

State Trauma Advisory Subcommittee
August 4, 2020,
Bureau of EMS, Trauma & Preparedness
Lansing, MI

Attendees: Gaby Iskander, Howard Klausner, Allan Lamb, Kolby Miller, Amy Randall, and Wayne Vanderkolk,

Guests: Helen Berghoef, Doug Burke, Tammy First, Deb Detro-Fisher, Jill Jean, Theresa Jenkins, Denise Kapnick, Bob Loiselle, Dr. Samantha Mishra, Cheryl Moore, Lyn Nelson, Jennifer Strayer, Eileen Worden

Call Order: 9:01 a.m.

Minutes from June 2, 2020 approved.

Old Business:

- ❖ **Vacant STAC position:** The application for the position of Trauma Registrar has been submitted to the Director's office for consideration.
- ❖ **Extension to the STAC and Designation Committee terms:** The members of both advisory bodies have indicated that they are willing to serve through 2021. We are in the process of getting clarity about formally extending the terms as the EMSCC bylaws are inconsistent. The bylaws committee is meeting in September. Eileen noted the crucial role both committees have in advising the department. Consideration is being given to retaining institutional memory particularly on the Designation Committee, by replacing 50 percent of the positions at a time. Dr. Vanderkolk recommended replacing 30 percent of the committee at a time.
- ❖ **Future meetings:** Dr. Vanderkolk asked for planning purposes if STAC meetings will continue to be held virtually. Eileen responded that for the foreseeable future that will likely be the case.
- ❖ **EMS Administrative Rules:** The EMS Section and stakeholders have been working on revisions to the EMS Administrative Rules. The vote was held to approve the language changes at the July EMSCC meeting. Language changes that impact the trauma system include the following:
 - ◆ The definition of Regional Trauma Networks was included.
 - ◆ Free standing ED's may participate in Medical Control Authorities.
 - ◆ All MCAs in a region must participate in the regional trauma network comprised of collaborating local medical control authorities.
 - ◆ The Regional Trauma Network will be notified if a participating medical control authority designation has been denied, revoked, or suspended.
 - ◆ Each medical control authority must develop protocols for the withdrawal or restoration of a hospital, free standing surgical outpatient facility or off campus emergency department with provider-based status as defined in R325.22122 (1) (c). The protocol must include a provision to notify the regional trauma network of the withdrawal or restoration of a facility.

Presentation: EMS for Children Grant (EMSC) by Dr. Samantha Mishra

- ❖ Dr. Mishra was introduced to the committee. She is a graduate of Michigan State University College of Osteopathic Medicine, she has a Masters' in Public Health with an emphasis in childhood wellness and disease prevention and worked in Emergency Medicine at Henry Ford Allegiance. Dr. Mishra joined BETP in December of 2019 as the EMS for Children Coordinator.

- ❖ Dr. Mishra presented on the mission of the EMSC grant “reduce child and youth mortality and morbidity resulting from severe illness or trauma.” She discussed the nine performance measures the grant is focusing on. One of the performance measures focuses on interfacility transfer guidelines. The EMSC stakeholders used the trauma system transfer guidelines as a reference for their discussions. Identifying Pediatric Champions or Pediatric Emergency Care Coordinators (PECCs) to ensure there is a dedicated individual(s) identified in the Emergency Department of local EMS agency that represents pediatric interests is another focus area. There will be more information about the subject at www.michigna.gov/PedsChampions Pediatric Readiness, or the ability to meet the immediate need of an ill or injured child is another a grant objective. Ongoing work to support these and the other nine objectives is the focus of the grant.
- ❖ Eileen mentioned that the EMS Division has been an EMSC grantee for many years.
- ❖ Noted was an increase in fireworks injuries in people under 18 from 2019 to 2020.

Designation and Verification during COVID-19 response:

- ❖ The American College of Surgeons is conducting a virtual site visit with a Michigan facility this summer. Trauma Section staff will be reaching out to the participants to learn about the successes and pitfalls involved.

Data Report:

- ❖ **Quarterly data:** Was due June 15. It was reported 98% submission compliance rate for first quarter 2020 data. Second quarter data submission is due September 15th.
- ❖ Back to Basic Webinar- In final preparation stages. A date has been selected, September 17th, 9-10am. Webinar event content will focus on newer Image Trend Direct Entry Registry users, however; all will be welcome to participate.
- ❖ MTQIP Level III webinar was held in last month. It was well attended the group reviewed the reports and how to interpret them. The consensus was they appreciated the learning opportunity.

New Business:

- ❖ **Regional Application review:** The committee was reminded that the regional trauma network applications are submitted to STAC every three years. This is the third round of applications to be submitted. The applications were revised last year (both the bylaws and workplans) and the new applications were reviewed at the Leadership Summit. The application review process will be new for some STAC members. The editor review form and assignments were provided in the meeting materials. Review assignments were made so each member can review two applications for perspective and so that reviewers do not review applications from their own regions. This was slightly more challenging this round as there are 5 STAC members from Region 2S and 2 from Region 6 and of course one vacant STAC position. The applications will be sent for review in early September, all review sheets must be completed and returned to the Trauma Section. Each STAC editor will review and report to the group their recommendation regarding approval. STAC will vote on all the applications at the October 6 meeting and EMSCC will vote at the November meeting. Once approved, a letter is sent recognizing the region for three years.
- ❖ **Strategic Plan and projects:** The Trauma Section has begun working on a variety of projects and initiatives related to the pillars written into the Strategic Plan (Preparedness, Continuum of Care, Data, Education, Verification, Injury Prevention, Communication, System Evaluation/Infrastructure. This concept was introduced at the June meeting and in the

intervening months projects and initiatives have been started or discussed. A more formal method of reporting on the ongoing work is being planned.

- ◆ Strategic Plan/System Eval-Discussions about drafting state trauma system annual report have begun.
 - ◆ Infrastructure-Efforts will be focused on engagement and synergy with Preparedness, including more visibility at the Regional Leadership meetings.
 - ◆ Continuum of Care-SWOT analysis being conducted, and workgroup in the planning stage.
 - ◆ Data- Discussions related to monitoring data hygiene (validity/completeness) are ongoing. Education gaps are currently being addressed via the Back to Basics webinar planned for September.
 - ◆ Verification/Designation-2021 schedule has been forecasted, visioning for 2022 begun, refinements to process and forms ongoing.
 - ◆ Regional Performance Improvement-Inventory data collection ongoing, suggested revisions are being collected from RTC's and stakeholders, PI process in discussion for refinements and/or need for further documentation.
 - ◆ Injury Prevention-Strategic Plan objective discussed the development of a state injury plan. A workgroup will be seated in the fall to undertake that work.
 - ◆ Education-a priority focus area is the Adult and Pediatric Field Triage protocol. There has been a very good discussion with EMS around a documentation protocol and some synergy with the need to collect the triage elements, consistently, completely and recorded so it is easily retrieved.
 - ◆ Communication-Methods to provide routine updates about the state trauma system is in discussion.
- ❖ **Quarterly Reports:** Reports have been submitted, there were no comments.
 - ❖ **Trauma Survey:** The Trauma Section is interested in collecting point in time information regarding some of the impacts of COVID-19. A draft survey was shared, and the committee provided comments which will be included in the new draft. The survey will be set up electronically.
 - ❖ **Case study:** Dr. Lamb provided a case study that included interfacility transfer with a positive outcome that supported the effectiveness of the trauma system.

10:30 a.m. Adjourn

The next STAC meeting is Tuesday, October 6, 2020 from 9-11 a.m. meeting will be held electronically