

**REGIONAL PHYSICIAN ADVISORY BOARD
MEETING MINUTES**

**June 25, 2008
Hospital Council of Northwest Ohio
Conference Room**

Attendance:

Members:

F. Barry Knotts

David Miramontes, MD

Michael Oswanski, MD

St. Vincent Mercy Medical Center

Mercy Health Partners/Toledo Fire Department

The Toledo Hospital

Guests:

James Fenn, RN

Jacquelyn Kiser, RN

Ellen Owens

Jason Samberg, RN

Diane Simon, RN

Flower Hospital

Fisher-Titus Medical Center

ODPS – Division of EMS

St. Vincent Mercy Medical Center

Defiance Regional Medical Center

Staff:

Marchelle Lee

Jane Riebe

Hospital Council of Northwest Ohio

Hospital Council of Northwest Ohio

1. CALL TO ORDER

The meeting was called to order at 10:07 a.m. by Dr. Knotts.

2. APPROVAL OF MINUTES

The minutes from April 23, 2008, were approved. Dr. Oswanski commented on how well the minutes were prepared especially considering the complex nature of the topics discussed.

3. CHAIRMAN'S REPORT

Next week is RPAB Chairpersons's meeting at state.

3. LIAISON REPORTS:

NORTR:

Due to cuts made at the state level, i.e., tobacco funding, HCNO will have to make some cuts to its operating budget by the end of this month. It is recognized that there is the potential for us to lose Susan Murphy's position as assistant to the trauma registry. This would place a hardship on NORTR, and some changes would need to be made in order to account for the absence of support staff. Drs. Knotts and Oswanski indicated that they are willing to do whatever they can to help us maintain regional registry support staff.

NORTR Board hasn't met since the last RPAB meeting, so there is nothing to report from that group at this time.

2008 Trauma Symposium – Friday, September 26, 2008:

Jane announced that the keynote speaker will be Dr. James Price (PhD MPH). Dr. Price's presentation is entitled, "Public Health Aspects of Firearm Violence. Dr. Knotts has a ballistics talk that he will be presenting at the symposium, as well.

The symposium will be held at St. Vincent Mercy Medical Center. Plans for holding it at UTMCC, again, this year have been nixed due to major physical changes being made to the originally planned location.

Trauma Registry Advisory Subcommittee

The main point coming out of the meeting is that the state is out of funding to support any changes to the state trauma database. The proposed changes related to becoming aligned with the NTDB are now on hold indefinitely. Aligning with the NTDB can be addressed at the regional level, though, and at the hospital level if individual facilities desire to go that route. Participation in NTDB is required of all verified trauma centers.

At the TRAS meeting it was stated that implementation of education plans are on hold, too. There is also a hiring freeze at the state level. Currently, there is little TRAS can advise the state on other than continuing to pursue development of a unique identifier. The proposed identifier would be a combination of numbers such as the date, EMS provider, and hospital number. The field length will be determined by the unique EMS identifier. It is already known that there are some practices that will have to be changed in order to benefit from using a unique identifier. One of the issues is that some EMS agencies don't enter the run number right away, i.e., it is generated retrospectively.

State Trauma Committee

The last meeting of the State Trauma Committee was May 14. Topics discussed included the trauma subcommittee workgroups, which consists of an over- and under-triage group, and a system reports group. Neither group has made much headway since they were appointed.

There is also a Model Trauma System planning group, which expects to have a final report of their work to present at the July meeting.

There was also discussion about trauma committee members interviewing with the media. This became an issue as the result of the evaluation the trauma committee in regard to Ohio's status with the Model Trauma System. EMS Executive Rucker wants to ensure that all official interviews of the Trauma Committee go through Ohio Department of Public Safety PIO.

The next meeting of the Trauma Committee July 9th at 10am in Columbus at ODPS.

Carol Cunningham is updating the legislation to update scope; currently, there is no liability protection for the RPAB to act as Medical Director; instead, the RPAB should stay in the advisory role.

The geriatric trauma triage report is done. It will be published in the *Journal of Trauma*. Changes in triage criteria resulting from the findings in this study are likely to be implemented January of 2009. Jane will send the study, the current Region IV triage criteria and the passage in the legislation on the criteria out to RPAB.

