

# Minutes

# Trauma System Oversight & Management Committee

September 7, 2006

Called to order at 11:00

Adjourned at 1:45

Location: The Place at Innsbrook

[www.vdh.virginia.gov/oems/trauma/traumacenters.asp](http://www.vdh.virginia.gov/oems/trauma/traumacenters.asp)

Meeting called by:  
Morris Reece

Chair: Morris Reece

OEMS Staff: Paul Sharpe, Jodi Kuhn Russ Stamm, Christy Saldana.

Attendees: Andi Wright, Barbara Hawkins, Betti Prentice, Carol Gilbert, Carol Smithson, Don Wilson, DJ Douglas, Elton Mabry, Kathy Butler, Kevin Dwyer, Leonard Weireter, Linda Sayles, Lisa Wells, Lou Ann Miller, Maureen Waller, Nancy Martin, Patrick Earnest, R. Bland Lawson, Sonia Cooper, Stanley Heatwole, Susan Ward, Valeria Mitchell

## Agenda Topics

### Introductions

No new attendees present

### Previous Meeting Minutes

The previous meeting minutes were distributed electronically prior to the meeting and in hard copy format at the meeting. An amendment to the minutes was requested to change the word acquired with affiliated under the Lynchburg General report. A motion to approve the minutes as amended was made by Barbara Hawkins and seconded by Don Wilson. The June 21, 2006 minutes were accepted as amended unanimously.

### Chair

The chair reviewed the Traumatic Injury Cooperative Program (TICP). Dr. Gilbert assisted in providing an update on the TICP. The TICP addresses the role of non trauma designated hospitals during a major/surge event that involves traumatic injury. The past federal driven focus was on providing education similar to ACLS, ATLS and ABA to traditional emergency medicine providers.

The TICP focus more on health care providers that care for patients beyond the emergency department and traditionally do not care for trauma patients. The TICP focuses on three patient types, the expectant (fatally injured), minor injuries that are anticipated to be discharged, and those patients that would be held waiting for transfer to definitive trauma care.

General guidelines, educational programs and materials are the expectant outcome of this effort.

### Trauma PI Committee Report

Don Wilson provided an update on the status of the Trauma PI committee. The TPI committee will be meeting immediately following this meeting. The agenda includes reviewing the aggregate trauma registry data that will be provided to regional TPI committees and the letter communicating the TPI process to all Virginia non designated hospitals.

### OEMS Report

An update on the status of the new trauma registry reporting tool was provided; it is projected to be released this month. OEMS has begun using output from the VTSR such as with site review preparation and an annual report.

The 27<sup>th</sup> Annual EMS Symposium will be held from Nov. 8-12 in Norfolk. An update on additional OEMS positions previously announced was provided.

Division of Trauma/Critical Care (TCC) update, several legislative updates have been proposed related to TCC. These updates generally pertain to updating language to the Patient Care Information System (PPCR/VSTR) and the Trauma Triage Plan. A proposed update to the "disclosure of medical records" language that is included with PPCR and the VSTR that will support last years progress with information sharing. One last potential legislative update is on the previously proposed Medevac Authority Bill. The key issues involved with developing a new Virginia Poison Control Network RFP were presented.

#### Update on Action Plan

The status of the goals listed in the Trauma Action Plan was reviewed without issue.

#### Trauma Fund Update

The revised Trauma Center Fund Distribution was presented in hard copy form and the changes reviewed with the Committee. This revision included significant changes describing how the funds are to be used and the reporting requirements on its use. Lengthy discussion was held on how there is a variation in where these funds are applied in individual institution. OEMS affirmed it's support in these funds be directed for use to develop and ensure trauma care and trauma programs are maintained and improved upon.

The revised Trauma Center Fund Distribution Policy will be sent to designated trauma center administrators, medical directors and program managers with a cover letter of explanation. As always it will be posted publicly on the OEMS web site.

#### TNC Report

The Trauma Nurse Coordinators met prior to this meeting. Topics of discussion included submitting to the state trauma registry electronically. There was consensus on submitting quarterly with at least a 60 day lag time from discharge to submission to the registry.

