

STATE OF OHIO
EMERGENCY MEDICAL SERVICES BOARD

TRAUMA COMMITTEE MEETING MINUTES *FINAL*
Wednesday, March 9, 2011

Location: Ohio Department of Transportation, Conference Room G-B, Columbus.

Members Present: Nancy Bechtel, Dr. John Crow, Dr. Todd Glass, Vickie Graymire, Kathy Haley, Brian Kuntz, Dr. Edward Michelson, Dr. Sidney Miller, Debra Myers, Dr. Greg Nemunaitis, John Ross, Dr. Michael Shannon, Diane Simon, Dr. Howard Werman Dr. Richard Ziegler.

Non-Voting Liaisons Present: Dr. Carol Cunningham, Kitty Hevener, Carol Jacobson, F. Barry Knotts, Jolene Defiore-Hyrmer, Dr. Steven Steinberg.

Members Absent: David Degman, Mark Gebhart, Dr. Gary Huston, Jennifer Piccione, David Pohlman, Dr. Kevin Pugh, Dr. Jonathan Saxe.

Non-Voting Liaisons Absent: Dara Bakes.

Non-Voting EMS Staff Present: Tim Erskine, Sue Morris, Carol Palantekin, Millie Pontious, Mark Resanovich, EMS Board Vice-Chair.

SUBJECT	DISCUSSION	ACTION
MEETING CALLED TO ORDER		The State of Ohio Emergency Medical Services Trauma Committee was CALLED TO ORDER by Committee Chair Kathy Haley at 10:10 a.m.
WELCOME & INTRODUCTIONS	Committee members and others in attendance introduced themselves.	
MEETING MINUTES January 12, 2011	Chair Haley asked if anyone wished to make any additions or corrections to the January 12th minutes.	A motion was made by Dr. Miller to approve the Trauma Committee meeting minutes, seconded by Dr. Glass. All in favor, none opposed. MOTION PASSED.
ODPS Legislative Update	Mr. Erskine distributed a one-page document regarding Senate and House bills pending the General Assembly that are trauma related. Each bill shows the name of the sponsoring legislator and what the bill pertains to. Mr. Erskine expanded on H. B. 128, to revise the requirements for staffing ambulances and the priorities for distributing grants for emergency medical services. Grant priorities are outlined on this Bill. Several members of the committee discussed the word priority as it pertains to the funding for each grant. Mr. Erskine will discuss this bill with the Division's counsel in order to find out the meaning of the word priority . This bill will also be forwarded to the Grants Committee for discussion. Also, just introduced was HB 143, the concussion/traumatic brain injury legislation as proposed would require both school sponsored sports and youth sports organization to adhere to certain requirements for the appropriate evaluation of head injuries and concussions before an athlete is permitted to return to participation.	

PUBLIC RECORD

**EMS Medical
Director Report**

Dr. Cunningham reported that the RPAB chairs will be having the first meeting of the year this afternoon. Dr. Cunningham will discuss the NHTSA final report which includes additional responsibilities for the RPABs. Dr. Cunningham attended the NAEMSP annual meeting in January which was partnered with the mid-annual meeting of the National Association of State EMS Officials (NASEMSO) Medical Directors Council meeting. Dr. Cunningham attended three presentations related to mass casualty events and triage. 1) management of patients during the Haitian earthquake; 2) triage used during The Station nightclub fire in Rhode Island and during the Vancouver Olympics; and 3) review of the CDC national triage guidelines recommendations. NASEMSO has decided not to endorse the NAEMSP position paper that support the CDC field triage protocol.

**Governor's
Council on People
with Disabilities
Response**

Ms. Haley introduced Ms. Kitty Hevener a representative from the Governor's Council. Ms. Hevener will be working with the Trauma Visionary Committee, Goal #10. Ms. Hevener reported that she has been spending a lot of time researching what has been done in the area for disaster response and emergency preparedness. Ms. Hevener will be assisting the Visionary Committee to improve with disaster preparedness and response recovery as far as disasters. Mr. Scott Hinton, from the Governor's Council, was introduced and will also be working with the Visionary Committee.

