



Trauma Advisory Council

January 17, 2012

3:00 p.m.

Minutes

MEMBERS PRESENT

Dr. Mary Aitken
Dr. Charles Mabry
Dr. Barry Pierce
Dr. Janet Curry
Dr. Paul K. Halverson
Dr. Alvin Simmons
Dr. Clint Evans
Dr. Viviana Suarez
Dr. Michael Pollock
Kathryn Blackman
Christi Whatley
Terry Collins
R.T. Fendley
Jon Wilkerson
Carrie Helm
Freddie Riley
K.C. Jones
Colonel J.R. Howard (rep. by
Capt. Mark Allen)
Myra Looney Wood
Keith Moore
Robert T. Williams
John E. Heard

MEMBERS ABSENT

Dr. John Cone
Dr. Ronald Robertson
Dr. Victor Williams
Dr. James Graham

GUESTS

Dr. Michael Sutherland
Dr. James Booker
Dr. Marney Sorenson
Dr. Charles Mason
Jon Swanson
Denise Carson
Kathy Gray
Theresa Jordan
John Recicar
Michelle Mirtha
Milton Teal
Cheryl Vines
D'borai Cook
Tim Vandiver
Jeff Tabor
Julia Ponder
Cathee Terrell
Joe Hennington
Monica Kimbrell
Robert Fox
Tonja Kelly
Faith Lyke
Johnnie Schaumleffel
Donna Parnell-Beasley
Sarah Bemis
Don Adams
Shelly Wildbur
Carla McMillan
Laura Guthrie
Scott Ryan
Carla Jackson
Cindy Metzger
Donald Reed

GUESTS (Continued)

Debbie Moore
Ron Crane
Jasper Fultz
Dennis W. Ashley
John Cannady
Michael Manley
Chris Cauthen
Tonya Baier
Lisa Williams
Gary Meadows
Charles Grinder
Rodney Walker
Sarah Bemis
Shelly Marty
Claudia Parks

STAFF

Dr. Todd Maxson
Donnie Smith
Bill Temple
Renee Patrick
Renee Mallory
Diannia Hall-Clutts
Joe Martin
Marie Lewis
Rick Hogan
Austin Porter
Paula Duke
Jim C. Brown
Greg Brown
Melissa Foust
Norajean Miles-Harrell

I. Call to Order – Terry Collins, Presiding

The Trauma Advisory Council (TAC) meeting was called to order on Tuesday, January 17, 2012, at 3:00 p.m. by Terry Collins.

II. Welcome and Introductions

Ms. Collins welcomed all guests and members and asked everyone to introduce themselves. As part of the introductions, Bill Temple recognized our guests from the Georgia Trauma Commission: Dr. Dennis W. Ashley, Chairman, and John Cannady, Trauma Communications Center Coordinator.

IV. Review of One-Year TAC Goals

Mr. Temple discussed the goals and objectives from the Strategic Planning Retreat meeting in September, 2011. A hard copy progress update was distributed to TAC members at the meeting. He asked that members review the list and note the items for which they have responsibility.

V. Trauma Office Report – Bill Temple

Personnel

- We have hired a Section Chief level Grant Manager for the CORE VIPP grant. Teresa Belew, former Executive Director of Mothers Against Drunk Driving, comes to us with injury prevention experience and will begin work on Monday, January 23, 2012.
- Tatiana Hicks, one of our Administrative Specialists, will leave as of next Monday. We will immediately repost her position.
- We will re-advertise our Public Health Educator position once Teresa Belew is on board and becomes acclimated to the job.

Hospital Designation

- Thirty-two hospitals have now been designated, including five Level I, four Level II, seven Level III and 16 Level IV trauma centers. We presently have eight hospitals that have had site surveys, but have not yet been designated. Six were presented at the Designation Subcommittee earlier today.
- We also have 21 hospitals scheduled for site surveys prior to June 30, 2012. This includes Washington Regional and three other Northwest Region Level III hospitals.

