

**STATE OF OHIO  
EMERGENCY MEDICAL SERVICES BOARD**

**TRAUMA COMMITTEE MEETING MINUTES FINAL  
Wednesday, November 10, 2010**

**Location:** Ohio Department of Public Safety, 1970 West Broad Street, Room 134, Columbus.

**Members Present:** Nancy Bechtel, Dr. John Crow, William Crum, Dr. Todd Glass, Kathy Haley, Dr. Gary Huston, Dr. Edward Michelson, Debra Myers, Dr. Kevin Pugh, Dr. Jonathan Saxe, Dr. Michael Shannon, Diane Simon, Dr. Howard Werman, Dr. Richard Ziegler; **Non-Voting Committee Members:** Dara Bakes, Dr. Carol Cunningham, Dr. Barry Knotts, Dr. Steve Steinberg;  
**Non-Voting EMS Staff:** Tim Erskine, Sue Morris, Millie Pontious. Jim Davis EMS Chair and Mark Resanovich, EMS Vice Chair.

**Members Absent:** David Degman, Mark Gebhart, Vickie Graymire, Brian Kuntz, Dr. Sidney Miller, Dr. Greg Nemunaitis, Jennifer Piccione, David Pohlman, John Ross;  
**Non-Voting Members:** Carol Jacobson, Forrest Smith, Amy Wermert; **ODPS Legal Staff:** Heather Friend.

SUBJECT	DISCUSSION	ACTION
<b>MEETING CALLED TO ORDER</b>		The State of Ohio Emergency Medical Services Trauma Committee was CALLED TO ORDER by Committee Chairman Dr. Crow at 10:07 a.m.
<b>WELCOME &amp; INTRODUCTIONS</b>	Committee members and others in attendance introduced themselves.	
<b>MEETING MINUTES September 8, 2010</b>	John Crow asked if anyone wished to make any additions or corrections to the September 8 <sup>th</sup> minutes.	A motion was made by Dr. Michelson to approve the Trauma Committee meeting minutes, seconded by Dr. Werman. All in favor, none opposed. MOTION PASSED.
<b>ODPS Legislative Update</b>	Mr. Erskine reported that Senate Bill 567 (draft copy distributed at meeting), the stroke bill, has not moved at all and it is unlikely that it will during a lame duck session. The legislation adds a sixth exception to mandatory transport to a trauma center. That is, if a trauma victim has had a stroke, the victim must be transported to a certified stroke center. Senate Bill 302 was introduced since our last meeting. The bill which was introduced on behalf of Ohio fire chiefs will revise the requirements for staffing ambulances and the priorities for distributing grants for emergency medical services. Ms. Haley provided an update regarding grant priorities 2, 3, and 4 which are part of Senate Bill 302. Ms. Haley also discussed the funding for the ACS review of the Ohio trauma system.	The Trauma Committee will work on revising grant priorities 2, 3, and 4.
<b>EMS Medical Director Report</b>	Dr. Cunningham reported that at the last all-member RPAB Chair meeting a SWOT analysis was completed, as was the Education Committee's new curriculum for the national EMS scope of practice.	

