

Trauma System Oversight & Management Committee
OEMS, 1041 Technology Park Drive
Glen Allen, VA
March 1, 2012
11:00 a.m.

Members Present:	OEMS Staff:	Other Attendees:
J. Forrest Calland	Paul Sharpe	
Kathy M. Butler	Russ Stamm	
Lou Ann Miller	Carol Pugh	
Mindy Carter	Wanda Street	
Larry Roberts	Gary Brown	
Barbara Hawkins		
Emory Altizer		
LeAnna Harris		
Raymond Makhoul		
Dallas Taylor		
Bryan Collier		
Elton Mabry		
Leonard Weireter		
Amanda Turner		
Melissa Hall		
Jane Gilley		
Stanley Heatwole		
Valeria Mitchell		
Andi Wright		
Melinda Myers		

Topic/Subject	Discussion	Recommendations, Action/Follow-up; Responsible Person
Call to order:	The meeting was called to order by Dr. Calland at 11:08 a.m. The Chair could not be in attendance at this meeting.	
Approval of minutes dated December 1, 2011:	A motion was made to approve the minutes as written. Under Trauma Center Updates, Amanda Turner said to remove the sentence, "Looking at pediatric hospice." The motion was moved by Dr. Calland and seconded by Emory Altizer. No one opposed or abstained. All committee members were in favor of approving the minutes with the correction.	The minutes were approved with the one correction.
Chair Report – Dr. Ajai Malhotra:	No report. Dr. Malhotra could not be in attendance at this meeting.	
Performance Improvement Committee Update:	Dr. Calland has met with OEMS staffs and Dr. Malhotra on several occasions to discuss the trauma triage data outcomes. The goal is to give feedback to the individual EMS regions. OEMS has produced maps depicting patients that met Trauma Triage Step 1 criteria that go to a Level I trauma center and those that go to non-trauma centers as well as other maps and graphs. Some of the trauma centers present would like to validate the information in the reports by comparing OEMS' analysis to their own internal trauma registries. OEMS will coordinate the validation process.	
Committee Composition	At a previous meeting, it was discussed to add a pre-hospital provider (rapid access). That motion was passed and Dr. Malhotra	

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(from 12/1/11 meeting):	<p>sent a request to Dr. Yee to add a committee member. It was also discussed previously whether the committee was too large. As far as the committee size is concerned, Dr. Calland feels the committee functions well as is and there is no need to change it. Gary Brown commented that funding or size of the committee is not an issue. He feels that the trauma committee does an outstanding job and should be commended for the work that is done. The OEMS does not have issues with supporting the TSO&MC as if and has not been approached by the EMS Advisory Board with any concerns.</p> <p>All discussions on this topic are closed and the committee will remain as is with the exception of adding an EMS representative.</p>	
Trauma Fund Panel Selection:	<p>OEMS advised that the trauma fund panel policy requires that at the March meeting, the Chair appoints the trauma fund panel or it could be decided not to change the appointments. The current panel consists of Andi Wright, Dr. Raymond Makhoul, Dr. Larry Roberts, Paul Sharpe and Dr. Ajai Malhotra.</p> <p>It was decided to leave the panel composition for Dr. Malhotra. It was also suggested that the panel meet within the next 30 to 45 days. If anyone is interested in becoming a member of the panel, please forward your request to Dr. Malhotra or Paul.</p>	<p>The Trauma Fund Panel will meet within 30 to 45 days.</p> <p>If anyone is interested in becoming a member of the panel, please forward your request to Dr. Malhotra or Paul.</p>
OEMS Update – Paul Sharpe:	<p>David Edwards, EMS for Children Coordinator, reported that he is in the final stages for approving the criteria for voluntary Pediatric Emergency Department designation. The pediatric criteria workgroup is meeting on March 11.</p> <p>Russ Stamm reported that there was 100% compliance during the last trauma center submission audit. He thanked everyone.</p> <p>OEMS has completed sending out the trauma fund letter introducing the new trauma fund policy. OEMS has received 100% of the signed acknowledgements back. A new annual reporting tool will be developed and posted on the OEMS website for this year's reporting. The report due date will change from September to January. It will be for the calendar year instead of fiscal year. Paul will send guidance on how to report September – December 2011 payments.</p> <p>The EMS Advisory Board Committee met a couple of weeks ago and the additional committee member was approved. Paul will ensure that Ajai knows this.</p> <p>As far as the trauma center and burn designation manual is concerned, the pending draft that will go before the State Board of Health on March 23. Paul will update everyone before the next meeting on whether or not it was approved.</p> <p>OEMS has begun developing a template to use to update the trauma registry data dictionary. OEMS will be sending out questions from time to time to collect information needed for a new data dictionary. Once a working draft has been developed OEMS will ask the committee to decide how to best proceed with working on the document. There is no defined timeline at this point. OEMS is internally preparing for the upcoming move from ICD9 codes to ICD10. This transition is scheduled for late 2013.</p> <p>The goal within OEMD is to synch the timeline of the change from ICD-9 to ICD-10 with making any needed upgrades to the trauma registry program and implementing any desired data elements at the same time. It would be helpful for OEMS to know what elements are in each of the center's trauma registries. The approval process for the data dictionary is that it will be approved by this committee, then go to the Advisory Board for approval and then to the State Board of Health for final approval. Then it will be official. LeAnna said that this would be a great topic for the June Trauma Coordinators meeting. So noted by Andi.</p>	<p>Paul will develop a new annual report on how to use the trauma funds and post it on the OEMS website.</p> <p>Paul will also email guidance on how to report September to December 2011 payments.</p>