Ohio EMS Board – Ellen Owens gave a report from the state.

Board approved EMT Interfacility Transport and Scope of Practice. Worked with Boards of Nursing, Pharmacy, and Ohio Medical transport to develop this. New scope of practice and study rules went into effect May 29. Full rules are on the EMS website.

RPAB rules will be coming out to RPAB members within the next week or so. As discussed, “shall serve as medical director” will be taken out. Instead, will encourage everyone to have a plan B before in the event of a death or resignation of the EMS medical director. A backup medical director needs to be named so there is no downtime. Currently, there is a day or two of leeway when something happens, but liability is an issue.

Position paper on Prehospital scope of practice. See attached.

Disaster Planning –

Jim Fenn was a participant in the panflu exercise. It started two weeks prior to the local exercise with the first inject. The exercise tested their ability to handle 50% more patients than are normally seen in a day, with 15% or so with flulike symptoms. The formal disaster plan was activated. Wanted to see what the true surge capacity was, and use the opportunity to identify flaws in the system. The scenario included 40% absenteeism due to flu, and alternate care site setup, contacting the strategic national stockpile, etc. The scenario was reported to be much better written this year.

Discussed HICS IV training. Key positions in incident command have indicated they need more training beyond HICS IV. They are looking to HCNO for guidance.

The RPAB rules will be rewritten so that RPAB will be more active in disaster planning, as there are not many regional resources for disaster planning currently.

Lucas County EMS - Dave Miramontes, M.D., reported on the following LCEMS activities:

ICE hypothermia protocol started June 1st, and is used in Wood County now, also. Not a lot of data has come back yet on how it is working. The hospitals are using different devices to bring about the hypothermia, Arctic Vests, FEM FEM closed cooling system and cooling blankets. They only had a month to get the involved departments coordinated and the equipment purchased.

Trunked 800 System is a communication device that allows multiple agencies to communicate on different channel or you can broadcast to everyone. It can be patched through to UHF, microwave, and helicopter systems. The system was purchased with grant

funds. It is newer technology than the ODH MARCS radio system that disaster uses. MARCS is currently often located in security, rather than ED.

Discussed field EKG upgrades. Medtronic uses analog cell phones, a circuit switch technology that will be phased out at the end of the year. The choices are to work around it or to upgrade. Many local organizations have chosen Phillips monitors. Transmission can be made in 2 second to server in packets of data. The cost is low, \$1,200 in software, and less than \$10,000 to the hospital. You can pdf, fax, email, etc. The door-to-balloon time benchmark is changing, and becoming notification-to-balloon time. There is no funding in Lucas County to make the switch, but have applied for a grant. Rural areas have different rules. Rural EMT Basics can apply and transmit the 12 lead EKG.

The Biennial Report on the Incidence of Traumatic Brain Injury, which was awarded to HCNO for the third time, has been completed for the years 2004-2006. This time money was included for printing. It has been written at a level for John Q. Public (i.e., legislators) to understand it. Jane will send the PDF version out to RPAB. The data this time is more reliable, but conclusions have not changed greatly, i.e., the report seems to generate as many questions as it answers.

4. NEW BUSINESS

Dr. Mahany has resigned his position on the RPAB. While up to nine may participate, we don't have to have nine. In earlier discussion, Diane volunteered to contact Dr. Walker to see if he is interested. There was interest in having someone from outside of the metropolitan Toledo area. Applications are sent to the state, in particular to Ellen Owens. Dr. Cunningham then contacts applicants to discuss their duties as a RPAB member.

5. NEXT MEETING

The next meeting is scheduled for Wednesday, August 27, 2008, at 10:00 a.m. at Defiance Regional Medical Center. Meeting minutes and an agenda will be sent out prior to that meeting.

6. ADJOURNMENT

There being no further business, the meeting was adjourned at 11:20a.m.

Schedule for 2008:

Wednesdays 10 to 11:30 a.m. August 27, October 22.

The December meeting is on a Thursday – December 4 from 10:30 a.m. to noon.

Minutes respectfully submitted by:

Marchelle Lee, BS
Administrative Assistant