



**MINUTES**

**EMERGENCY MEDICAL SERVICES & TRAUMA SYSTEM (EMSTS)**

**REGIONAL TRAUMA ADVISORY BOARD**

**JANUARY 21, 2015 - 2:30 P.M.**

**MEMBERS PRESENT**

Sean Dort, MD, St. Rose Siena Hospital, Chair	Kim Dokken, RN, St. Rose Siena Hospital
John Fildes, MD, University Medical Center	Abby Hudema, RN, University Medical Center
Chris Fisher, MD, Sunrise Hospital	Stacy Johnson, RN, Sunrise Hospital
Margaret Russitano, RN, Sunrise Hospital	Frank Simone, North Las Vegas Fire Department
Sajit Pullarkat, Centennial Hills Hospital	Danita Cohen, University Medical Center
Erin Breen, Transportation Research Center, UNLV	

**MEMBERS ABSENT**

Dale Carrison, DO, MAB Chairman	Kathy Silver, Health Services Coalition
Senator Shirley Breeden, Public Representative	Eric Dievendorf, EMT-P, AMR

**SNHD STAFF PRESENT**

Mary Ellen Britt, RN, EMSTS Manager	Joseph P. Iser, MD, Chief Health Officer
John Hammond, EMSTS Supervisor	Mike Bernstein, SNHD – OCDPHP
Heather Anderson-Fintak, Esquire	Lei Zhang, SNHD – Informatics
Corey Scribner, SNHD-Public Information Office	Michelle Nath, Recording Secretary

**PUBLIC ATTENDANCE**

Daniel Llamas, Sunrise Hospital	Pat Foley, Clark County Fire Department
Jen Renner, Sunrise Hospital	

**CALL TO ORDER – NOTICE OF POSTING**

The Regional Trauma Advisory Board convened in the Southern Nevada Health District (SNHD) 330 S. Valley View Boulevard facility, Conference Room #2 on January 21, 2015. Chairman Dort 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 Dort noted that a quorum was present.

**Regional Trauma Advisory Board Service Recognition:**

Michelle Nath – EMSTS Program/Project Coordinator – Safe Community Partnership/Vulnerable Road Users Project Honoree

Michelle Nath received the 2014 Emergency Medicine Honoree award in September from the Safe Community Partnership/Vulnerable Users Project for her support of trauma outreach in Las Vegas, and her dedication to pedestrian safety in the community and keeping all road users safe.

**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. Seeing no one, he closed the Public Comment portion of the meeting.

## II. CONSENT AGENDA

Chairman Dort 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.

### Approve Minutes/Regional Trauma Advisory Board Meeting: 10/15/14

Chairman Dort asked for approval of the minutes from the October 15, 2014 meeting. *A motion was made by Dr. Fildes, seconded by Dr. Fisher, and passed unanimously to approve the minutes as written.*

## III. REPORT/DISCUSSION/POSSIBLE ACTION

### A. Selection of Vice Chairman

Dr. Dort, former Vice Chairman, had assumed the Chairman responsibilities when the previous Chair resigned from the post which was effective for the October 15, 2014 RTAB meeting. There was discussion of filling the position of Vice Chairman for the RTAB, and Chairman Dort opened the floor for nominations. *A motion was made by Member Dokken to nominate Abby Hudema for the position of Vice Chairman, seconded by Dr. Fildes, and passed unanimously.*

### B. Report on Proposed Revisions to the Clark County Trauma System Regulations

### C. Report on Proposed Revisions to the Clark County Trauma System Plan

### D. Report on Proposed Revisions to the Southern Nevada Health District Trauma Performance Improvement Plan

Chairman Dort stated that agenda items B-D would be discussed together as they relate to the trauma system documents. He reported that the Clark County Trauma System Regulations, Clark County Trauma System Plan and the Southern Nevada Health District Trauma Performance Improvement Plan were reviewed by the Trauma Procedure/Protocol Review Committee (TPPRC) earlier in the month as recommended by the RTAB during their October 2014 meeting. The TPPRC reviewed the proposed revisions that were presented and recommended that the documents be referred back to the RTAB for final review and endorsement. A subsequent public workshop was held for further input to the three documents, and they were now being presented to the RTAB for endorsement. The Chair asked if there was any further discussion and hearing none, he requested a motion for acceptance of the documents. *A motion was made by Dr. Fildes to accept the proposed revisions to the Trauma System Regulations, Southern Nevada Trauma System Plan, and Trauma System Performance Improvement Plan, seconded by Dr. Fisher, and passed unanimously.*