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	<p>The EMS data dictionary and minimum dataset is currently posted for public comment. If anyone would like to look at it, there is a 300 page version and also an excel spreadsheet with elements in the fields. Go to www.vdh.virginia.gov/oems and click on “VPHIB Update January 2012” in the upper right corner of the page. This will go into effect January 2013.</p> <p>Paul Sharpe may not be able to attend the next meeting due to his child’s graduation (depending on the time).</p> <p>David Edwards will serve as back up for the site reviews as a cross training measure.</p> <p>Lou Ann Miller asked about the EMS Regulations. They are in the Governor’s office awaiting final approval and will not be approved until after the General Assembly session is over.</p> <p>Paul has not been given any information on the trauma center fund audits. Three audits are to be performed each year. Andi went through the audit, but has not received a report from the auditors.</p>	
Trauma Nurse Coordinators Report:	<p>Andi reported that the coordinators met yesterday and decided it was time to update the Virginia Statewide Trauma Center Designation Program – Hospital Resource Manual. The manual has been broken down into five workgroups:</p> <ul style="list-style-type: none"> Operational – Blue Education/Credentialing – Yellow Performance Improvement – Pink Special Needs – Green Administrative – Orange <p>A sign-up sheet was passed around for anyone who would like to participate on any of the groups. Co-chairs have been appointed to some of the groups. They were asked to have a draft available a week before the June meeting of the section they are working on.</p> <p>The coordinators also discussed having a three-day retreat in September. The place has yet to be determined.</p>	<p>Andi will add data dictionary discussion to the June agenda.</p> <p>All trauma coordinators are encouraged to participate in updating the Manual. Please sign up.</p>
Trauma Center Updates:	<p>Mindy Carter of CJW Medical Center – CJW had their site review on December 9 and Mindy is very pleased with the outcome of that. They had some recommendations but no critical deficiencies. Currently recruiting a PI Education Coordinator and losing a Trauma Nurse Practitioner. They have expanded their office space to include more storage space.</p> <p>Dr. Larry Roberts & Melissa Hall of Mary Washington Hospital – Melissa Hall is the permanent Trauma Program Manager. An ACS Verification was held in December. Mary Washington has started a “Survivors Speak Out” where trauma survivors speak at schools and other places about distracted driving, drowsy driving and/or intoxicated driving. They have two people so far participating who were involved in drowsy driving crashes and had a kick-off event with 150 people in attendance.</p> <p>Melinda Myers of INOVA – INOVA had an ACS Review in December and it went well. ATLS Instructor course is being offered March 14 and 15. Currently recruiting for Trauma Nurse Specialist and a Social Worker.</p> <p>Kathy Butler & Dr. Calland of UVA – UVA’s second helipad is due to complete construction in the next week or two. UVA is continuing to improve the efficiency of the radiology department and also looking at acute care by forecasting the intern support they may or may not have in July. Dr. Calland stated that UVA is also auditing all air medical communications.</p>	

