



Trauma Advisory Council

September 21, 2010

3:00 p.m.

Minutes

MEMBERS PRESENT

Dr. Victor Williams
Dr. Charles Mabry
Dr. Clint Evans
Dr. Ronald Robertson
James Carter
Colonel Winford Phillips (represented by Capt.
Gloria Cook)
Dr. Paul Halverson (represented by Donnie
Smith)
K. C. Jones
Dr. Barry Pierce
R. T. Fendley
Robert Williams
Ron Peterson
Terry Collins
Robert Atkinson
Dr. Lorrie George

GUESTS

Dr. J. Booker
Terry McCormack
Jerry Duncan
Bo Ryall
Carla McMillan
John Recicar
Ronald Russell
Barbara Riba
D'borai Cook
Dr. Michael Sutherland
Carol Cassil
Joe Hennington
Donna Parnell-Beasley
Theresa Jordan
Laura Guthrie
Denise Carson
Michael Smith
Ron Woodard
Jasper Fultz
Kim Hall
Pam Rolens
Dr. Tim Callicott
Greg Hammons

MEMBERS ABSENT

Dr. Mary Aitken
Dr. John Cone
Carrie Helm
Vanessa Davis
Dr. James Graham
Jeremy Stogner
Jon Wilkerson
Dr. Alvin Simmons
Ruth Baldwin

STAFF

Donnie Smith
Bill Temple
Brian Nation
Lynda Lehing
Marie Lewis
Norajean Miles Harrell
Lee Crawford
Sue Ellen Peglow
Margaret Holloway
Joe Martin
Austin Porter
Diannia Hall-Clutts
Jim C. Brown
Dr. Todd Maxson
Renee Patrick
Rick Hogan
Gregg Brown

GUESTS (continued)

Vornetta Compton
Tim Vandiver
Don Adams
Kathy Gray
Jeff Tabor
Terry Bracy
Carla Jackson
Jon Swanson
Keith Moore
Myra Looney Wood
Talmage M. Holmes

I. Call to Order – Dr. Ron Robertson, Acting Chairman

The Trauma Advisory Council (TAC) meeting was called to order on Tuesday, September 21, 2010, at 3:05 p.m. by Dr. Ron Robertson.

II. Welcome and Introduction

Dr. Robertson welcomed all guests and everyone introduced themselves.

III. Approval of Draft Minutes From the August 17, 2010 Meeting

The TAC reviewed the August 17, 2010 minutes. Dr. Robertson made a motion to approve the minutes. The motion was seconded by Dr. Mabry. The minutes were approved.

IV. Trauma Office Report – Bill Temple

Staffing

Mr. Temple said that 16 of 18 positions are now filled. Since the last meeting 3 new employees have come on-board: Margaret Holaway, Registered Nurse; Brian Nation, Health Program Specialist; and, Lee Crawford, Health Program Specialist. Jacquelyn Dillard is the new Budget Analyst (the 17th position) and will start Monday, October 4th. The final position is for our last Registered Nurse. It has been reposted for the third time. We expect to take swift action to fill this Registered Nurse position.

Sub-grants

There was a slowdown in grant payments at the end of FY 10 (ended 6/30) due to normal contract support office activities. New purchase orders were done by September 1 to allow those hospitals, EMS providers & training sites which were not paid in FY 10 to receive FY 10 money in FY 11. As a result, payments have begun again. Current statistics are as follows:

Hospitals: 73 intent applications (71 previously) (CrossRidge Hospital in Wynn and Dallas County Hospital are the two additions)
66 grant packages received (65 previously)
55 paid (48 previously)

EMS providers: 118 eligible (same)
116 grant packages (same)
73 paid (62 previously)

EMS training sites: 33 eligible (5 declined – same)
26 grant packages – (same)
16 paid (11 previously)

Call Center

ADH executed a contract with MEMS and the contract went through legislative review with no questions. We expect an October 1st contract start date. The call center and at least part of the

communications system are expected to go live on January 1, 2011.

Communications System

An independent contractor came in and met with ADH executive staff regarding their findings on VHF vs. AWIN. According to the contractor's written report, the "AWIN solution appears to be the most viable considering operability, schedule, and risk." We are in the process of nailing down the cost comparisons between the options.

Injury Prevention

The Injury Prevention sub-grant to the Injury Prevention Center at Arkansas Children's Hospital also went through the legislative review with no questions so we can expect an October 1st start date.

Hospital Designation Site Surveys

There will be a press conference at the State Capitol regarding designation of UAMS, Jefferson Regional and The Med on Tuesday September 28th at 1:30 p.m.. All are invited to attend.

Trauma Regional Advisory Councils (TRACs)

The Southwest Arkansas TRAC initial meeting is set for Wednesday, September 29th from 12:00 – 2:00 p.m. at Christus St. Michaels in Texarkana, Texas..

V. ADH Medical Consultant Report – Dr. Todd Maxson

Dr. Maxson thanked Bob Williams for setting up the initial TRAC meeting in northwest Arkansas. He reminded the TAC of the important role of the TRACs in providing designation protocols to the Call Center. The next meeting is October 20th for NWATRAC..

We have received two new requests for designation site visits. Arkansas Children's Hospital has requested dates of November 8th and 9th. Baptist has also requested a site visit and we are working on dates to get reviewers lined up. The volume of questions on the designation process from around the state indicates we are making exciting progress.

Dr. Maxson reminded everyone of the interim status of "in pursuit" designation and that the significance is that hospitals will continue to receive patients and comply with the rules.

