TRAUMA MEDICAL REVIEW COMMITTEE (TMRC) MEETING MINUTES – (APPROVED)

December 19, 2018

Richard M. Flynn Fire Academy, Classroom 2, Administration Building 98 Smokey Bear Boulevard Concord. NH 03301

Members Present:

Reto Baertschiger, Kathy Bizarro-Thunberg, Mark Hastings, Peter Hedberg, Ryan Hickey, Tony Maggio, Eric Martin, Rick Murphy, Lisa Patterson, Ryan Pouliot, Stacey Savage, Scott Schuler, Joey Scollan, Jonathan Snow, and Jennifer Weymouth (15)

Members Absent:

Kenneth Call, Ryan Ridley, and Richard Tomolonis (3)

Bureau Staff:

Director Deborah Pendergast, Assistant Director Jeffrey Phillips, Bureau Chief Justin Romanello, Captain Vicki Blanchard, Gerard Christian, June Connor (minutes), Chip Cooper, Rachel Horr, Joanne Lahaie, Christopher Rousseau, Liam Jewell, Kyle Snowdon, and Don Himsel (13)

Guests:

Lynn Chabot, Jeanne Church, Nathan Denio, Kayleigh Farrell, John Hall, Katie Hartford, Hilary Hawkins, Sharon Hillger, Joseph Leahy, Kyle Madigan, Neil Moore, Mike Mulhern, Brian Nicholson, Adam Rembisz, Jennifer Roach, Debra Samaha, Andrew Seefeld, Anna Sessa, and Erica Newman (19)

Guest Speaker: Senior Assistant Attorney General Nancy Smith, accompanied by Jon Lavallee

NOTE: "Action items" are in bold red.

I. Call to Order

Item 1. The meeting was called to order at 9:35AM with a guorum present.

After introductions, Chair Murphy stated that, due to time constraints, Senior Assistant Attorney General Nancy Smith would give her presentation first, followed by votes on hospital designations, past minutes, and the 2019 schedule. The rest of the agenda would be done if time allowed.

Meeting minutes votes (actually taken at the end of the meeting):

A motion was made (Maggio/Martin) – to approve the non-public minutes from the February 21, 2018 meeting, passed with an abstention from Reto Baertschiger.

A motion was made (Martin/Wentworth) – to approve the October 17, 2018 non-public minutes from the October 17, 2018 meeting, passed with an abstention from Reto Baertschiger.

A motion was made (Hedberg/Maggio) – to approve the minutes from the October 17, 2018 public meeting, passed unanimously.

II. Administrative Law Presentation / Q & A

Chair Murphy explained that this presentation was being given in order to make the members and guests of the TMRC more aware of the RSA's that govern the body.

A copy of the PowerPoint presentation that was done by Nancy Smith is attached to these minutes.

Nancy clarified that her presence at this meeting was not a meeting for the purpose of legal counsel, but rather to educate the members about rules and laws that govern boards and committees. Questions about specific TMRC issues would have to be done in a meeting with just an attorney and the voting members so that the attorney/client privilege would apply.

Questions asked:

Who can be a voting member of a sub-committee that is made up of volunteers and voting members from the larger body?

A: Although volunteers can attend meetings and give input, only members from the main body can vote. During deliberations in a sub-committee meeting, non-voting participants cannot be present.

Should all non-public meetings only be attended by members of the TMRC?

A: It depends on what is being done. If, for example, a volunteer is presenting a report that is of a confidential nature, then that is allowed. Similarly, if volunteers are needed to answer questions, then that is also allowed. During deliberations however, these volunteers should be asked to leave.

If a voting member must recuse himself/herself in a sub-committee, how does that affect the quorum?

A: If you recuse yourself, you are no longer a part of the quorum. So, if you have a 3-person body, and 1 person is recused, the chair should be contacted about appointing an alternate.

Do sub-committee meetings have to be posted in the same way as committee meetings?

A: Yes

Can sub-committee meetings be held in conference calls?

