

Washington State Department of Health
Office of Community Health Systems
EMS & Trauma Care Steering Committee

MEETING MINUTES

January 18, 2017
Creekside Conference Room
20809-72nd Avenue South, Kent, WA

ATTENDEES:

Committee Members:

Sam Arbabi, MD	Tim Hoover	David Tirschwell, MD
Cameron Buck, MD	Erica Liebelt, MD	Melody Westmoreland
Cindy Button	Valerie Lyttle	Lynn Wittwer, MD
Robert Conroy, MD	Shawn Maxwell	
Tony Escobar Jr., MD	Russell McCallion	
Mark Freitas	Brenda Nelson, RN	
Madeleine Geraghty, MD	Erika D. Schroeder, MD	
Dan Hall	Susan Stern, MD	
Denise Haun-Taylor	Mark Taylor	

DOH Staff

Tony Bledsoe	Dawn Felt	Jason Norris
Ben Booth	Dolly Fernandes	Tim Orcutt
Donna Bybee	Therese Hansen	Eva Rooks
Aimee D'Avignon	Jim Jansen	Denece Thomas
Eric Dean	Matt Nelson	

Guests:

Bob Berschauer	Traci Larrabee	Vince Reynolds
Barb Carrier	David Lynde	Adam Richards
Erick Cooper	Chris Martin	Caesar Ursic
Rinita Cook	Tammy Pettis	Zita Wiltgen
Tyler Dalton	Heather Pounds	Martin Zamazal
Kurt Hardin	Brian Pulse	
Susie Johnson		

Call to Order: Sam Arbabi, MD

Review of previous meeting minutes: Sam Arbabi MD, Chair

Handout: Minutes from the November 16, 2016, EMS and Trauma Care Steering Committee meeting.

Motion #1: Approve November 2016 meeting minutes.
Approved unanimously.

DOH Updates: Dolly Fernandes, DOH

Dolly introduced and welcomed Steve Bowman, new Office of Community Health Systems Director, beginning January 1, 2017. Steve is a former member of the EMS and Trauma family. He was a Section Manager and Trauma Epidemiologist in the nineties and through 2007. He also worked for the tobacco prevention program at the department. Over the last ten years, Steve has held academic faculty positions at several prestigious universities on the east coast including John Hopkins. Steve knows and understands the trauma registry and will be an asset as we address this issue. We are very fortunate to have Steve back and leading our office.

We have a few organizational changes in the Health Systems Quality Assurance Division (HSQA). Behavioral Health Integration: Department of Health together with the Office of the Governor, the Health Care Authority and the Department of Social and Health Services are working on reconfiguring behavioral health in Washington State. The intent is to move all state purchased health care services into one service delivery structure. Physical and behavioral healthcare will be integrated across the state. Department of Social and Health Services, Behavioral Health and Recovery will become a part of the Health Care Authority. The Department of Health will be responsible for the licensing and certification of mental health and substance abuse disorder agencies. Twenty-six licensing staff anticipate to move from the Department of Social and Health Services to HSQA by mid-2018.

Injury and Violence Prevention: Therese Hansen and the Injury and Violence Prevention team is moving organizationally to another division Prevention and Community Health Division in the next couple of months.

Personnel update: We have two vacancies: an Administrative Assistant position and a Research Investigator project position funded by a grant from Washington Traffic Safety Commission.

The Legislative Session started January 9, 2017. This is the long session and Sine Die is April 12th. We anticipate budget session running over. The Governor's budget was released in December, with a focus on mental health, education and public health. Funding was included for modernization of our data systems, Lead exposure for schools, and Adverse Events.

Legislative Bills introduced at this time, include: Travis Alert bill, HB 1258, which addresses EMS caring for patients with disabilities at the scene of an accident. The bill calls for reviewing training programs and identifying who needs the training.

The Air Medical Rules hearing was held on November 17th. The significant analysis is completed and the CR 103 package will be filed within a month. The rules will be effective around May 2017.

Tony Bledsoe, DOH, announced that a CR 101 rules package has been filed to revise Trauma Designation Standards to align them with the new American College of Surgeon standards for trauma designation.

