

State Trauma Advisory Subcommittee
October 2, 2018
Bureau of EMS, Trauma & Preparedness
Lansing, MI

Attendees: Jeff Boyd, Robert Domeier, Beth Fasbinder, Allan Lamb, Joshua Mastenbrook, Dawn Rudgers, and Wayne Vanderkolk

Guests: Helen Berghoef, Doug Burke, Tammy First, Deb Detro-Fisher, Theresa Jenkins, Denise Kapnick, Bob Loiselle, Cheryl Moore, Lyn Nelson and Eileen Worden

Call Order: 9:01 a.m.

Minutes from August 7, 2018 approved.

Old Business:

- ❖ **2018 Trauma System Development Projects:** The projects have been completed and reports are being finalized and filed with the fiduciaries. A significant number of projects were focused on education and training particularly related to the bleeding control initiative Stop the Bleed®. There were some challenges with delays in getting paperwork through to initiate the projects, unanticipated delays in moving approvals through etc. This is expected to be the final round of system development projects. A final report of the 2017 Trauma System Development projects is on the website www.michigan.gov/traumasystem. A report on the 2018 Trauma System Development projects will be developed when information on the Final Reports is available.
- ❖ **Data Update:** The quarterly call for data was September 15. There were 6 hospitals that need to re-import their data. The Regional Trauma Coordinators are following up with those facilities. There are currently 284,496 incidents in the registry. The Trauma Section is reviewing options to address resources related to managing data, reporting and the registry. A State Trauma Registrar/Epidemiologist has been hired and will begin full time work later in the year.
- ❖ **Systems of Care:** The groups are meeting to develop recommendations for stroke and STEMI system which integrates with trauma.
- ❖ There was some discussion about Stop the Bleed® and how much material is retained and for how long. Other considerations included whether it would be effective for dispatch to be trained in giving instructions and if evaluation of the effectiveness of the training available.

Designation Report:

- ❖ Currently, 78 facilities are designated, 8 site visits have been scheduled through January, including two on-site focused reviews. There are 37 hospitals in the queue waiting for a site visit. The Designation Subcommittee meets next on November 13th and will be reviewing and discussing 4 in-state designation applications and one focused review report.
- ❖ A new reviewer training was held on September 24, 2018 in Lansing. 30 new reviewers were trained. A big thank you to Dr. Wayne VanderKolk, Dr. Gaby Iskander, Amy Koestner, Chris McEachin and Sherri Veurink-Balicki for their assistance in planning and presenting at the training. The training focused on site visit preparation, chart review, performance improvement, exit interview and report writing.
- ❖ There has been one facility in Region 3 who was not designated.

Regional Reports:

- ❖ Region 1 and Region 2 North
Region 1

1. Region 1 RMCAN spent some of their program funding on a Tactical Combat Casualty Care (TCCC) course. The course was held at the Michigan International Speedway (MIS), each MCA was provided support to send 6 trainees. The morning consisted of Bleeding Control and triage and rapid extraction of casualties from a hot zone (active shooter, MCI). The afternoon was a hands-on scenario event which included moulaged patients and pyrotechnics.
2. This class links into Region 1's project regarding event medicine. Dr. Maino, the RTAC co-chair is very active with ACEP and their event medicine work group. He oversees the hospital at the MIS speedway and is very active in preparedness at large venues.
3. Henry Ford Allegiance just had their annual trauma conference, which focused on the care of trauma patients. Topics included: difficult airway, managing gunshot wounds, chest wall trauma, hypothermia, managing compartment syndrome. Dr. Narkiewicz (Trauma Medical Director) did a very nice presentation titled "Trauma Systems: Top 10 Lessons on the Road to Trauma Designation".
4. The region had an RTAC education day in August which covered Human Trafficking and the Management and Injury Prevention for Drowning.
5. The RTC attended the annual Burn meeting in Ann Arbor this past month as a trauma liaison. The meeting included strategic planning around education for burn care, updating Burn Surge Facility partners and streamlining the data exchange between hospitals and the State Burn Coordinating Center (SBCC). This was held the day before the Eastern Great Lakes Burn Conference.
6. The RTC continues to work with the counties in Region 1 training trainers for Stop the Bleed®. We continue to have a lot of interest in the program.

