

TRAUMA MEDICAL REVIEW COMMITTEE (TMRC)

MEETING MINUTES – (APPROVED)

February 20, 2019

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

Members Present:

Kathy Bizarro-Thunberg, Tony Maggio, Eric Martin, Neil Moore, Lisa Patterson, Ryan Pouliot, Stacey Savage, Scott Schuler, Joey Scollan, Jennifer Weymouth **(10)**

Members Absent:

Reto Baertschiger, Kenneth Call, Mark Hastings, Peter Hedberg, Ryan Hickey, Rick Murphy, Ryan Ridley, Jonathan Snow, Richard Tomolonis **(9)**

Bureau Staff:

Bureau Chief Justin Romanello, Captain Vicki Blanchard, Gerard Christian (minutes), Joanne Lahaie **(4)**

Guests:

Lynn Chabot, Craig Clough, Theresa Epp, Katie Hartford, Hilary Hawkins, Alia Hayes, Sharon Hillger, Joseph Leahy, Shelly Mackay, Deborah Mallett, Matthew Petrin, Mary Reidy, Adam Rembisz, Jennifer Roach, Debra Samaha, Anna Sessa, Jessica Wyman **(17)**

NOTE: "Action items" are in bold red.

I. Call to Order

Item 1: Call to Order

- The meeting was called to order at 0940 hours, with a quorum present, by co-chair Martin

Item 2: Approval of Non-public Minutes: (not needed at this meeting)

Item 3: Approval of Minutes:

- **A motion was made (Weymouth/Maggio) –to approve the minutes from the December 19, 2018 public meeting; passed unanimously.**

Item 4: Membership:

- Co-chair Martin welcomed Neil Moore, TPM from Parkland Medical Center to the committee. Moore was recently appointed to the committee by the Commissioner of Safety to fill the Trauma Program Manager's vacancy left by the resignation of Mark Hastings. Welcome Aboard!

II. Bureau Report

Item 1: Division Items of Interest (BC Romanello Reporting):

- Updated EMS rules have been approved by the Coordinating Board and have gone on to JLCAR for the next step in the process
- Division Staff is working with the Office of Rural Health at DHHS to potentially join into their workforce study, as part of the Division's ongoing examination of the State's EMS workforce
- EMS Operations Section:
 - There are approximately 781 persons to be relicensed this cycle (provider licenses expiring 31-March-2019)
 - On 01-April-2019 new NREMT-LCCR State required subjects will go into effect.
 - These are four separate subject specific, 1-hour education modules
 - Modules will be available through the Bureau of EMS, but providers can obtain the required hours through other programs outside of the Bureau
 - Topics include: EMS in the Warm Zone (Rescue Task Force), Documentation, Provider Mental Health, Sleep Deprivation and Provider Fatigue
- Data Systems Section:
 - User Management System contract is at Governor and Council for approval today. POST MEETING NOTE: Contract for user management was approved by G&C. More news to follow.
- Clinical Systems Section:
 - After the NHTSA System Review last fall, The Union Leader released an article re: the State Trauma System. BC Romanello noted that the journalist completed thorough interviews and the article was a good snapshot of the state of the system
 - Division approached by Governor's office for a plan
 - Priority put in the Division's budget for the following positions
 - Full time Trauma Coordinator
 - Full time Trauma Data Specialist
 - Full time EMS Education Captain
 - Part time PIFT Coordinator
 - Part time Compliance Specialist
 - Positions were not funded in the Governor's budget; plans to follow for how to move forward
- Education Section:
 - BC Romanello along with current Division Staff have been working to increase the current educational opportunities
 - Working to increase delivery strategies
 - Varying delivery times, including nights and weekends
 - Teleconferencing available for all hospitals (through EMS coordinators) and 45th Parallel EMS

- Previously developed process for medical professional challenge was inappropriate, Gap analysis conducted, NREMT requirements assessed
 - New process will include:
 - 28 hours in person education
 - An online component
 - Process will be offered by Bureau and pushed out to the I/C's as well
 - Approx. 24pp/yr are interested in this program
- Special Projects Section:
 - Working on developing an educational training centers model as well as a dedicated EMS Instructor I program

Item 2: TEMSIS Data Report: (No report at this meeting)

III. Sub-committee and Topic Reports

Item 1: Process Improvement Subcommittee (Christian Reporting)

- Hospital survey complete
 - Minimal progress was made
 - The only non-designated hospital that sent information back was Cheshire

Item 2: Education Subcommittee (Hartford Reporting)

- Annual Trauma Conference on September 26 & 27, 2019 at the Fire Academy
 - Subcommittee will meet after today's meeting

Item 3: PreHospital Subcommittee (Clough Reporting)

- Met before today's meeting
 - The group continues to work with the hospital association to update the hospital capabilities spreadsheet
 - **Clough will send Christian trauma plan edits**

