

**STATE OF OHIO  
EMERGENCY MEDICAL SERVICES BOARD  
TRAUMA COMMITTEE MEETING MINUTES FINAL  
Wednesday, May 11, 2011**

**Location:** Ohio Department of Public Safety, Conference Room 134, Columbus.

**Members Present:** Nancy Bechtel, Dr. John Crow, Vickie Graymire, Kathy Haley, Brian Kuntz, Dr. Sidney Miller, Dr. Greg Nemunaitis, John Ross, Dr. Michael Shannon, Diane Simon, Dr. Howard Werman, Dr. Richard Ziegler, Dr. Jonathan Saxe.

**Non-Voting Liaisons Present:** Dara Bakes, Dr. Carol Cunningham, Kitty Hevener, Dr. F. Barry Knotts, Dr. Steven Steinberg.

**Members Absent:** David Degman, Dr. Mark Gebhart, Dr. Todd Glass, Dr. Gary Huston, Dr. Edward Michelson, Debra Myers Jennifer Piccione, David Pohlman, Dr. Kevin Pugh.

**Non-Voting Liaisons Absent:** Carol Jacobson, Jolene Defiore-Hyrmer

**Non-Voting EMS Staff Present:** Tim Erskine, Sue Morris, Millie Pontious, Ellen Owens, Toni Tester, Summer Boyer, Mark Resanovich, Jim Davis, Geoff Dutton, Deanna Harris

SUBJECT	DISCUSSION	ACTION
<b>MEETING CALLED TO ORDER</b>		The State of Ohio Emergency Medical Services Trauma Committee was CALLED TO ORDER by Committee Chair Kathy Haley at 10:04 a.m.
<b>WELCOME &amp; INTRODUCTIONS</b>	Committee members and others in attendance introduced themselves.	
<b>MEETING MINUTES January 12, 2011</b>	Chair Haley asked if anyone wished to make any additions or corrections to the March 9th minutes.	A motion was made by Dr. Shannon to approve the Trauma Committee meeting minutes, seconded by Ms. Bechtel. All in favor, none opposed. MOTION PASSED.
<b>ODPS Legislative Update</b>	Bill Crum, Dave Degman, and Dr. Mark Gebhart have resigned and will need replaced by their respective organizations. This process may take a few months.  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, noting that it has passed the House and has gone on to the Senate.	
<b>EMS Medical Director Report</b>	Dr. Cunningham reported that the RPAB chairs would be meeting that afternoon. They have asked her to submit a proposal to the EMS Board for consideration of waiving the requirement of having a trauma surgeon involved in trauma education programs, as current law requires. Medical Directors are now required to be board-	

certified in Emergency Medicine. The RPAB feels that such Medical Directors receive enough training in trauma to make decisions without approval from a trauma surgeon.

Dr. Cunningham recently attended a NAEMSO meeting in Washington, D.C. They are looking for a lead agency for EMS on the Federal level. Health and Human Services is receiving primary consideration while keeping NHTSA offices involved. The HITS committee has posted an EMS Incident Response and Readiness Assessment as well as the results of the MIECE study. Dr. Cunningham will send an electronic copy of these as soon as they are available.

Dr. Cunningham has spoken several times with Rick Hunt, Director of Injury Prevention at the CDC, regarding their field triage guidelines. The workgroup responsible for these guidelines are reconvening to take a closer look at some issues raised by NAEMSP and NASEMSO.

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**Discussion of  
Trauma Surgeon  
Waiver**

Due to time constraints and scheduling conflicts of members, the committee moved discussion of waiving the requirement of a trauma surgeon's involvement in trauma education programs from old business to this time.

Mr. Erskine gave an overview of the history leading up to this proposal, including the motion passed by the EMS Board. The motion that went through contained two different issues, but the part that pertained to trauma surgeons was to seek a change in legislation that would allow either a trauma surgeon or a medical director of an EMS agency who meets qualifications as outlined in rule to be in charge of trauma education programs.

Dr. Cunningham said the only request by the RPAB was for the waiver to apply to medical directors of an EMS agency who meet the qualifications of 4765-3-05 (Medical director requirements for each emergency medical services organization). The RPAB did not discuss educational institutions, only EMS agencies.

Dr. Saxe said the ACS feels strongly that this should not happen because trauma surgeons should be heavily involved in the

education of EMS providers in their respective areas. A lengthy discussion ensued.