❖ Region 2N

1. Doug Burke has joined the section as the 2N coordinator. Doug and Theresa Jenkins have been working together to orient him, meet the regional partners and then turn over the regional responsibilities to him.
2. The Region has been working on completing a destination matrix like the one being used in 2S. Doug has been working with the hospitals to get their information and working with EMS to get the tool in a format easiest for EMS use.
3. St Clair County had their annual 4H fair and members of the regional Injury Prevention Committee had a booth with information. They gave out helmets, gun locks, had the ETOH goggles for people to try and gave out lots of information to fair goers.
4. R2N has had several requests for Stop the Bleed trainings in schools. Beaumont Royal Oak has educated several schools in their area and Theresa Jenkins helped St. Joe Mercy Oakland with the schools in Clarkston. Elementary, middle and high school staff were trained.
5. Macomb County MCA had an education day in September. Topics included a trauma lecture by Dr. Mandip Atwal. Beaumont also has their Annual Nursing Trauma Conference coming up in October. Topics include disaster management, pain control, extremity trauma, eye trauma and case study presentations.

❖ Region 2S

1. Stop the Bleed® is the new initiative and will be taught at all Detroit Public Schools over the next couple year's with collaboration with hospitals in Region 2 South
2. Planning for work groups for upcoming Strategic Plan is ongoing
3. Events:
 Oct 11th, 2018 Injury Prevention Symposium at St. Mary's Mercy Hospital. Excellent presentation
 ACS site review for St. Mary's Mercy Hospital Nov 5th and 6th
 Nov. 8th and 9th Detroit Trauma Symposium to be held at the MGM casino

❖ Region 3

1. The Region 3 PRSO met and reviewed two cases involving system issues at the July RPSRO meeting. They have decided to move to review regional system issues at this point until more accurate data becomes available to the region.
2. The Trauma Triage and Destination Subcommittee started reviewing the Trauma Triage and Destination Protocol for effectiveness and any needed changes. The protocol has been in effect since 2015.
3. Region 3 will convene an ad-hoc committee to review the progress on the current work plan as the region approaches the half-way point with the plan. They will meet in January 2019. The committee will include the chairs and vice chairs of the various committees as well as other interested regional stakeholders. Their findings will be reported out at the January meetings.
4. Region 3 has one medical facility in the que for a site review in January of 2019.
5. MDHHS recently accepted the recommendation of the Designation Committee and revoked the designation of one of Region 3's medical facilities due to cited deficiencies at the focused review. Eileen Worden, Trauma Section Manager and Bob Loiselle, Region 3 Trauma Coordinator met with the Nursing Administrator and their Trauma Program Manager at their request to discuss and explain the revocation of the designation status and potential next steps.
6. Region 3 continues to be active in providing Bleeding Control courses throughout the region.
7. The Region 3 Trauma Symposium is currently in the planning stages and will tentatively be held Thursday, March 7th, 2019 at the Horizon Center in Saginaw, MI.

❖ Region 5

1. Updated RPSRO bylaws were approved.
2. The region is working on updating RPSRO membership in accordance to bylaws.
3. The Injury Prevention committee has provided trauma education activities at the fairs, senior living centers, churches, schools, and fire departments.
4. RTAC will meet end of October, the committee is working on updating the R5 workplan and approving the 2019 meeting schedule.

❖ Region 6

1. Many Stop the Bleed[®] trainings have been implemented.
2. Two hospitals in the region received trauma designation and 7 remain in the queue.
3. A TXA survey was completed to identify which Level IV facilities has access to TXA, how often it was used and if a protocol was developed and if not, did facilities want or need one. The next step is developing a regional facility protocol for hospitals to use if they chose to.
4. Level III/IV activation criteria education is planned for the RTAC meeting on October 10.

❖ Region 7

1. Munson Grayling hospital was designated as a Level IV facility in June. Together with Otsego Memorial, which was also designated as a Level IV, most of the 1-75 corridor is covered by designated facilities.
2. Paul Oliver Hospital in Frankfort is scheduled for a Level IV site visit in November.
3. Five other hospitals stretching along Lake Michigan from the Region's southernmost border up to the Straights of Mackinac are in the que for Level IV site visits beginning in spring of 2019.
4. McLaren Northern Michigan's new trauma director is on board.
5. Mid-Mi Alpena's new ED group should be on board in January 2019 with some members of the group

arriving earlier.

6. Injury Prevention and Education – The Region 7 Trauma Network is partnering with the RMCAN and the Region 7 Healthcare Coalition to develop a region-wide plan for providing bleeding control training to school teachers, staff, coaches, and ancillary personnel followed by the placement of custom bleeding control kits in those locations.
7. The Region 7 trauma network is also looking at the feasibility of training Community Emergency Response Teams from all over the state who will be attending the full-scale exercise at Camp Grayling next year.
8. Efforts continue to accomplish work plan objectives.
9. Numerous trauma training programs were held regionally because of the availability of grant funds. Most programs were open region-wide which encouraged networking and the sharing of best practices in preparing for site verification.
10. The RPSRO did not meet after the last STAC meeting. The region anticipates they will see some movement on regional performance improvement activities in late fall to coincide with more robust data reports because of the hiring of the trauma epidemiologist.
11. The Region discovered a hiccup in the EMS protocol renewal process which resulted in some of the regional protocols not being renewed by some of the MCAs in the region.
12. The regional registry group continues to meet monthly with their primary foci being methods for validating data and serving as a support system.
13. All but two hospitals successfully completed their grant projects. The two that did not complete their projects had changes in C-suite with insufficient hand-off of projects.
14. The RTAC and Subcommittees were advised to review the 2018-2020 regional objectives and identify areas that may have been completed and areas of focus for each group in the coming months.