Dr. Maxson said he gave a presentation at Yale last week and that people around the country are aware of what is going on in Arkansas. At the symposium, he provided a call center update and said they were excited about the progress Arkansas had achieved in a short period of time.

VI. Trauma Registry – Marie Lewis

- We are continuing to register hospitals and assist users with logging on and data entry
- The next step is getting Report Writer for the central site up and running, projected for early October
- The second AAAM AIS course was held September 1-2; the third and final course is currently being scheduled for March 2011
- There are still a few seats left for the ATS Trauma Registrar Course scheduled for October 7-8

- The DI User Group meeting is scheduled for October 13-15 in Nashville, Tennessee

VII. TAC Subcommittee Meeting Reports –

(Note: summaries are attached; only official action is documented in this section)

- Finance Subcommittee (Dr. Ron Robertson – Chair) (did not meet) – No report.
- EMS Subcommittee (Dr. Clint Evans - Chair). (see attached report)
- Injury Prevention Subcommittee (Dr. Mary Aitken – Chair) (did not meet) – No report.
- Hospital Designation -- (Jamie Carter) (see attached report)
- TRAC Subcommittee (Dr. Charles Mabry – Chair) (did not meet) - No report.
- Trauma Registry Subcommittee – (did not meet) (did not meet) – No report.

VIII. Next Meeting Date

The next TAC meeting will be held on Tuesday, October 19, 2010, at 3:00 p.m. The meeting will be held in Room 906 (Boardroom) at the Freeway Medical Building.

IX. Adjournment

Without objection, Dr. Robertson adjourned the meeting at 4:01 p.m.

Respectfully Submitted,

Paul K. Halverson, DrPH, FACHE
Secretary Treasurer of the Trauma Advisory Council
Director and State Health Officer, Arkansas Department of Health

EMS Subcommittee Meeting Summary September 21, 2010

The EMS subcommittee met on September 21, 2010. Our first topic of discussion was the communication system. Two guests, who work with the AWIN system, were in attendance. The consultant retained by the Dept of Health has recommended the AWIN radio option over the VHF option. Either option will involve much more expense than originally anticipated. The present recommendation would entail the state purchasing 600+ mobile units to be installed in every licensed truck in the state. Maintenance of the units would be the responsibility of the service. The radios would only be for use in contacting the call center, and not for dispatch or other day-to-day operations of the service. However, the radios could be used for disaster response. There are still many issues to resolve, but after much discussion, the group was unanimous that the AWIN option seems to be the best.

The deliverables for the current grant cycle were reviewed. These had already been discussed by the group and approved by the TAC. However, some of the wording was somewhat vague and open to interpretation. This led to marginal compliance with some of the deliverables last year, and it was felt this wording should be made more clear.

To receive service grants, services must “participate in the statewide trauma registry by submitting all electronic data records for calendar year 2010 EMS runs to the Section of EMS by March 31, 2011.” Unfortunately, some services submitted only partial run data last year, with some submitting as few as one run prior to the deadline. However, these services will likely receive full funding this year, but the above wording should eliminate this problem for next year.

A new deliverable was added to address the issue of leaving a pre-hospital summary with the patient at the receiving facility. We had previously added a deliverable to leave the full PCR with the receiving facility within 24 hours. This timeframe was changed to 72 hours. However, if it is not possible to leave this prior to leaving the hospital, we would ask the service to at least leave a “short form,” with the data pertinent to immediate patient care. This form is currently under development, and the use of this form was included as a new deliverable to be used at such time as the form is available.

We discussed a deliverables page to be used for the EMS training sites. This year, sites may use their funds for student scholarships, books, or equipment. However, we would like sites to use at least 60% on scholarships.

There were other items on the agenda which were tabled until the next meeting due to time constraints.

Designation Subcommittee
Meeting Summary
September 21, 2010

The Designation Committee of the Trauma Advisory Council met on August 17, 2010 at 10 am to discuss several designation issues for Arkansas Hospitals. Two out of state hospitals (Missouri) presented intent applications for considerations. Discussion revolved around how out of state hospitals would be considered for inclusion in the State's trauma system. Based on two other hospitals already considered for inclusion are The Med and LeBonheur Children's Hospital, both based out of Memphis, TN. It was concluded that more data needed to be collected with respect to volume of Arkansas residents seen in the two Missouri hospitals. It was further concluded that two factors would be applied toward consideration of any out of state hospital, including:

- 1) Level of financial participation would be indexed against the average number of Arkansas trauma patients seen in Level I, II, and III hospitals in Arkansas, and
- 2) The trauma hospitals included in each region of the State of Arkansas needed to approve the out of state hospital to be included in that particular region.

There was also further discussion about expanding the Designation Committee in order to review survey findings of hospitals seeking designation. The purpose of the committee expansion is due to the volume of survey reviews that will occur as hospitals seek to designate, the workload will need to be taken on by the committee. Also, to keep from any conflict of interest, the committee expansion is necessary. Carter and Maxson committed to submitting names to Temple for consideration.

The committee was presented with a proposed equipment list for pediatric trauma patients. Trauma rules and regulations stipulate that appropriate pediatric equipment is required by hospitals seeking trauma designation, but the rules and regulations are silent on specific equipment. The committee was asked to consider the list of equipment before next month's meeting. The intent is to approve the equipment list at next month's meeting, then post the recommended equipment on the on-line FAQ.

Lastly, a two and a half page list of clarification questions was submitted to the committee for consideration. Each question was addressed and is attached to these minutes. Temple stated that the on-line FAQ would be updated with these being added.

There being no further business brought before the committee, the meeting was adjourned at 11:05 am.

Jamie Carter