Contracts

- The education contract was successfully “reviewed” by the Arkansas Legislative Council Review Committee last Tuesday, January 10, 2012. We did field questions from three legislators and prepared responses for Rep. Tracy Pennartz from Ft. Smith. The

Legislative Council seemed very supportive of our collective efforts. The contract start date is February 1, 2012. Dr. Michael Sutherland is Chairman of the Board of the Arkansas Education and Research Foundation, Inc., which was awarded the contract. We will be focusing on 13 courses for physicians, nurses and EMS personnel. Through May, 2012, we already have 18 courses scheduled. Dr. Sutherland showed several PowerPoint slides to introduce the Foundation and share its structure. The website “www.aterf.org” is expected to go live by February 1, 2012.

- The Quality Improvement Organization (QIO) contract bids were unsealed on Monday, January 9, 2012. Two vendors responded and the review team has been selected. The review team members will receive instructions from ADH’s Contract Support Office tomorrow. The expected start date for the QIO contract is May 1, 2012.
- The rehabilitation contract was handled with a simple Memorandum of Agreement with the Arkansas Spinal Cord Commission since it is a state agency. It began January 1, 2012 and is funded at \$204,400 through the end of the fiscal year.

Injury Community Planning Group (ICPG)

The second meeting of this group is scheduled for January 26, 2012. The ICPG will work closely with the Injury Prevention and Control Branch at ADH under the CORE Violence and Injury Prevention Program grant. Mr. Temple asked those interested in participating in this group to contact him.

We are working on a mini-grant solicitation process with Arkansas Children’s Hospital to have grants around the state in an amount up to \$5,000 for entities to engage in injury prevention education and interventions. Instructions for applying for these grants will be on the ADH and ACH websites.

Other

Mr. Temple reminded those in attendance that we have new conference call numbers to be used for the TAC and subcommittee meetings. He cautioned everyone to please pay attention to the meeting notices for the correct conference call numbers.

Call Center Report – Jeff Tabor

For last year, our first year in operation, we coordinated 13,188 trauma patients. Of that number, 8,221 were “scene calls” and 4,967 were hospital-to-hospital transfers. Of the “scene calls”, 2,079 (41%) were major and moderate trauma, and of the hospital-to-hospital transfers, 3,384 (41%) were major and moderate trauma. The average time of acceptance for major trauma patients is six minutes and 16 seconds. For those suffering moderate trauma, the average time is seven minutes and 36 seconds.

Additional discussion focused on:

- pattern changes

- gathering data to evaluate
- delays and transfers longer than 2 hours
- transfer denials

Dr. Halverson asked about tracking the unavailability of designated trauma centers and further requested that we have a dashboard report at each meeting to monitor and evaluate.

VI. ADH Medical Consultant Report – Dr. Todd Maxson

Dr. Maxson, in looking at the strategic plan objectives from September, said there are well over 30 items identified and eight of them are long-term goals. Of the remaining goals, about a quarter of them are completed and accomplished. This still leaves much to accomplish. One of the major items is to update our Trauma Rules. Dr. Maxson solicited participation, specifically from nurses, physicians and administrators, to go through the Level III and Level IV rules in preparation for consideration by the Designation Subcommittee. Participants will need to meet three or four times over the next couple of months.

He reminded everyone of the significance of EMTALA to the success of our Trauma System. We could track ICU availability through the dashboard and we do need to work toward a standardized dashboard report. We will need to work to determine what data to track in regard to benchmarks. Dr. Mabry suggested we decide data based on benchmarks that subcommittees wish to track and evaluate. We will also want to coordinate ATCC reports with hospital TRAC reports so we can link them together for meaningful evaluations.

Dr. Maxson reminded the TAC that other sources of revenue have been discussed, specifically activation fees, on the hospital side. We still need to consider and evaluate this possibility for trauma team activation. R. T. Fendley shared that at his hospital they are seeing some positive movement by at least one corporate payer.

VII. Trauma Registry – Marie Lewis

- On December 15, 2011, we had a meeting with trauma registrars from around the state. Thirty-four hospitals were represented by the 65 people who attended. Agenda items included: inclusion criteria, data dictionary updates, state audit filters, performance improvement and new processes/functionality for 2012. We received very positive feedback. We expect to hold this meeting annually. We will hold quarterly conference calls via Tandberg to cover appropriate topics, as needed.
- The final Performance Improvement Plan and filters have been posted to the ADH website with links on both the registry and hospital designation pages.
- The next submission deadline for fourth quarter 2012 is March 1, 2012.