Strategic Plan Report: Hospital TAC: Tony Bledsoe, DOH

Hospital TAC - Annual Report

Handout

Tony Bledsoe and Denise Haun-Taylor, TAC chair, gave the 2016 TAC Report. In 2016 the TAC's work centered on continuing to crosswalk the current WAC designation standards with the most recent version of the American College of Surgeons (ACS) designation standards. The TAC also revised and created several clinical practice guidelines throughout the year. The TAC also developed a Listserv to improve the coordination of the TAC and continued to build the trauma program manager mentorship program. All of this work will continue throughout 2017. The TAC has put on hold several strategic items as they expect the formal rule making and continued clinical practice guideline revision work to take up most of the TAC's time in 2017. Denise Haun-Taylor mentioned how participation in this TAC is excellent and thanked everyone for their dedication and support.

2014-2016 Trauma Designation Outcomes

Handout

Tony discussed trauma designation results from the 2014-2016 designation cycle. All of the final reports from the last three years were reviewed with the goal of identifying trends and areas for future program improvement. The main trend identified in the review was that the majority of facilities receiving a provisional designation struggle with trauma quality improvement efforts and have had recent trauma program manager turnover, stressing the importance of finding ways to keep people in these positions. The report also showed that 80% of all of the final report requirements issued to trauma designated facilities are related to four specific sections of the designation application—ED and Surgical Services, Trauma Quality Improvement, Trauma Team Activation, and Injury Prevention. The designation program plans to use this information to focus existing education programs reduce the number of report requirements issued and improve the process of designation for stakeholders.

Regional Plan Review Schedule – Dolly Fernandes, DOH

Dolly reminded the committee that the 8 EMS and Trauma Regional Plans are up for their biennial review by the committee in March and April. The following committee members have agreed to review plans: Dr. Sam Mandell, Dr. Rob Conroy, Dr. Madeleine Geraghty, Denise Haun-Taylor, Mark Taylor, Tim Hoover, Mark Freitas, Shaughn Maxwell, Dr. Lynn Wittwer, Dr. Tony Escobar, Dr. Susan Stern, Dr. Erika Schroeder and Norma Pancake. Thank you to all for agreeing to do this review. Dr. Arbabi encouraged the reviewers to look closely at data for improving outcomes and continuing education for EMS and Trauma personnel when reviewing the plans. Make recommendations for how this can be improved.

Data Presentation on Firearm Injuries in the Trauma Registry – Ben Booth, DOH
Handout

Ben presented the 2015 data on patients with firearm injuries in the Washington State Trauma Registry. It included an overview of where the injuries occurred, compared transferred to non-transferred patients, and also addressed the quality of the data from the newest version of the trauma registry (version 5). He presented a status update of the registry, which included a brief summary of an upcoming patch that should resolve some issues that are present in the software. Work is underway to link ICD9 and ICD10, and link V4 (pre 2015) to V5 (2015 onward) from both the DOH and DI vendor. Other data sources are: WEMSYS, NVDRS, and CHARs. The data is there, getting to the data will take time, and each patch will help.

DOH efforts on Firearm Violence and Suicide Prevention: Therese Hansen, DOH
Handout

Therese Hansen presented on Department of Health efforts on Firearm Violence and Suicide Prevention. She talked about the State Suicide Prevention Plan, data on suicides from Death Certificates and CHARs, and activities on suicide prevention taking place across the state.

Impact of Flu on the Emergency Care System: Sam Arbabi, MD

Dr. Arbabi facilitated a discussion on the flu on the Washington emergency care system. Hospitals going on divert is having a negative impact on the EMS system. King County is working on reaffirming their hospital no diversion policy. Several issues seem to be impacting the surge in flu patients at Emergency Departments. The cold weather with heavy snow and icy conditions, and long holiday weekends seem to be exacerbating the situation. Hospitals going on divert is impacting EMS who end up having long wait periods at the emergency department with the patient while the transfer takes place and this means the ambulance is unavailable for other calls and backs up the EMS response system. Other concerns raised were lack of hospital beds, shortage of hospital staffing, inappropriate use of emergency departments, triaging patients and reimbursement. Dr. Stern advocated for having a statewide hospital no-divert policy. Discussion ensued with conclusion that this is a multifactorial issue and that solutions need to be resolved at the local level. Dr. Arbabi asked the Pre Hospital and Hospital TAC chairs to discuss this matter further in their respective TACs, in terms of what is the problem and what are the solutions and bring back this information to the Steering Committee for the next meeting. Dr. Stern will also research how this diversion issue is being addressed nationally and report on it at the next meeting.

