Trauma System Oversight & Management Committee Virginia Office of EMS Virginia Crossings Hotel & Conference Center 1000 Virginia Center Parkway Glen Allen, VA 23059 September 6, 2018 1:30 p.m.

Members Present:	Members Absent:	Other Attendees:	OEMS Staff:
Michel Aboutanos, Chair	Susan Watkins	J. Thomas Ryan	Gary Brown
J. Forrest Calland	Lisa Wells	Morris Reece	Cam Crittenden
Emory Altizer	Keith Stephenson	Jeff Haynes	Wanda Street
K. Scott Hickey	Sid Bingley	Karen Shipman	David Edwards
Shawn Safford		Tracey Lee	Tim Erskine
Andi Wright		Kathy Butler	
Jay Collins		Valeria Mitchell	
Lou Ann Miller		Dallas Taylor	
Michael Feldman		Jennifer Mantha-Mund	
Margaret Griffen		Bryan Collier	
		Peter Ploch	
		Kelly Brown	
		Tom Forsberg	
		Allison Schmitt	
		Kelley Rumsey	
		Tanya Trevilian	
		Kate Challis	
		Kenneth Smith	
		Amy Gulick	
		Cathy Peterson	
		Beth Broering	
		Nicole Laurin	
		Kelly Parker	
		Pier Ferguson	
		Chantelle Hayes	
		Robin Pearce	
		Daniel Munn	
		Wayne Perry	
		Mark Day	
		Sherry Stanley	
		Melinda Myers	

Topic/Subject	Discussion	Recommendations,
		Action/Follow-up;
Call to and an	Dr. Aboutance called the mosting to order at 1:22 n m	Responsible Person
Call to order: Approval of the Agenda:	Dr. Aboutanos called the meeting to order at 1:33 p.m. A motion was made by Emory Altizer to approve the agenda. The motion was seconded by Dr. Jay Collins.	The agenda was approved as
Approval of the Agenda:	The agenda was approved as submitted.	submitted.
Approval of minutes	A motion was made by Andi Wright to approve the minutes dated June 7, 2018. Dr. Jay Collins seconded	The June minutes were
dated June 7, 2018:	the motion. All committee members were in favor. None opposed. The meeting minutes were approved as submitted.	approved as submitted.
Chair Report:	Dr. Aboutanos sent an email to the committee about the approval of the Trauma System Plan by the EMS Advisory Board. Only a few questions were asked such as the effect on the composition of the current Advisory Board. The By-Laws for the Plan will be submitted for approval at the November Advisory Board meeting.A lunch meeting was held today with the chairs of the workgroups/committees and Dr. Aboutanos thanked them	
	and all the other members who helped to develop the Trauma System Plan. It was challenging but everyone worked collaboratively together. He also thanked the Office of EMS for their incredible guidance, support and vision during this process. He just wanted to thank everyone for all of their hard work. (applause)	
Trauma Performance	Dr. Calland thanked the committee formerly known as the Trauma Performance Improvement Committee (TPIC),	
Improvement Committee	which is now known as the System Improvement Committee (SIC). SIC is engaged in the process of affirming a	
(TPIC) Update –Dr. J. Forrest Calland:	new chair and determining the committee membership. The ongoing work of the committee is to make sure the	
Forrest Canand:	pre-hospital records are complete to allow for accurate decision making regarding the transfer of patients to trauma centers for patients with low GCS. We have achieved a great success in the completeness of those records. We	
	then went from there and worked on the seasonal variation in the relative prevalence of hypothermia among	
	patients admitted to trauma centers. This work is ongoing. We want to determine how big this problem is so that	
	the Medical Direction Committee can get a sense of how much they need to invest in this in terms of time and	
	money. Lastly, looking forward, we concluded today that the frontier for us is risk-adjusted assessment outcomes	
	and risk-adjusted mortality in the Commonwealth of Virginia.	
Trauma Program	The Trauma Program Managers did not meet yesterday due to not having a full agenda and the absence of many of	
Managers Update – Andi	the program managers. Andi has been privileged and honored to be the chair of the TPM meetings and sent out an	
Wright:	email yesterday announcing her retirement effective the end of the year. She asked them to submit nominations for	
	the chair of the TPM Committee. Dr. Aboutanos thanked her for all her efforts and many years of service to the	
	TSO&	
	MC.	
Trauma and Non-	Riverside Regional Medical Center – Lou Ann Miller	
Trauma Center Updates:	• Our Pavilion expansion is finished and we will move patients over the week of September 10 th .	
eren eren eren eren er	 We have two new trauma surgeons who started in August and another surgeon starting in September 	Attention Trauma Program
	giving us a total of 6 Trauma and Acute Care Surgeons.	<u>Managers</u> – Please submit your
		trauma center updates at least
	Children's Hospital of the King's Daughters – Cathy Peterson	one week prior to the next
	• CHKD had their site review on July 24 and we are waiting for the Commissioner to sign off for our	meeting to wanda.street@vdh.virginia.gov.
	designation.	
	Chippenham Hospital – Heather Davis	
	Chippennam Hospital – Iteatitet Davis	