PUBLIC RECORD

	<p>Dr. Cunningham attended the annual meeting of the National Association of State EMS officials (NASEMSO) last month. Items discussed related to this committee were: NASEMSO has received funding from NHTSA to work on one of their mission which is the culture of safety. NHTSA has a project called <i>Toward Zero Death</i> which encompasses not only deaths from injury from the general public but also in the responder world with EMS safety. Another project is <i>HITS</i> (Highway Incident and Traffic Systems) which awarded two large grants. The first grant went to ACEP to look at the culture of safety specifically in EMS. The second grant went to NASEMSO for the Hedge project. NASEMSO created a highway mass casualty project which includes a couple components: (1) the Model Inventory of Emergency Care Elements (MIECE). MIECE is modeled after the US DOT's Model Inventory of Roadway Elements (MIRE). The goal of MIECE is to demonstrate the feasibility and utility of an emergency care inventory that displays resources and capacity by segments of interstates and US highways. (2) the Event Response Readiness Assessment (ERRA) that a state and local EMS agencies can use to assess their level of multidisciplinary system integration and response capability for mass casualties on highways.</p> <p>Dr. Cunningham discussed an FAA proposal regarding new rules for helicopter operators, including air ambulances, which would require stricter flight rules and procedures, improved communications and training, and additional on-board safety equipment. Dr. Cunningham also reported that this week NHTSA has put out a request for a team composed of different people from EMS community, including Dr. Cunningham, to travel to Israel to look at how things are managed during a mass casualty event including response, resources, communications, triage, patient tracking system, etc. A trip date has not been scheduled.</p> <p>Last September, the American Board of Medical Specialties announced the creation of an Emergency Medical Services subspecialty physician certification which will be administered by the American Board of Emergency Medicine (ABEM).</p>	
<p><b>Ohio Department of Health</b></p>	<p>Due to Dr. Smith's absence, Mr. Erskine distributed and read a letter from Dr. Smith to all committee members. Dr. Smith will be retiring from the Ohio Department of Health effective at the end of December 2010. Dr. Smith and Mr. Erskine met with ODH's Assistant Director</p>	

	regarding the Trauma Center planning process and the transition of the Trauma Committee's ODH Liaison representative.	
<b>Ohio Injury Prevention Partnership (OIPP)</b>	Ms. Bakes announced that the annual meeting of the Ohio Injury Prevention Partnership has been scheduled for Thursday, November 18, 2010. Mr. Erskine commented that the goals of OIPP match tightly with or almost completely with Goal 2 of the Trauma framework as OIPP actually wrote Goal 2 for us. A suggestion to update the Ohio Injury Prevention Partnership website was made by a committee member in order to have more up to date information.	
<b>EMS Board</b>	Dr. Steinberg updated the committee regarding items the EMS Board had discussed: Senate Bill 302; lack of grant applications; approved the Framework document giving oversight to the Trauma Visionary Group; funding for ACS visit; and brief discussion regarding the role of the Trauma Committee and the EMS Board and whether an Ohio Trauma Board should be created.	
<b>Trauma Registry Advisory Subcommittee</b>	Ms. Bechtel discussed a memorandum dated October 7 <sup>th</sup> which was previously distributed regarding key issues relevant to the Ohio Trauma Acute Care Registry. Ms. Bechtel commented that TRAS members are willing to assist with the creation of the RFP and/or other steps necessary to improve the TACR. Mr. Erskine updated those present regarding where the ODPS software package stands. Mr. Erskine suggested forwarding the TACR dictionary to the EMS Board for approval next. It will be implemented once the hardware is in place, hopefully around March 1. Ms. Bechtel would like to discuss with TRAS members for them to decide on the roll-out timeline.	<ol style="list-style-type: none"> <li>1. Dr. Saxe made a motion to approve the Trauma Acute Care Registry data dictionary, second by Dr. Michelson. All in favor, none opposed. <b>MOTION PASSED.</b></li> <li>2. Dr. Werman made a motion to endorse the TACR's commercial software package, second by Dr. Glass. All in favor, none opposed. <b>MOTION PASSED.</b></li> <li>3. Dr. Glass made a motion to allow TRAS to write the technical specifications for the software package, second by Dr. Pugh. All in favor, none opposed. <b>MOTION PASSED.</b></li> </ol>
<b>Trauma Visionary Workgroup</b>	Dr. Crow mentioned that most of the items discussed at the last Trauma Visionary Workgroup meeting had been brought up earlier. Such as SB 302, working on the Framework document, how to fund the ACS Consultation, Grants Committee issues, TRAS (FTE, data dictionary, and the intent of the Trauma Registry) and Trauma Center Closure (Huron Hospital).	
<b>Trauma System Plan</b>	Ms. Haley mentioned that the Trauma System Framework was approved by the EMS Board. Letters have been sent to all participants that provided input. The Trauma Visionary group will be meeting immediately after this meeting and will discuss how to move	Dr. Crow, as Chair, declared the Trauma System Framework workgroup disbanded.