Mr. Davis stated that the motion will go before the EMS Board at their next meeting for clarification.

A motion was made by Vicki Graymire to form a workgroup, including the appropriate stakeholders, to further examine this issue, seconded by Ms. Bechtel. All in favor, none opposed. MOTION PASSED.

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**Ohio Department of Health** No report.

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**Ohio Injury Prevention Partnership** No report.

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**EMS Board** No report.

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**Grants Committee** The definition of different priority levels was discussed. The process for funding each priority was clarified.

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**Trauma Visionary Committee** The EMS Board would like the committee to develop a specific plan for the creation of a Joint Registry Oversight Committee (JROC), which would disband both EMSIRS and TRAS by combining the two under one committee. Possible functions and structures of JROC were discussed. The TVC will be responsible for creating a detailed plan of action to bring back to the Trauma Committee.

A motion was made by Dr. Werman for the TVC to plan and design JROC, seconded by Dr. Michelson. All in favor, none opposed, Ms. Bechtel abstained. MOTION PASSED.

Lengthy discussion took place regarding the concept of a lead trauma agency; specifically, whether the TVC or the Trauma Committee should assume this responsibility and the roles played by each committee and subcommittee.

Dr. Crow requested that legal representation be present at all meetings.

Dr. Saxe brought forth the need for a Performance Review Questionnaire (PRQ). Mr. Erskine will review a similar PRQ and associated budget completed by Colorado, compare it to Ohio's budget, and send the results to Dr. Steinberg.

**Trauma Registry  
Advisory  
Subcommittee  
Report**

TRAS is currently vetting the registry software and has a subgroup looking at the possibility of a burn component.

Mr. Erskine passed out a draft of the 2009 Trauma Registry data report. He will send out electronic copies to all members of the Trauma Committee and TRAS for input.

**Performance  
Improvement  
Subcommittee**

Ms. Haley stated that metrics need to be included in the PI process. The TVC discussed this at their last meeting and would like to discuss it further at their next meeting, then give more direction to the PI process at the next Trauma Committee meeting.

Ms. Haas has begun a brainstorming list for a metrics scorecard that will be developed; a handout was given with an overview of these ideas.

**Huron Hospital  
Trauma Center  
Closure**

No update from the last meeting.

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

Any rule change recommendations the committee would like taken to the Board need done now so Ms. Haley can present them next week. After that, any suggestions for revisions to the pre-hospital trauma triage guidelines need to be completed by August 2011 in time for the September 2011 filing deadline.

**COTS Study**

Ms. Bechtel presented a study completed by COTS which looked at existing trauma triage criteria. In Franklin county, 81% of trauma patients taken to acute care hospitals had none of the criteria that are in the existing trauma triage criteria. This suggests that the current criteria are not designating these patients to go to trauma centers.

Discussion ensued regarding using mechanism of injury as an additional way to decide triage and whether any changes should be made at this point to the existing guidelines. Waiting until the study is

A motion was made by Dr. Crow to align Ohio's trauma triage criteria with the CDC field triage criteria, seconded by Saxe with the addition of the geriatric piece that Ohio has already implemented. Ayes 4, Nays 7. MOTION FAILED.

A motion was made by Ms. Graymire to request the state and each region to mirror the COTS study, seconded by Dr. Knotts. All in favor, none opposed. MOTION PASSED.

A motion was made by Mr. Michelson for no change to the

**COTS Study** replicated by new staff members, as well as other registries, was suggested.

trauma triage criteria, seconded by Mr. Ross. Ayes 10, Nays 1. MOTION PASSED.

**Resources for Optimal Care of the Injured Patient** Because of a previously unknown requirement for recommendations for changes to have been published, revisions made during the previous meeting were not submitted in time for the green book deadline.

**NHTSA State EMS Assessment** NHTSA has released the assessment of the Ohio EMS system. Ms. Haley requested each committee member to review the assessment in detail and provide input at the next meeting.

**General Discussion** The committee would like attendance of members to be reviewed for compliance with attendance requirements. Mr. Erskine will report on the status of attendance at the next meeting.

Dr. Crow suggested that all members bring their own handouts in lieu of staff making hard copies for each meeting.

**Next Regularly Scheduled Meeting** The next Trauma Committee meeting will be on July 13, 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: Toni Tester, MPH