	 Dr. Frank Yang deployed to Korea for 6 months Dr. Khaled Basiouny appointed to Trauma Medical Director Welcome Trauma Education and Injury Prevention Coordinator, Chantelle Hayes Welcome 2 new additions to trauma surgery group, Dr. P. Chip Rich and Dr. Dustin Donley Recruiting for Trauma Registrar <u>VCU Medical Center – Beth Broering</u> VCU Medical Center will have an 11th Acute Care Surgeon joining the faculty in October 2018 Rao Ivatury Trauma Symposium will be on March 22, 2019 <u>Lynchburg General Hospital – Kelly Brown</u> We implemented our new EMR – Cerner- September 1, 2018 Begun Collaboration with BREMS to provide Stop the Bleed Education using our high-fidelity Simulation Center Plan to Host TCAR class January 2019 - stay tuned for more details 	
Trauma System Plan Task Force Update – Dr. Aboutanos:	 Dr. Aboutanos asked each of the chairs to give a brief update on what they have done today and what the plan is for the next three months: Trauma Administrative & Governance – Lou Ann Miller Lou Ann stated that they already have a chair, so they went down the committee composition list and came up with names to reach out to for submission as nominees. Andi added that they considered the time requirement as well as the geographic locations, diversity, experience and skillset. They were able to come up with some of the position nominees and some they were not. This is a work in progress. Prehospital Care – Dallas Taylor Dallas reported for Eddie Ferguson, who apologized for having to leave. They did the same and went down the list for each individual member. They identified organizations/associations and looked at the geographic areas. They assigned some of the individuals who were currently attending the meetings and made some phone calls to see if they were interested in filling these roles. Acute Care – Tanya Trevilian Ditto what Dallas said. They also looked at the structure of who they had picked and also who were our strengths and weaknesses to be able to assist other committees in choosing representatives for their seats. We also came up with names and some people were texted and asked if they were interested. We wanted to be sure of who we chose in respect to who will be committed. We need to be sure to have a quorum at the meetings in order to make decisions and get the work completed. These were our considerations. Post-Acute Care – Kathy Butler Likewise, we took our list of members and penciled in some names that could be potential nominees. We felt our hour or so was well spent. 	

	Emergency Preparedness & Response – Mark Day Mark and Kelly went through the list and Kelly will be able to get some diverse members from all over the state.	
	They also talked about the individuals that will come from other committees such as Prehospital and Post-Acute Care committees and what we want from those committees.	
	Dr. Safford mentioned that there will be a lot of shared resources and he wonders how people are going to be	
	attending the meetings if they will be held at the same time. Dr. Aboutanos stated that after all the groups are finished he will speak about the logistics.	
	Injury & Violence Prevention – Karen Shipman Ditto what everybody else said. We identified more organizations and groups than names today. We wanted to keep in mind the injury patterns. We looked at injury patterns throughout the state. What is the number one injury versus what is happening in other regions? We want to make sure we have regional cooperation and we want to think more globally when including organizational representatives. They will meet again in the next couple of weeks.	
	Dr. Aboutanos said that the logistics are still being worked out so that all the meetings won't be held at the exact same time. He stated that it may be wise to only serve on one committee which best suits your expertise. There may be times when you may be needed for one or two meetings, you will have to coordinate that. The Trauma Administrative and Governance will never meet at the same time any other group meets. They will probably meet at the end of the day. Logistically, we will look at when will be the best time for each committee to meet.	
	Dr Aboutanos also discussed the use of Survey Monkey by the Office of EMS that could be used to facilitate the gathering of the names and their function with a brief statement as to why they should be on the committee. Mistakes will be made; this is a learning process. Please be tolerant with each other.	
	The names will be submitted to the chairs of the workgroups and they will forward them to Tim. The chairs can give feedback to the rest of the workgroup concerning the nominees.	
VA COT Committee Update – Dr. J. Forrest Calland:	Dr. Calland explained that he is the COT Chair for the Commonwealth of VA. There are two things that we are presently focusing on; first on behalf of the Central Office in Chicago, there is a lot of embarrassment about the delayed TQIP reports as they changed to a new information and data system. He had nothing to do with this; nevertheless, he wanted to apologize on behalf of the staff and colleagues who have worked hard on this system. This has also delayed the activities of the Region III Collaborative. If you are interested in participating in the Region III Collaborative, it costs \$500 per year. They are meeting in November in Anaheim and will talk about TQIP and we encourage everyone in Virginia to join. Dr. Calland will send out notices of the meetings. There will be a Region III luncheon-information session and Dr. Calland will send out more information as he does not have the information with him today.	
	The other thing is that many of the people here are engaged in the process of rolling out Stop the Bleed in their communities. We have an exciting idea of getting this out through high schools. The pilot is underway in the Charlottesville region to educate school nurses and physical education teachers so they can teach the program in the schools as part of the annual curriculum. If you would like to do this, let Dr. Calland know. He has surplus COT funding to purchase more kits on a first come, first served basis.	