VIII. TAC Subcommittee Meeting Reports

(Note: Summaries are attached; only official action and additional information provided to the TAC is documented in this section.)

- Finance Subcommittee (R. T. Fendley – Chair) (Committee did not meet) (No report)

Mr. Fendley shared that we are trying to learn from our colleagues with the Georgia Trauma Commission regarding the surveys and methodologies they used to understand the cost of trauma care. Don Adams, Arkansas Hospital Association, is assisting in this process.

- Hospital Designation (Terry Collins, Chair) (See attached report)

Ms. Collins reported that several hospitals came before the Subcommittee for designation recommendations, and that the following hospitals were recommended for designation at the stated levels:

- Community Medical Center of Izard County, Calico Rock, AR (Level IV)
- Baptist Health Medical Center, Heber Springs, AR (Level IV)
- Mercy Hospital Turner Memorial, Ozark, AR (Level IV)
- Lawrence Memorial Hospital, Walnut Ridge, AR (Level IV)
- Johnson Regional Medical Center, Clarksville, AR (Level III)
- Magnolia Regional Medical Center, Magnolia, AR (Level III)

These recommendations will be sent to ADH for approval. The Subcommittee also addressed one FAQ regarding the question, “Can a hospital seek trauma center designation utilizing core surgeons?” The Subcommittee defined core surgeons as those surgeons who take 60% of all trauma call. Furthermore, the hospital must have a method of keeping the non-core surgeons in the loop regarding performance improvement issues and that those non-core surgeons attend peer meetings when cases involve their patients. In other words, do all surgeons have to come to the multi-disciplinary peer review? It is the Subcommittee’s recommendation that the core surgeons (as designated by the hospitals) are the ones that must attend 50% of the meetings, with the consideration that a good action plan process is in place. This FAQ will be placed on the ADH website.

- EMS Subcommittee (Dr. Clint Evans - Chair) (See attached report)

Dr. Evans reported the Subcommittee met and that they have drafted by-laws for a joint committee that includes members of the TAC EMS Subcommittee and the EMS Advisory Council. EMS data submission continues and we have 302,000 runs submitted year-to-date. The Subcommittee is still working to adjust the time frame for data submission deadlines. Going forward, the reporting period deadline will be 30 days after the end of the month. Work continues with EMS services to validate submitted data. The new by-laws hopefully could be approved by both bodies in February. It was also noted that ground radios are great and that we are still working on the helicopter communication issue.

- Rehabilitation Subcommittee (Jon Wilkerson – Chair) (Did not meet in November)

Mr. Wilkerson reported that we will be holding a trauma rehabilitation symposium on June 14 -15, 2012.

- TRAC/QI Subcommittee (Dr. Charles Mabry – Chair) (Did not meet)
- Injury Prevention Subcommittee (Dr. Mary Aitken – Chair) (Did not meet)

Dr. Aitken said they will next meet on March 15, 2012.

IX. Other

Ms. Collins passed around a sign-up list for those TAC members interested in being on a specific subcommittee. It was stated that all subcommittee members do not need to be on the TAC. Further discussion included whether subcommittee chairs must be TAC members. Dr. Halverson advocated that Subcommittee Chairpersons be members of the TAC. After much discussion, Dr. Mary Aitken made a motion that Subcommittee Chairs either be members of the TAC or, if not a TAC member, appointed by the TAC Chairman, but that all members of subcommittees do not have to be members of the TAC. Also, voting members of Subcommittees do not necessarily have to be members of the TAC. Dr. Michael Pollock seconded the motion and it was approved.

Mr. Temple mentioned that we may want to have both voting and non-voting members of the subcommittees. He specifically asked Subcommittee Chairpersons to provide us a list of their subcommittee members.

Ms. Collins reminded everyone that the Arkansas Trauma Update Conference 2012 will be on April 13 & 14 at the Wyndham Hotel in North Little Rock. It will be simulcast both from that location and Fayetteville. There is limited space.

Dr. Halverson reminded the TAC that, although the trauma system funding is a high priority for our Governor and the Legislature, the budget appropriation is an annual process. Dr. Halverson is presenting the pre-legislative annual budget on Thursday.

