

Trauma System Plan Task Force Meeting
Virginia Office of EMS
Virginia Public Safety Training Center
7093 Broad Neck Road
Hanover, VA 23069
September 7, 2017
9:00 a.m.

Members Present:	Members Absent:	Other Attendees:	OEMS Staff:
Michel Aboutanos, Chair	Lisa Wells	Stephanie Boese	Gary Brown
Timothy "T. J." Novosel	Shawn Safford	Heather Davis	Cam Crittenden
Lou Ann Miller	Marilyn McLeod	Cathy Peterson	Tim Erskine
Emory Altizer	John Hyslop	Beth Broering	Wanda Street
J. Forrest Calland	Valeria Mitchell	Kathy Butler	David Edwards
R. Macon Sizemore		Tanya Trevilian	George Lindbeck
Andi Wright		Jordan Estroff	
Sid Bingley		Pier Ferguson	
Anne Zehner		Ann Kuhn	
Scott Hickey		Mark Day	
Morris Reece		Wayne Perry	
Maggie Griffen		Terral Goode	
Tom Ryan		Paul Sharpe	
Keith Stephenson		Tracey Lee	
Michael Feldman		Melinda Myers	
		Robin Pearce	
		Sherry Stanley	
		Daniel Munn	
		Kelley Rumsey	

Topic/Subject	Discussion	Recommendations, Action/Follow-up; Responsible Person
Call to order:	The meeting was called to order by Dr. Aboutanos at 9:20 a.m. Dr. Aboutanos stated that this is a meeting to review the draft of the trauma system plan.	
Introductions:	No introductions were made.	
Review and Approval of June 1, 2017 minutes:	A motion was made to approve the minutes dated June 1, 2017. The motion was moved by Emory Altizer and seconded by Lou Ann Miller. The minutes were approved as submitted.	The minutes were approved as submitted.
Review of combined Trauma System Plan document:	Dr. Aboutanos gave an overview of how the outline of the document should be and Tim presented a very rough draft of how the document will look. It will include the mission, vision statement, values and code of conduct of the Trauma System Plan. It will also include two main sections – Administrative and Operational & Clinical components to include the following bullet points under each:	

I. Executive Summary, Who Are We, Mission, Vision, Values, etc.

II. Administrative

- Leadership & Governance
- Information, Education, System Evaluation & Research
- Finance

III. Operational & Clinical

- Injury Prevention
- Pre-Hospital Care
- Acute Definitive Care
- Post-Acute Care Rehabilitation
- Emergency Preparedness & Disaster Response

Each area will include the description of the current status, desired status, goals and objectives, benchmark scores and actions needed to meet desired scores.

The beginning of the document will also include an Executive Summary which will be discussed and agreed upon at a later time. The question was raised if there will be mission and vision statements for each of the workgroup sections. The committee decided that there should only be one overall mission, vision, etc. for the entire Trauma System Plan. This has already been completed and is on the agenda. Each workgroup or section will have objectives and goals that they plan to accomplish.

The task force discussed the membership of the Pre-hospital workgroup and other workgroups. It was decided to table this discussion until the chair or other representative of the Pre-hospital workgroup is present.

Dr. Aboutanos went through his notes to determine the missing items from each of the workgroups. He asked the group how long it will take to complete a final plan. Six months? Six months will be March of 2018. Is this feasible? The task force agreed that this is a feasible goal. In March 2018, there will be a finalized trauma system plan for review and final touches.

Task force members asked for a copy of the draft plan. Tim will send a copy of the draft document to the chairs for distribution.

Dr. Aboutanos suggested establishing and including long term goals such as 3 year or 5 year goals for each section.

A reference section will be added to the end of the document.

It was also suggested to group all of the indicators from each workgroup together in a spreadsheet. Dr. Aboutanos suggested listing the indicator numbers in each workgroup section, then listing all of them as an appendix in the back of the document. Cam asked if we can create a spreadsheet that has the indicator, the workgroup responsible for it, and the workgroup score. Cam also suggested adding a line under the action steps

	<p>of who else is working on the indicator and still having the spreadsheet in the back of the document.</p> <p>At the December meeting, all of the workgroups should have submitted their completed HRSA documentation to Tim Erskine at timothy.erskine@vdh.virginia.gov for inclusion into the document.</p> <p>NEXT STEPS:</p> <ul style="list-style-type: none"> a) Tim will incorporate each of the workgroup HRSA documents into the trauma system plan document. b) The draft of the compiled document will be send out to the Chairs of each workgroup. c) The Chairs will distribute to the workgroup members. d) Prior to the December meeting, each of the workgroups may or may not need to meet to complete their HRSA document and send it to Tim. Meetings should be held in October. Send updated documents to Tim by the first week in November. e) Tim will send out another copy of the document with the updated information before the December meeting. f) The December meeting will consist of reviewing the draft Trauma System Plan document. 	
Unfinished Business:	None.	
New Business:	None.	
Public Comment:	None.	
Adjournment:	The meeting adjourned at approximately 11:55 a.m.	

DRAFT