A: Only when a quorum is physically present at the meeting site that has a speaker phone.

Are attachments that contain information that is going to be discussed considered to be public?

A: A draft is not public; once it is finalized, it then becomes public. A discussion about a draft, however, is public.

Is there such a thing as a work group?

A: Yes. It usually involves 1 member of the committee helping the staff do something.

Are non-members allowed to be on hospital designation review teams?

A: Yes, and the 15-A disclosure form is not required for such individuals.

If you are a state reviewer, but not a voting member, can you be involved in a non-public session if you were involved in that particular review?

A: Yes, but you cannot be present during deliberations or the vote.

If you are a state reviewer offering your expert opinion on another review in which you are not engaged, can you be part of that non-public discussion?

A: (same answer as above)

Does a volunteer who is working for a board assigned to a state agency become an Executive branch official?

A: Yes, but he/she probably does not have to file the 15-A form.

What if someone worked as a facility consultant for a specified period of time, but by the time the facility was reviewed, this person no longer served in that role?

A: If the person is no longer serving in the capacity of being the facility's consultant, a per se conflict of interest no longer exists because there is no longer a current pecuniary interest. That said, each case has to be looked at individually and the long-term relationship evaluated.

The members and volunteers on the TMRC help to develop standards upon which hospitals are reviewed, and they also work for those hospitals. Is this a conflict of interest?

A: The role of the TMRC is to make recommendations about standards, but the standards themselves are actually adopted by the DOS Commissioner. The TMRC members serve in an advisory capacity, and the statute states that certain people with expertise sit on the committee, so this is not a per se conflict of interest. However, members and volunteers should not participate in matters in which they currently have a direct financial interest.

When board members recuse themselves, should they leave the table?

A: Though it is not spelled out clearly in statute, it is the advice of the Attorney General's office that recused board members leave the board table and sit in the public area. Recused members cannot participate in discussion while recused.

Can a non-voting member be a chair of a sub-committee?

A: We would advise against it because a non-voting chair would have to leave during deliberations and vote taking.

If you have a sub-committee that is comprised of both voting and non-voting members, and the voting members are also hospital designation reviewers, can you get around the quorum if their purpose for attending is to be a reviewer in an advisory capacity?

A: If the voting member opts out of this role in favor of being an advisor, the quorum could be negatively affected. No discussion or deliberations can take place without a quorum. Information, in this circumstance, can be disseminated, but a vote would have to be delayed until such time as a quorum would be present.

Is the quorum for the sub-committee separate from the quorum from the larger body?

A: Yes, if you designate 3 committee members (made up of voting members from the larger body), then the quorum for that sub-committee is 2.

If you have 1 voting member and 2 volunteers serve in the capacity of hospital reviewers, can they discuss their findings amongst themselves and present 1 report to the sub-committee or do they have to present individual reports? Would the discussion amongst the reviewers be considered a "meeting"?

A: Because there is only 1 voting member, this would not be considered a meeting, and the reviewers could discuss the review and decide whether to present one report or individual ones. At the subcommittee meeting, the voting member reviewer would have to recuse himself/herself from deliberating and voting.

If there is a TMRC sub-committee that does not discuss non-public information, do the same rules regarding quorums and voting apply? (Example: a sub-committee that discusses education and Q/A issues and never has to bring anything before the larger body for a vote)

A: This is something that should be discussed with an attorney (Allison Greenstein)

If attorney's fees have to be paid, would this be on an individual or the entire committee?

A: Fees would be charged to the public body.

(At this point, Nancy Smith concluded her presentation and left the meeting.)

