

## **MINUTES**

# EMERGENCY MEDICAL SERVICES & TRAUMA SYSTEM

# REGIONAL TRAUMA ADVISORY BOARD

# March 21, 2007 - 2:30 P.M.

# MEMBERS PRESENT

Mary Ellen Britt, RN, Chairman

E.P. Homansky, MD, American Medical Response
Sameer Abu-Samrah, MD, Sierra Health & Life
Richard Henderson, MD, MAB Chairman
JoEllen Hannom, RN, Clark County Fire Dept (Alt)
Robert Bursey, General Public Representative

John Fildes, MD, University Medical Center
Sean Dort, MD, St. Rose Hospital
Michael Metzler, MD, Sunrise Hospital
Kim Dokken, RN, St. Rose Hospital
Melinda Hursh, RN, Sunrise Hospital
John Recicar, RN, University Medical Center

# **MEMBERS ABSENT**

Tim Hingtgen, Summerlin Hospital Michelle Chino, PhD, UNLV-SPH

Sandy Young, RN, Las Vegas Fire & Rescue

#### SNHD STAFF PRESENT

Mike Bernstein, Health Educator

Judy Tabat, Recording Secretary

# **PUBLIC ATTENDANCE**

Bruce Evans, EMT-P, North Las Vegas Fire Dept

Dan Petcavage, UMC

Debra Pinkney

Teressa Conley, St. Rose Hospital

Janie Pinkney

#### **CALL TO ORDER – NOTICE OF POSTING**

The Regional Trauma Advisory Board convened in Human Resources Training Room #2 of the Ravenholt Public Health Center on Wednesday, March 21, 2007. Chairman Mary Ellen Britt called the meeting to order at 2:35p.m. and the Affidavit of Posting was noted in accordance with the Nevada Open Meeting Law. Chairman Britt noted that a quorum was present.

#### I. CONSENT AGENDA

Chairman Britt stated the Consent Agenda consisted of matters to be considered by the Regional Trauma Advisory Board (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.

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Chairman Britt asked for approval of the minutes of the February 21, 2007 meeting. <u>A motion was made, seconded and passed unanimously to approve the minutes as written.</u>

#### II. REPORT/DISCUSSION/POSSIBLE ACTION

# A. Discussion of Status of Bill Draft Regarding Protection of Autopsy Reports

Ms. Britt reported that Senate Bill 228 which provides access to, sharing and confidentiality of autopsy records during a medical review committee process will be heard on Friday, March 23<sup>rd</sup> at 1:30 pm. Dr. Heck, who introduced the bill, asked if one of the Trauma Medical Directors or Program Managers would be available to testify. SNHD Attorney Steve Minagil will be present to answer any questions related to the definition of the medical review committee. Ms. Britt stated that she will be meeting with the Assistant Coroner Mr. Fudenberg and Ms. Rehfeldt, the Assistant District Attorney for the Coroner's Office, on Thursday, March 22<sup>nd</sup> to discuss the issue prior to the hearing. Dr. Metzler agreed to attend the hearing. The Board members asked Dr. Metzler to state that the bill is unanimously supported by the RTAB members.

#### B. Discussion of Clark County Social Services Medical Card

Ms. Britt reported that patients with a Clark County Social Services Medical Card are having problems filling prescriptions that are not written on UMC prescriptions. She spoke with Stacie Short at the Clark County Social Services Office and was advised that a card is issued to individuals who meet certain eligibility requirements and they are advised at the time they receive the card that they can only use UMC facilities. They discussed what happens when a patient is transported to another facility by EMS because the incident occurred outside of the UMC catchment area. Ms. Short replied that the initial care generally isn't a problem but getting a prescription filled does become an issue because the prescription cannot be filled at an UMC pharmacy if it is not written on an UMC prescription. Ms. Britt stated she then spoke with Diana Bond, Director of Pharmacy at UMC, and she stated that federal law actually prohibits her from filling those prescriptions outside of her system.

