



MINUTES

EMERGENCY MEDICAL SERVICES & TRAUMA SYSTEM

REGIONAL TRAUMA ADVISORY BOARD

September 19, 2007 - 2:30 P.M.

MEMBERS PRESENT

Mary Ellen Britt, RN, Chairman	David Slattery, MD Las Vegas Fire & Rescue(Alt)
John Fildes, MD, University Medical Center	Melinda Hursh, RN, Sunrise Hospital
Kevin Stockton, Centennial Hills	Jo Ellen Hannom, RN, Clark County Fire Dept.
Deborah Kreun, ThinkFirst-NV	John Recicar, RN, University Medical Center
Michael Metzler, MD, Sunrise Hospital	Kim Dokken, RN, St. Rose Hospital
Sean Dort, MD, St. Rose Hospital	Brian Rogers, MedicWest Ambulance
Sameer Abu-Samrah, MD, Sierra Health & Life	

MEMBERS ABSENT

Robert Bursey, General Public Representative	Allen Marino, MD, MAB Chairman
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SNHD STAFF PRESENT

Lan Lam, Recording Secretary	Judy Tabat, Administrative Assistant
John Hammond, EMS Field Representative	Trish Beckwith, EMS Field Representative
Joseph J. Heck, D.O., Operational Medical Director	

PUBLIC ATTENDANCE

Patty Holden, Sunrise Hospital	Sandy Young, RN, Las Vegas Fire & Rescue
Teressa Conley, St. Rose Hospital	Amy Koler, UMC Trauma
Fergus Laughridge, State EMS Program Manager	Ron Tucker, EMT-P, MedicWest Ambulance
Tiffany Ellis, Culinary Union	Larry Johnson, EMT-P, MedicWest Ambulance
Jason Meilleur, EMT-P, Sunrise Hospital	Randy Howell, EMT-P, Henderson Fire Dept.
Christina Belanger, Touro Student	

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, September 19, 2007. Chairman Mary Ellen Britt called the meeting to order at 2:32 p.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.

Minutes Regional Trauma Advisory Board Meeting August 15, 2007

Chairman Britt asked for approval of the minutes of the August 15, 2007 meeting. A motion was made, seconded and passed unanimously to approve the minutes as written.

II. REPORT/DISCUSSION/POSSIBLE ACTION

A. Discussion of Proposed Changes to the Trauma Medical Audit Committee

Ms. Britt reported that Dr. Metzler submitted a proposal with suggestions for revisions to the way the Trauma Medical Audit Committee (TMAC) has been conducted.

Dr. Metzler explained that the TMAC meeting should be utilized to conduct peer reviews and the RTAB should be utilized for members to discuss the findings that impact the trauma system. He believes TMAC should have two parts to the meeting. The first part devoted to key aspects of trauma such as prevention, pre-hospital care, acute care, rehabilitation, and psychiatric care. The second part devoted to discussion of cases found by trauma center performance improvement and patient safety processes.

Dr. Fildes suggested it would be useful to rotate the topics so that the full spectrum of issues can be covered. He suggested combining the rehabilitation and psychiatric issues and addressing any additional issues as necessary.

Dr. Metzler noted that if the meeting is run appropriately, an annual report can be produced to help determine the strengths and weaknesses of the trauma system. The trauma center data which has been collected and reported on in the past during the TMAC meeting will continue to be collected and a written report will be provided to the committee members.

Dr. Fildes stated that he would like to add the opportunity for an educational process under section C of the proposed TMAC meeting outline.

Ms. Hursh made a motion to adopt the proposed TMAC meeting plan and use it as a template for the Pre-TMAC meeting. The motion was seconded and passed unanimously.

B. Discussion of NAC 450B.845 – Pediatric Center for the Treatment of Trauma Designation Requirements

Ms. Britt noted that NAC 450B.845 currently reads that in order to be designated as a pediatric trauma center you need to meet the minimum criteria for a Level I center for the treatment of trauma. She stated that she and Fergus Laughridge, Manager of the EMS Office for the State Health Division, would like the Board's input on the requirements for pediatric trauma centers. The question is should Level II trauma centers also be eligible for designation as a pediatric trauma center?

Dr. Metzler noted that this is a state requirement, not a national requirement. Ms. Britt asked Mr. Laughridge to review the NAC 450B.845 proposed revised language. Mr. Laughridge reported that any reference to "regional resource" as it relates to pediatric trauma centers will be deleted and replaced with "center for the treatment of trauma." In addition to Level I trauma centers, Level II trauma centers will be added to the minimum criteria for pediatric centers for the treatment of trauma in subsection 2.

Mr. Laughridge also reported that the draft regulations for the centers for the treatment of trauma and destination criteria have been completed and will be distributed prior to the public workshop that will be conducted on October 9th in Las Vegas.

C. Discussion of EMS System Status

Mr. Laughridge reported the responsibility for EMS System has been transferred from the Nevada Hospital Association to the State Health Division. The EMS System is now operating as a statewide program since it is funded under the ASPR Grant. Mr. Laughridge shared his plans regarding housing the EMS System with the Public Health Preparedness Program within the State Health Division. He noted that the EMS System has more capabilities than originally thought and additional training is expected.

D. Review of Trauma Transport Data

Ms. Britt reported that the number of out-of-area transports has increased. They were at 7% in June, dropped to 5.6% in July, and increased to 7.2% in August. The reasons for this increase are still under review. Ms. Britt stated that she is in the process of a 90 day study which will analyze each of the out-of-area transports. In reviewing the August data, Ms. Britt noted that it appears additional training is necessary with regard to catchment areas and patient choice.

Brian Rogers stated that in reviewing the data, he noticed that most of the out-of-area transports were within the border of the catchment areas. He noted that travel time as it relates to traffic patterns is a factor that should also be considered. Ms. Britt agreed that most of the out-of-area transports were borderline calls, some by only one block. She stated that the Trauma Field Triage Criteria protocol allows for the paramedic to make that judgment. The data will be analyzed over the course of the next 60 days, will go to the TMAC for further review, and a report will be brought back to the RTAB.

Ms. Hursh commented about the importance of re-educating the paramedics about submitting complete run reports with accurate data relating to their specific location. Ms. Britt stated that this issue will be addressed at the next QI Directors meeting.

III. INFORMATIONAL ITEMS/DISCUSSION ONLY

A. Report from Southern Nevada Injury Prevention Partnership

Deborah Kreun from ThinkFirst reported that they have identified 45 people that are involved in injury prevention efforts in the Southern Nevada region. These individuals along with the members from RTAB have been invited to attend a meeting taking place on October 12th. The primary agenda item will be to introduce the Southern Nevada Injury Prevention Partnership (SNIPP), identify the top priorities of the trauma system, and set goals for improvement of processes.

B. Report on Terrorism Injuries: Information, Dissemination and Exchange (TIIDE) Grant

Ms. Britt reported that the TIIDE grant started at the beginning of September and discussions have already taken place with FirstWatch. FirstWatch is the vendor that the fire departments utilize to capture Computer Aided Dispatch (CAD) data. Ms. Britt noted they are working on identifying an automated process to reduce the agencies' workload by obtaining accurate data that includes the longitude/latitude location of the incident including cross streets. Ms. Britt stated she will continue to report on their progress.

IV. PUBLIC APPEARANCE/CITIZEN PARTICIPATION

None

V. ADJOURNMENT

As there was no further business, Chairman Britt called for a motion to adjourn. The motion was made, seconded and carried unanimously to adjourn at 3:09 p.m.