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	<p>Valeria Mitchell of Sentara Norfolk General Hospital – The Physicians for Peace team left on Tuesday and will return next week. The trauma symposium will be held October 21 and 22. SNGH had their first ACS TQUIP visit to validate some 2010 data. During the visit, they discovered that there were some collectors’ areas that were not up to date nor was the ACS complications list.</p> <p>Elton Mabry of Southside Regional Medical Center – SRMC has seen an increase of gunshot wounds within the past 2 months and has seen 4 or 5 in the past few days. Many of them have been walk ins to avoid the police on scene. They are trying to get Stroke Center Designated. Will hold a TNCC course in April and an Instructor Course also in April.</p> <p>Lisa Wells of Winchester Medical Center – Winchester has recently completed construction and increased the bed size by 20 and increased ICU to 50. They have lost an orthopedic trauma surgeon. Will have four TNCC classes this year.</p> <p>LeAnna Harris of Sentara Virginia Beach General Hospital – The hospital administrator, Dr. Raymond Troiano, will retire effective April 6, 2012. LeAnna has been working with ENA/TNCC course instructor in the area to offer TNCC courses every other month in order to meet the state requirement by the end of the year. Just had ICU Skills fair for trauma on massive transfusion. Recently did some work with IT department to have the ordering process go more smoothly in EPIC. Every 15 Minute Drinking and Driving Program will be held on March 14 and April 25. Dr. Collins from Norfolk General came to talk to trauma surgeons about burn care. Children’s Hospital of the King’s Daughter Department of Sports Medicine is offering education on sports related injuries. Trauma research project on alcohol is in phase 2 of data analysis.</p> <p>Amanda Turner of Lynchburg General Hospital – LGH will be implementing Massive Transfusion Protocol on March 1. Have had one TNCC course this year and will have three more.</p> <p>Jane Gilley of Carilion New River Valley – CNRV had site visit in January and had a provisional one year status. Ortho is a problem for them. They have a new CEO who will work on this.</p> <p>Lou Ann Miller of Riverside Regional Medical Center – Trauma symposium coming up on March 30 and brochures are available if you would like one. TNCC was held in February and more will be held in September and December. The new surgical addition is due to open in January 2013. Every 15 Minute Program will be held in May at Warwick High School. Site review was held in December and went very well, was approved for the next three years. Currently recruiting for trauma surgeons. Had two trauma crash courses (modeled after Andi’s) and the next one will be held in May.</p> <p>Andi Wright of Carilion Roanoke Memorial Hospital – CRMH lost seven trauma surgeons last year and a medical director. Have replaced most of those people. Brian has hit the ground running and has been very good for our hospital on many levels. Site visit went fair, because we had no ophthalmology coverage, but new CEO is very supportive and we now have some ophthalmology coverage as of January 1. Still recruiting for ENT and getting a new pediatric surgeon. Also recruiting for two more surgeons. Added a nurse practitioner last summer. Trauma Symposium on October 18.</p> <p>Emory Altizer of Lewis Gale Hospital Montgomery –Lewis Gale continues to provide EMS Outreach education with one coming up in March. LGHM has an additional TNCC instructor and will have two additional courses this summer. They also have a new orthopedist that will start seeing patients next week.</p>	
Old Business:	None.	

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New Business:	<p>Emory mentioned that yesterday at the Coordinator's meeting he discussed that the percentages for the Level III hospitals' trauma fund disbursements were extremely low and wondered what he could do to get the percentages increased. He stated that it is difficult to fund the community and EMS outreach programs with the current level of funding. His thought was to set the minimum amount for a Level III at 2%. He feels that this would help tremendously.</p> <p>Barbara agrees with Emory wholeheartedly. She said that the Level III's are struggling and should get more than 2% if possible. She feels it is definitely something worth looking into.</p> <p>Dr. Calland has a question for the group involving the Data Dictionary. He wants to know if this may be a tool for measuring long term outcomes for getting heads of households back home or back to work. Paul feels that this is a great time to start collecting data of this type.</p> <p>Elton asked if OEMS will adhere to the new CDC Trauma Triage changes. Paul stated that only change that affected the trauma triage criteria was the geriatric vital signs 110 instead of 90. The question is should we go through the process of changing this now or wait two years? For such a minor change, they committee feels that it may be best to wait two years.</p>	
Adjournment:	The meeting adjourned at approximately 1:00 p.m.	2012 Meeting Schedule: Thursday, June 7 Thursday, Sept. 6 Thursday, Dec. 6