Dr. Fildes acknowledged the efforts made by the EMS & Trauma System Office to revise all of the trauma system documents. He remarked that in addition to the meetings in January there have been numerous work sessions held previously to accomplish the task of revising the documents to modernize and synchronize them to the current standard of practice and to be aligned with current regulations. He then inquired what the next step of the process would entail. Ms. Britt responded that there would be a public notice in the Las Vegas Review Journal announcing the public hearing, and that the documents would be presented to the District Board of Health for their adoption at their next scheduled meeting on February 26, 2015. Dr. Iser questioned if the RTAB was in favor of placing the items under the consent agenda for the Board of Health and the Board unanimously agreed.

### E. Report: Trauma System Advocacy Committee Meeting 12/9/14

#### 1. Discussion of Outreach Efforts to Increase Awareness about the Southern Nevada EMS &

Trauma System

2. Discussion of Future Legislative Efforts Related to EMS & Trauma System Development and Funding in Nevada
3. Discussion of Creating a Tax-Exempt 501(c)(3) Organization to Support EMS & Trauma System Activities

Erin Breen reported that there weren't any community events in the last quarter; however, there is work in progress to create a trauma system micro-site under the Health District's website. Ms. Britt introduced Corey Scribner, the SNHD web content specialist, and informed the Board that he is in the process of creating the Southern Nevada Trauma System (SNTS) micro-site. She added that the site would serve as a tool to better inform the public and policy makers about the value of the trauma system. Mr. Scribner displayed a visual of the demo micro-site and explained the plans for developing the pages and links within the site, and he remarked that the SNTS link will be mobile ready. The site will contain information like the four major components of a trauma system and there will be a page dedicated to documents and reports, which will include the trauma system plan, regulations, data reports and other documents. There will be links to the websites for the three trauma centers, as well as links to partnering agencies. A page will be dedicated to the RTAB and its subcommittees, and individual photos of the Board members were being captured for inclusion on the site. Mr. Scribner closed by noting that there would be a future demonstration of the site once it has been completed.

Ms. Breen informed the Board that Senator Joyce Woodhouse continues to move forward with the bill draft request (BDR) in support of EMS and trauma system activities. Most recently Senator Woodhouse had been informed that the State Office would be allocating funds to the program currently responsible for the trauma registry, which would allow for the completion of the necessary upgrades to the trauma registry system. Consequently, she is seeking a firm commitment from the State Office that the trauma registry will be operationalized and maintained as a functioning registry.

There was further discussion regarding other legislation that will be brought forward in the upcoming session, like the BDR to institute a primary seat belt law. Another bill coming forward is one to revise the age and weight requirements for the current booster seat law. There was also discussion of a bill that would require mandatory helmets, as well as vehicle registration for operating a scooter. The registration would be a flat fee, but if during the process it was determined that the scooter met motorcycle specifications then the individual registering the scooter would be required to meet the obligations for motorcycle registration. There is support from the Metropolitan Police Department for the scooter bill because scooters have a high rate of theft. Representatives from the various trauma centers have previously expressed their concerns about the risk factors associated with this population and have commented about the severity of injuries sustained by scooter drivers who are involved in crashes. Ms. Breen remarked that these various bills pertain to injury prevention activities; therefore, she opined it would be appropriate for the RTAB to be supportive of them. Dr. Iser responded that these issues are related to public health and as the local public health authority there is a willingness to support these efforts.

