

Topic/Subject	Discussion	Recommendations, Action/Follow-up; Responsible Person
	<p>Ms. McDonnell informs the committee a major topic to be discussed is identification of barriers related to discharging patients to appropriate rehab facilities. Mr. Weppner gave insight to the conversation, addressing the issues with disorders of consciousness and feeling it is becoming common that insurance companies are more critical of status for rehab acceptance. They are finding placement issues at long term acute care as well.</p> <p>Ms. Ewers and Ms. Sturt, (Lori is a Level 3 TPM, Britney is in the process of developing a Level 3) express to the committee the issues with having to transfer TBI patients they may have been unable to treat due to lack of neurosurgeon availability. *It should be noted that Level III trauma centers are not required to have neurosurgery or neurology capabilities.* Ms. McDonnell discusses a waiver program Virginia is hoping to put in place to increase physician participation in TBI management. Ms. Ewers asks if that progress can be shared with the TPM's and Ms. McDonnell agrees to follow up on it. Mr. Dillard addresses the lack of pediatric neuro resources to be a barrier to TBI pediatric care.</p>	
III. Discussion of Goal 2	<p>Ms. McDonnell goes onto address another issue the committee has been facing concerning a post-acute care facility inventory list. Dr. Giebfried offers that before the COVID pandemic, there was an extensive list made of discharge facilities and resources. Ms. McDonnell asks if it is possible to get that list and Dr. Giebfried acknowledged he would do his best to track down the list.</p> <p>The group begins to discuss goal 2, integrating adequate rehab facilities into the trauma system. It is discussed that case managers are best equipped to help with accomplishing some of those goals. It is also brought up that goal 2.2 is gathering data on patient outcomes in the rehab setting. This should be considered for a subcommittee task. There is committee discussion regarding whether the transition to ESO will allow for outcome data collection. More is to follow on the topic. Ms. Tetterton offers that the best solution may be to simply ask for the data from facilities, as it is most likely already there.</p> <p>Ms. McDonnell informs the committee that there are still two spots for social workers needing to be filled. It is preferred one be from a trauma center and one from acute care. She informs the committee that Greg is trying to recruit an acute care social worker from VCU, and they are taking recommendations for the trauma center social worker position. More discussion is had by the committee concerning outcome data post hospital discharge</p>	None. Informational.
IV. Public Comment	None.	None. Informational.
V. Adjournment	Ms. McDonnell adjourns the meeting at 2:20pm.	

Respectfully submitted by Ashley Camper and Mindy Carter.