Central Region increase in Level V Min Max, Chris Martin

The State plan has a maximum of one Level V facility for the Central Region. Chris Martin, representing the Central Region, explained that the population growth in the Snoqualmie Valley area is overloading the Snoqualmie hospitals. An additional Level V in that area will help. The Central Region EMS and Trauma Council supports this request.

Motion 1 #: Increase number of maximum number of Level V facilities in Central Region from one to two.

Approved unanimously.

Committee Business:

Meeting Time - Dr. Arbabi received a request from a Steering Committee member to consider changing the EMS and Trauma Care Steering Committee meeting times to end earlier by reducing the lunch break. The committee was receptive to this recommendation and agreed to try it out. This will start with the March meeting, with start time of 9:30am, 15 minute break around 11:00am, and meeting ending at 1:00pm. Members can eat their lunch during the meeting.

TAC Reports: Dolly Fernandes indicated that the TAC reports recently have been about meetings held or not held and lack content on progress on TAC activities relating to the strategic plan. She requested that the reporters provide more detail on this and offered to provide a standard TAC report template if that would help.

KPI Update – new stroke measurement: Jim Jansen, DOH

Handout

Jim proposed an addition to EMS Key Performance Indicators (KPIs). The proposed addition is 6.6: “Percent of suspected CVA/TIA patients with a positive FAST exam score who received a LAMS Stroke Scale Assessment from EMS or had the LAMS exam protocol documented”.

Jim requested the committee’s approval to make this change.

Motion 2 #: Add to the 6.6 KPI: Percent of suspected CVA/TIA patients who have a FAST exam score who have a LAMS Stroke Scale Assessment completed and documented or documentation of why an assessment could not be completed.

Approved unanimously.

TAC Reports:

Hospital TAC – Denise Haun-Taylor: The TAC met earlier and had a lengthy discussion on hospital diversion in relation to flu patients being taken to emergency departments. The TAC will discuss this issue further. The TAC discussed what data is needed for Regional QI and the need for standardizing these data reports meeting schedule and if meetings should be held monthly due to work on WAC revisions, and the use of WATrac. There was agreement that the next guideline will be on burn care.

Pediatric TAC – Matt Nelson: Completed a successful media campaign to reduce shaken baby trauma, with 34 buses in King and Pierce County labeled with messages. It has received 1.2 million views. The TAC discussed the project to standardize pediatric dosing for EMS, and voted to try to expand it to other counties.

Prehospital TAC – Russ McCallion: Last meeting discussed stroke metrics, and CDC representatives in attendance, with Kim Kelly presenting on the Coverdell stroke grant. Main focus of the TAC is on transition from WEMIS 2 to 3 and the need for getting better and cleaner data. There was a National

Registry presentation on changes in educational requirements for EMT and Paramedics that want to maintain the National Registry.

Injury and Violence TAC– Aimee D’Avignon: Recruited new TAC members. West Region annual conference is February 24 & 25 and it will feature a half day prevention workshop on depression, suicide, two presentations by the Washington Poison Center and a presentation on young drivers.

Emergency Cardiac & Stroke TAC – Matt Nelson: Prehospital stroke triage tool narrative portion is now finalized and the TAC is focusing on education and communication rollout. Also, discussing county variances with regards to utilization of the triage tool.

Rehab TAC – Tim Orcutt: Continuing to develop and work on strategic plan. Now have four complete years of rehab data. Address the limitations and issues of the Rehab data presented by Ben. Working to prevent errors in the data for this coming year. Also working on a plan to help understand the barriers of patients being referred to inpatient rehab. Once barriers are identified will develop a plan to remove or limit them.

RAC TAC – Melody Westmoreland: Kim Kelley gave a presentation on the cardiac and stroke Coverdell grant. Presentation on One net initiative. Each region is updating their bylaws and web pages and working on preparing regional plans for review. The TAC is also developing a template for the patient care procedure needed to address legislation passed in 2015 on the alternate transport destinations. Meeting again in March.

Cost TAC – Eric Dean: The TAC started working on the Trauma Care Fund spending plan for 2017-2019 biennium and last meeting was held on 1/11/17 via a conference call. The Cost TAC will review a draft spending plan model at next meeting on 3/8/17, which also will be via conference call, and bring a recommendation to the Steering Committee at the March meeting.

Meeting adjourned at 1:50 pm