

State Trauma Advisory Committee (STAC) Meeting

July 18, 2018

AGENDA ITEM		COMMITTEE/ (PRESENTER)	NOTES
I	Call to Order	Jacobs	
II	Approval of Minutes	Jacobs	<ul style="list-style-type: none"> Minutes from the April 18, 2018 meeting were approved as written
III	State Report	Lewis	<ul style="list-style-type: none"> Announced that EMS Expo (formerly EM Today) registration is now open and will be held in Greensboro from October 1-3. The Expo offers a lot of great continuing education for all levels of EMS professionals as well as EM Physicians and RN's. Update on the components of the Mobile Disaster Hospital that have been in Marathon FL serving as a Critical Access Hospital while repairs have been made to one that was flooded during hurricane Katrina. Staff from the disaster program and OEMS staff are currently in FL to disassemble and return these assets to NC. Also reported that more components of the Mobile Disaster Hospital are deployed to St Croix due to the loss of their hospital during hurricane Matthew.
IV	Trauma Systems Updates	Douglas	<ul style="list-style-type: none"> Mentioned that there are quite a few site visits scheduled for the remainder of the summer and into the fall. Naval Hospital Camp Lejeune's state designation visit is scheduled for July 24. This will be the first military hospital in NC to pursue and hopefully obtain designation as a trauma center. Asked that program managers who have not done so send Amy updates/contact info on new trauma program staff members Presented Missions designation certificate. Mission underwent their site visit in February, was voted on and approved for re-designation at the May EMS Advisory Council meeting.
V	OEMS/Medical Director Update	Winslow	<ul style="list-style-type: none"> Should be seeing fewer backboards used for transporting trauma patients (per EMS Protocol) Opioid Crisis remains principal focus
VI	Committee Reports	RAC Coordinators (Lake)	<ul style="list-style-type: none"> New officers elected. Brian Simonson elected as committee chairperson. Upcoming ATLS Classes posted: Check with Bryan Lake for details. Also PCAR class scheduled at AtriumHealth (10/22 – 10/23). Trauma Transfer Times <ul style="list-style-type: none"> Transfer delays secondary to lack of transportation ACTION: Group will be working on developing a plan to investigate transport delays due to availability issue etc. along with trends within each RAC. Stop The Bleed (STB): <ul style="list-style-type: none"> Lots of interest/activity in the various regions

			<ul style="list-style-type: none"> ○ Discussed whether there should be a central website where STB Courses are listed. This information is available at www.facs.org, but might also want to have a site where only NC STB Course information is posted. No great enthusiasm for this concept at this time. ○ Also discussed STB Course content, specifically whether the use of improvised tourniquets should even be mentioned in official SSTB Courses, far less recommended. ACS explicitly discourages the use of anything but standard tourniquets for the B-Con Course, but the practical question arises as to what we should recommend that bystanders do when standard tourniquets are unavailable, and bleeding is not controlled with direct pressure. Spirited discussion ensued!! No consensus reached at this time.
		Injury Prevention Coordinators (Campbell)	<ul style="list-style-type: none"> • Discussed the pros/cons of universal STAC logo. Tracey Gates volunteered to have her program pay the cost of the logo if it were a onetime fee and did not require an annual payment to maintain ownership of the logo. • STAC IP resource guides –Discussed the need for this resource guide. • State Update from NCDHHS-DPH <ul style="list-style-type: none"> ○ Child Fatality Taskforce- Issue Applications are open, deadline for submissions is August 3rd. To submit Goggle (Child Fatality Taskforce NC) ○ New Falls Prevention Taskforce (to include 3 RACS – Wake, Duke, UNC and 24 County wide- Spearheaded by Tricia Smar and Lindsay Bailey) – Next meeting Sept. 11th 11:00-1:30 ○ Statewide Falls Coalition will be held on Aug. 29th 1:00- 4:00 at NC Institute of Medicine in Mooresville, NC ○ Opioids: More funding be made available for community efforts /strategies ○ Upcoming Conferences <ul style="list-style-type: none"> ▪ Safe States Alliance- Sept.5th-7th Charleston, SC ▪ Safe Systems Summit (focus on motor vehicle work) Sept. 13th & 14th at Durham Convention Center – Registration \$35 ○ Promotion of the NC Injury Free Academy – Applications in the Fall, participation is FREE • Numerous local prevention initiatives being carried out at trauma centers (STB, falls prevention, CPS, Trauma Survivors Network, bicycle safety, fireworks safety, water safety, unintentional gun violence prevention (ASK Campaign), etc. Contact Tracie Campbell for further details. • Congratulations to Duke University: NC ATS grant recipient – Falls Prevention.
		TPM's (Spain)	<ul style="list-style-type: none"> • Stop the Bleed Campaign <ul style="list-style-type: none"> ○ Completed education to 250+ athletic trainers. 11 institutions with 31 trainers on July 18th ○ Transylvania County in the pilot county for Stop the Bleed kits ○ Upcoming course at the NC School Nurse Conference on December 6th (approximately 100 participants). Will need 16 instructors and 16 kits. • TOPIC Course: <ul style="list-style-type: none"> ○ UNC hosting a course in January. Will need 20 to hold a course, currently we have 17 interested • Transfer of Trauma Patients to Non-Trauma Centers

