



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

**January 20, 2021 - 2:30 P.M.**

**MEMBERS PRESENT**

Sean Dort, MD, Chair, St. Rose Siena Hospital	Sam Scheller, Paramedic, Private EMS Provider
Douglas Fraser, MD, University Medical Center	Lisa Rogge, RN, University Medical Center
Chris Fisher, MD, Sunrise Hospital	Abby LeDuff, RN, Sunrise Hospital
Jessica Colvin, System Finance	Carl Bottorf, General Public
Sajit Pullarkat, Administrator, Non-Trauma Hospital	Cassandra Trummel, Health Education
Danita Cohen, Public Relations/Advocacy	Frank Simone, Paramedic, Public EMS Provider
Maya Holmes, Payers of Medical Benefits	

**MEMBERS ABSENT**

Mike Barnum, MD, MAB Chairman	Amy Henley, Rehabilitation Services
Kim Dokken, RN, St. Rose Siena Hospital	Erin Breen, Legislative/Advocacy

**SNHD STAFF PRESENT**

Chad Kingsley, Regional Trauma Coordinator	John Hammond, EMSTS Manager
Michael Johnson, PhD, Dir. of Community Health	Heather Anderson-Fintak, Associate General Counsel
Andria Cordovez Mulet, Exec Admin Secretary	Judy Tabat, Recording Secretary
Michelle Stanton, Sr. Admin Assistant	

**PUBLIC ATTENDANCE**

Brett Olbur, Dignity	Jessica Goldstein
Georgi Collins, HCA	Damon Schilling
Jennifer Lopez, R&R Partners	Kelly Stout
Rebecca Carmody	Theresa Ladd

**CALL TO ORDER – ROLL CALL**

Chairman Dort called the Regional Trauma Advisory Board (RTAB) to order at 2:33 p.m. All Committee Members joined the meeting by teleconference and the roll call was administered by Chad Kingsley, Regional Trauma Coordinator and he noted that a quorum was present.

- I. **FIRST 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 else 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 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: 10/21/2020

Chairman Dort asked for approval of the minutes from the October 21, 2020 meeting. A motion was made by Member LeDuff, seconded by Member Pullarkat and passed unanimously to approve the minutes.

## **III. CHIEF HEALTH OFFICER REPORT:**

Dr. Johnson advised the board that they are continuing to see increases in Covid cases and mortality with hospital capacity being stretched. A lot of their efforts focus on contact tracing and working to sustain hospital capacity. They are also focused on the big vaccine distribution rollout. They have had a few technical difficulties with some of the registration and appointments but are hoping to get this rolling out smoother over the next few days.

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

### **A. Nominations for Non-Standing RTAB Member Seats for Terms Expiring June 30, 2021**

- Administrator from a non-trauma center hospital system
- Public providers of advanced emergency care
- Private franchised providers of advanced emergency care
- Rehabilitation services
- Knowledge of system financing/funding

Chairman Dort referred to the RTAB Nomination form in the meeting handouts. He added that these nominations are due back by March 30<sup>th</sup>, and they will be deliberated on after that date.

### **B. 2019 Clark County Trauma Needs Assessment Review**

Mr. Kingsley advised the board that in April they will begin the process of collecting the 2020 data and anticipate having the 2020 report available for discussion in July. He added that the 2019 report is completed and available to the community. The report will be posted to the SNHD website on the EMS webpage. He asked the board if there were any questions.

Ms. Holmes stated that she hoped in future reports the dispositions were broken out by step level for each trauma. She felt that when the data is lumped together it can confuse where those increases are happening and what type of patients are involved. She added that she is still very concerned with the increase in step 4s from 2016 to 2019 and she feels it is changes in EMS practices and those protocol changes are not consistent with national guidelines.

Mr. Kingsley stated that he will be taking this report to the Board of Health and asked the board if this report stands on its own or if they feel a bullet point advisory statement needs to accompany the report.

Chairman Dort entertained comments.

Mr. Bottorf felt that the report stands on its own and if there are questions, it is more precise to answer the question than it is to generalize in bullets.

Chairman Dort agreed and asked for a motion to take the 2019 Clark County Trauma Needs Assessment Review to the Board of Health. A motion was made by Member Bottorf, seconded by Member Rogge and carried unanimously.

C. Trauma Field Triage Criteria Data Report for 3<sup>rd</sup> Quarter 2020

Mr. Kingsley referred to the TFTC data reports in the board's packet and reported on the trauma transport data for 3<sup>rd</sup> quarter 2020.

Chairman Dort asked the board for any questions or comments, hearing none he moved to the next agenda item.

D. Regional Trauma Coordinator Works in Progress

Mr. Kingsley advised that with Covid a lot of projects are currently challenging. He stated that he will continue to work on the proposed update to the Southern Nevada Injury Prevention Partnership (SNIPP) and Trauma System Advocacy (TSAC) Committee's that were previously voted on to change them workgroups. He added that he will update the Trauma Performance Improvement Plan so that moving forward they can select chairs for those 2 workgroups in July and make it an actionable item on the RTAB.

He added that he continues to work on evaluating out of area to be able to notice the trends and as previously noted begin on the 2020 trauma assessment report.

Mr. Kingsley reported that he received an email from St. Rose Siena informing him of a new field named PCR UUID (universally unique identifiers) that was added to the pre-hospital section of the PCR and questioned if EMS is aware of this added field.

Mr. Hammond informed the board that this is a new field in the NEMSIS data base version 3.5. Currently most of the agencies are using version 3.3. or 3.4, so until they are up to speed or they are upgraded to version 3.5, they won't be able to fill that field.

Dr. Dort stated that he will bring that information back to the hospital. Ms. Rogge thanked Mr. Hammond for that information because they had the same question.

V. INFORMATIONAL ITEMS / DISCUSSION ONLY

A. Report from Public Provider of Advanced Emergency Care

No report

B. Report from Private Provider of Advanced Emergency Care

Mr. Scheller stated they continue to battle Covid and staffing issues they are facing.

C. Report from General Public Representative

Mr. Bottorf suggested a better understanding of the 12-month chart that was presented earlier. He felt it might be interesting to dissect the types of trauma that were eliminated in April when the trauma cases were so low.

Dr. Fisher explained that they looked at their numbers coming through and their drops in the April and May time frame were from blunt trauma most likely motor vehicle crashes.

Ms. Rogge agreed adding that their data showed the same.

D. Report from Non-Trauma Center Hospital Representative

Mr. Pullarkat stated that efforts are ongoing with regards to patient loads, hospital capacity, and vaccinating staff.

E. Report from Rehabilitation Representative

No report

F. Report from Health Education & Injury Prevention Services Representative

Ms. Trummel stated there were no items to report.

G. Report from Legislative/Advocacy Representative

No report

H. Report from Public Relations/Media Representative

Ms. Cohen stated there were no items to report.

I. Report from Payer of Medical Benefits

Ms. Holmes stated there were no items to report.

J. Report from System Finance/Funding

Ms. Colvin 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. Hearing 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 3:05 pm.*