



John J. Barthelmes
Commissioner

State of New Hampshire

Department of Safety
Division of Fire Standards and Training & Emergency Medical Services
Richard M. Flynn Fire Academy
98 Smokey Bear Boulevard, Concord, New Hampshire
Mailing Address: 33 Hazen Drive, Concord, New Hampshire 03305-0002



Deborah A. Pendergast
Director

TRAUMA MEDICAL REVIEW COMMITTEE

COMMITTEE MEETING MINUTES

DECEMBER 17, 2014

- Members Present:** Rick Murphy, MD; Kenneth Call, MD; Doreen Gilligan, RN;
Call in members: Tony Maggio; Laurie Latchaw, MD; Shawn Riley;
 Peter Hedberg, MD; Gary Curcio, MD
- Members Absent:** Kathy Bizarro, Cherie Holmes, Lukas Kolm, Kevin MacCaffrie, Amy Matthews, James Paquette, Eric Schelberg
- Guests:** Sue Barnard, RN; Mark Hastings, RN; Chris O’Connell; Peg Pedone, RN; Mary Reidy, RN; Gail Thomas, RN; Lynn Chabot, RN; Eric Martin, MD; Hilary Hawkins, RN; John Seidner, MD
- Bureau Staff:** Deputy Bureau Chief Jon Bouffard; Vicki Blanchard

I. Call to Order

The meeting was called to order by Dr. Murphy at 9:30 a.m. on Wednesday, December 17, 2014 at the Richard M. Flynn Fire Academy in Concord, NH

Item 1. Introductions

All attendees introduced themselves, and it was determined that a quorum was present with the voting member attendees and call-ins counted.

Item 2. Minutes

October 15, 2014 minutes – A motion was made by Doreen Gilligan to approve; Gary Curcio seconded the motion. The October 15, 2014 minutes were approved unanimously.

II. Sub-Committee and Member Reports

Item 1. Hospital Designation Sub-Committee

Mary Reidy reported that the sub-committee went over the new application that will follow the assessment criteria. Sue Barnard has agreed to be the “guinea pig” to test out the new application. Applications will be sent electronically to Deputy Chief Jon Bouffard. The review year will be added to the application, 12 months prior to the review date which should be two months prior to the review, resulting in no record being greater than 14 months.



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The other change involves trauma education for all nursing personnel. It was in our criteria that they must show current TNCC (Trauma Nursing Core Curriculum) or ATCN (Advanced Trauma Care for Nurses) or show 2 years annually of trauma education, but because the ACS does not require this, the latter part of the criteria was changed to “*show evidence of annual trauma education*”. This is for any nurse. There is an effort to synchronize the criteria with what the ACS requires.

The Portsmouth review is on January 28, 2015. St. Joseph’s is due around the end of June, 2015.

Mary concluded her report by stating that the committee’s membership has declined and asked for input regarding new possible members.

Item 2. Education Sub-Committee (Trauma Conference – 2014)

Doreen Gilligan reported that the Trauma Conference went very well. There were 154 registered participants, and 170 people actually attended. PowerPoint presentations should be available on the website soon. A small sum of money was made and has been tucked away for next year’s conference. The CME requirements didn’t ask any questions regarding positive or negative comments about the conference, so that will have to be addressed next year. However, **Doreen emailed most of the participants asking them for their feedback, and she will present the results once the feedback is compiled.**

Item 3. Bureau Report

Trauma Registry: Deputy Chief Jon Bouffard reported that the money has been secured for this project. The contract has gone to the DOIT director, and the language has been settled with the vendors. The next step involves getting approval from the Governor and Council, followed by having the Attorney General sign off on the contract. Within approximately 3 months, the purchase will be completed. When this is done, the contract will be awarded, and then the implementation process will begin. At this stage, Jon will be asking for help.

III. Old Business

Item 1. Engagement of Hospitals

How to engage hospitals was the topic of conversation. Jon Bouffard went to Cottage for their trauma committee meeting. He will be returning in January to discuss their system and how they can work closer with the TMRC. Jon will be working his way up the “Connecticut River Coast”, focusing on the northern hospitals. (Two trauma system maps, adult and pediatric, were passed around. These are on the web on the “Documents and Forms” page, under the subheading, “[Trauma System](#)”.) **A suggestion was made to send out a questionnaire to these hospitals prior to a**



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visit. Doreen Gilligan stated that this was something that the Education Sub-Committee was supposed to work on now that the Trauma Conference was over. Doreen and Jon Bouffard will come up with a plan.

