

# State Trauma Advisory Committee

## May 2, 2016

### 10:00 AM – 3:00 PM

## Minutes

## Attendees

### Committee Chair

Robert Mackersie, MD, FACS

### Committee Vice-Chair

Joe Barger, MD, FACS

### Regional Trauma Coordinating Committees Members

David Shatz, MD

Adella Garland, MD, FACS

James Davis, MD, FACS

Katy Haddock, RN

John Steele, MD, FACS

 Rick Kline, MD, FACS

### Local EMS Agency Members

 Cathy Chidester, RN, MSN

Dan Lynch

Jay Goldman, MD, FACEP

### Constituent Members

BJ Bartleson

 H. Gill Cryer, MD, PhD

Jan Serrano, RN

Robert Dimand, MD

Ken Miller, MD, FACEP

Myron Smith, EMT-P

Lynn Bennink, RN

Kristan Staudenmayer, MD, FACS - Guest

### At-Large Members

Joe Barger, MD

Chris Newton, MD

### State of California – EMS Authority Staff

Daniel R. Smiley

Tom McGinnis, EMT-P

Farid Nasr, MD

Howard Backer, MD, FACEP

Bonnie Sinz, RN

## Minutes

### A. Introductions

All members introduced.

## Standing Agenda Items

### **B. Update of EMS Authority Systems Division – Bonnie**

EMSA has three new staff members:

Kay Spencer – Grant Coordinator

Adrienne Kim – Data Analyst

Nancy Marker – Data Analyst

These three are great additions to our EMSA family and I hope you will meet them soon. All other EMSA updates are further in the agenda.

### **C. RTCC Updates**

South West – Cathy Chidester

Planning for Grand Rounds October 21<sup>st</sup> – watch for Save-the-Date

Revising By-Laws, strategic plan, and re-organizing structure

South East – Dr. John Steele

Planning conference for Oct 13<sup>th</sup> at Loma Linda

Continuing PI projects

Central – No report

Bay Area – Dr. Joe Barger

Dr. Adella Garland is the new Chair; Trauma Director at Santa Clara Valley Medical Center

Dr. Rick Kline reported on re-triage study and data obtained; will share lessons learned with new statewide re-triage project

North – Dr. David Shatz

Next face-to-face May 23<sup>rd</sup> at Enloe Medical Center in Chico

Presenting case studies

Oregon Health will attend next meeting in Redding

San Joaquin General has new Trauma Director with interest in PI

Requesting STAC Project Workgroup to complete Level III/IV comparison document between trauma regulations and ACS orange book

**Action:** Bonnie will bring STAC Project Workgroup back together again; hiatus for ACS survey process

### **D. Subcommittee Reports**

#### **PIPS – Dr. Gill Cryer/Bonnie**

Draft completed and being reviewed by administrative staff

ACS complimentary of the document

“The trauma stakeholders and staff are to be commended for their efforts in developing a draft

PIPS Plan and identifying performance measures, even though they are vaguely defined.”

It will be the role of the new PIPS subgroup to further define the measures once the document has been approved.

#### **Regional Re-Triage Network – Drs. Goldman and Steele/Bonnie**

Members had minor revisions; new draft attached

**Action:** Bonnie will format the draft and send to administration for approval; after approval-public comment

### **E. State Trauma Plan Status – Bonnie**

EMSA continuing to work with Agency to “fine tune” some language; so far there is not substantive changes that require the Plan to go out for another public comment; Agency waiting for ACS report before moving forward

## F. CEMSIIS-Trauma Update – Bonnie

- Bonnie announced that as of today, 75 of the 77 Trauma Centers are participating in CEMSIIS-Trauma. Bonnie is working with El Centro Medical Center and Pioneer Hospital exploring options for data submission.
  - 2013 shows 64,485 records
  - 2014 shows 67,229 records
  - 2015 shows 54,276 records
- These totals do not reflect the total number of trauma records for all 75 participating Trauma Centers as there are “holes” in the data for some of the months. Bonnie has sent out volume reports to each LEMSA requesting “holes” be filled. Oct-Dec 2015 data was due April 1<sup>st</sup>.
- CEMSIIS uses the following filter with all reports to be consistent with NTDB:
    - ED Discharge Disposition does NOT equal: home with services, home without services, AMA, and Jail
  - “Report Cards” are being developed to show each LEMSA the completion rates for select data elements for their designated Trauma Centers. 2015 data will be used.
  - For those facilities that send patients directly to the “resuscitation” area; discharge from this area would also be considered “treat and release”. EMSA will work with the LEMSAs with these facilities to ensure that consistent inclusion criteria are met.