			<ul style="list-style-type: none"> ○ Occurring at several trauma centers across the state. ○ Each institution should look at their process and discuss with their communication centers. ○ Further discussion at October meeting (TPM's and STAC) ● CHS Cleveland discussed that they have experienced some delays with getting burn patients accepted to UNC. Al Bonifacio will follow-up ● Upcoming Site Visits <ul style="list-style-type: none"> ○ Camp Lejeune State Designation: July 24th ○ Moses Cone: August 2018 ○ Baptist: Oct 2018 ○ Duke: November 2018 ○ Caromont: November 2018
		Trauma Registrars (Parker)	<ul style="list-style-type: none"> ● Deleting patients from State Registry. State developing a process to ensure consistency ● <u>Problems with coding maxilla injuries.</u> DI addressing. ● <u>AIS Coding and ICD10 Coding:</u> Question was raised regarding coding laterality of injuries. Group discussion concluded that the ICD10 code should reflect the correct laterality. ● <u>DI Updates</u> <ul style="list-style-type: none"> ○ ITDX-NTDB update has been released <ul style="list-style-type: none"> ▪ Centers were reminded to make sure they have registered for the Trauma Cloud ▪ Centers were also asked to verify that they have the newest version of V5 installed prior to submitting data to the ACS. ○ Some centers reported that they are not receiving the emails that contain the update links. <ul style="list-style-type: none"> ▪ <i>RESPONSE: Per Sharon:</i> We think the reason that some sites aren't receiving the updates is that they're being sent as an executable attached to an email. DI is going to add ".nc" extension to all files in the future. ● <u>Continuum</u> <ul style="list-style-type: none"> ○ New EMS reporting system, Continuum is now active. ○ To access Continuum: https://www.emspic.org/ ○ ACTION: <ul style="list-style-type: none"> ▪ If you do not have a user name/password please contact Shawn Kaye. <ul style="list-style-type: none"> • Phone: 919-843-0201 x 232 • Email: skaye@emspic.org ● <u>AIS Course:</u> Sept 17-18; Southern Regional AHEC; Fayetteville NC 28304 ● <u>ATS Registry Course</u> <ul style="list-style-type: none"> ○ ATS requesting that the course be held in December rather than September. ○ Contact Brenda Medlin if your facility can send staff in December to attend the course.
		Process Improvement (Foley)	<ul style="list-style-type: none"> ● Terrie Smith provided an update of the NC TQIP Geriatric Initiative encouraging facilities to share current supportive documents and practices that support geriatric trauma care. The following is not all inclusive although representative:

			<ul style="list-style-type: none"> ○ Frailty scores ○ Pain management (non-opioid) ○ Rib fx Admission (pathways/guidelines) ○ Non-invasive ventilator options ○ Geriatric consult/Palliative consult criteria for geriatric population • Brief discussion surrounding under and over-triage including methods of capturing and monitoring. • JCAHO Taxonomy: <ul style="list-style-type: none"> ○ Overview and review of PI committee historical tools and resources was emailed to each member. ○ Unreasonable to expect this type of review on all PI issues, so each facility should develop criteria for appropriate use of this tool. ○ The event tool was demonstrated for committee and encouraged to use as a worksheet for “events” • In addition, associated definitions and TOPIC taxonomy model were reviewed • Abbreviated bylaws dictating committee chair, vice chair and secretary were adopted. New officers were elected. Newly elected Chair: Cheryl Workman. The next voting term will occur July 2020.
		North Carolina Air Medical Alliance (Taylor)	<ul style="list-style-type: none"> • No Report
		PI/Research (Schiro)	<ul style="list-style-type: none"> • Discussed fluidity of registry at COT meeting. Registry is fluid, as data changes roughly weekly as the Registrars enter new records and correct or update existing records. Datasets for research projects will be frozen at the time the first results or dataset is provided to the researcher. If new datapoints need to be added to the study, a new dataset will be pulled and all stats will be re-run from the new dataset. • We have a lot of research projects underway, many from researchers outside the STAC. Sharon to work on a mechanism for publishing the list of projects that are currently underway.
		NC-COT (Jacobs)	<ul style="list-style-type: none"> • NC/SC Competition Resident Paper Competition <ul style="list-style-type: none"> ○ North Carolina took top 3 places in the 2-state competition <ul style="list-style-type: none"> ▪ Trauma Recidivism and Mortality Following Violent Injury in Young Adults (AtriumHealth) ▪ Augmented Pharmacokinetics of Vancomycin in Patients with Traumatic Brain Injury (Wake Forest) ▪ Redefining Minimal Traumatic Brain Injury (mTBI): A Novel CT Criteria to Predict Intervention (AtriumHealth) ○ Top 2 papers from NC will represent NC at the Regional Paper Competition in November: • TQIP Collaborative <ul style="list-style-type: none"> ○ Focus is on Geriatric Trauma ○ Collaborative met at annual TQIP Meeting (November 2017) ○ Capstone Project Update:

			<ul style="list-style-type: none"> ▪ Current Capstone Students making their final report to STAC later today. Their goal was to identify best practices in Geriatric Trauma from across North Carolina ▪ Funding has been secured for a 2nd Capstone Project, the focus of which will be implementation of the best practices identified in the initial Capstone Project ○ TQIP Collaborative Steering Committee membership has been finalized ○ January 2018 Collaborative Meeting postponed (inclement weather), and April 2018 meeting postponed due to ATLS -10th Edition Update Course • STOP the Bleed Campaign <ul style="list-style-type: none"> ○ Britt Christmas and Eric Toschlog will continue to spearhead NC COT effort to promote STB training across the state ○ STB Course for legislators held in conjunction with Lobby Day 2018: May 23, 3018. See attached summary. ○ Still need to identify a mechanism to catalog how many people each Trauma Center is training. <ul style="list-style-type: none"> ▪ Website (http://www.bleedingcontrol.org) provides a mechanism to capture this information. ▪ Trauma Center Injury Prevention Coordinators or Outreach Coordinators may be best positioned to take the lead on this, although TMD's need to remain engaged as well. • Upcoming Important Dates: <ul style="list-style-type: none"> ○ Region IV Trauma/ACS Resident Paper Competition <ul style="list-style-type: none"> ▪ November 2-3, 2018 (Charlotte, NC) ○ TQIP Scientific Meeting <ul style="list-style-type: none"> ▪ November 18-18, 2018 (Anaheim, CA)
		NC-ATS (Wilkins)	<ul style="list-style-type: none"> • No Report
VII	New Business		<ul style="list-style-type: none"> • ATLS Cost Structure <ul style="list-style-type: none"> ○ Significant variability between NC Trauma Centers in what (and who) they charge for ATLS courses: <ul style="list-style-type: none"> ▪ Varying charges across institutions in registration fees for attending physicians (\$725-\$975) ▪ Varying charges within institutions for residents vs attendings vs physician extenders ▪ Some institutions charge a registration fee for auditors, others do not ▪ Some include auditors when calculating the "S/P COT-Flat Fee per Participant" or "State Charge" while others do not. ○ After discussion, does not seem to be an appetite to standardize fees and practices across the state, primarily because course-related expenses also vary significantly across the state for things not under the control of the trauma center, so course fees need to be flexible in order to maintain profitability for some centers, while not over-charging students at other centers. ○ NC-COT however will adopt a policy of charging the trauma center a flat fee (currently \$45) for each student who pays an ATLS Course registration fee. If a given institution chooses to charge a registration fee for course auditors, NC-COT will assess that center the standard administrative

			fee, whereas no fee will be charged to those centers who do not charge their auditors a registration fee.
VIII	Next Meeting	-	<ul style="list-style-type: none">October 17, 2018
IX	Adjourn	Jacobs	

Submitted by:

David Jacobs