



**MINUTES**  
**EMERGENCY MEDICAL SERVICES & TRAUMA SYSTEM**  
**DIVISION OF COMMUNITY HEALTH**  
**REGIONAL TRAUMA ADVISORY BOARD (RTAB)**

**October 18, 2017 - 2:30 P.M.**

**MEMBERS PRESENT**

Sean Dort, MD, Chair, St. Rose Siena Hospital	John Fildes, MD, UMC
Chris Fisher, MD, Sunrise Hospital	Hilary Mauch, RN, Sunrise Hospital
Kim Cerasoli, RN, University Medical Center	Kim Dokken, RN, St. Rose Siena Hosp
Danita Cohen, Public Relations/Media	August Corrales, Paramedic, Private EMS Provider
Billy Meyer, RN, Rehabilitation Services	Kelly Taylor, Payers of Medical Benefits
Shirley Breeden, Public Representative (via phone)	Jeff Ellis, System Financing/Funding
Sajit Pullarkat, Administrator, Non-Trauma Hospital	Erica Nansen, Health Education & Injury Prevention
Frank Simone, Paramedic, Public EMS Provider	

**MEMBERS ABSENT**

Tressa Naik, MD, MAB Chairman	Erin Breen, Legislative/Advocacy
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**SNHD STAFF PRESENT**

John Hammond, EMSTS Manager	Christian Young, MD, EMSTS Medical Director
Michael Johnson, PhD, Director of Community Health	Laura Palmer, EMSTS Supervisor
Scott Wagner, EMS Field Rep	Gerry Julian, EMS Field Rep
Lei Zhang, Sr. Informatician	Edie Mattox, Administrative Secretary
Judy Tabat, Recording Secretary	Heather Anderson-Fintak, Associate Attorney

**PUBLIC ATTENDANCE**

Stacy Johnson, Mountain View Hospital	Amy Doane, Sunrise Hospital
Stephanie Lim, Spring Valley Hospital	Dorita Sondereker, Sunrise Hospital
Jennifer Kocis, HCA	Brandi Planet, Ferrari Public Affairs
Deborah Kuhls, MD, UNLV/UMC	Karen Port, Mountain View Hospital
Erin Klein, Centennial Hills Hospital	

**CALL TO ORDER – NOTICE OF POSTING**

The Regional Trauma Advisory Board (RTAB) convened in the Red Rock Trail Conference Room at the Southern Nevada Health District, located at 280 S. Decatur Boulevard, on October 18, 2017. Chairman Dort called the meeting to order at 2:37 p.m. and the Affidavit of Posting was noted in accordance with the Nevada Open Meeting Law. Chairman Dort noted that a quorum was present.

Dr. Dort introduced the following and welcomed them as new non-standing members of the RTAB:

- 1) Sajit Pullarkat, representing the Administrator from a non-trauma hospital system
- 2) Frank Simone, representing the public providers of advanced emergency care
- 3) August Corrales, representing the private franchised providers of advanced emergency care
- 4) Billy Meyer, representing the rehabilitation services
- 5) Jeff Ellis, representing system funding/financing

#### **I. PUBLIC COMMENT**

Members of the public are allowed to speak on Action items after the Board's discussion and prior to their vote. Each speaker will be given five (5) minutes to address the Board 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 Board on the same matter, the Chair may request that those groups select only one or two speakers from the group to address the Board on behalf of the group. Once the action item is closed, no additional public comment will be accepted.

Chairman Dort asked if anyone wished to address the Board pertaining to items listed on the Agenda. Seeing no one, he closed the Public Comment of the meeting.

Dr. Dort noted that he has been serving on the RTAB for the past 13 years. He stated the RTAB provides for a collaborative effort that involves first responders, private and public providers, trauma hospitals, non-trauma hospitals, and everyone that has some connection to health care in the city. He related that a little over two weeks ago our system was put to a test, unlike any other city in America. By every account, all who were involved demonstrated an outstanding performance. Dr. Dort stated that the city should be proud of itself in the way it handled such a tragedy.

