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To Hospital CEO

## Maintaining front-line trauma services during the COVID-19 response

COVID-19 is poised to challenge the capacity and capability of health facilities across Australia and New Zealand. As patient numbers escalate, we anticipate this will result in repurposing of resources to reduce the morbidity and mortality related to this virus. We firmly support efforts to reduce the spread of the virus and treat patients that suffer the consequences of infection.

Amidst the influx of COVID-19 patients, trauma patients will continue to arrive and will require the highest possible levels of care to reduce complications that may impact on resources such as ventilators and ICU/HDU beds for COVID-19 patients. In addition, patterns of trauma may change in unforeseeable ways during the pandemic response, and as such demand for trauma services is unpredictable.

To mitigate this, we recommend that facilities and jurisdictions mandate and prioritise the application of experienced clinical trauma personnel to this highly vulnerable patient group as the volume of COVID-19 patients escalates. Redeployment of clinical trauma personnel away from their core expertise into tasks that could be performed by others compromises all patient groups. We also recommend, where systems are available, that timely data are provided to trauma units and trauma clinical networks to enable rapid decision-making regarding patient distribution, care pathways, and prevention priority areas.

The potential influx of trauma patients of all ages during community lockdowns and social restrictions will place added pressure on our ability to deal with COVID-19 patients in our emergency departments and hospitals. We strongly support and encourage all agencies responsible for community-based injury prevention to actively and immediately pursue injury prevention initiatives related to community lockdowns and restrictions.

Yours sincerely

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Chair RACS Trauma Committee

**Prof Michael Reade** President Australasian Trauma Society



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