



**MISSISSIPPI STATE DEPARTMENT OF HEALTH**

<b>MEMBERS PRESENT:</b> Jimmy McMannus, Chair; Gloria Smalley; Gerald Nottenkamper; Janet Terrell; Brandye Vance; Bobbie Knight; Cherri Rickels; Donna Grisham; Diane Furtick; Monica McCullum; Courtney Stevens; Amber Kyle; Alita Guthrie; Stephanie Langston; Teresa Windham; Teletha Johnson; David Hall; Kathryn Stewart (ph); Lisa Wilson (ph)				
<b>FACILITATOR:</b> Jimmy McManus				
<b>CALL TO ORDER: TIME:</b> 12:03 AM/PM		<b>DATE:</b> 4/11/2017	<b>PLACE:</b> MSDH Airport Warehouse, 131 Freightways Drive	
<b>MINUTES OF PREVIOUS MEETING:</b> Minutes: [ ] Approved [ ] Not Approved [ ] Distributed by E-mail				
TOPIC	MAIN POINTS OF DISCUSSION/CONCLUSIONS	RECOMMENDATIONS/ACTION	RESPONSIBLE PARTY	F/U Date
<b>Welcome</b>				
<b>Review of 1-17-2017 meetings minutes</b>	Minutes reviewed and approved	Motion – Gloria 2 <sup>nd</sup> - Cherri	Group	closed
<b>OLD BUSINESS &amp; STANDING AGENA ITEMS</b>				
<b>Department Updates</b>	<ul style="list-style-type: none"> <li>David gave update on RFP process</li> <li>Update on different vendors that have been met with- DI has continued to be impressive. Update on cloud information</li> </ul>	<ul style="list-style-type: none"> <li>All hospitals to register individually on the cloud. Will email region directors if any more webinars held.</li> <li>Meeting with ITS regarding RFP</li> </ul>	BACS	Next meeting
<b>Trauma Registry Training</b>	<ul style="list-style-type: none"> <li>Teresa states we have User Group on 4-26 10am- 2pm. Amber will be doing presentation.</li> <li>Group discussed webinar for user group meetings</li> </ul>	<ul style="list-style-type: none"> <li>Group to email Teletha with individuals that will be attending the training.</li> </ul>	Teletha	Next meeting
<b>MEMSIS Data</b>	<ul style="list-style-type: none"> <li>David states have not updated to 3.0 and they are working with HIN network.</li> </ul>	<ul style="list-style-type: none"> <li>David states he will follow up with Alisa to get information.</li> </ul>	David	Next meeting
<b>Data Dictionary</b>	<ul style="list-style-type: none"> <li>Kathryn with LeBonheur question regarding EMS scene collection if patient had gone to referral hospital and EMS judgment weather to choose that or not? States if pt transferred from a facility they did not have to enter the scene information.</li> <li>Jimmy states we need task force to re-establish definitions of the dataset; all need training on data definitions from trauma registrar to regional administrators and state. We all have to be using the same page.</li> </ul>	<ul style="list-style-type: none"> <li>Will have follow up on training with user group meeting</li> <li>Group asked to send any agenda items to Teresa 2 weeks prior to the meeting.</li> <li>Task group to look at data dictionary and validation.</li> </ul>	Jimmy/ Teresa	ongoing
<b>List Serv update</b>	<ul style="list-style-type: none"> <li>Jimmy states has not received an update</li> </ul>	<ul style="list-style-type: none"> <li>Decision from last meeting that we would dissolve MS google group and use professional organizations that are established.</li> </ul>	Closed	closed
<b>Reporting</b>	<ul style="list-style-type: none"> <li>Email sent from Jimmy on different types of reports- please see attached reports for review. Need to continue to vet the numbers, discussion of the need to document date report pulled as additional records could be added after the report and skew the numbers.</li> </ul>	<ul style="list-style-type: none"> <li>Hospitals and regions to review all transfers at PI meetings with fall outs reported to state level PI</li> </ul>	Group	On going