	Kate Challis also commented that a coalition for Stop the Bleed has been formed in Central Virginia and all the trauma centers in Central Virginia will meet on September 23 at VCU. We have coordinated to jointly do some large scale public events. They have also started to schedule classes through VCU, so all the data is collected. Dr. Aboutanos stated that this is a great method to push forward into other regions, not just Central Virginia. Dr. Calland said that this is awesome. He is very excited about this. Kate also stated that the Office of EMS, Department of Education and the coalition are working together to create a pilot program that will start in Powhatan in November. They will teach and train all school nurses in the County. It has a two components, one is the Stop the Bleed course and the second is a scenario based component to see if they retained what they learned. Karen Shipman of VCU collaborated with Richmond Ambulance Authority last year and trained school nurses and school resource officers at Richmond City Public Schools. They went back and trained the assistant principals. They are supposed to go back sometime this year to train the coaches and PE teachers.	
Medical Direction	No update.	
Committee Update – Dr.		
J. Forrest Calland:		
OEMS Update Gary	Gary Brown stated that we have come a long way since the 2015 ACS Consultative Report. He congratulated	
Brown:	everyone in the room for the commitment in making the Trauma System Plan happen. He also thanked Dr. Aboutanos for his leadership in this endeavor. The Plan will be presented at the State Board of Health on	
	Thursday, September 13. Gary and Cam will attend the meeting and has asked Dr. Aboutanos to attend also. He	
	stated that the committees have his unequivocal support and commitment to the Trauma System Plan and to the	
	efforts as this is a living document that will not just sit on the shelf. He will ensure that the Office of EMS has the	
	resources, staff, funding and infrastructure to support this Plan as we make changes to the Advisory Board and the legislative changes. It won't happen overnight, but the commitment is there.	
	registative enanges. It won't happen overnight, but the communent is there.	
	Stop the Bleed will be rolled out at our Annual EMS Symposium and our target is no less than 600, but hoping for	
	800 EMS providers throughout the Commonwealth. We will train them and they will go back to their communities	
	to train others. The Symposium will be from November 7-11 in Norfolk. The country of Bermuda has adopted	
	Virginia for their EMS continuing education credits. Gary will get with our Public Relations Coordinator to get	
	some media alerts out.	
	Gary also stated that a dedicated trauma track is always held as well as a pediatric track. Please join us by taking	
	some classes. Also, the Call for Presentations is open for 2019. Gary challenged the committee members to teach	
	and submit courses for the 40 th Anniversary EMS Symposium in 2019. The symposium program committee is	
	always looking for good topics and good instructors.	
Old/Unfinished Business:	a. ABMS Maintenance of Certifications and physician trauma CME	
	Andi stated that at the June Trauma System Oversight & Management Committee meeting a small workgroup was	
	tasked with reviewing the ACS recommendations for physician CMEs. The workgroup consisted of Andi, Dr.	
	Hickey, Dr. Collins, and Dr. Stephenson. They also brought in the State Chapter President of the Virginia Academy of Physician Assistants (VAPA). They spoke to a number of nurse practitioners who also chair different	
	chapters of the state and several others who are in the room. The trauma program managers have seen the	
	document and it was distributed at the meeting today. Briefly, whenever preparing for a state survey or an ACS	
	survey, gathering CME data is very important. These recommendations are a work in progress and we are bringing	
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	them to the group today for discussion. The committee reviewed each of the recommendations and made several changes or additions in which Andi will correct. The corrected document will be reviewed at the next Trauma System Oversight & Management Committee meeting in December and then go before the EMS Advisory Board in February. It will then go to the State Board of Health for their approval.	
New Business:	None.	
Public Comment:	None.	
Adjournment:	The meeting adjourned at approximately 1:58 p.m.	2018 TSO & MC Meeting Schedule: December 6