

State Trauma Advisory Subcommittee
December 3, 2019
Bureau of EMS, Trauma &
Preparedness Lansing, MI

Attendees: Robert Domeier, Gaby Iskander, Jill Jean, Allan Lamb, Joshua Mastenbrook, Amy Randall, 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, Jennifer Strayer, Eileen Worden

Call Order: 9:01 a.m.

Minutes from October 1, 2019 approved.

Old Business:

- ❖ **Introduction Trauma Nurse Coordinator:** Amy Randall MSN, R.N., has been appointed by the Director to fill the vacant Trauma Nurse Coordinator position. Amy will serve out the remainder of the term begun by Beth Fasbinder. Amy is the Pediatric Trauma Program Manager at C.S. Mott Children's Hospital. She has experience in adult trauma and emergency care.
- ❖ **MCA and Trauma conferences:** The conference planner forwarded the conference evaluation results, there were 198 responses. The overall average was 89.25% positive. All the speakers were rated positively. Many commented on the Las Vegas Case Study by Dr. Lake and the Tragedy at the Tree of Like Synagogue by Dr. Roth stating that they learned important new information that they would be bringing back to their institutions. The presentation on trauma billing was noted to be too specific for some of the audience members not actively engaged in trauma billing. Noted by many was that while the setting was lovely the venue was too small for the number of attendees (this was the largest combined MCA and Trauma conference to date) the conference planner suggested that future conferences should plan for 310-315 participants and 25 exhibitors.
- ❖ **The Regional Leadership Summit:** The Leadership Summit survey respondents suggested that attending a content heavy meeting after a full conference day was challenging. Respondents agreed that meeting annually in person would be helpful.
- ❖ **Regional reporting:** The reports have been revised to more closely reflect the Administrative Rule requirements. This process took longer than anticipated, and that will be considered for future reporting. The reports will be sent to STAC before the close of the year. There will be time on the February agenda to discuss the reports if needed. The Quarterly report process has undergone similar revisions as has the reporting schedule which was also presented at the Leadership Summit.
- ❖ **Trauma Protocols discussed at QATF meeting:** After some discussion after the Leadership Summit, it was determined that the destination protocol originally proposed will be withdrawn. The MCA directors and BETP will be meeting later in the month to discuss how to address the issue if/when it occurs. The Region 5 protocol described the development of a regional PRSO for EMS (outside of the regional trauma network RPRSO described in the Administrative Rules). The discussion was tabled until a legal opinion from the Attorney General's office about whether this was possible based on existing Rule language could be rendered.

Designation Report:

- ❖ **Michigan Designated Facilities:** Currently, 99 facilities are designated, 6 site visits and 1 on-site focused review have been scheduled. There are 18 hospitals in the queue waiting for a site visit. The Designation Subcommittee meets next on January 7, 2020 and will be reviewing and discussing 5 in-state/verification designation applications, 1 focused review report and up to 4 ACS verified designation applications.
- ❖ **Designation Subcommittee Recommendations:** At the November 5, 2019 meeting, the Designation Subcommittee discussed some verification frequently asked questions (FAQs) that required clarification. The questions included the minimum number of meetings for an in-state level III trauma facility, the required level of review of transfers at level IV trauma facilities, and a six-month grace period for ATLS. A motion was made by Dr. Lamb to approve the FAQs as submitted by the Designation Subcommittee, Dr. Vanderkolk supported the motion. The motion passed with all in favor. The FAQ's will be implemented starting on January 1, 2020.

Data Report:

- ❖ **Quarterly data** is due on December 15th. A reminder will be sent out this week.
- ❖ **Database Coordinator:** Interviews are ongoing

New Business:

- ❖ **Guest Speaker:** Chris Lake, MPFFU, EMSCC presented his personal story about surviving and overcoming injuries from a motorcycle accident this summer and how effectively the trauma system functioned to support his positive outcome.
- ❖ **SOC:** The SOC coordinator and consultant have drafted a SOC White paper that will elaborate on the thirteen recommendations. The draft is being reviewed by leadership and when approved for release it will be shared with the Expert Writing groups and other stakeholders including STAC for comment and discussion.
- ❖ **Strategic Plan annual update:** Progress on the Strategic plan priority objectives presented by Eileen Worden.

By September 30, 2020, develop a messaging/media campaign for the trauma system that resonates with the intended spectrum of constituents as evidenced by print, social media, and other communication modalities.	Some roadblocks encountered this summer (MDHHS Communications-rigorous policy/procedure). Reviewing options
By September 30, 2023, establish a stable funding source for the trauma system that is aligned with the trauma system strategic plan and priorities.	MDHHS continues to educate Administration, new partners and stakeholders about the value and benefit of the trauma system. The sunset date is October 1, 2021

By December 31, 2022, the Regional Trauma Networks will put into place plans, policies, tools and tracking methods for patient transfers to ensure trauma patients are moved appropriately and expeditiously.	Field triage filters have been added to Biospatial and report for Regional Inventory will be run biannually. This work is in progress
By January 31, 2021, the STAC establishes a multidisciplinary and multi-agency subcommittee writing group to write an Injury Prevention (IP) Plan with a comprehensive public health focus that is specific for the state of Michigan.	Work has not begun; regional injury prevention work is ongoing

- ❖ **RPRSO Policy Update:** There has been a question raised about how an RPRSO may communicate to outside entities when they have been alerted to a system issue that has subsequently been addressed. Eileen shared that this question was posed to PHA Legal Affairs and their opinion was that it would not be an issue for the RPRSO that was in receipt of information from an outside entity to evaluate it and then communicate with the RPRSO that covers the geographic area where that facility is located in order to provide then necessary follow-up. After some discussion STAC recommended that effective loop closure would necessitate that be that the outside entity that has an issue outside of its region take the issue to the Chair of their RPRSO who will then take it to the Chair of the region where the issue originated. Communication will be their responsibility. The RPRSO policy will be amended to reflect the discussion.
- ❖ **2020 STAC Chair:** There will be a vote of the group to appoint a Chair for the 2020 STAC. Jeff Boyd who holds the position of Life Support Agency Manager on STAC will be retiring in January. The position filled as soon as possible.
- ❖ **PI Toolkit:** Materials, tools, guidance documents from a variety of sources have been gathered and will be posted on the trauma website by mid- February.

11:00 a.m. Adjourn

The next STAC meeting is **Tuesday February 4, 2020 at 1001 Terminal Road, Lansing**