

**Trauma Performance Improvement Committee
Meeting
June 2, 2016
8:00 AM - 9:00 AM**

Members Present:	Members Absent:	OEMS Staff:	Others:
Forrest Calland	Greg Stanford	Cam Crittenden	
Valeria Mitchell		Dwight E. Crews	
Lou Ann Miller			
Mike Aboutanos			
T. J. Novosel			
Bryan Collier			
Marilyn McLeod			

Topic/Subject	Discussion	Recommendations, Action/Follow-up; Responsible Person
TPIC Annual Report – Final Draft	<p>Introduction to New Trauma and Critical Care Manager, Cam Crittenden, BSN, RN</p> <p>Dwight reviewed the final draft of the TPIC Annual Report. First section of the report includes an introduction and background with trauma criteria definitions. The next section of the report includes a section on data quality with trauma patients. Reviewed the data with patients with complete/incomplete vitals. Noted that 34 percent of patients had incomplete vital signs. Also, reviewed the data by EMS Council Region. Also, noted that 30 percent of trauma patients missing vital signs were missing GCS. Committee discussed the struggles with pre hospital patient care reporting with recording CGS. Committee discussed education and mentioned posting GCS Scale poster in ever ambulance in the state. Committee suggested the data quality report can bring about awareness/competition and the CGS scale poster can be used to educate providers. Need to explain the importance of GCS. Need a data quality report (% cases with all 3 vital signs) for each agency that goes to the regional council and to individual agencies. Committee also suggested working with ImageTrend to support providers by creating a help pop-up window in the system for help with completing GCS. Dwight pointed out that supplemental tables have data by agencies with data quality. GCS data quality issues could also be related to system import issues. Cam mentioned the VPHIB data transition to NEMSIS Version 3. Marilyn also mentioned giving agencies positive feedback when they do well with data quality.</p> <p>Forrest recommended changing the wording for incorrect trauma triage. Need to word differently. Some agencies do not have a trauma center. Need to soften language. Lou Ann Miller and committee mentioned getting the same report for 2015.</p> <p>Dwight reviewed the data with trauma incidents and with the trauma patients who met step 1 trauma triage criteria. Noted that 42 percent of trauma patients who met step 1 criteria were taken to non trauma centers. Reviewed regions that had the highest percentages of trauma patients who were taken to non trauma centers. Also, reviewed distribution of</p>	<p>Update incorrect trauma triage wording in report. (Dwight)</p> <p>Produce statewide map for percent taken to non trauma centers by council region. (Dwight)</p> <p>Add updated CDC (WISQARS) map.</p> <p>Update data quality reports for 2015 and 2016. (Dwight)</p>

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	<p>trauma triage patients who met 1, 2, or 3 of the step 1 criteria.</p> <p>Committee recommended producing a map for percent taken to non trauma center by council region. Also, recommended adding an updated CDC map.</p> <p>Reviewed the state map of trauma centers and the state map of trauma centers with 45 min. drive time.</p> <p>Committee discussed getting an updated report on data quality with vital signs for 2015 and 2016. Committee just needs data quality report updated by region and by agency. They don't need the additional data from the report.</p> <p>Forrest recommended Dwight present the data to the Trauma System Oversight & Management Committee today.</p>	
Membership	<p>Got approval for the new committee structure. Reviewed new committee recommendations.</p> <p>New TPIC Committee Structure:</p> <p>Trauma Center Representative (6)</p> <p>Level I - T. J. Novosel - Sentara Norfolk General Hospital Level II - Greg Stanford - Winchester Medical Center Level III - John Hyslop - Johnston-Willis Hospital Level I - Lou Ann Miller - Riverside Regional Medical Center Level II - Valeria Mitchell - Sentara Norfolk General Hospital Level III - Emory Altizer - LewisGale Hospital Montgomery</p> <p>Medical Direction Committee (MDC) Chair (1) Marilyn McLeod - Centra Emergency Services</p> <p>Citizen Representative (1) ?</p> <p>Rehabilitation Representative (1) HealthSouth Representative (Taskforce Meetings)</p> <p>Pediatrics Representative (1) Shawn Safford - Carilion Roanoke Memorial Hospital</p> <p>Burn Representative (1) Mike Aboutanos - VCU Medical Center</p> <p>Non-Trauma Center Representative (1)</p>	Send Invitations to new committee members. (Dwight)

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	<p>Ann Mills - Danville Regional Medical Center</p> <p>EMS Regional Council Representative (1) Gary Critzer - State EMS Advisory Board - Central Shenandoah EMS Council</p> <p>Mike Aboutanos will request a burn representative for the committee.</p> <p>Valeria mentioned adding a Performance Improvement (PI) person on the committee. Forrest recommended asking Gary if a Trauma Representative can be Program Manager or PI Person for future nominations.</p>	
PUBLIC COMMENT	n/a	
UNFINISHED BUSINESS		
NEW BUSINESS		
Adjournment	9:00 AM	