



**MISSISSIPPI STATE DEPARTMENT OF HEALTH**

**Mississippi Trauma Advisory Committee – Meeting Minutes**

<b>MEMBERS PRESENT:</b> Dr. Duncan Donald (Chair), Dr. Rick Carlton (Chair of EMSAC), Dr. Hugh Gamble, Dr. Leslie McKenzie, Dr. William Lineaweaver, Dr. Clyde Deschamp, Mr. Walter Grace, Mr. Mark Galtelli, Mr. David Grayson, Mr. Wade Spruill and Mr. Dwayne Blaylock				
<b>Members Absent:</b> Dr. Jonathan Wilson, Dr. Ben Yarbrough, Dr. Pete Avara, Ms. Amber Kyle, Ms. Janie Clanton and Ms. Debby Berry				
<b>MSDH Staff Present:</b> Mr. Jim Craig, Mr. David Hall, Ms. Teresa Windham, Ms. Teletha Johnson, Ms. Tammy Wells, Ms. Margaret Cooper, Ms. Lynnette Harper				
<b>Visitors Present:</b> Ms. Casey Copeland, Mr. Tyler Blalock (EMSAC member), Ms. Suzanne James, Ms. Hope Ladner, Ms. Donna Grisham, Ms. Gail Thomas, Ms. Patty Causey, Ms. Brandy Vance, Ms. Janet Terrell, Mr. Jimmy McManus, Mr. David Bonner, Ms. Lisa Miller, Ms. Cherri Rickels, Mr. Norman Miller, Ms. Carolyn Boyd and Ms. Anita East				
<b>FACILITATOR:</b> Dr. Duncan Donald, Chair				
<b>CALL TO ORDER: TIME:</b> 10:03 a.m.		<b>DATE:</b> 12 July 2018	<b>PLACE:</b> MSDH Cobb Auditorium/Osborne Building	
<b>MINUTES OF MEETING:</b> Minutes: <input type="checkbox"/> Approved; <input type="checkbox"/> Not Approved; <input type="checkbox"/> Distributed by E-mail				
TOPIC	MAIN POINTS OF DISCUSSION/CONCLUSIONS	RECOMMENDATIONS/ACTION	RESPONSIBLE PARTY	F/U Date
<b>Welcome</b> • Dr. Donald	<ul style="list-style-type: none"> <li>Called to order</li> <li>Welcomed all present</li> </ul>			
<b>Review of minutes of the previous meeting: 11 January 2018</b>	<ul style="list-style-type: none"> <li>Mr. Spruill requested an amendment to the proposed minutes               <ul style="list-style-type: none"> <li>To add content pertaining to the discussion at the last meeting related to the proposed amendment to the region contracts</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li><b>M-S-P;</b> motion to accept as amended – Mr. Galtelli; second – Dr. Deschamp; all in favor</li> </ul>		
<b>OLD BUSINESS &amp; STANDING REPORTS</b>				
<b>MSDH/BACS Financial Update</b> • Mr. Jim Craig	<ul style="list-style-type: none"> <li>Mr. Craig provided the financial report for the period: FY13-18               <ul style="list-style-type: none"> <li>Handout distributed to members</li> <li>Mr. Spruill thanked Mr. Craig for the presentation</li> <li>Mr. Spruill voiced his concerns as to the cuts hospitals and physicians have taken in light of decreased authority to spend for trauma</li> <li>Dr. Carlton asked if there was any possibility the Legislature might return funds from fines for moving violations back to TCTF (rather than placing them in the State General Fund)</li> <li>Dr. Donald states he would like to see MTAC take a stance on trauma advocacy</li> <li>There was general discussion about Legislative authorization to spend on trauma</li> </ul> </li> </ul>			