	forward toward the next steps. Ms. Haley asked that those present review each goal and decide which goals should rest under the Trauma Committee.	
<b>Performance Improvement Subcommittee</b>	Due to Dr. Miller's absence, Mr. Erskine reported that the subcommittee has just started working on looking at non-trauma center deaths to try to get a picture of who they are and why they are at non-trauma centers. Records show that of 228 deaths in a non-trauma center, 104 died in the emergency department. The subcommittee is also looking at the age of these patients; how much over triage there is, etc.	
<b>OTR Staffing</b>	Ms. Bechtel discussed a memorandum dated August 17 regarding Staff Support for the Ohio Trauma Registry distributed earlier. Dr. Crow suggested that the memorandum be sent back to TRAS to revise it taking a stronger approach on OTR staffing requirements before forwarding it to the EMS Board. Ms. Bechtel expressed concern regarding work overload.	Ms. Haley offered to take the lead on this project and complete it by the first of the year.
<b>Elections</b>	Dr. Crow stated that Ms. Haley had been nominated as Chair of the Trauma Committee and Dr. Saxe as Vice Chair. Dr. Crow asked if there were any other nominations the committee members wanted to bring to the floor. No other nominations offered.	Ms. Haley was elected as Chair and Dr. Saxe was elected as Vice Chair of the Trauma Committee.
<b>Committee SOP</b>	Dr. Crow discussed adding a new section to the committee SOP labeled <i>Expedited Review/Executive Review</i> . This section will address time sensitive issues that need expeditious approval. The executive review will be conducted by the Chair, Vice Chair and the Executive Director. The item will then be brought to the Trauma Committee meeting for discussion.	Ms. Haley and Mr. Erskine will revise the SOP regarding this matter.
<b>Grant Priorities</b>	Ms. Haley asked for volunteers from the Trauma Committee to become an active part of the Grants Committee to provide guidance specifically on priorities 2, 3, and 4 starting on January 2011; provide accountability, advocacy, leadership and expertise relative to priorities 2, 3, and 4; and be the liaison between those two groups. The Grants Committee meets on the Tuesday before the EMS Board meeting from 2-4 p.m. Mr. Davis expanded on the duties of the Grant Committee members. Ms. Haley agreed to change the Framework Goals 2 and 6 and integrate into priority statement for Priority 4 for	

	national trauma system review process which will be included in the RFP for the grant application. This will be shared with the Grants Committee's Chair and Grants Committee's staff liaison, Alan Boster. The hope is to spark some interest in the grants. Discussion regarding the grant applications, giving direction as to items that need to be researched under each category, and the end result of each grant research. Items that can be researched through grants would be trauma centers closings, rehabilitation centers procedures.	
<b>3-Year Review of Trauma Triage Rules</b>	The 3-Year Review of Trauma Triage Rules is due November 2011. Mr. Erskine will send out the current rules on trauma triage to committee members and let them know what steps need to be taken to complete the review. Deadline for the final draft will be May 2011. Most of the members of the Performance Improvement subcommittee will be part of the review.	Mr. Erskine will send out the current rules on trauma triage to committee members.
<b>Huron Hospital Trauma Center Closure</b>	Mr. Erskine reported that Cleveland Clinic had announced the closure of the trauma service (Level 2) at Huron Hospital in East Cleveland. Trauma services will be transferred to Hillcrest Hospital. The cities of Cleveland and East Cleveland have filed a court injunction regarding the closing of this trauma center. Several committee members discussed the cause and effects of the closing of Ohio trauma centers and whether the Trauma Committee can take any action.	
<b>Appreciation Certificate</b>	Mr. Erskine presented Dr. Crow with a certificate of appreciation for his years of service as chair of the Trauma Committee. Dr. Crow thanked everyone for their hard work and dedication.	
<b>Next Regular Scheduled Meeting</b>	<b>The date of the next Trauma Committee meeting will be on Wednesday, January 12, 2011, Conference Room 134.</b>	
<b>ADJOURNMENT</b>		The State of Ohio Emergency Medical Services Trauma Committee was ADJOURNED at 12:40 p.m. by Committee Chairman Dr. Crow.