X. Next Meeting Date

The next meeting will be Tuesday, February 21, 2012 at 3:00 p.m. The meeting will be held in Room 906 (Boardroom) at Freeway Medical Tower.

XI. Adjournment

Without objection, Terry Collins adjourned the meeting at 4:30 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

Meeting Title Designation Sub-Committee of the TAC

MINUTES 01-17-2012

FREEWAY MEDICAL BUILDING – BOARD ROOM

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| MEETING CALLED BY | Terry Collins |
| TYPE OF MEETING | Sub-Committee |
| FACILITATOR | Terry Collins |
| NOTE TAKER | Diannia Hall-Clutts |
| COMMITTEE MEMBER ATTENDEES | Terry Collins, Dr. Micheal Sutherland, Dr. Jim Booker, Dr. Barry Pierce, Donna Parnell-Beasley, Alvin Simmons, Kathy Blackman |

Agenda topics

WELCOME & MINUTE APPROVAL

TERRY COLLINS

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| | Terry Collins welcomed everyone. A motion to approve the November minutes was made by Dr. Barry Pierce and seconded by Donna Parnell-Beasley. The motion carried. |
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| | HOSPITAL INTENT APPLICATIONS | TERRY COLLINS |
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| DISCUSSION | Changes in the Shared Level III Drew Memorial lost a surgeon; they have requested to go back to a level IV and have submitted their application, Chicot has submitted their intent application to become an independent level III. Ashley has not submitted their intent applications. Ashley needs to understand they will need to submit an application for a Level IV and not continue working under the current Level III intent application. A motion was made by Dr. Sutherland to approve and also go ahead and approve Ashley as a Level IV so that this does not have to come before this committee again. Dr. Barry Pierce seconded, the motion carried. |
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| | FAQ – Core vs No-Core Surgeons | TERRY COLLINS |
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| DISCUSSION | Question: We have a couple of our general surgeons that only cover a few days of call for us. These surgeons, who infrequently cover call, are finding it difficult to attend 50% of our multi-disciplinary peer review meetings. Is there any provision for these “non-core” surgeons who cover call occasionally in regards to meeting attendance? Answer: Non-core surgeons will be exempt from a meeting threshold requirement but must be present if their case is being reviewed. There needs to be a mechanism to ensure continuity of information from TQI Meetings to those non-core surgeons to make sure they have access to those meetings. Dr. Booker made the motion which was seconded by Dr. Pierce, motion carried. |
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| | RULES AND REGULATIONS - REVISION | TERRY COLLINS |
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| DISCUSSION | Tabled till the February meeting |
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| | NEW BUSINESS | TERRY COLLINS |
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Marie Lewis spoke to the group about the approved process to provide data to the reviewer before the designation site visit. She asked how the reviewers would want them to provide the data to them. The first list that will be sent will be a list of charts with registry numbers that can be emailed out. The second list will have patient identifiers, diagnoses, and other confidential information, it can be emailed but has to be encrypted and password protected. She stated that they could create a user account on the web portal and the reviewers can go there to get the confidential information. The question was asked if Department of Health has a secure email account that they could use. Everyone liked the secure email account route.

We need to start look at the denials on transferring patients, hospitals are getting dinged for longer transfer time on isolated fractures and other minor patients. We need to ask ATCC for this data. If they are not capturing elements at the ATCC that are sufficient to define what would be acceptable or unacceptable delay to drive the ATCC to capture that data better. So that we could report on the minor, moderate or severe. See if it is a transportation issue or other reasons.

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| ADJOURNMENT | Designation Sub-Committee meeting adjourned- Closed Hospital Designation Discussion and Review meeting to follow. |
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| OBSERVERS | John Recicar, Diannia Hall-Clutts, Margaret Holaway, Paula Duke, Milton Teal, Marie Lewis |
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| NEXT MEETING | February 21, 2012 @ 10:30-12:00 a.m. |
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EMS Trauma Subcommittee
Meeting Summary
December 13th, 2011 - 3:00 PM

The EMS Trauma Subcommittee met on December 13th at 1500. There were 16 people in attendance, with 3 people on the conference call.

Renee introduced Claudia Parks-Miller with the Arkansas Trauma Education and Research Foundation. This is the organization that has contracted with the state to provide trauma education. We discussed the type of educational offerings that the ATERF will offer for EMS providers. Claudia solicited feedback on what we felt would be beneficial.