#### **II. CONSENT AGENDA**

Chairman Dort stated the Consent Agenda consisted of matters to be considered by the RTAB that can be enacted by one motion. Any item may be discussed separately per Board member request. Any exceptions to the Consent Agenda must be stated prior to approval.

Approve Minutes/Regional Trauma Advisory Board Meeting: 07/19/2017

Chairman Dort asked for approval of the minutes from the July 19, 2017 meeting. *A motion was made by Member Fildes, seconded by Member Taylor and passed unanimously to approve the minutes.*

#### **III. CHIEF HEALTH OFFICE REPORT: Dr. Iser**

Dr. Michael Johnson, Director of Community Health, reported that there was no CHO report. He reiterated Dr. Dort's comments on the response and recovery effort. Many of the SNHD staff were also involved, particularly the Office of Public Health Preparedness, Vital Records and the OEMSTS. The communication appeared seamless and was impressive. It's a testament to all the exercises, drills and training put in place to prepare for this type of event. He reported there has been overwhelming support from the community including food, money and behavioral mental health providers that have offered their services. The FAC (Family Assistance Center) will be moved from the Las Vegas Convention Centre to a location off Pinto Lane. It will be named the Vegas Strong Resiliency Center. They will be providing behavioral mental health services, medical/legal services referrals, and assisting with burial permits and death certificates to fulfill the needs of the victims and families of those touched by the tragedy.

#### **IV. REPORT/DISCUSSION/POSSIBLE ACTION**

- A. Discussion of Upcoming Election for Chair and Vice-Chair of Regional Trauma Advisory Board

Dr. Dort referred the Board to the nomination forms for Chair and Vice-Chair for the upcoming two-year term. He explained that the Vice-Chair is automatically nominated for the Chair position, if they are willing to serve. The nomination forms are due to the OEMSTS by November 30<sup>th</sup>. The new term will begin July 1, 2018.

B. Committee Report: Trauma Needs Assessment Taskforce (07/19/17; 09/19/17)

- Review/Discuss Data Dictionary
- Review/Discuss Draft Needs Procedure
- Review/Discuss Assigning Weights to the SNHD Trauma Needs Assessment Tool

Dr. Fildes reported that the Trauma Needs Assessment Taskforce has spent a lot of time and gotten very granular about measures that can be used by SNHD, community partners, and healthcare partners who are potential applicants for new centers for the treatment of trauma. Last month there was a suggestion for a new inclusion that will be discussed at its next meeting. He believes the data dictionary will then be substantially complete. The procedure for the suitability of the Needs Assessment will also be considered again at the RTAB.

In terms of assigning weights to the different measures and positions in the procedure, it may require some drafting to place the concepts and data elements into a policy that will eventually become part of the Trauma System Plan. Since it is outside the purview initially given to the Taskforce, it may eventually be assigned to the RTAB going forward.

C. Workshop Report: Southern Nevada Injury Prevention Partnership (SNIPP) (09/07/2017)

Ms. Nansen announced the next meeting is scheduled for the following Monday. One topic of discussion will be how to reenergize the Committee.

Upcoming events include the Halloween Safe-tacular on October 2<sup>st</sup> at the Kohl's on Flamingo and the 215. They will be distributing information on pedestrian safety, along with games, activities and treats. They are also updating the Fall Prevention pamphlets to include information for adults and pediatrics.

D. Trauma Field Triage Criteria Data Report

Ms. Palmer reported the following trauma registry data for 2<sup>nd</sup> Quarter of 2017:

Total Trauma Registry Patients = 1928

April 2017 = 664

May 2017 = 667

June 2017 = 597

She stated that the number 1 mechanism of injury for patients was falls followed by motor vehicle occupant and then motorcyclist.

She added that the number 1 mechanisms of injury for deaths was gunshot wounds followed by falls and then auto pedestrian.