The TNC's are also committed to exploring a trauma nurse certification in Virginia and will work towards having additional information at the next quarterly meeting.

#### Trauma Center Updates

**Inova Fairfax-** three nurse practitioners have been hired and will be starting this month. Interviews continue for two additional surgeons and a neurosurgeon. Rafaat has accepted a position with NHTSA. Fairfax's trauma symposium will be held on November 3, 2006. Three papers and one poster will be presented at AAST.

**Riverside Regional-**A second trauma surgeon has joined the program. The trauma program is working with administration to get approval to add physician extenders to the program. A fourth neurosurgeon and an orthopedic surgeon have been added to the Riverside staff and a reorganization of the emergency department are all expected to benefit the trauma program. A program is being developed to assure the retention of nursing staff.

**New River Valley-**two additional orthopedic surgeons have been recruited, one performs spinal surg. Construction continues on a new building continues. The new building is being built for radiology and cardiology, but will free up space for the ED. A new 64 slice CT has been installed.

**Lynchburg General-**there is a new VP over the trauma program. Mr. E.W. Tibbs joins Lynchburg and already has a history with the Virginia trauma system with his previous employment. Lynchburg lost its ATLS coordinator and is working to replace that function. Funding from the Trauma Center Fund has been used for nursing education and outreach related to ATV injuries. Performance Improvement activities with regional EMS agencies will begin in October.

**Virginia Beach General-**the previous medical director stepped down, but remains on staff and a new medical director is in place. Improvements were made obtaining radiology results during off shifts. A trauma/critical care orientation program has been developed. VBGH is actively recruiting for an additional neurosurgeon and is pursuing restoring their level II status.

**Norfolk General-**the hospital is considering working towards achieving magnet status. The trauma program will have a dedicated coder and is already seeing the benefits of this position in improving charting. Burn patient volumes continue to increase, most are <25% BSA injuries. A new PA will be starting with the

program and the program will have two PA's upon return of another PA from active duty.

**Winchester**-has been working on education (TNCC, burn) and outreach. Staffing issues include a new ED director, a new orthopedic surgeon, and difficulty with ED staffing.

**CJW**-electronic triage has begun in the ED. ED staff attended a train the trainer course on burn injuries hosted by VCU. The PI committee has been more active since the JW site review and is current working on alert criteria.

**UVA**-the hospital has achieved Magnet status. The PI committee has work collaboratively with radiology and made improvements between programs. The pilot program that provides feedback to EMS providers is progressing well. They are moving ahead cautiously to assure compliance with HIPAA.

**Roanoke Memorial**-staffing update includes the addition of a PI coordinator, neurosurgeon, and a trauma surgeon. The trauma program has been sponsoring mock trauma scenarios with the residents and ED staff. A disaster drill with the airport has been scheduled for the near future.

**VCU Health Systems**-upcoming educational events include an ATCN class in Nov., trauma nursing symposium the day before the annual trauma symposium. Children's hospital has discontinued providing rehab, so the VCU in patient rehab has seen an increase in pediatric patients. An abstract and two posters are being submitted to AAST. Have submitted to the state trauma registry, still some issues to be resolved.

**Montgomery Regional**-having success implementing an internal trauma registry program and hope to begin to submit electronically to the state by next year. Staffing; continued efforts to recruit surgeons and two new nurse practitioners have been hired. EMS education being provided every other month.

**Southside Regional**-participated in a mass. Casualty drill where the scenario was a hurricane. Compliments paid to the local EMS response to the drill. A ground breaking ceremony was held for the new hospital. Preparing for this falls site review.

#### Old Business

None

#### New Business

None

#### Scheduled Meetings

##### **2006 Meeting Schedule**

##### **Full Committee Meetings:**

- Thursday, December 7<sup>th</sup>. "The Place"

##### **2007 Meeting Schedule:** (location to be announced)

- Thursday, March 1, 2007
- June part of trauma conference n/a
- Thursday, September 6, 2007
- Thursday, December 6, 2007