**Performance
Improvement
Subcommittee**

Dr. Miller reported that the Over/Under Triage/PI Subcommittee had a meeting on November 2010. At the moment, this group is planning to set up another meeting at 9:00 a.m., right before the next Trauma Committee meeting. Dr. Miller commented that there is plenty of data in the registry; however, staff to extract the data from the registry has been not available. Ms. Haley reported that Dr. Bryce Robinson and Lynn Haas will join the Performance Improvement Subcommittee. Dr. Shannon suggested to Dr. Miller to draft a written request of the data needed and submitted to Mr. Erskine. If the data is not produced, then the request can go to the EMS Board. Ms. Bechtel commented that she has submitted several request for data and although the turn-around time has been slow, the data has always been produced. Mr. Erskine informed the committee members that the Division of EMS's Research and Analysis section will be getting a total of 3 FTEs who will be available to work on the trauma registry projects. Mr. Erskine assured the committee members that there will

be data support for the PI subcommittee in the near future. Mr. Erskine explained the classifications of the three full-time positions: One epidemiologist, one statistician and one data manager. Dr. Crow asked Dr. Miller to please review and comment regarding a letter from Nationwide Children's Hospital dated February 28, 2011 address to Tim Erskine regarding the deletion of the average daily census requirement of three or more patients for verified burn centers. Dr. Miller commented that this item is specific to pediatric hospitals. Ms. Haley asked the committee members to review a document written by COTS regarding Chapter 14/Guidelines for the Operation of Burn Centers.

A motion was made by Dr. Michelson that this committee send a recommendation to the American College of Surgeons that they consider deleting the average daily census requirement of three or more patients for verified burn centers and revise requirement to establish a minimum total number of patients treated per year, seconded by Ms. Bechtel. By raising hand, ten in favor, none opposed, 4 abstained. MOTION PASSED.

**Air Medical/CMS
(Centers for
Medicare &
Medicaid
Services)
Workgroup**

Dr. Werman and Dr. Michelson researched the impact of the new CMS legislation on trauma patient air transport discussed at our last committee meeting. Dr. Werman commented that this is not new information; it is simply a clarification in their rules and regulations. Dr. Werman recommended to the committee members to just monitor the behavior and see what happens. Dr. Michelson agreed and commented that he checked with his medical provider, who is a national company; this company has not seen any changes in reimbursements. Dr. Michelson believes that there is a great potential that this is going to happen as the government looks to reduce Medicare expenses. Dr. Michelson also feels this is something we should revisit.

**Ohio Department
of Health**

Ms. DeFiore-Hyrmer reported that she had received a request from Mercy Medical Center for provisional status. ODH has been involved with the National Public Health week is April 4th through April 10th and this year's theme will be "Safety is no Accident"; at the last meeting of the Ohio Injury Prevention Partnership on February 11th, Rep. Michael Stinziano spoke regarding HB 143 regarding the prevention of concussions and brain injuries in young athletes and the promotion of concussion education and legislation. Ms. DeFiore-Hyrmer also reported on several action group projects discussed at the February meeting: The Data Action, Evidenced Based, IP Policy and Advocacy, Child Injury Action, and Ohio Older Adults Falls Prevention Coalition, etc. Ms. DeFiore-Hyrmer announced that if anyone was interested in the Data Action group, to please contact her.

EMS Board Dr. Steinberg commented that he was unable to make it to the last EMS Board meeting.