We then discussed the CISM project. There had been discussions about utilizing the ATERF to provide CISM training. However, the thought is that we need to implement a CISM network, and not simply provide a class. It was decided the CISM project would be better served as a special project, separate from the ATERF. We will now present the idea to the Finance Subcommittee in hopes of moving forward with an RFP for a provider.

Trauma radios for air services were again discussed. It appears the cost estimate has now increased to around 2.8 million for 33 helicopters. We will hopefully know more in the future.

We discussed EMS data submission again. To date, there have been around 269 K runs submitted to the state. Since our last meeting, there had been some concern from many involved with the TAC that some services were still not submitting data. Greg updated us on the process and assured us this is improving. The current deliverable states that all run data for 2011 must be submitted by March 31, 2012. We discussed shortening this time frame for the FY13 grants.

The bylaws have been presented to the TAC, and they have been sent to the Health Dept Lawyers for review. We discussed the idea of increasing the voting membership to 15, but it was decided to keep it at 13.

Myra provided us with the current and proposed list of state EMS PI filters. Some of the items were unavailable for review, but the list will be sent out by e-mail and reviewed at our next meeting. Greg will let us know which of these items can be obtained from the state EMS data.

The Finance Subcommittee has tasked us with providing a cost analysis for providing care to trauma patients. Myra presented a proposal to address this issue. This report included three goals. The first two goals were felt to be appropriate, while the third goal was felt to not be feasible. It was also decided it would be best for this reporting to be voluntary and not tied to a deliverable. A representative sample should be adequate to address the issue.

We briefly discussed the FY 2013 budget. We will focus on completing this at the next meeting.

**Trauma Advisory Council
Rehabilitation Subcommittee**

Meeting Minutes

Time and Date: 1:30 PM, December 1, 2011

Freeway Medical Tower
Room 902
5800 West 10th St.
Little Rock, AR 72204

In Attendance: Jon Wilkerson, (TAC), Dana Austen (BIA-AR), Marie Lewis (ADH), Bill Temple (ADH), Letitia DeGraft-Johnson (ADH), John Bishop (BHRI), Betty Watts (ADH), Stacy Sawyer (St Vincent Rehab), Vicki Finch (St Vincent Rehab). Via conference call: Yousef Fahoum (BIA-AR).

Welcome and Introductions: Meeting called to order at 1:32 PM by Jon Wilkerson.

ADH update

Marie Lewis reported the Trauma Registry updates will include delays to facility. The use of AMPAC and FIM scores will continue to be discussed.

Bill Temple reported 29 hospitals have been designated as centers and about 30 are set for site surveys before the end of March 2012. A contract with Motorola has been secured to install AWIN. Trauma Radios in about 530 ambulances around the state. There are 33 helicopters in the state but the expense is huge for installation which poses an issue with funds so other options will need to be looked into. A position for Injury Prevention Grant Coordinator will be posted. In the next few months a position for an Injury Prevention Section Chief will be posted as well. The contract between the Arkansas Department of Health and Arkansas Spinal Cord Commission is ready for Cheryl Vines to sign. A meeting was held at ADH 11/30/11 regarding the budget that clarified funds have to be funneled to ASCC on a reimbursement basis. This poses an issue for the start up cost that is needed for ASCC to undertake the project. Options were discussed at the meeting as to how to make sure ASCC gets funding they need to accept these responsibilities. Under the Core Grant an Injury Community Planning Group (ICPG) will be formed to set the policy for the state. Yousef Fahoum volunteered to be on the group and anyone can be on the group to provide input.

Project Workgroups

-Education: John Bishop reported a meeting was held and a workshop scheduled for June 14-15 that will focus on RNs, LPNs, and SWs. They have the capacity to hold about 300+ at Baptist. The workgroup will start with a national key note speaker and will cover SCI, prosthetics, assistive technology, brain injury, trauma and will have a SCI case study ending with an address from Dr Maxson. It will offer about 10-11 CEUs and cost will be nominal (free to \$20) to cover expense of national keynote, local travel and the meal. The next meeting is scheduled for 12/9/11 @ 10:00AM

-Systems Analysis: Yousef Fahoum reported he's formed a team that includes various disciplines to hit all the areas contained within an ideal rehab system. The plan is to develop a survey of minimum data to be collected at each site as to accurately compare each site. Any additional information will be welcomed as well. This group will be able to present preliminary data at January meeting. Reimbursement/funding will be in the core set of questions.