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	<ul style="list-style-type: none"> <li>Discussion on transfers- including that transfers should be addressed at the hospital and region level with fall outs being referred to the state level</li> <li>Discussion on not valued (unknown mechanism of injury)- NA and blanks</li> <li>Discussion of data entered timely, accurate, and complete.</li> <li>Discussion of Alpha/Bravo with upgrade and downgrades- facilities can build a data table to distinguish fallouts for correction. Discussion if consult even an option for activation. Gloria states she has educated her region and others need to do the same. Jimmy states should never have initial activation as unknown. Amber give example of when unknown would be used (if not documented) Gloria states she would enter as no activation. Teresa states there is no option for no activation.</li> <li>Discussion of policy of downgrades, what regions have a policy.</li> <li>Amber asks how we move forward with the validation process. Should we ask the regions to validate data monthly. Gloria states that state should be responsible for data validation. Teresa states DOH currently has validation process monthly and reports of questions/query sent to each facility. Gloria states the states has not been doing registry validation audits. David updated group that the state will be doing on-site registry validation audits as well as continue the audits that are occurring currently.</li> </ul>	<ul style="list-style-type: none"> <li>Teresa to follow up with DI regarding mapping</li> <li>Task group for data validation from facility, region with fall outs to the state. <ul style="list-style-type: none"> <li>Group to look at how alpha, bravo upgrade and downgrades documented in registry.</li> </ul> </li> <li>Recommendation to revamp the QA reports that the state currently uses.</li> <li>Recommendation to look at validation process from the hospital and regions</li> <li>Process for data validation</li> </ul>	<p align="center">Teresa</p> <p align="center">Group/ Teresa/ Jimmy</p> <p>Taskgroup members to draft a process to meet the needs of the state PI committee for data validation- Motion Amber, Gerald 2<sup>nd</sup>.</p> <ul style="list-style-type: none"> <li>Amber</li> <li>Kathryn</li> <li>Gerald</li> <li>Monica</li> <li>Gloria</li> <li>Donna</li> <li>Jimmy</li> <li>Brandye</li> <li>Teresa</li> </ul>	<p align="center">Next Meeting</p> <p align="center">10-1-2017</p>
<b>Membership</b>	<ul style="list-style-type: none"> <li>Discussion of membership of the committee. See attached TRSC Visionary Statement for make up of committee membership and participation.</li> </ul>	<ul style="list-style-type: none"> <li>Recommendation 50% or greater participation / attendance to meetings.</li> </ul>		
<b>NEW BUSINESS</b>				
<b>Committee Updates</b>	<ul style="list-style-type: none"> <li><b>State Trauma PI Committee-</b> how to get the best information to report, currently looking at mortality and deaths rising since 2012-2013; could that be related to decrease in funding</li> <li><b>Rules &amp; Regulation Sub-Committee</b></li> <li><b>MTAC &amp; EMS Advisory Committees</b> David states destination guidelines &amp; activation criteria sent back from MDTQA and will go to the CEC committee. Possible that they will be split.</li> <li>Burn Committee- no updates other than we have been able to look at data.</li> </ul>	<ul style="list-style-type: none"> <li>Gerald to follow up with PI committee on what data they want from this group</li> <li>Everything has been approved will go to BOH meeting in July</li> <li>Turn around of rules and regs processing for meeting.</li> </ul>	<p align="center">Gerald</p> <p align="center">Amber</p> <p align="center">BACS</p>	<p align="center">Next meeting</p> <p align="center">7-12-2017</p> <p align="center">Ongoing</p>
<b>Standing Agenda Items</b>	<ul style="list-style-type: none"> <li>Jimmy asked if there are any particular items for standing agenda, Amber request discussing and evaluating the user group meeting, burn committee needs to be a standing agenda item, PI committee standing agenda item.</li> </ul>	<ul style="list-style-type: none"> <li>Add as standing agenda items <ul style="list-style-type: none"> <li>User group</li> <li>Burn committee</li> <li>PI committee</li> </ul> </li> </ul>	<p align="center">Teresa</p>	<p align="center">Next meeting</p>
	<ul style="list-style-type: none"> <li>Question when MEMSIS data dictionary will be available. Alisa</li> </ul>	<ul style="list-style-type: none"> <li>Jimmy states will follow up on EMS</li> </ul>	<p align="center">Jimmy</p>	<p align="center">Next meeting</p>



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	was on the phone and had to get off d/t another meeting. Group request if Alisa is unable to attend if someone could come and give update on when this would be updated.	member to update the group.		
<b>Trauma Website / PSAs</b>	<ul style="list-style-type: none"> <li>How to use trauma website and PSAs on trauma website. David states would need to follow up with webmaster. Teresa updated the group on clearing the browser to look at updated information. David reminded group that with any advertising to include the department of health reference also.</li> </ul>			
<b>Other Business</b>	<ul style="list-style-type: none"> <li>ATS Trauma Registry course- understanding and education of the registry and its uses. Cherri states the TPM course is 2 days and the TPR course is 2 days. Amber suggested we may look at revamping and doing one for beginners and more advanced.</li> <li>Kathryn – 1. misconception among registrars about what needs to be put in states many were told to put EMS judgement in field. 2. States was told if patient came from referral hospital they were told not to put in EMS referral or initial EMS record.</li> <li>Gerald- states was told that snakebites are not included in the trauma registry- Kathryn states Arkansas includes but NTDB excludes. 2. Do we include SHF &gt;70 with hip fracture but have contusions, abrasions. States needs to be very clear on the definition.</li> </ul>	<ul style="list-style-type: none"> <li>More to come</li> <li>Data dictionary shows the purpose of scene 1 and scene 2. Group agrees that all data should be entered into the registry.</li> <li>Snakebites are not included;</li> <li>Send SHF question to the CEC committee for review.</li> </ul>	Amber  Group  Group  Teresa	Next meeting  Next Meeting   7-19-2017
<b>Readmissions</b>	<ul style="list-style-type: none"> <li>Amber asks if anyone was tracking readmissions. NMMC states they are tracking and continue on the same record. Teresa ask what the group is using as a definition of readmissions. Ask how facilities are documenting this in the registry. Gloria states that should not be entered into the registry the funding was not set up to cover readmissions. Amber states that tracking readmissions would be used to track quality of care. LeBonheur states they track readmits up to 30 days.</li> </ul>	NA	Closed	Closed
<b>Trauma Cloud</b>	<ul style="list-style-type: none"> <li>All hospitals need to register</li> </ul>	All hospitals to register individually.	Closed	Closed
<b>Data Submission Deadlines</b>	<ul style="list-style-type: none"> <li>Jimmy displayed graph of current data submissions for CY2016. Jimmy states once the delinquent list is sent out from the state he sends notice to the facility and the administrator. Gloria states there was a process from the state for delinquent data. Teresa reminded Gloria that this is continued it is the email that is sent by department each month. Gloria states this only tells you they didn't get in one record, it really doesn't show how late you are entering records.</li> </ul>	Follow up with MATA	Jimmy	Next meeting

**ADJOURNMENT:** 15:15 AM/PM

**Next Meeting:** July 18, 2017 12pm-3pm Airport Warehouse

**MINUTES RECORDED BY:** Teresa Windham