Dr. Iser reported that there is a scheduled meeting with Senator Woodhouse, the SNHD lobbyist, Ms. Britt and him to outline the process for proceeding with the legislative efforts as the session is fast approaching. He has been in communication with individuals from Carson City to gain support for the request to fund EMS and trauma system activities. Part of those discussions included the importance of developing a sustainable funding source for the state trauma registry as part of the legislative efforts. Currently, the registry is being funded with Public Health Preparedness funds. There has also been consideration by the State to contract the trauma registry reporting with the University of Nevada, Reno. In closing, he remarked that working through a 501(c)(3) organization to develop a viable funding source for EMS and trauma system activities is also another option.

F. Report: Trauma Procedure/Protocol Review Committee Meeting 1/8/15

1. Discussion of Proposed Revisions to the Clark County Trauma System Regulations

2. Discussion of Proposed Revisions to the Clark County Trauma System Plan
3. Discussion of Proposed Revisions to the Southern Nevada Health District Trauma Performance Improvement Plan

Chair Dort informed the Board that there weren't any additional items to report as the items listed under the TPPRC report were previously covered and approved during the discussion of the RTAB agenda items B-D.

G. Report: Southern Nevada Injury Prevention Partnership Meeting 1/13/15

1. Welcome and Introductions
2. Selection of Chairman
3. Selection of Vice Chairman
4. Discussion of Draft Committee Bylaws
5. Update on Proposed Legislative Seatbelt Presentation
6. Update on Proposed Injury Prevention Related Legislation
7. Next Meeting and Agenda Items

Mike Bernstein reported that the Southern Nevada Injury Prevention Partnership (SNIPP) is in the process of becoming a formal committee of the RTAB. Anybody who is interested in becoming an official member will need to attend at least two of the four quarterly meetings per calendar year and must be actively participating in injury prevention activities. Nominations for the position of Chairman and Vice Chairman are being accepted and the goal is to fill the vacancies by the next scheduled SNIPP meeting.

The draft SNIPP bylaws were presented and approved by the members who were present at the January meeting. The bylaws follow the same language found in all SNHD EMS and Trauma System (EMSTS) committees, and were brought forward to the RTAB for approval. Chairman Dort requested a motion to adopt the SNIPP bylaws as written. A motion was made by Dr. Fildes to accept the Southern Nevada Injury Prevention Partnership bylaws as written, seconded by Member Dokken, and passed unanimously.

During the discussion of the proposed legislative seat belt presentation, it was reported that Nadia Fulkerson, Project Director for the Center for Traffic Safety Research, made revisions to the original PowerPoint as recommended by the SNIPP at the October 2014 meeting. Mr. Bernstein referenced a few key slides which were included in the RTAB handouts. The first slide, Nevada Restraint Status by County, indicated that Esmeralda County, followed by Lincoln, had the highest rates of unrestrained occupants per 100,000 capita. The second slide, Nevada Restraint Status by Ethnicity, depicted that the Hispanic population had the highest rate of unrestraint, followed by African-Americans. The third slide compared Injury Severity Scores for restrained and non-restrained occupants in motor vehicle crashes, and the unrestrained occupants sustained a higher rate of critical injuries in comparison to the restrained occupants. The final slide pertained to the average comprehensive cost and the projection is that Nevada could save at least \$1.6 million dollars on medical costs from the introduction of a primary seat belt law, with a total savings to all payers of approximately \$6.9 million dollars annually.

In addition to the proposed primary seat belt legislation, there is other legislation being introduced related to traffic safety initiatives including a helmet law and another to increase the speed limit on certain roads in Nevada to 85 mph. Traci Pearl from the Nevada Department of Transportation agreed to send a tracking list of the upcoming legislative bills to the EMSTS Office for distribution to the SNIPP members.

Mr. Bernstein provided an update on the drowning data for 2014, and the year closed with the lowest recorded number of drowning deaths. There were only two deaths. The number of reported nonfatal drowning incidents also decreased significantly resulting in the lowest recorded number of incidents since the inception of the drowning registry in 1994.

