



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Mississippi Trauma Advisory Committee
Minutes

April 17, 2014

10:00 a.m.

Osborne Auditorium

570 East Woodrow Wilson Ave, Jackson, Mississippi 39215

Members Present

- **William "Pete" Avara, MD, Chairman**
 - **William Bassett**
 - **Rick Carlton, MD**
 - **Brett Cone (representing H. S. McMillan)**
 - **Clyde Deschamp, PhD**
 - **Rod Frothingham, MD**
 - **Mark Galtelli**
 - **Hugh Gamble, MD**
 - **Walter Grace**
 - **Don Hemeter**
 - **Doug Higginbotham**
 - **Amber Kyle, RN**
 - **Heather Kyle, RN**
 - **John Nelson, MD**
 - **Ben Yarbrough, MD**
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Agenda

- **Call to Order/Acceptance of Minutes**
 - Meeting called to order by Dr. Avara.
 - Mr. William Bassett submitted one correction to the minutes of the January 16, 2014 meeting: He asked to not be considered for appointment as the Education and Injury Prevention Sub-committee chair due to personal reasons. Ms. Amber Kyle also requested that the minutes reflect which Ms. Kyle is making a motion, report, etc.
 - Motion to approve Minutes of January 26, 2014 meeting as corrected made by Dr. Yarbrough, seconded by Dr. Gamble. Motion passed.
 - **Region reports**
 - Reports from the region administrators were included in the information package
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distributed to each member.

- **Rules and Regulations Sub-committee Report**

- Ms. Amber Kyle reported that the committee has not met, however, the pre-publication version of the ACS (American College of Surgeons) Optimal Resource Guide is on their website for review. Some of the highlights of the new book ("Orange Book") are:

- Admissions to hospitalists/non-surgical services.
- Responses for open fractures.
- Requirement for Level I and II hospitals to be able to read radiology from any hospital within their catchment area.
- Registry manning.
- Performance Improvement and Patient Safety (PIPS).
- No discussion of Level V trauma centers.

- **Functionality Sub-committee Report**

- Dr. Carlton reported on the Functionality Sub-committee. Although the committee has not met recently (meets jointly with Rules and Regs), there are a number of issues to discuss.

- **Trauma Registry Sub-Committee Report**

- Ms. Heather Kyle reported on the Trauma Registry Sub-Committee and presented the proposed changes to the Registry inclusion criteria.
- Motion by Dr. Deschamp, second by Dr. Carlton to adopt the changes, motion carried.

- **Burn Sub-Committee Report**

- Mr. Galtelli reported that the committee met for the first time on March 19, 2014. All three burn centers in our trauma system were represented; USA in Mobile, The Med in Memphis, and JM Still in Jackson.
- The first order of business is to establish registry inclusion criteria for burns. Currently, there is very limited inclusion criteria, and the committee believes that we are missing a large percentage of burns as they are not included.
- Determining the Performance Improvement process for burns is another major issue.

- **State Trauma PI Sub-Committee Report**

- Mr. Oliver reported that the committee had not met due to cancellations caused by weather conditions. He reported that the regions are well prepared for the meetings and local PI efforts are strong.
- The committee has embarked on a process to rotate the chairmanship through participating trauma surgeons, and Mr. Oliver announced he would be retiring at the end of the year.
- Dr. Miller reported that the proposed pilot for changes to the destination guidelines was on hold as none of the regions desired to participate. Dr. Robert Galli, State EMS Medical Director and chair of MDTQA stated he would address the issue of

using motor aspect of GCS for determining Alpha criteria at the next meeting of MDTQA.

- **System Update**

- Dr. Miller reported that the following Level IV trauma centers had been designated in the last quarter:
 - Alliance Healthcare, Holly Springs
 - Covington County Hospital, Collins
 - Greene County Hospital, Leaksville
 - Lawrence County Hospital, Monticello
 - Sharkey-Issaquena Community Hospital, Rolling Fork
- Dr. Miller also presented the Corrective Action Plan (CAP) for the Trauma System, based on the recommendations of MTAC at the Strategic Planning Conference. The PEER committee asked for a follow-up on the recommendations from the two previous PEER evaluations, one of which was strategic planning. The CAP was developed by the Trauma Division, and approved by the State Health Officer. After a lengthy discussion, Dr. Avara directed that the CAP will be a standing agenda item.

- **Open Session**

- Dr. Gamble presented an article from the ACS called the "Hartford Consensus in action." The article addresses that many penetrating wound victims (gunshot) often bleed to death before EMS can reach them. The article recommends training police officers to use tourniquets and other life-saving processes, similar to the "guidelines developed by the US military to advance battlefield trauma care." Dr. Miller was charged with researching the possibility of developing a trial program in one of the trauma regions or perhaps a smaller area, i.e., county.
- Dr. Avara addressed the issue of admitting trauma patients to non-trauma services, particularly elderly patients that fall and sustain an orthopedic injury, in addition to any/all of the co-morbidities they have. His concern is revolves around the quality of care, not just what is required by regulations. After discussion, Dr. Avara directed the Rules and Regulations Sub-committee to review the ACS guidelines for applicability to our regulations.

- **Trauma Center Designations**

- Open Session adjourned to move to Executive Session to discuss Trauma Center survey results.

- **Adjourned at 11:40 p.m.-Next scheduled meeting is October 22, 2014.**
