

Trauma System Plan Task Force
 Definitive Care Work Group of the TSO&MC
 9960 Mayland Drive
 Suite 201
 Thursday, March 3,2016 0900-1100

Members Present

Heather Davis
 Tracey Lee
 Scott Hickey M.D.
 Christopher Lindsay
 John Hyslop M.D.
 Pier Ferguson
 Terral Goode M.D.
 Tiffany Lord
 Kelley Rumsey

| Topics / Subject | Discussion | Recommendations, Action /follow-up; Responsible person |
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| Called to order | Heather Davis calls meeting to order at 0900. | Heather and Tracey |
| Welcome and introductions | Each member identified their title and affiliation, agreed this work group needed Eastern representation | All members present as above, Heather Davis will ask Valeria Mitchell and Lou-Ann Miller for recommendations |
| Regulations | Reviewed regulatory guidelines to be compliant with State rule. Discussed the structure and commitment required by members present to establish a dedicated group, committed to the TSO&MC, Definitive Care work group. This group has been charged to promote a standardized level of care and as a result improve patient outcomes in the Commonwealth of Virginia and to uphold the set Mission , Vision and Values of the TSO&MC | No further recommendations. Members agreed to the set regulations and will uphold the task presented to them. |

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| Members | Discussion to make this work group set at 9 voting members and 2 Chairs with a rotation of needed adhoc members for consultation and feedback, and 5 out of 9 members to establish a quorum | No further recommendations, all agreed |
| ACS Recommendations for Definitive Care | 1. Engage all acute care facilities in the Trauma System. | Recommended this as a top priority and will be discussed in next meeting |
| | a. Provide technical assistance and guidelines for treatment and transfer protocols. OEMS, recent task force that updated and set recent guidelines for Transfer interfacility (this document is awaiting final approval). | Kelley Rumsey will bring copy for review at next meeting. |
| | b. Promote participation in statewide trauma system performance improvement. It was discussed that OEMS currently hiring for a statistician the group felt this would greatly improve this process. Considered if Data work group has been tasked with this evaluation and is it overlapped. Dr Hyslop: need to promote a Regional Collaboration | Heather Davis will reach out to Data group and follow up on status of statistician with OEMS |
| | 2. Place the trauma center designation criteria in administrative rule. Group felt this was hard to achieve and would take great amount of time and resources to achieve. Dr Hyslop: not integrated, need to focus on empowering the TSO&MC, this should not be just an advisory board , that the trauma system should follow the HRSA model | This was considered a lower priority |

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| | 3. Establish a process for designation of new trauma centers based on need | Recommended this as a top priority and will be discussed in next meeting. The group needs assessment of the current system and how Virginia delineates this task. Consider better non-designated education and standards of care. Promote Level 3 designations in rural out lying areas |
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| | 4. Explore mechanisms used by other states to track patient flow and outcomes for patients treated in out-of-state trauma centers for the documentation in the state trauma registry | Pier Ferguson and Terral Goode will bring to next meeting their facility current practice and guidelines for review and discussion |
| | 5. Consider implementation concurrent site visits for facilities electing both ACS and Virginia trauma center | Kelley Rumsey and Heather Davis will research and present for next meeting |
| | 6. Explore the potential for an additional level of pediatric trauma center designation | Kelley Rumsey will research and present at next meeting. Tiffany Lord will research and present at next meeting in reference to Burn Center designations |
| Public Comment | No one present | |
| Next Meeting | TBA | |
| Unfinished business | Interfacility transfer | Kelley Rumsey |

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