Trauma Visionary Committee Ms. Graymire reported that the Trauma Visionary Committee (“TVC”) last met in January. There was no February meeting because of the EMS Board Retreat and NHTSA Review. The committee scheduled a full-day meeting and had a facilitator go through the first priority goal which was Goal #8, Trauma System Registry Infrastructure. Further work of Goal #8 by this committee will continue this afternoon immediately after this meeting. The committee also prioritized the goals of the framework in order of importance and significance. The committee will continue to work on the framework goals and will eventually bring in stakeholders and organizations.

Trauma Registry Advisory Subcommittee Report Dr. Knotts reported that the last TRAS committee meeting (January) was dedicated to the evaluation of the OTR Vendors. Mr. Erskine updated the committee regarding the process used to select an OTR vendor out of five trauma registry software applications submitted for review and approval. The information submitted by each software company included capabilities, options and price list. This information was then forwarded to ODPS, IT Section for their review. A recommendation was then made to the Executive Director of the EMS Board to contract with Digital Innovations. Digital Innovations scored approximately 8% higher than the rest and also came in at a cost below the other bids. ODPS will now move this forward to the Controlling Board for approval since it is an amount above \$50,000.00 and this step can take up to three months. Mr. Erskine explained that the new Trauma Acute Care Registry Data Dictionary will be implemented with the new software system. Ms. Bechtel asked Mr. Erskine if there was a legislative step to follow before implementing the new data dictionary. Mr. Erskine replied that this only requires the approval of the Ohio EMS Board and the Board has already approved the inclusion criteria and the data dictionary; this item is policy and not rule or law. Ms. Bechtel outlined items that the TRAS committee will be working on during 2011: Complete the State Acquisition process & implement the commercial vendor software for TACR; implement the revised TACR Data Dictionary; publish an Annual Data Report; unique injury identifier number; burn registry; and, increase TACR reliability and

utilization.

Dr. Knotts asked Mr. Erskine if Digital Innovations could make a presentation regarding their software package, or provide a disk (DVD) that the committee can view? Mr. Erskine will check into this item and will provide an answer at our next committee meeting.

**Huron Hospital
Trauma Center
Closure**

Mr. Erskine distributed an article by the *Plain Dealer* reporting that the Huron Hospital Trauma Center closure has been delayed by Cleveland Clinic. Therefore, the Level II trauma center at Huron Hospital remains opened.

**3-Year Review of
Trauma Triage
Rules**

Mr. Erskine explained that the deadline for the trauma committee's final draft is due by May 2011. A hearing will be held during the EMS Board May, 2011 meeting. The EMS Board will also hold a hearing for all the rules at their August, 2011 meeting. The 3-year review of trauma triage rules is due September 2011.

Ms. Bechtel distributed a document from COTS, Prehospital Committee Trauma Triage Work Group with recommendations to the EMS Board regarding changes to state trauma triage criteria. The document includes COTS's suggestions to the Trauma Committee for their consideration and to include these revisions to the State Trauma Triage Criteria. Discussion regarding "over and under triage" by several members followed. Mr. Erskine once again commented that a notice will be send out to the general public (to groups that need to be included) letting them know the changes that are being proposed to the EMS Board for approval asking them for their input by May 1st. The Trauma Committee meeting will discuss this item at the next May 11th committee meeting. Ms. Haley asked the committee members to review the documents distributed earlier and be ready to discuss at the next meeting.

**Geriatric Trauma
Triage**

Mr. Erskine mentioned that there has been some recent interest in the geriatric trauma triage. The state of Pennsylvania trauma system has been reviewing our geriatric trauma triage and asked Mr. Erskine for information related to our data. Mr. Erskine will be speaking at a conference in South Bend, Indiana regarding our trauma triage system.

Notice Ms. Haley informed the committee members that committee member Bill Crum had resigned for personal reasons. Mr. Crum will be honored with a plaque which will be mailed or presented to him thanking him for his many years of services. Mr. Erskine commented that that the two entities involved in the nomination of this seat are the Brain Injury Association of Ohio and the Governor's Council on People with Disabilities.