Dr. Metzler expressed concern about Ms. Bond's statement and felt that this barrier should be addressed. He commented that it is a waste of time for people to be seen again in the emergency department at UMC to have a physician copy a prescription over. He felt there should at least be a formulary on file so he doesn't write for something that the UMC pharmacy does not carry. Dr. Homansky agreed and stated that he fought some of these issues for years with no success. Dr. Henderson stated that it was hard to believe this would be a legal issue and felt that this was just an agreement between Clark County Social Services and UMC.

Dr. Metzler asked if the attorney for the Health District could research this issue and report back to the Board. Dr. Fildes added that he will speak with some of the senior administrators at UMC to relay their experiences as well. Ms. Britt stated that would be helpful so she could give the Health District's attorney some direction.

Dr. Metzler asked the Board to keep this as an ongoing issue on the agenda.

#### C. Discussion of Draft Trauma Regulations

Ms. Britt stated the changes that were discussed in the last meeting have been incorporated into the draft regulations document and all new language is in bolded text.

The Regional Trauma Advisory Board reviewed each regulation and the following recommendations were made:

#### Section 100 Definitions

100.050 – added "Health Officer"

100.060 – added "Medical Advisory Board"

100.090 - added "Permittee"

100.130 - added "Transfer"

100.140 – added "Transport"

100.150 – The SNHD EMS Trauma Field Triage Criteria Protocol was referenced as suggested in last month's meeting.

100.160 – Per Dr. Fildes request, "Verification by the American College of Surgeons is an integral part of the state's Designation process as outlined in NAC 450B.820" was referenced as part of the definition.

#### • Section 200 Trauma System Administration

200.000 – This section was reordered to reflect patient flow starting with prevention and public education, and the coordination of mass casualty planning community-wide with public safety, public health and emergency care was added.

200.100 – "Initial and renewal" was added in Subsection III for clarification since reviews occur in both the initial and renewal process.

200.200 – This new section added the enabling language to support the EMS protocol that is already in place for trauma patient transport.

200.300 – This new language was added to clarify that transfers occur between receiving facilities. Dr. Fildes questioned Subsection I stating that any hospital could be transferring to and receiving patients from any hospital. The language was simplified to read "Trauma patients may be transferred to centers for the treatment of trauma..." Dr. Henderson suggested that Subsection I.A. should read "as determined by the physician of record" instead of trauma surgeon.

Dr. Metzler questioned whether a patient has a right to ask to be transferred to a general hospital after being transported to a trauma center for injuries that are normally cared for in a trauma center. Dr. Fildes stated that this situation comes up rarely but when it does and it poses no direct harm to the patient they tell the patient that they need to facilitate the transfer by providing an accepting physician or hospital administrator from the other facility. From his experience most hospitals will not accept the transfer. There was some discussion on whether this violates a patient's rights or if it should be considered an action against medical advice. Dr. Fildes responded there is an ethical argument that can be made regarding creating a public safety net to ensure patients who meet trauma triage criteria are cared for in centers designed to provide quality trauma care.

### • Section 300 Center for the Treatment of Trauma Authorization Process

300.000 – "All Level I, II and III Centers for the Treatment of Trauma in Clark County must be verified by ACS at the appropriate level" was added to Subsection I per Dr. Heck's request. In Subsection II, per the Board's recommendation the two mechanisms to enter into the authorization process were listed separately. In Subsection VI, the reference to the District Procedure for Authorization as a Center for the Treatment of Trauma was added.

300.100 – Per Dr. Metzler's request the language "In order for the Board to consider issuing..." was added for clarification.

Subsection II was added as enabling language although payment of an appropriate fee as prescribed by the Board is not yet in place.

300.200 – Added "Process for Accepting Applications for Renewal of Authorization". Ms. Britt explained that the first step for any trauma center that desires renewal of designation in Clark County shall be to request renewal of their authorization in a letter to the Board. She added that she envisions the application to be fairly abbreviated since the hospital is already in the system. Dr. Fildes asked whether the existing three centers will need to complete authorization requests to the Board. Ms. Britt stated that she assumed the existing three centers would be grandfathered in until such time they apply for renewal.

Dr. Henderson asked why a hospital would need to reapply every three years if they have maintained their ACS verification. Ms. Britt explained that it provides an opportunity to review the center's participation of the trauma system.