Ms. Palmer reported the following trauma transport data for 2<sup>nd</sup> Quarter of 2017:

Total Trauma Transports = 2985 (2691 adult; 294 pediatric)

April 2017

- Total Transports = 986; (889 adult; 97 pediatric)
- UMC: 776; (691 adult; 85 pediatric)
- Sunrise: 144; (140 adult; 4 pediatric)
- St. Rose Siena: 66; (58 adult; 8 pediatric)
- Out of area transports: 3%

May 2017

- Total Transports = 1,017; (912 adult; 105 pediatric)

- UMC = 819; (726 adult; 93 pediatric)
- Sunrise = 139; (130 adult; 9 pediatric)
- St. Rose Siena = 59; (56 adult; 3 pediatric)
- Out of area transports 5%

June 2017

- Total Transports = 982; (890 adult; 92 pediatric)
- UMC = 811; (723 adult; 88 pediatric)
- Sunrise = 113; (111 adult; 2 pediatric)
- St. Rose Siena = 58; (56 adult; 2 pediatric)
- Out of area transports 3%

Total out of area for 2<sup>nd</sup> Quarter of 2017 was 4%

Ms. Palmer reported the following Clark County trauma centers disposition by category percentage totals for 2<sup>nd</sup> Quarter of 2017:

Physiological step 1 patients: 5%

Anatomical step 2 patients: 7%

Mechanism step 3 patients: 41%

Special Considerations step 4 patients: 47%

Ms. Palmer commented that there were over 8000 transports for the year with 3 more months to report.

Dr. Fildes noted Step 3 and Step 4 mechanism and consideration patients account for 86% of the transports, which seems high compared to the historical data reported. In relative terms, it's actually driven down the number of anatomical and physiological patients to 14% of the total population of the system; a situation that probably deserves a bit more study. He inquired whether there has been any concern voiced from the EMS providers in terms of number of transports and the severity of illness of the patients being transported. Ms. Palmer stated that nothing has been relayed thus far.

## V. INFORMATION ITEMS / DISCUSSION ONLY

### A. Report from Public Provider of Advanced Emergency Care

Mr. Simone stated there were no items to report.

### B. Report from Private Provider of Advanced Emergency Care

Mr. Corrales reported that Community Ambulance was already on scene providing standby medical care at the Route 91 concert where the shooting occurred. AMR and MedicWest Ambulance were able to mobilize additional employees to be able to attend to the event. There was a tremendous response from the additional team that was deployed. There were also several units available for response in the staging area.

### C. Report from General Public Representative

Ms. Breeden stated there were no items to report.

### D. Report from Non-Trauma Center Hospital Representative

Mr. Pullarkat commended the healthcare community on its coordination and support during the tragedy that took place two weeks ago.

### E. Report from Rehabilitation Representative

Mr. Meyer stated there were no items to report.

### F. Report from Health Education & Injury Prevention Services Representative

Ms. Nansen reported UMC's annual "You Drink, You Drive, You Lose" event is scheduled for December 1st. Dr. Fildes noted the "Every 15 Minutes" event requires a lot of work for

the people who commit to it. He has had the honor of participating a few times, and was moved at how powerful the program is, particularly for teenagers. It's a community-wide effort for which they should elicit additional patronage from a larger group of stakeholders for future events.

G. Report from Legislative/Advocacy Representative

No report given.

H. Report from Public Relations/Media Representative

Ms. Cohen stated there were no items to report.

I. Report from Payer of Medical Benefits

Ms. Taylor stated there were no items to report.

J. Report from System Finance/Funding

Mr. Ellis stated there were no items to report.

**VI. 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 include on an agenda as an item upon which may be taken pursuant to NRS 241.020. All comments are limited to five (5) minutes. Chairman Dort asked if anyone wished to address the Board. Seeing no one, he closed the Public Comment portion of the meeting.

**VII. ADJOURNMENT**

There being no further business to come before the Board, *Chairman Dort adjourned the meeting at 2:55 p.m.*