



MINUTES

EMERGENCY MEDICAL SERVICES & TRAUMA SYSTEM (EMSTS)

TRAUMA SYSTEM ADVOCACY COMMITTEE

MARCH 25, 2014 - 3:00 P.M.

MEMBERS PRESENT

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| Erin Breen, UNLV, Chairman | Abby Hudema, RN, UMC |
| Dennis Nolan, Community Ambulance, Vice-Chairman | Gail Yedinak, UMC |
| Kim Dokken, RN, St. Rose Siena Hospital | |

MEMBERS ABSENT

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| Senator Shirley Breeden | Melinda Case, RN, Sunrise Hospital |
| Kate Osti, Nevada Disability Advocacy & Law Center | Carl Nelson, Public |

SNHD STAFF PRESENT

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| Mary Ellen Britt, RN, EMSTS Manager | Christian Young, MD, EMSTS Medical Director |
| John Hammond, EMSTS Supervisor | Jennifer Sizemore, PIO Manager |
| Stephanie Bethel, Public Information Officer | Michelle Nath, Recording Secretary |

PUBLIC ATTENDANCE

Kimberly Syres, University Medical Center

CALL TO ORDER – NOTICE OF POSTING

The Trauma System Advocacy Committee convened in Conference Room 2 at Southern Nevada Health District, 330 S. Valley View Boulevard, on Tuesday, March 25, 2014. Chair Breen called the meeting to order at 3:13 p.m. and the Affidavit of Posting was noted in accordance with the Nevada Open Meeting Law.

I. PUBLIC COMMENT

Members of the public are allowed to speak on action items after the Committee’s discussion and prior to their vote. Each speaker will be given five (5) minutes to address the Committee on the pending topic. No person may yield his or her time to another person. In those situations where large groups of people desire to address the Committee on the same matter, the Chair may request that those groups select only one or two speakers from the group to address the Committee on behalf of the group. Once the action item is closed, no additional public comment will be accepted. Seeing no one Chair Breen closed the Public Comment portion of the meeting.

II. CONSENT AGENDA

Chair Breen stated the Consent Agenda consisted of matters to be considered by the Trauma System Advocacy Committee (TSAC) that can be enacted by one motion. Any item may be discussed separately per Committee member request. Any exceptions to the Consent Agenda must be stated prior to approval.

Approve Minutes/Trauma System Advocacy Committee: 2/11/14

Chair Breen asked for approval of the minutes from the February 11, 2014 meeting. Vice-Chairman

Nolan noted for the record that the affiliation with Centennial Hills Hospital following his name should be changed to Community Ambulance. *A motion was made by Gail Yedinak to accept the minutes with the correction noted by Vice-Chairman Nolan. The motion was seconded by Abby Hudema, and carried unanimously by the Committee.*

III. REPORT/DISCUSSION/POSSIBLE ACTION

A. Discussion of Increasing Public Awareness about the Clark County Trauma System

At the previous committee meeting, there was discussion about creating a list of trauma system stakeholders and involving them in the dialogue about system funding in preparation for the next legislative session. Chair Breen distributed a list of stakeholders that she had compiled for committee review. The list which consisted of trauma centers, hospitals, large corporations, small businesses, and other community partners will need to be completed by the committee. She recommended the members begin to identify individual names for as many of the targeted organizations as possible. The stakeholders list would then serve two purposes: 1) those in support of funding the Emergency Medical Services & Trauma System (EMSTS) could lend their support with legislative efforts and 2) their names could be considered for Board membership if a trauma system foundation were to be created. Vice-Chair Nolan added that the hospitals and their Boards are a good resource as they strive to place relevant people from the community on their Boards who are willing to advocate for pertinent issues. Chair Breen noted that those employers who are self-insured would understand the subject matter better than those who carry private insurance, and obtaining their support would be beneficial. The efforts to obtain a sustainable funding source for the EMSTS will be enhanced by engaging all trauma system stakeholders prior to the legislative session.

In an effort to increase public awareness about the trauma system, there was discussion pertaining to the marketing of the system and developing a brand for it. Health District staff members from the Public Information Office (PIO) were present and they shared some of their findings during their research of trauma systems campaigns. There was reference to a series of videos posted on social media for the state of Washington. The episodes covered various components like CPR classes, dispatch centers, on the scene, in the ambulance, and the emergency department. The State of Ohio completed a marketing plan for their trauma system and there were many good ideas incorporated in the plan. Jennifer Sizemore remarked that the PIO could create a microsite on the Health District's website for the trauma system. It could have its own unique look and this would be one way to brand the Clark County Trauma System. The PIO will begin a "Did You Know" campaign with the use of an electronic newsletter. For the month of May the dedicated topic could be trauma as a means to increase awareness about the value of the system. There were many ideas brought forward for a slogan and visuals, and the committee members agreed to hold a separate workshop for brainstorming marketing ideas.

There was a recommendation to hold a press conference in May because it's dedicated as Trauma Awareness month. The press conference could be the kick start to the introduction of the trauma system. The plan is to include representation from each of the trauma centers as well as survivors who can share their stories. Building on this idea, Dr. Young remarked the involvement of the different facilities, with each of their capabilities, can serve as a trauma consortium. It gets many people involved and a specific objective, like public education, can be realized. Chair Breen was in favor of a trauma consortium and suggested that any further recommendations for this topic also be explored at the workshop.