Item 2. Trauma Application Updates

Portsmouth application: January 28, 2015 (site review scheduled)
There is an agenda.

Jon Bouffard will move Item 2 up to the "Designation Sub-Committee" section.

Item 3. Membership of the TMRC

Rick Murphy spoke about committee membership and the difficulty with making quorums. Attendance records from the past two years were studied, resulting in the following actions:

- Raj Gupta has resigned.
- Kurt Rynhart will be resigning, and Eric Martin will be coming on.
- Miguel Gaeta will be resigning.
- Cheri Holmes – has not responded to emails
- Laurie Latchaw will be retiring between March 1 and June 19th, 2015. Elizabeth Soukup, from Elliot Hospital, is interested in taking Dr. Latchaw's place.
- PFFNH – awaiting a response
- Medical Examiner's Office – awaiting a response
- Eric Schelberg – actively working on getting his replacement
- ACEP (American College of Emergency Physicians) – Dr. Seidner has been nominated; we are awaiting a letter from the Commissioner.
- Amy Matthews, representing ENA, has submitted her resignation. Doreen Gilligan will get formal letter with a new nominee.

RSA 153a.8: There is a rule regarding who can be a voting member which can leave out the contributions of those who are not voting members. The legislative sub-committee(*see note below) is taking a look at this.

*NOTE: As new sub-committees are formed, the agenda for the TMRC should be adjusted so that each sub-committee can report on its activity.

Jon Bouffard stated that his sub-committee identified that there were two missing participants who are key components of a trauma system:

- Post hospital care
- Injury prevention



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IV. New Business

Item 1. System Needs

- a. **TMRC representation at the Coordinating Board:** Dr. Call is on the Coordinating Board representing the Medical Control Board; he is not the TMRC representative even though he has been performing that function informally along with Bureau Chief Nick Mercuri. Doreen Gilligan has been the representative, but her term has expired. Whoever is chosen to represent the TMRC at the Coordinating Board meetings is appointed by the Governor and should be responsible for reporting the activities of the CB to the TMRC. The Emergency Medical and Trauma Services Coordinating Board meet on the third Thursday of every other month. The TMRC can make recommendations to the CB (Example: the Trauma Plan)
- b. **ACS Review:** Rick Murphy passed around a copy of the 2010 State of New Hampshire Trauma System Plan and stated that this should now be the focus of the TMRC rather than the designation of hospitals. **He asked that everyone review this document and start to think about revisions that need to be made in order to develop and implement a new trauma system.** There are 4 parts to a comprehensive trauma system:
 1. Injury prevention (Al Willis from DHHS and Deb Samaha could help with this.)
 2. Pre-hospital
 3. Hospital
 4. Re-habilitation – post hospital care

The ACS, having about 20 years of experience, provides the service of evaluating trauma systems for the different states in the country. The 3 day review involves 10 people who provide a consultative service. Once the consultation is complete, the ACS team provides a comprehensive blueprint, complete with benchmarks.

Dr. Murphy, Bureau Chief Nick Mercuri, and Jon Bouffard have already met with Commissioner Barthelmes, and he is supportive of the idea as long as the money can be found. Once funding can be secured from the State, the minimum preparation time is about 6 months.

Various state reports done by the ACS can be found online. Everyone is urged to take a look at these reports in an effort to better know what the State of NH will need.

Resolution to endorse the ACS consultation review: A motion was made by Laurie Latchaw and seconded by Gary Curcio. No opposition; no abstentions; the resolution was unanimously endorsed by the TMRC.

A resolution letter will be written by Dr. Murphy.



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This topic should be put as number one under "Old Business" for the next meeting.

c. Other Business/Overview of Bureau of EMS

- Doreen Gilligan, Trauma Nurse Coordinator representative: term expired.
- Overview of Bureau of EMS – starts on page 8 (Trauma System Lead Agency) in the 2010 Trauma System Plan.
- Vicki Blanchard will send out brochure that explains the 3 different boards.
- **TMRC guests will be added to distribution list for TMRC information.**
- Sue Barnard asked about application submittals and to whom they should be submitted. It was decided that applications should go to the sub-committee.

V. Next Meeting and Adjournment (10:45 a.m.) - February 18, 2015 @ 9:30 – 11:00

The meetings are the third Wednesday of the even months.
2015 dates are as follows: ***April 15, 2015, *June 17, 2015, *August 19, 2015, *October 21, 2015, and *December 16, 2015.**

Respectfully Submitted,

Rick Murphy, MD
TMRC Chair

Prepared by June Connor
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