

State Trauma Advisory Subcommittee
April 1, 2014
Michigan College of Emergency Physicians (MCEP)
Lansing, MI

Attendees: Jeff Boyd, John Fath, Wayne VanderKolk, Diane Fisher, Tom Charleton, Mark Lowell, Deane Krajkowski, Pat Patton, Eileen Worden
Guests: Harvy Holland, Wayne Snyder, Theresa Jenkins, Bob Hale, Cheryl Moore, Deb Detto-Fisher, Diana Ropele, Todd Nickoles, Kevin Putnam

Call to Order:

Minutes from February 4, 2014 meeting: Approved

Old Business:

- ❖ EMSCC voted to approve Region 5 Regional Trauma Network Application.
- ❖ A Designation Sub (sub) committee of EMSCC has been proposed and language has been drafted. An application form to apply to be a Designation committee member is being developed for dissemination within the region.
- ❖ The revisions discussed at the February meeting were made to the following documents; Regional Professional Standards Review Organization, EMSCC proposed bylaws change, Michigan criteria for designation. STAC recommended approving the documents with the revisions.

New Business:

- ❖ Region 2 South Regional Trauma Network application was reviewed by Diane Fisher and Wayne VanderKolk. They had the following comments:
 - The RPRSO did not have a removal process defined for all members i.e. trauma facility program managers. The RPRSO voting process was not defined.
 - It was noted that the Regional Trauma Steering committee was a large group (17) and that it is challenging to gain consensus with a group that size. The requirement for unanimous voting could also be a barrier. Members of Region 2 South (on STAC) and the Regional Trauma Coordinator explained that the membership size was something the trauma centers support, as well as the approval voting. The region has a bylaws clause that allows for presumed consent if the member does not respond to a call for a vote.
- ❖ Region 8 Regional Trauma Network application was reviewed by John Fath and Jeff Boyd. They had the following comments:
 - Remove the Regional Trauma Coordinator as an ex-officio member of the RTAC.
 - Objectives were straight forward and achievable.
 - The committees were organized around the work of the objectives.
 - Notable was the objective under Medical Oversight Committee to address communication.

- Committee structure directly links with the deliverables from the HRSA rules, which is interesting and a good thing.
- The diagram of the committee structure should show that the RPSRO reports to both the RTAC and the Regional Trauma Network.
- The RTN meetings were open to the public, and the RPSRO reports there. This could set up some privacy issues and it should be a private report.
- The voting in the RPSRO was not clarified but the organization of the committee was noted to be a work in progress
- There was some clarification of the composition of the RTAC committee in that each MCA would send a representative, but there had to be certain makeup to the committee which was listed on that page. That was confusing and clarified at the STAC meeting by the Regional Coordinator
- Only two of the 16 hospitals in the Region were verified, and others should step up and participate

STAC voted to approve the applications with the suggested changes and forward them to the EMSCC for consideration at the May meeting.

- ❖ Verification/Designation Coordinator-The position was posted, there were 37 applications submitted and interviews will be held April 18.
- ❖ Image Trend Trainings will be held throughout the state the week of April 7-11, 2014. The focus is the hospitals that will be doing direct data entry into the registry. Trainings will be held in Lansing, Gaylord, Sault Ste .Marie and Baraga. Representatives from all the Upper Peninsula hospitals have registered for the trainings.
- ❖ The CDC will not be taking the lead in revising the Field Triage Guidelines (last revision 2011). Other national entities (NASEMSO, ACS) are considering taking it on.