B. Discussion of Trauma System Funding

Chair Breen opened the discussion of trauma system funding by reviewing some of the previously discussed recommendations to obtain a sustainable funding source. She remarked that she is awaiting an update from the Nevada Insurance Council about implementing a fee to insurance policies in support of the EMSTS. There was discussion pertaining to Senate Bill No. 58 (SB58),

introduced during the 2007 legislative session, which would have provided for the imposition of a fee to be added to certain traffic violations to create a funding source for rural Emergency Medical Services (EMS). The outcome was the bill did not pass the Assembly floor by one vote. Chair Breen agreed to provide the Committee with a summary of the events pertaining to SB58. The events surrounding this bill could serve as a means to strategize for future legislative efforts. Vice-Chair Nolan remarked there will need to be a champion in the Legislature to carry a bill draft request to support the request for system funding and he remarked the Chairman of the Senate Health and Human Services Committee would be preferable. Chair Breen responded that Senator Woodhouse, the Vice-Chairwoman of the Senate Health and Human Services Committee, had already submitted a placeholder for a future bill draft. The next step would be to engage trauma system stakeholders, including the Nevada Hospital Association and gaming industry, who could lend support through their lobbyists.

As the discussion of funding furthered, it was noted that there is consideration of moving the State's EMS Office to the Department of Public Safety (DPS). This information had been announced at a recent statewide Committee on Emergency Medical Services meeting and this move could impact any future legislative efforts. This change would open Nevada Revised Statutes Chapter 450B which gives the Southern Nevada District Board of Health the authority for EMS in Clark County. It could change the committee's goals in terms of identifying a funding source and which agency will ultimately receive the revenue. Gail Yedinak questioned if the budget had been discussed and whether or not it would be reallocated to DPS. Mary Ellen Britt responded it would require a legislative change with a transfer of the funding source to DPS, and it did not seem likely that there would be any additional dedicated funding. Ms. Yedinak remarked this change would impact any efforts to pursue revenue from the Indigent Accident Fund.

As system issues were discussed, there was a comment made that the Governor is concerned about patients who are placed on a Legal 2000 hold being transported to local hospitals and consequently causing internal disaster declarations at those facilities due to patient overload. This issue is gaining a great deal of attention from policymakers. As this issue is in the forefront, a recommendation was made to take this forum and weave in the discussion of EMSTS funding. Tourism is a vital to the local community. It's important for the gaming industry to understand the significance of a robust EMSTS and making sure that it's ready to respond in an emergency situation. Vice-Chair Nolan recommended creating a fact sheet to be used as an educational tool when approaching stakeholders. The fact sheet will need to outline why funding EMSTS is critical. Mary Ellen Britt remarked that the EMSTS budget is small as compared to other states. In response there was a suggestion to have Senator Woodhouse, as the bill sponsor, inquire if the Legislative Counsel Bureau (LCB) staff could contact the National Conference of State Legislators and obtain a comparison on how other states fund their trauma systems. Some information was previously provided to the committee by Melinda Case who obtained the details from the Trauma Association of America. John Hammond reported that the EMS Office in Oregon is funded through revenue generated from medical marijuana. Ms. Britt responded that many organizations will be competing for money stemming from medical marijuana. It was noted that the State's EMS Office receives public health preparedness funds and that those dollars may eventually be reduced. Ms. Yedinak suggested outlining the gaps in funding and highlighting those results when creating the fact sheet.

C. Discussion of Future Legislative Activities in Support of the Trauma System

Chair Breen remarked despite the news of the potential move of the State's EMS Office to DPS, the legislative activities of the committee will need to move forward. Ms. Britt commented that the State EMS Office is not in favor of the change. It's in the exploratory phase of discussion and funding is one of the issues. She added if a dedicated funding source was created to support the Health Division in doing the job of being the regulatory agency for EMS and trauma then perhaps the move would not be considered. Referring back to SB58, Chair Breen commented that there is a possibility

to revisit implementation of a fee to certain traffic violations. The 2007 attempt which was almost successful would have generated approximately \$2.5 million annually. It was noted that there was opposition to the proposed fee from a couple of Clark County judges. To move a similar bill forward, the Chair recommended including the judges in the dialogue from the outset.

The closing comments related to the creation of a trauma system foundation. Ms. Yedinak remarked to pursue revenue from specialty license plates there would need to be a 501(c)(3) in place. The foundation could receive donations and its mission would be to support the trauma system. Chair Breen remarked if it were a stand-alone foundation then it could be called the Southern Nevada Acute Care and Trauma Consortium (SNACTC).

III. INFORMATIONAL ITEMS/DISCUSSION ONLY

The Committee agreed to meet on April 8, 2014 for a work session to work on publicity and marketing ideas.

IV. PUBLIC COMMENT

Public comment is a period devoted to comments by the general public, if any, and discussions of those comments, about matters relevant to the Committee's jurisdiction will be held. No action may be taken upon a matter raised under this item of this Agenda until the matter itself has been specifically included on an agenda as an item upon which may be taken pursuant to NRS 241.020. All comments are limited to five (5) minutes. Chair Breen asked if anyone wished to address the Committee. Seeing no one, she closed the Public Comment portion of the meeting.

V. ADJOURNMENT

As there was no further business on the agenda, *Chair Breen called for a motion to adjourn. The motion was seconded and passed unanimously to adjourn at 4:25 p.m.*