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	<ul style="list-style-type: none"> <li>+ Mr. Craig reported that this year's request for funding for FY20 from the Legislature was for an authorization to spend up to 28 million dollars</li> </ul>			
<b>BACS Update</b> <ul style="list-style-type: none"> <li>• <b>Mr. David Hall</b></li> </ul>	<ul style="list-style-type: none"> <li>• Mr. Hall provided a general report for BACS</li> <li>• Noted that this year Trauma SOC celebrates its 20<sup>th</sup> year</li> <li>• Recognized those who facilitated and attended Trauma Day at the Legislature event (March)</li> <li>• Provided an update on transition to the web-based registry</li> <li>• Thanked UMMC for serving as a test site for entering patients into the new web-based registry server</li> </ul>			
<b>BACS Data Report</b> <ul style="list-style-type: none"> <li>• <b>Ms. Teresa Windham</b></li> </ul>	<ul style="list-style-type: none"> <li>• Ms. Windham presented information as a follow-up to questions posed at the last meeting of MTAC (PPT Presentation)               <ul style="list-style-type: none"> <li>• ISS scores of patients transferred from Level IV centers                   <ul style="list-style-type: none"> <li>+ Reminder to group: these patients do not have a complete workup; so ISS scores are expected to be lower</li> </ul> </li> <li>• Question regarding transfers/outliers                   <ul style="list-style-type: none"> <li>+ Note: This performance measure is discussed quarterly at the Statewide Trauma PI meeting</li> </ul> </li> <li>• Trends in Alpha activations arriving at level IV centers</li> <li>• Patient arrival mode EMS vs. POV</li> <li>• ED Disposition from Level IV centers</li> <li>• Transfer rationale from Level IV centers</li> <li>• Question regarding transfers within region or outside of region                   <ul style="list-style-type: none"> <li>+ Group discussion: may be something we want to look at</li> </ul> </li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Follow-up and monitor transfers in/out of region</li> <li>• Monitor reasons for transfers out of region</li> </ul>	BACS	Subsequent meetings
<b>State Medical Director Report: CEC/PI</b> <ul style="list-style-type: none"> <li>• <b>Dr. Donald</b></li> </ul>	<ul style="list-style-type: none"> <li>• Both committees have met this quarter</li> <li>• CEC               <ul style="list-style-type: none"> <li>• Discussed change in activation criteria</li> <li>• Considered the question as to why there are significantly fewer patients entered into the registry this year as opposed to last year (2017 vs. 2018)</li> <li>• Discussed the current monthly "deadline" for trauma center registrars to submit data into the registry                   <ul style="list-style-type: none"> <li>+ At present registrars must enter data within 60 + 6 days of hospital admission</li> </ul> </li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Evaluate where are we currently with entry of data and % entered within 60 + 6 days; and refer the proposed change to go to a requirement for 100% of patients entered within 90 days of discharge to registry subcommittee</li> </ul>	Dr. Donald/ Registry Subcommittee/ BACS	Subsequent meetings



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	<ul style="list-style-type: none"> <li>+ CEC has suggested that the registry subcommittee consider changing this to require all entries be complete within 90 days of patient discharge</li> <li>+ An alternate suggestion was to require hospitals to “close” the record with all information from arrival through ED disposition within an allotted period and then “finalize” the record within an allotted period post discharge (reminded group that any such change would require a change in how reports are run: to run reports from discharge dates)</li> <li>• PI             <ul style="list-style-type: none"> <li>• Dr. Donald gave overview of what the PI committee is reviewing:                 <ul style="list-style-type: none"> <li>+ PI is now looking at and tracking data regarding deaths, survivors, transfers and transfer delays</li> <li>+ Looking at trends within the region to determine best practices that could be shared related to patients expired at Level III/IV; are deaths related to severity of injury, etc.</li> <li>+ Transfer patterns in /out of regions (how to determine the time of transfer and differentiate if time waiting is in facilities)</li> </ul> </li> </ul> </li> <li>• PI plan and indicators</li> <li>• There was general discussion regarding trauma education and training</li> </ul>			
<p><b>MHA</b></p> <ul style="list-style-type: none"> <li>• <b>Mr. Richard Roberson</b></li> </ul>	<ul style="list-style-type: none"> <li>• Mr. Roberson stated that MHA plans to address the issue of trauma funding with Legislature             <ul style="list-style-type: none"> <li>• Specifics                 <ul style="list-style-type: none"> <li>+ Request to increase funding</li> <li>+ Request to perhaps increase fines for DUI and use said collections for trauma</li> </ul> </li> </ul> </li> <li>• Mr. Spruill requested that someone update the previous report that was published in 2015 (not clear on which report is being referred to here) (perhaps to use Horne CPA for the requested report)</li> </ul>	<ul style="list-style-type: none"> <li>• <b>M-S-P</b>; motion to update the report from 2015 to reflect changes in trauma funding – Dr. Deschamp; second Mr. Galtelli, no opposition</li> </ul>	<p align="center">BACS</p>	<p align="center">Subsequent meetings</p>