Resources for Optimal Care of the Injured Patient

Ms. Myers discussed a document from the Alliance of Ohio Trauma Registrars ("AOTR") distributed earlier to all committee members. This document discusses the role and responsibilities of a trauma registrar. Ms. Myers further explained that AOTR believes that the title "trauma registrar" does not adequately reflect what is being done on a daily basis by these individuals. Therefore, a classification name change is being considered.

A motion was made by Dr. Crow to make a recommendation to AOTR to make a name change from Trauma Registrar to Trauma Registry Specialist, seconded by Dr. Glass. All in favor, none opposed. MOTION PASSED.

Ms. Bechtel discussed a COTS's document previously distributed. These are recommended changes to the "Green Book".

Chapter 1/Trauma Systems. Ms. Haley suggested accepting this language as written. The rationale, expert opinion.

A motion was made by Dr. Knotts to adopt Chapter 1 as written, seconded by Dr. Crow. All in favor, none opposed, Ms. Bechtel abstained. MOTION PASSED.

Chapter 20/Disaster Planning Management. Ms. Bechtel explained the recommended changes to this chapter.

Section Hospital Priorities – Discussion.

A motion was made by Dr. Crow to adopt the hospital priorities as written, seconded by Dr. Knotts. All in favor, none opposed, Ms Bechtel abstained. MOTION PASSED.

Section Hospital Disaster Plan – Discussion.

A motion was made by Dr. Knotts to adopt the hospital disaster plan as written, seconded by Dr. Crow. All in favor, none opposed, Ms Bechtel abstained. MOTION PASSED.

Also under *Section Hospital Disaster Plan*: HEICS is now HICS.

A motion was made by Dr. Glass to adopt the hospital disaster plan with the HICS model, seconded by Dr. Crow. All in favor, none opposed, Ms Bechtel abstained. MOTION PASSED.

Section Preparation & Planning – Communication systems should be established.

A motion was made by Dr. Glass to adopt the preparation and planning regarding the communication systems, seconded by Dr. Crow. All in favor, none opposed, Ms Bechtel abstained. MOTION PASSED.

Section Preparation & Planning – A regionally-adopted triage system as a short module at all our ATLS and TNCC courses.

A motion was made by Dr. Crow to adopt the regionally-adopted triage system as a short module (as written),

seconded by Dr. Glass. All in favor, none opposed, Ms Bechtel abstained. MOTION PASSED.

Section Disaster Response Drills & Exercises – Discussion.

After discussion, committee members decided to change the language from every 6 months to a minimum of two drills per year.

A motion was made by Ms. Myers to adopt the disaster response drills & exercises with the suggested language change, seconded by Dr. Crow.

Trauma Surgeon Review of Trauma-Related EMS CE

Ms. Carol Palantekin, Division of EMS, Education Coordinator, explained her role when she reviews a training program site or a continuing education program site regarding trauma care education compliance. Ms. Palantekin would like to get some clarification from the trauma committee members. A copy of the ORC 4765.16 Continuing education – development document was distributed. The rule specifies that *“a course that deals with trauma care shall be developed in consultation with a physician who specializes in trauma surgery.”* Dr. Crow commented that the rule is too restrictive and it needs clarification. Ms. Graymire suggested a legal explanation from ODPS legal counsel should be sought; and then it should be returned to this committee for discussion.

NHTSA State EMS Assessment

Mr. Erskine reported that the NHTSA February 2011 Assessment contains some items that pertain to trauma. As soon as this is available, Mr. Erskine will provide a copy to the trauma committee members. This assessment will also be posted on the EMS website.

Next Regular Scheduled Meeting

The date of the next Trauma Committee meeting will be on Wednesday, May 11, 2011, Conference Room 134.

Adjournment

The State of Ohio Emergency Medical Services Trauma Committee meeting was ADJOURNED at 1:10 p.m. by Committee Chair Ms. Haley.

Minutes submitted by: Millie Pontious