POST MEETING INFORMATION:

Link to RSA governing the TMRC:

RSA 153-A

91-A (Right to Know)

TMRC Responsibilities, as written in RSA 153-A:8 (effective July 1, 1999)

- Develop and routinely update the adult and pediatric trauma system plan.
- Review statewide trauma system operations, including monitoring adherence to established guidelines and standards, the availability of appropriate resources, and the periodic review of trauma hospital classification criteria.
- Review the delivery of emergency medical services by providers and units concerning the provision of care to trauma patients.
- Make recommendations to the Coordinating Board based on the reviews described above.
- Recommend to the EMS medical Control Board modifications of the protocols of trauma care as a result of system-wide review.
- Assist trauma hospitals in the development and implementation of trauma quality improvement programs.
- Assist the Coordinating Board in the coordination of a system of comprehensive emergency medical services and the establishment of minimum standards throughout the state by advising the Coordinating Board on policies, procedures, and protocols.

The members spent some time giving their reactions to the presentation and how the TMRC will be

affected.

Moving forward, the TMRC voting members and volunteers will email their questions to June

Connor who will compile them for Allison Greenstein. Appropriate meetings will be set up for legal counsel.

The members discussed whether or not there should be a long-term plan to study and perhaps change the RSA, which would involve legislative change.

Kathy Bizarro-Thunberg clarified that 91-A has to do with how meetings are structured and other procedural issues. A discussion about the complement of the committee is a totally different thing, having more to do with RSA 153-A. It was decided years ago that despite the fact that there were voting members, there was still ample opportunity for public participation. Is the makeup of the committee "broken" or is it just that we have to concentrate more on adhering to the state structure, per 91-A? In the end, the TMRC has to be clear about what they are asking for.

The question was asked if the ACS, in their review, had any suggestions about the TMRC and its structure or function. Generally, the ACS cautioned about the heavy emphasis on volunteers in the system rather than zeroing in on the TMRC specifically.

Bureau Chief Romanello pointed out that the ACS report is on the website along with all of the other reports that have been done in the past couple of years

ACS Trauma System Consultation Report - 2016 2018 State of NH NHTSA Reassessment Report - Executive Summary Strategic Outreach Report - 2017

Chair Murphy asked everyone to study the information; this topic (TMRC issues) should be put on the agenda for the February, 2019 meeting.

III. Sub-committee and Topic Reports

There was no time for this item.

IV. Old Business

There was no time for this item.

V. New Business

A motion was made (Murphy/Bizarro-Thunberg) – to approve the TMRC meeting schedule for 2019, passed unanimously.

TMRC 2019 schedule: February 20, 2019 April 17, 2019 June 19, 2019 August 21, 2019 October 16, 2019 December 18, 2019

VI. Hospital Designation Sub-Committee

The 3 hospitals being recommended for designation status to the DOS Commissioner waived their right for a non-public hearing at this meeting.

Wentworth-Douglass Hospital:

Eric Martin reported on the findings of the review committee.

A motion was made (Maggio/Patterson) – to recommend an Adult Level III and Pediatric Level III designation for Wentworth-Douglass Hospital through October 15, 2021; passed with the recusals of Stacey Savage and Peter Hedberg from the vote.

Dartmouth-Hitchcock Hospital:

A motion was made (Patterson/Weymouth) – to recommend the ACS corrected provisional Level I Adult and Pediatric Level II designations for Dartmouth-Hitchcock Hospital through December 30, 2020, passed with the recusals of Eric Martin, Reto Baertschiger, and Ryan Pouliot from the vote.

Catholic Medical Center Hospital:

A motion was made (Martin/Baertschiger) – to recommend that the ACS visit scheduled in March, 2019 for a Pediatric Level IV designation be re-scheduled for August, 2019 in order to match the due date for the state verification; passed unanimously.

VII. Public Comment

This is the last meeting for Mark Hastings, the trauma nurse coordinator representative on the TMRC. THANK YOU MARK, and best of luck in your new position at SNHMC on December 30th.

June Connor will send out instructions on how to apply for Mark's vacant position.

Director Pendergast took a moment to thank everyone for their dedication and hard work on the TMRC and wished everyone a happy holiday.

VIII. Next Meeting and Adjournment – February 20, 2019

A motion was made (Bizarro-Thunberg/Snow) – to adjourn the meeting at 11.20AM; passed unanimously.

(Notes prepared by June Connor, Administrative Assistant, NH FST&EMS)