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	<ul style="list-style-type: none"> <li>• Dr. Deschamp pointed out that that Center for Healthcare Policy had relatively recently published a report pertaining to the trauma system and financials</li> </ul>			
<b>Trauma Care Region Administration/ MATA</b> <ul style="list-style-type: none"> <li>• <b>Ms. Gail Thomas</b></li> </ul>	<ul style="list-style-type: none"> <li>• Ms. Thomas provided information for the group and posed questions for BACS on behalf of the regions (discussion derived from information and questions posed as noted below)</li> <li>• Provided information about the joint Coast TCR and Central TCR symposium               <ul style="list-style-type: none"> <li>+ 479 participants</li> <li>+ 80 people as trained as instructors for Stop the Bleed</li> </ul> </li> <li>• Requested that MTAC waive Rule 1.4.3 regarding region compliance with registry training, claiming that there have not been enough registry training made available in light of registrar turnover and pending changes in the registry itself</li> <li>• Mr. Hall shared information about recent training               <ul style="list-style-type: none"> <li>+ 80 plus participants at the training session offered at the Mississippi Sports Hall of Fame for the purpose of updating users on how to use the web-based registry</li> <li>+ Multiple online webinars for the purpose of making the transition to the web-based registry</li> <li>+ DI also offers web-based training monthly, which is available for individual users</li> </ul> </li> <li>• Dr. Miller states of the 20 hospitals in his region 18 of them are out of compliance with registry training requirements</li> <li>• Mr. Galtelli suggested having web-based training</li> <li>• Ms. Windham noted that DI offered web-based training</li> <li>• Ms. Thomas requested that the region contracts include reference to weighted funding and education funding for the regions               <ul style="list-style-type: none"> <li>+ States it's always been reflected in the contract in the past</li> <li>+ Mr. Hall explained that due to a new process it was not included but that the contracts could perhaps be modified</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• <b>M-S-P</b>; motion to waive Rule 1.4.3 for 1 year – Mr. Spruill; second – Dr. Lineaweaver; amended Dr. Carlton to include the provision that the system will “look for alternate ways to provide training”</li> </ul>	BACS/ Registry Subcommittee	Closed
<b>Committee Reports</b>	<ul style="list-style-type: none"> <li>• <u>Rules &amp; Regulations</u></li> <li>• Chapter 2, the PI chapter for the Rules and Regulations               <ul style="list-style-type: none"> <li>+ Draft document sent prior to the cancelled April meeting</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• <b>M- S- P</b>; motion to approve Chapter 2 as presented – Mr. Spruill; second – Mr. Grace; none opposed</li> </ul>	BACS	For submission the State Board of Health