An issue which the SNIPP members have been monitoring is the increasing sales of prescription

opioids. Research indicates people addicted to opioids who cannot readily fill their prescriptions due to a prescription drug monitoring program are more likely to become addicted to heroin because it's cheaper and easier to obtain. Dr. Iser reported that the Clark County Medical Society (CCMS) recently held a meeting and part of the discussion involved legislative efforts pertaining to Narcan. There's a potential that a bill will be introduced to make Narcan more readily available and the CCMS is supportive. He suggested that the SNIPP would be an appropriate group to monitor this topic.

As the discussion regarding injury prevention efforts progressed, Abby Hudema commented about the high rates of suicide deaths and inquired if those rates are trended. Mr. Bernstein replied that the most recent national data illustrates that Nevada had dropped to sixth place for suicide. This is the first time Nevada had not been in the top five; therefore, there is a downward trend. He added that there is an increasing rate of youth suicides and it's the second leading cause of death for youth ages 15-24. It was noted that firearms are used in more than half of Nevada suicide deaths. As a result, the Nevada Office of Suicide Prevention has partnered with guns shops and ranges to provide suicide awareness training and to reduce access to lethal means.

#### H. Update of Status of State Trauma Registry

Ms. Britt reported that the current manager of the state trauma registry has received a commitment from her administration that funding will be allocated for the registry and upgrading the software. A trauma registry report will also be provided by July 1, 2015, and the report will be highly anticipated since one has not been published since 2006. Dr. Fildes remarked that in the absence of a functioning registry, the EMSTS has processed the data collected from the trauma centers, produced reports that are actionable and depicted injury in approximately 80% of the population of the state. As there have been many challenges with the state trauma registry, Dr. Fildes strongly recommended that the SNHD continue to collect data from the trauma centers and issue aggregate reports, while continuing to support the state's efforts to achieve their goal. Ms. Britt added that during the ACS Trauma System Consultation visit in July 2011 there was a previous commitment made by the non-trauma center hospitals to also submit data to the SNHD. She asked Sajit Pullarkat if this was still the intent and he replied that there should not be any issues with this request.

#### I. Trauma Field Triage Criteria Data Report

Ms. Britt referred the Board to view the various TFTC reports for the third quarter of 2014 that were available in their member packets. There were 1,526 patients transported to the three trauma centers by EMS for the third quarter of 2014. It was reported that the out-of-area transports remained under the 5% tolerance benchmark for the third quarter with an average total of 3%. It was noted that there has been a slight upward trend of patients transported to the trauma centers since the decline that transpired during the 2008-2010 time frame. The percentage of patients being discharged remains steady, and this trend reflects the value of the trauma system which includes a seamless transition between each stage of patient care and the availability of resources in order to achieve better patient outcomes.

### IV. INFORMATIONAL ITEMS/DISCUSSION ONLY

#### A. Report from Emergency Medical Services Representative

Frank Simone stated there were no items to report.

#### B. Report from General Public Representative

Senator Shirley Breeden did not attend the meeting.

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

Sajit Pullarkat reported that the acute care hospitals in Clark County are seeing an increased volume of patients. Some of this volume is related to a peak in influenza cases and the receiving facilities are working with EMS agencies and other health care partners to make sure that patients have appropriate access to care.

D. Report from Payers of Medical Benefits Representative

Kathy Silver did not attend the meeting.

E. Report from Rehabilitation Representative

Margaret Russitano reported that the Trauma Rehabilitation Committee will need to be re-established as many of the previous committee members are no longer in the community. She will begin to contact various providers as a first step in redeveloping the committee.

F. Report from Health Education & Prevention Services Representative

Mike Bernstein stated that there were no additional items to report.

G. Report from Legislative/Advocacy Representative

Erin Breen stated that there were no additional items to report.

H. Report from Public Relations/Media Representative

Danita Cohen remarked that she would make herself available to assist with public relations efforts related to legislation that will be introduced pertaining to injury prevention efforts.

V. PUBLIC COMMENT

Dr. Iser reported that the SNHD submitted its Statement of Intent, as the initial step to pursue accreditation, to the Public Health Accreditation Board. There will be a one year time frame to fulfill the requirements for the accreditation process.

VI. ADJOURNMENT

As there was no further business on the agenda, Chairman Dort adjourned the meeting at 3:18 p.m.