Dr. Metzler questioned whether there was a timeline involved in the designation process with the state. Ms. Britt stated that the state's timeline was 6 months to allow time to make the necessary arrangements with ACS.

Ms. Britt advised the Board that she will be creating a calendar of each center's renewal date so when a renewal of authorization letter comes in it will go directly to the Board of Health minimizing delays. She added that Subsection IV talks about completing the process at the state level.

300.300 – Added "Duration of Authorization; Renewal of Authorization; and Provisional Authorization of a Center for the Treatment of Trauma".

300.400 – Added "Process for Requesting Change in Level of Designation".

300.500 – Added "Denial of Initial or Renewal Application for Authorization or Suspension or Revocation of Existing Authorization by the Board".

300.600 – Added "Withdrawal of Existing Authorization by the Center for the Treatment of Trauma". Ms. Britt stated that this section mirrors the language in the NAC.

300.700 – Added "Appeal Process for Denial of Application for Initial or Renewal Authorization or Suspension or Revocation of Existing Authorization". Ms. Britt explained that this is the appeals process that was written by the Health District attorney which has been lifted out of the EMS Regulations with the necessary changes to reflect the trauma system. Dr. Metzler commented Subsection VII was not very clear, so Ms. Britt will meet with the attorney to see about adding language that would close the loop.

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Ms. Britt reported that there were no changes to this section.

- District Procedure for Authorization as a Center for the Treatment of Trauma Subsection I C 1, added specific reference to Trauma Regulation 300.000. Subsection VI was added to address the appeal process.
- District Procedure for Renewal of Authorization as a Center for the Treatment of Trauma

Ms. Britt stated that this was a new procedure which details the process for renewal of authorization.

Ms. Britt reviewed some issues with the Board to determine if they should be added to the regulations.

- 1. The necessity of including "Adoption of Publication by Reference: "Resources for Optimal Care of the Injured Patient". Dr. Fildes felt that it was reasonable to include this publication because it is referenced in NAC and NRS but at this time there are no other publications that need to be included.
- 2. NAC 450B.764 & 768 addresses the development of a system for collection of information concerning the treatment of trauma and submission of quarterly reports to the State Health Division. Drs. Fildes and Metzler recommended referencing the desire of the OEMSTS to maintain a registry of trauma data.

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- 3. NAC 450B.774 addresses when a patient refuses transport to a center for treatment of trauma. The Board agreed it need only be referenced in the District Protocols.
- 4. The Arkansas Trauma Systems Regulations address the occasional failure of a hospital to meet the standards of a trauma center. Dr. Metzler felt the draft regulations already address that and the other Board members agreed.

Ms. Britt stated she would bring the draft regulations back to the Board at the April meeting for final approval. If they are endorsed, she plans to take them to the District Board of Health for their consideration of adoption at the May meeting.

### D. Review of Trauma Transport Data

The January 2007 and February 2007 Trauma Transport Data reports were reviewed. Ms. Dokken reported that the St. Rose data collection system has been fixed so they are now reporting better data.

# III. PUBLIC APPEARANCE/CITIZEN PARTICIPATION

Janie Pinkney, a National Registry Paramedic spoke to the Board at the recommendation of the County Managers Office to voice her concerns about the treatment of certain patients who are being transported by American Medical Response (AMR). She distributed materials to the committee with details.

Debra Pinkney, mother of Janie Pinkney, also spoke to the Board to add that AMR employees routinely give drugs out of protocol and she is asking that for the health and safety of the people of Clark County this Board authorize an investigation. Dr. Henderson stated that this is not relevant to this Board's jurisdiction and suggested she bring this to the next Medical Advisory Board meeting.

Bruce Evans, Fire EMS Chief of North Las Vegas Fire Department announced that on April 17, 2007 the City of North Las Vegas will be leading a delegation to Frisco Texas to start the process of building a children's safety village. He added that some of the city managers along with staff for the parks & recreations department will be going, so if interested to please see him after the meeting.

# IV. ADJOURNMENT

As there was no further business, <u>Chairman Britt called for a motion to adjourn.</u> The motion was made, seconded and carried unanimously to adjourn at 3:43 p.m.