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	+ Presented for review and approval at the present meeting			
	<ul style="list-style-type: none"> <li>• <u>Functionality</u> <ul style="list-style-type: none"> <li>- Dr. Deschamp provided the update</li> <li>- The subcommittee will begin work on data analysis for those patients transferred to a higher level and work to learn more about the disposition of said patients</li> <li>- Dr. Carlton states Amber has done some work on this in the past</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Dr. Deschamp to follow up with Amber regarding patients transferred in to facilities</li> <li>• Dr. Deschamp to work with Functionality committee regarding transfer to higher level of care and disposition of patients</li> </ul>	Dr. Deschamp	Next meeting
	<ul style="list-style-type: none"> <li>• <u>Burn Subcommittee</u> <ul style="list-style-type: none"> <li>- Mr. Galtelli provided the update</li> <li>- Working on understanding better what is going in/out of registry on burn deaths and burn care</li> <li>- States the committee meets again next week</li> </ul> </li> </ul>		Mr. Galtelli	Next meeting
	<ul style="list-style-type: none"> <li>• <u>Trauma Registry Subcommittee</u> <ul style="list-style-type: none"> <li>- Mr. McManus provided the update</li> <li>- Group made revision on validation process to only include admitted patients</li> <li>- Recommendation in region role of validation process and rewording of document as regions requested</li> <li>- Task group met to review data dictionary – completed and sent to DI</li> <li>- UMMC – entered over 1000 patients into web-based registry</li> <li>- UMMC provided information and feedback on the functionality of the web-based registry</li> <li>- BACS has sent that feedback sent to DI</li> </ul> </li> </ul>		Mr. McManus	Next meeting
<b>NEW BUSINESS</b>				
<b>Stop the Bleed</b>	<ul style="list-style-type: none"> <li>• Dr. Donald states STB program was approved by grant funding up to \$500,000               <ul style="list-style-type: none"> <li>- Question: do we want to continue the program up to the \$500,000?</li> <li>- Mr. Spruill suggests not to continue funding due to funding cuts and proposes to direct more trauma funds to the providers</li> <li>- Dr. Gamble feels it's too early to give up on this program</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• <b>M- S- P;</b> motion to continue the Stop the Bleed program for law enforcement (only) up to the \$500,000 initially allotted and then reevaluate at that time – Dr. Gamble; second – Mr. Spruill; none opposed</li> </ul>	BACS	Ongoing



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	<ul style="list-style-type: none"> <li>- Dr. Gamble points out that only a relatively small amount of money has been spent so far</li> <li>- Dr. Miller states in his region he spends over amount allotted ~ 100% on this training</li> <li>- Dr. Miller suggests to expand to 1<sup>st</sup> responders and fire departments that run medical calls</li> <li>- Mr. Grace states feels like there needs to be better communication and outreach to show successes of the trauma system</li> <li>- Mr. Spruill suggested that if the program is allowed to continue that it remain for law enforcement, only</li> </ul>			
<b>Southeast TCR Study</b>	<ul style="list-style-type: none"> <li>• Mr. Spruill provided copies of a pamphlet highlighting a study sponsored by the Southeast TCR               <ul style="list-style-type: none"> <li>- Copies inserted in the binders as per Mr. Spruill’s request</li> <li>- Mr. Spruill states that he believes that the systems of care will place increase demands on EMS (does not refer to any specific data in the report supporting this statement)</li> <li>- States that data supports that for his region 98% of the patients remain in the SETCR</li> <li>- States that the 2% transferred out of the SETCR are pediatric patients or those needing neuro services</li> <li>- Suggests that this is true across the state</li> <li>- Dr. Carlton states we would need data at state level to determine if this is indeed true across the state - doesn’t believe this can be based on one region</li> <li>- Mr. Hall pointed out that data pulled recently for various reports suggests that this is not the case throughout the state and that BACS will provide data to look into this further</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• BACS to follow up transfer patients in/out of region for FY17</li> </ul>	BACS	Next meeting
<b>Adjourned to Executive Session</b>				
<b>ADJOURNMENT:</b> 12:26 p.m. <b>Next Meeting:</b> September 26, 2018		<b>MINUTES RECORDED BY:</b> Ms. Windham/Mr. Hall		