## New Agenda Items

### G. NBATS Discussion – Dr. Kristan Staudenmayer

NBATS is the **DRAFT** ACS “Needs Based Assessment of Trauma Systems” Tool (attached). The tool is designed to assist regions in the performance of an assessment and the determination of the number of trauma centers needed in a region. The tool assigns points based upon four elements: population, transport time, community support, and number of severely injured patients (ISS > 15) discharged from hospitals in the trauma service area that are not Level I, Level II, or Level III trauma centers. This raw score is then adjusted based upon the number of existing Level I, Level II, and Level III centers, and based upon the volume of severely injured patients seen at those existing centers. The final score provides a guideline for the number of trauma centers needed in the trauma service area.

Kristan would like to use California as a testing site to evaluate the components of the tool and its usefulness. OSHPD and CEMSIIS will be used to collect some of the data. In addition, information needs to be obtained from LEMSAs to complete the process. A small group will discuss process to include:

Kristan  
Bonnie  
Christy Preston (LA)  
Katy Hadduck (Ventura)  
Michelle Moss (SSV)

### H. ACS Consultation Visit Report – Bonnie, Dr. Mackersie

The ACS visit was in San Diego March 22<sup>nd</sup> – 25<sup>th</sup>. The consultation team included:  
Robert J. Winchell, MD, FACS; Trauma Director, New York-Presbyterian Med. Cntr.  
Shelly D. Timmons, MD, PhD, FACS; Neurosurgeon, Geisinger Med. Center., PA  
Kathy J. Rinnert, MD, MPH, FACEP; Emergency Medicine, University of Texas, Dallas  
Drexal Pratt; State EMS Director (retired), North Carolina  
Jolene R. Whitney, MPA; State Trauma System Manager, Utah  
Nels D. Sanddal, PhD, REMT (ACS technical advisor)  
Jane W. Ball, RN, DrPH (ACS consultant)

The team provided a summary of its key findings on the 25<sup>th</sup> as follows:

**Injury Epidemiology:** Create an injury report template for LEMSAs and coordinate with CDPH Epidemiological Center.

**Statutory Authority:** Revise regulations to be less permissive in certain areas and consistent with State Trauma System Plan; provide for minimum operational standards based on size and resource capabilities delineated by the LEMSAs.

**System Leadership:** Establish basic quality and activity reporting standards for LEMSAs; better define the structure and charge of the trauma regions to solidify their role in the State trauma system.

**Coalition Building and Community Support:** Roll out a media campaign and use any opportunities to educate the public on the State trauma system

**Trauma System Plan:** Obtain approval for the State Trauma Plan.

**Financing:** Seek stable and sustainable funding to support state system planning, oversight, and evaluation; work with local agencies to report on cost and value of the system emphasizing the importance of maintaining readiness.

**Definitive Care Facilities:** Ensure uniform criteria for Trauma Center designation by the LEMSAs, based on a needs assessment; exercise the authority to collect data from all acute care facilities receiving trauma patients.

**System Evaluation and Quality Assurance:** Adopt the draft State Performance Improvement and Patient Safety Plan; monitor performance measures, especially timeliness to care and address trends in deviation of care; utilize CEMIS data for reports (despite limitations of completeness and quality)

The EMS Authority will be provided a draft report in May to check for inaccuracies and then the final report should arrive in June.

**I. Revision of Trauma Regulations – Bonnie/Dr. Mackersie/Cathy Chidester**

Key issues being addressed:

- ACS consultation/verification requirements for Level I-III/Peds I/II
- Non-trauma facility participation
- Streamline Trauma Plan/Annual Report requirements
- System Evaluation: role of EMSA, LEMSA, Trauma Center
- Population restrictions for new designations
- Update Level IV requirements

Getting close to putting committee together

**J. Report on San Francisco Trauma Summit – Bonnie**

7<sup>th</sup> Trauma Summit information on EMSA website

June 7<sup>th</sup> and 8<sup>th</sup>

Marines' Memorial Club

**K. Re-Triage Study Update - Bonnie**

9 Level I Trauma Centers participating

Working with Kristan S. on questions to ask the system re: re-triage

Compiling appropriate data elements to query

**L. Next Meeting/Conference Call**

Bonnie will send out a Doodle for a conference call