

**System Improvement Committee Meeting
 Virginia Office of Emergency Medical Services
 Embassy Suites
 2925 Emerywood Parkway Richmond, Virginia 23294
 February 2, 2022
 10:00am.**

Members Present:	Members Absent:	OEMS Staff:	Others:
Dr. Stanley Kurek		Mindy Carter	Nicole Laurin
Anne McDonnell		Ashley Camper	Whitney Pierce
Valeria Mitchell		Daisy Banta	Dr. Sam Bartle
Mike Watkins			Courtney Caton
Kim Klein			Autumn Davis
Dr. Rahil Dharia			Melinda Myers
Dr. Jeff Haynes			Kate Davenport
Jessica Rosner			Valerie Quick
Michelle Pomphrey			David Debiasi
Greg Neiman			Britney Ewers
Tim Donahue			Kate Schulz
			Kelley Rumsey
			Dan Freeman
			Lori Sturt
			Tracey Taylor
			Mike/Miguel Valdez
			Donna Nayduch
			Tanya Trevlian
			Jill Lucas Drakeford
			Amanda Loreti
			Kelsey Rideout
			Kim Jones
			Corey Miller-Hobbs
			Wendy Clement
			Reginald Middlebrooks
			Beth Broering
			Cassie Herman
			Dr. Paula Ferrada
			Dr. Michael Feldman
			Dallas Taylor

Topic/Subject	Discussion	Recommendations, Action/Follow-up; Responsible Person
I. Call to order, a. Introductions b. Approval of today’s agenda	Chair Dr. Stan Kurek called meeting to order at 10:12am. Introductions were made, and it was confirmed the committee had quorum. Dr. Kurek motioned to approve meeting agenda. Motion moved by Ms. McDonnell and seconded by Mr. Neiman.	Agenda approval.
II. Chair Report: a. Committee Structure and Members b. Goals and Objectives	<p>II. Dr. Kurek initiates chairs report.</p> <p>a. Dr. Kurek announces to the committee that he is taking nominations for a PI rep and that Dr. Donahue is now the military representative. He also notes that he has been thinking to move the citizen role to a level III. Dr. Ferrada motions to make the citizen representative slot into a level III representative. Mr. Watkins seconds and the motion passes. Dr. Ferrada motions to bring two nominations to the floor, Dr. Rahil Dharia for the level III representative and Kim Klein for the level III PI. An unnamed committee member seconds and the motion passes.</p> <p>b. Dr. Kurek opens discussion of goals and objectives to the floor. Goal 1, “To promote and support integrated data systems regarding the continuum of care and disposition of the patient in order to support trauma system education, performance improvement, public health planning, injury prevention and outcomes research”, is presented to the floor. Dr. Kurek and others agree that with the advancement of ESO there will be movement made on this goal. It is brought up however, with transport agencies utilizing systems such as EMS charts, there are still challenges to integrate data, even after the inclusion of ESO. Mr. Pomphrey comments that ACS promoted utilizing UUID number for national data sets. Ms. Rosner adds that UUID number should become available when the switch is made to NEMSIS 3.5. The committee conversates more on obstacles to data collection. No changes were proposed, and they move to goal 2.</p> <p>Dr. Kurek moves to objectives in goal 2; 2.1, “Create plan for providing risk adjustment mortality reports by institution”; 2.2, “Conduct an educational gap analysis of institutions, populace and providers regarding the role of the trauma system in the community” and 2.3, “Conduct a gap analysis of guidelines and protocols of care of the trauma patient.”. He opens the floor for suggestions on accomplishing the goal. It is discussed by committee members that the goals and objectives were created years ago and the objective of risk adjustment, may not capture what the committee is trying to work towards any longer. Dr. Ferrada makes a motion to eliminate objective 2.1. The motion is seconded by Dr. Rahil and a friendly amendment is made by Ms. McDonnell to entertain where else the committee should seek to work on tracking preventable deaths. All in favor and the motion passes.</p> <p>Dr. Kurek addresses goals 3 and it is noted on the published goals there is a typo and goal 3.3 should be, “engage medical direction committee council in development of regional benchmarking”. He asks for any comments on this goal and Ms. Nayduch inquiries about ways to meet any of the benchmarks by organizations that have TQIP. It is noted that few level III centers have TQIP and thus creating a limitation in collaboration. It is discussed within the committee what OEMS can do to integrate the data and Ms. Rosner informed the committee it is within the confines of the trauma data dictionary and how it translates, as that is how it would ultimately be integrated.</p>	<p>Citizen representative moved to a Level III rep and filled by Dr. Rahil Dharia.</p> <p>PI representative seat filled by Kim Klein.</p> <p>Objective 2.1: Retired</p>

