STATE EMS ADVISORY BOARD

Trauma Administrative and Governance Committee

Public Safety Training Center (PSTC)

7093 Broad Neck Road, Hanover, Virginia 23069

August 6, 2026, at 2 pm

Attendees (In Person)

- James Reynolds, Chair
- Chief Michael Watkins
- Dr. Kelley Rumsey
- Tanya Trevillian
- Courtney Caton
- Beth Broering
- Scott Cormier
- Dr. Lauren Webb

Attendees (Online)

- Dr. Jesse Burgess
- Dr. Steven Varga
- Dr. Terell Goode
- Linda Watkins

Excused

- Dr. Stefan Leichtle

Opening

- The agenda was presented and approved.
- A quorum was confirmed.

Systems Improvement

- Dr. Varga discussed data collection on the use of cervical collars.

Prehospital

- Chief Watkins discussed expansion of whole blood in rural areas of Virginia.
    - Goochland Fire and Rescue – December 2025
    - Hanover Fire-EMS – July 2026
    - Buckingham County Department of Emergency Services – July 2026
    - Dinwiddie Fire and EMS – July 2026
    - Mecklenburg Emergency Services – August 2026

Acute Care

- Courtney Caton shared updates from the workgroup focused on assisting and mentoring trauma centers as they transition to American College of Surgeons (ACS) trauma designation.

Virginia Trauma Center Designation Manual Updates

Dr. Varga provided an update on the transition to ACS Trauma Center Designation and reviewed proposed revisions to the Virginia Trauma Center Designation Manual.

1. First Three Recommended Changes
   a. PI Program Staffing
   b. Trauma Registry Staffing
   c. Registered Nurse Trauma Education

Recommended implementation date is January 1, 2027

1) **Next Four Recommended Changes**
   a. Craniofacial Expertise Requirements
   b. Soft Tissue and Reconstructive/Plastic Surgical Capability
   c. Ophthalmic Surgical Requirements
   d. Certified Registered Nurse Anesthetist (CRNA) Practice Clarification for Level III Trauma Centers.

The goal is for everyone to become aligned with American College of Surgeons.

Motions Presented and Approved

1) To implement the requirements for one, two, and three, which are ACS aligned PI program staffing, trauma registry staffing, and ACS aligned trauma nursing education requirements.
Motion approved: Beth Broering and Michael Watkins.

2) The recommendation through December 31, 2029, centers should comply with the call schedule requirements of the organization conducting their upcoming verification review. Centers undergoing a Virginia state review must meet Virginia requirements and centers undergoing an ACS review must meet ACS requirements. Effective January 1, 2030, Virginia surgical and medical call schedule will align with the applicable ACS requirements. Beginning in 2030, the same call schedule requirements will apply regardless of whether a center is undergoing an interim state review or an ACS review. *Motion approved: Dr. Rumsey and Tanya Trevillian*.

3) That center may transition a service. Based on ACS standards with that a transfer plan, a safe transfer of the patient, and then it's monitored through their PI process. *Motion approved: Courtney Caton and Tanya Travillian.*

4) The final transition to ACS verification for an independent Virginia state Trauma Center verification visit will be December 31, 2032.
Motion approved: Courtney Caton and Dr. Rumsey.

Workgroups created during the committee meeting.

1) Dr. Varga – Systems Improvement workgroup to evaluate data of prehospital of cervical collars throughout the Commonwealth and EMS Triage practices along with transports to non-trauma centers. Motion requested tor this workgroup and was approved. *Chief Watkins and Dr. Rumsey*.
2) James Reynolds – Requested a motion to create a workgroup to review, develop recommendations, and update the Virginia Trauma Center Fund. Motion approved: *Dr. Rumsey and Tanya Trevillian.*

Virginia Trauma Triage Plan

Dr. Rumsey briefed the work that has been completed in updating the Virginia Trauma Triage Plan. The workgroup has a strong draft and plan on presenting to the MDC at their meeting in October.

Action Items:

- Confirm with the VRC that it is within the realm of possibility for a consultative visit to result in verification being awarded.
- Consider adding pre-hospital blood transfusion sustainability to a future agenda.