Region 8

1. The injury prevention database is continually updated with recent programming, which is a regional objective. ATV and bicycle helmet fittings were scheduled throughout late summer. Stop the Bleed[®] programs are being scheduled with schools and this morning this training was requested at a State Police Post Citizen Academy. Marquette County Public Safety Answering Point (PSAP, which also does EMD has a section on how to use a tourniquet and talk callers through application.
2. A grassroots initiative has begun to increase the awareness of snowmobile riding right: the right side of the trail, ride sober, ride safe and expect the unexpected, ride right for your family and friends. The Luce County Sheriff's Office coined the phrases and sought assistance from others to gain more exposure.
3. The RTC attended an exercise training with county emergency managers, addressing a regional trauma plan objective related to the large-scale communications plan. State Police Post commanders and sergeants, health department emergency preparedness coordinators, a handful of local emergency responders and the RTC also completed the Complex Coordinated Attack program, a Department of Homeland Security course offered by Louisiana Tech. The hours of tabletop exercises provided new knowledge to mostly a law enforcement audience on how mass casualty scenes are orchestrated with emphasis on hospital trauma capacities and bypasses. Explanation of trauma systems, hospital trauma levels, and regional objectives were shared at the request of the instructors.
4. The first offering of Trauma Care After Resuscitation (TCAR) in the Upper Peninsula occurred supported by funding by a trauma project grant. Nurses from a handful of hospitals, and the RTC completed the course.
5. Every trauma program in the region was represented at the August 17th "Performance Improvement Bootcamp". Each hospital dedicated \$400 of its trauma project funding to support the program. Chris Ballard, Minnesota's Trauma Program Coordinator, was the presenter for the day. The program was well

received, as evidenced by the excellent evaluations received. The attendees commented in the evaluation about ways to continue offering PI education, what next steps they'd like to see, and gaps they would like to address. These results were tabulated, and all comments forwarded to leadership and shared with the other Regional Coordinators.

6. The region is interested in an ImageTrend® specific, hands-on registry training and reports already created that can be run or scheduled for each facility. There is a desire to become more data driven. The RTC went to ImageTrend® in Minnesota for patient registrar training and was able to see the vast capabilities of the software system.

Strategic Planning Process:

- ❖ Strategic Plan: Plan development began with the Mission and Vision statements that were crafted at the town hall meeting held in October and a survey of partners identified priorities. The next steps are to review the Model Trauma System Planning and Evaluation Core Indicators Section 100, 200 and 300. Section 100 was reviewed at the August meeting.
- ❖ Section 200 and 300 were reviewed:
 - Considerations generated from review of Section 200-Lead agency needs continued support, requirement for STAC Chair, collaboration with Preparedness, ongoing sunsets, resource issues, EMS funding, more robust ImageTrend® reporting.
 - Considerations generated from review of Section 300-Prehospital data, feasibility of rehab data collection, evaluation of triage protocols and multiple transfers, trauma system report, integration with community-based programs, evaluation of injury prevention, evaluation patient outcomes, additional data, education
- ❖ STAC has been asked to sign up for one of the Expert Writing groups that will be charged with drafting the goals, objectives and strategies for the Strategic plan. There are still some Writing Group Chairs that need to be identified. The groups should be finalized in the next week or so. There will be a leadership call in late October to organize the approach. The goal is to have a draft completed by May.
- ❖ Dr. Lamb asked that the STAC comment on an issue brought to his attention about a facility with some transfer challenges. The group stated that as a state advisory committee it would be difficult to make a recommendation without substantiating data that reflects a statewide system issue. It was suggested that the most appropriate, effective venue would be the region.

Pending Business:

- ❖ The draft STAC meeting schedule for 2019 will be available at the December meeting
- ❖ The Regional Trauma Network applications are due for their three- year submission in 2020. The application form will be reviewed in 2019 to see if any revisions are needed.
- ❖ EMSCC bylaw revisions are in the development stages and one of the impending revisions impacts STAC. The bylaws may be amended to strike the requirement that the STAC Chair be a member of the EMSCC.

The next STAC meeting is **Tuesday December 4, 2018 at 1001 Terminal Road, Lansing**