfer of Trauma Patients
To: All TSA-E Trauma Facilities
Subject: Urgent Review of Trauma Transfer Processes

Purpose

NCTTRAC would like to share a regional observation regarding delays in the interfacility transfer of trauma patients. Through ongoing performance improvement efforts, we have identified opportunities to strengthen timeliness in transfers to higher levels of care, particularly within the two-hour window from emergency department arrival.

This is a topic currently being discussed statewide through Governor's EMS and Trauma Advisory Council (GETAC) quarterly meetings, where Regional Advisory Councils (RACs) have been encouraged to work collaboratively with their members to better understand and address transfer delays at the local level.

Background

Timely transfer to definitive care is a key component of an effective trauma system. Guidance from the American College of Surgeons (ACS) in Advanced Trauma Life Support (ATLS) highlights the importance of early recognition of serious injury, rapid assessment, and initiating transfer as soon as the need for higher-level care is identified. Avoiding unnecessary delays, such as non-essential diagnostics or prolonged stabilization, can help facilitate more efficient movement to definitive care.

Additionally, the study *Increased Mortality for Transferred Trauma Patients: Should Transfer Time Become the Next Quality of Care Indicator?*[1] suggests that longer transfer times may be associated with increased mortality, further reinforcing the importance of timely transfers as part of overall system performance.

Regional Performance Goal

A recent statewide survey identified the following as the most common contributors to transfer delays within TSA-E:

- Delayed decision to transfer
- Limited availability of transport services
- Delays in transfer acceptance

In alignment with these findings, the NCTTRAC Trauma Committee has established a regional performance goal for at least **80% of critically injured patients to be transferred within two hours of emergency department arrival**.

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[1] Hosseinpour H, Stewart C, Leger M, et al. Increased mortality for transferred trauma patients: Should transfer time become the next quality of care indicator? Journal of the American College of Surgeons. 2022;235(5). doi:10.1097/01.XCS.0000895252.85714.6e.

This goal is intended to support ongoing system performance improvement and provide a shared benchmark for evaluating timeliness across the region.

Facilities that are consistently not meeting this metric may be contacted by the NCTTRAC System Performance Improvement (SPI) Subcommittee. These outreach efforts are intended to be collaborative and supportive, with a focus on **offering resources**, **data insights**, **and education** to help identify barriers and improve transfer processes.

Considerations for Facilities

As part of ongoing system improvement efforts, and in accordance with Texas Administrative Code (TAC) §157.126, designated facilities should review their current processes to identify opportunities to improve timeliness. Potential areas for review include:

- Early identification of patients who may benefit from transfer, consistent with ATLS principles and regional triage guidelines
- Timely initiation of transfer processes once the need for higher-level care is recognized
- Opportunities to reduce non-essential delays, including diagnostics that may not change immediate management
- Communication workflows, including acceptance and bed coordination processes
- Transport coordination, including availability and activation timelines

Suggested Next Steps

Facilities are encouraged to:

- Review internal trauma transfer workflows (e.g., ED arrival to decision, decision to acceptance, acceptance to departure)
- Identify any local barriers impacting transfer timeliness
- Explore process improvements or workflow adjustments that may help reduce delays
- Engage with NCTTRAC for collaboration, shared learning, and access to regional data and resources
- Encourage emergency department physicians and trauma care team members to complete ATLS training to support early recognition and timely transfer decision-making. **NCTTRAC offers course fee reimbursement for recertifications up to a designated amount for eligible participants**; additional details are available on the NCTTRAC Trauma Committee webpage.

Closing

NCTTRAC remains committed to supporting a collaborative, data-driven approach to improving trauma system performance across TSA-E. We appreciate the continued engagement of our members and the work being done across the region to enhance patient care. If your team would like to discuss this topic further or review data and potential strategies, we welcome the opportunity to connect.