Betty Watts reported under the Core Grant a brain injury analysis has to be completed. There is a national effort to look at the Glasgow Coma Scale to attach to an outcome measures to link funds per level of severity.

BRI is going to Craig in Colorado in January 2012 and Jon Wilkerson suggested having a TAC member attend as well. They will be evaluating set up and patient care. Although funding for the facility is vastly different from anything we have here in the state, the processes can still be looked at to determine best practices.

-TBI Registry: Yousef Fahoum reported he will talk with Austin Porter soon.

-Financial: Jon Wilkerson reported he spoke with Dr. Gerben DeJong from Washington D.C. and discussed the college of surgeons report and the needs assessment that was performed here in the state. Dr. DeJong recommended 3 ways to address the financial burden. It may not be as hard as we initially thought. Dr. DeJong will be able to advise whoever we contract but he himself will not be able to complete the task. This should be done in the near future. The next meeting for the Finance Committee is scheduled for Tuesday, December 6, 2011.

-FIM: John Bishop reported he met with Cheryl Vines. She is looking at another rating system that will be better for long term outcomes. AMPAC is more reliable and easy to administer. It can be performed over the phone and can start in the acute care setting. It is administered by a computer program that includes over 275 elements but the computer is able to draw out relevant questions for that particular patient. It's more predictive of long term outcomes.

Jon Wilkerson stated that since it would be sometime before our next meeting He would like the project workgroups to stay in contact with him thru the end of the year before the January meeting. He would like an action plan from the chairs including what's been done so far and plans to proceed in the future. He would like it sent out before the next meeting.

The next meeting is set for January 26, 2012 @ 1:30.

No new business. Meeting called at 2:26PM.

Injury Prevention Subcommittee report to the Trauma Advisory Council 1-17-12

The subcommittee met last in December and will meet quarterly. Next meeting to be scheduled in mid-March.

Dr. Aitken updated the TAC on activities of the Statewide Injury Prevention Program (SIPP) subcontract. SIPP activities focus on areas identified in the needs assessment conducted in 2011. Stakeholders identified needs for training, technical assistance/communication, and funding as key areas.

Training:

An overview course entitled Injury Prevention 101 (IP 101) has been delivered 3 times to approximately 50 people. Overall feedback on the course has been favorable. Upcoming IP 101 classes are scheduled for January 27th in Texarkana, in February for Fayetteville and Forrest City, in March for El Dorado, Hot Springs and Hope. The Texarkana class currently has over 20 people registered to attend. This day-long course is free and ARNA, CHES, and EMT CEUs are available. Please contact Kristie Taylor at 501-364-3431 or ktaylor2@uams.edu for information or to schedule an IP101 class in your area.

A grant writing class was delivered in Dumas in December to 11 attendees with great response. The grant writing class is available upon request, please contact Kristie Taylor.

SIPP has been asked to participate in the EDs PLACE teleconference series on a semi-monthly basis. The next session will be given on January 26th at 7:10 at UAMS College of Public Health and via the telehealth network. Dr. Darrell Nesmith (UAMS Department of Pediatrics) will present on Concussions.

Technical Assistance:

SIPP staff are actively working throughout the state to provide information and resources to trauma affiliated organizations. Staff logged 100-150 contacts monthly in the past quarter.

The SIPP webpage will be located on the Ark. Dept. of Health website and at www.SIPP.arkansas.gov. This website should be up in February 2012 and will contain prevention activities as links to the trauma calendar, the SIPP newsletter, resource guides, fact sheets, and contact information for all SIPP staff.

The SIPP newsletter, "The Arkansas Safety Source" will be produced and distributed soon (possibly late February or early March).

SIPP Resource binders will be going out on Tuesday (Jan. 24).

IP Subcommittees have been established in all TRACs except for the Central Region. Gary Ragen is working with these subcommittees to review regional data and develop strategic plans for IP interventions.

Funding:

Injury prevention funds through ADH will be made available and an application process is being finalized.