Item 4: Coordinating Board Report (Schuler Reporting)

- See Minutes:
 - https://www.nh.gov/safety/divisions/fstems/ems/boards/coordinating/documents/cb_20190117.pdf
- The Coordinating Board is working closely with Division Staff to develop a data privacy group

Item 5: Medical Control Board Report (Scollan Reporting)

- See Minutes:
 - <https://www.nh.gov/safety/divisions/fstems/ems/boards/medicalcontrol/documents/mcb20190117.pdf>

Item 6: Injury Prevention Report (Semaha Reporting)

- 12-March: Safe Kids meeting regarding the biology of child abuse

- 5-March: Falls Taskforce meeting at New Hampshire Hospital Association
- Child passenger safety training information is available through the Injury Prevention Center at Dartmouth
 - 50 Car seat fitting stations are available across the State
- Safe and Active community grant just closed
 - 30 communities applied for funding
 - Funds will be used to support safety at community events and to link safety and injury prevention groups within communities
- Teens and Driving
 - 15-May “Think Fast Seatbelt Challenge” – Free Event being held at SNHU
 - Teen Traffic Safety Coordinator position available at the Injury Prevention Center at Dartmouth
- New Hampshire Traffic Safety Conference being held on 6-May
- Injury Prevention Center has free smoke and carbon monoxide detectors available

Item 7: Rehabilitation Report (Petrin Reporting)

- 30,000 foot view of state’s acute rehab availability
 - Different levels of rehabilitation beds available throughout the State
 - The data that is currently available at the State level only reflects acute rehabilitation bed availability
 - 256 acute rehabilitation beds are available, all are south or Concord/Cheshire
 - Swing or Skilled Nursing Facility beds are not included in that number
 - Availability/placement is based on 13 ICD-10 diagnosis codes
 - Barriers to access:
 - 60% of the rehabilitation beds in each facility must remain within these ICD criteria, or CMS could pull the facility’s license for 3 years
 - Private insurance companies do not like to pay for inpatient rehabilitation
 - Facilities are required to have special medical oversight for the rehabilitation unit, 24/7 rehabilitation nursing coverage, and the patients occupying the unit must be able to tolerate 3 hours of intense therapy per day
 - Patients must also require a hospital level of care
 - Discharge rate to the community must be at least 70%
 - Physicians and Nurses require specialty training
 - **Petrin, Bizarro-Thunberg and Christian will work to obtain occupancy data and correlate available data with Trauma Registry Discharge Data**

Item 8: Medical Examiner Report (No report at this meeting)

IV. Old Business

Item 1: ACS Plan Implementation (BC Romanello Reporting)

- NHTSA and ACS Plans continue to be implemented within the Division
 - Progress remains limited by current staff and available positions

Item 2: Trauma Plan Edits (Christian Reporting)

- **Christian will send out an edited/updated copy of the plan to the group prior to the April Meeting**

Item 3: Trauma Registry Data Report (BC Romanello Report)

- Letter from September 2017 requesting counsel's opinion on the legality of the Division collecting PHI through the trauma registry remains on the desk of the Division's legal counsel
 - Senior leadership continues speak to legal monthly regarding this topic

V. New Business

Item 1: Air Medical Transport Protocol (Capt. Blanchard/Christian Reporting)

- Clay Odell has brought forward some concerns regarding the use of a GCS score of 13 as threshold for the use of air medical transport
 - Odell concerned that 13 is too shallow
 - State had lowered the threshold to 9 after an AMT utilization review in the early 2000's
 - 9 proved to be too steep
 - CDC trauma triage recommends 11 as a threshold score, but this score is not rooted in evidence (13 or 9 also aren't evidence based).
- **Will have additional Discussion at the April meeting, will ask Odell to attend**

VI. Hospital Designation Sub-Committee

Item 1: Public Report (Hawkins/Reidy Reporting)

- Discussed upcoming reviews and schedule
- Discussed options for opening the RSA (RSA 153 A-8) to include more Trauma Program Managers on the TMRC
- Subcommittee wants to add an additional nurse reviewer to each review
- BC Romanello noted that:
 - The review team is acting on behalf of the State (Division) as hospital reviews and designations are the responsibility of the Division per RSA
 - Review findings are presented to the TMRC, TMRC votes on findings, sends along to Commissioner of Safety (or designee) for designation

VII. Public Comment

- Schuler – The TMRC is the best group to advocate for trauma, but there is no mechanism to advocate to the public

- The TMRC should develop a subcommittee to deliver a message of consistency on behalf of the TMRC
 - Trauma advocacy group
 - Rembisz
 - Schuler

VIII. Next Meeting and Adjournment – April 17, 2019

- **A motion was made (Petrin/Maggio) – to adjourn the meeting at 1135hrs; passed unanimously.**

(Notes prepared by Gerard T. Christian, Clinical Systems Program Coordinator, NH FST & EMS)