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	<p>Dr. Kurek brings up goal 4, *See committee agenda for goal 4. Dr Ferrada makes a motion to rephrase the last two words from ‘research activities’ to ‘guidelines’. Mr. Watkins seconds and the motion passes. Dr. Ferrada goes onto discuss the verbiage of ‘research’ funding, and motions it be changed to ‘funding’. Mr. Nieman and Ms. Herman second and the motion passes. Ms. McDonnell addresses the goal relates to injury prevention and perhaps a better objective on the matter be proposed. The committee agrees and she says she will take time to consider it further and make recommendations.</p> <p>Dr. Kurek opens goal 5 to the floor *See committee agenda for goal 5. It is brought up by committee members that Pre-Hospital Committee (PHC) is currently tackling the task of vetting trauma triage criteria. Mr. Watkins offers that PHC is evaluating how the ACS-COT will relate to Virginia criteria. Dr. Ferrada adds that there is a workgroup that addresses some of goal 5 needs and would like to find an SI rep to assist and Dr. Kurek agrees.</p>	
<p>III. Committee Crossover Reports</p>	<p>a. Trauma Administration and Governance Committee Dr. Ferrada says they are currently focusing on repopulating the subcommittee with focus on diversity of regions and demographics. Multiple workforces have been created to include one evaluating the ACS-COT guidelines. Continued efforts are being made to collaborate with the COT chair including TPMs.</p> <p>b. Injury and Violence Prevention Committee Ms. Hobbs informs the floor they have been able to go through all their goals and objectives. There was no quorum at previous meeting so no formal movement was made on any topics.</p> <p>c. Pre-Hospital Care Committee Mr. Watkins reports they have done work to repopulate their committee. Goals and objectives were reviewed. This afternoon, the main topic of the agenda is to anchor down recommendations on the Trauma Triage Criteria, and more is to come.</p> <p>d. Acute Care Committee Ms. Taylor informs the committee movement is being made to vet the inter-facility considerations and guidelines. She requests that the ACC have a representative on the field triage guidelines workgroup. No follow up currently.</p> <p>e. Emergency Preparedness and Response Dr. Feldman informs the floor that today they updated committee structure to improve diversity inclusion. Kelley Rumsey was voted Vice Chair. The committee was briefed by Dr. Early on Virginia Commonwealth University’s on their Mass Casualty incident plan and the hope is to take lessons learned and share them across the state.</p>	<p>Informational.</p>
<p>IV. New Business</p>	<p>Dr. Kurek inquires to the committee about new business. Dr. Ferrada nominates Mike Watkins for Vice Chair of the Systems Improvement Committee. An Unnamed meeting attendee seconds and the motion passes.</p>	<p>Mike Watkins is named Vice Chair of Systems Improvement Committee.</p>
<p>V. Unfinished Business:</p>	<p>Dr. Kurek introduces Ms. Rosner to present data for the 3rd quarter 2022. Ms. Rosner briefs the</p>	<p>None. Informational.</p>

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	presentation to the committee. Issues with determining patient destinations from data presented was discussed by committee. Mr. Watkins offers there could be lost data due to Aeromedical events, as well as any transport or police assets crossing state lines for patient transports. It is further discussed by committees and is an ongoing issue to resolve data collection discrepancies. Full presentation can be found on OEMS website under the trauma and critical care header. Dr. Kurek thanks Ms. Rosner for the presentation.	
VI. Adjournment	Dr. Kurek requests to approve minutes. Dr. Nieman motions and Dr. Ferrada seconds. Minutes are approved. Dr. Kurek adjourns meeting at 11:10am.	None. Informational

Respectfully submitted by Ashley Camper and Mindy Carter.
