



Meeting: Trauma Committee Meeting

Date: 3/06/2018

Location: NCTTRAC Offices, Rm 150

Meeting Chair: Nakia Rapier

Agenda	Discussion	Action Plan	Responsible Individual	Targeted Completion / Next Step
Welcome			Chair	
<ul style="list-style-type: none"> Approve Minutes 				
Old Business			Chair	
<ul style="list-style-type: none"> None 				
New Business			Chair	
<ul style="list-style-type: none"> DFW Intimate Partner Violence Coalition 	Hospital screening Requesting stakeholder feedback regarding questions stemmed from the data.			
<ul style="list-style-type: none"> ASN Webinar 	Benchmarking options in system			
Trauma Scorecard			Chair	
<ul style="list-style-type: none"> Regional Trauma Plan 	Approved by Board 2/12/19 – will go to General Membership vote in April			
Standing Agenda Items			Chair	
<ul style="list-style-type: none"> SPI Dashboard 				
<ul style="list-style-type: none"> Registry Workgroup Update 	Moving to every other month – next mtg in April			
<ul style="list-style-type: none"> Trauma Psychosocial Support Workgroup Update 	Will combine with the Mental Health Work Group upon the approval of the Trauma Committee			
NCTTRAC Update			NCTTRAC Staff	
<ul style="list-style-type: none"> Sign In Reminder 				
<ul style="list-style-type: none"> General Membership Meeting 	Next Meeting: 4/09/2019	Lux Hotel & Spa, Arlington, TX		
Open Discussion			Chair	
Adjourn	Next Meeting: 4/03/2019			



Meeting: **Trauma Committee Meeting**

Date: **2/6/2019**

Location: **NCTTRAC Offices, Rm 150**

Meeting Chair: **Nakia Rapier**

Quorum: (Y) (N) (N/A)

Meeting Notes

- Attendance documentation attached
- Meeting Attendance Requirement Reminder

Agenda	Discussion	Action Plan	Responsible Individual	Targeted Completion / Next Step
Welcome			NCTTRAC Staff, Chair	
<ul style="list-style-type: none"> • Approve Notes 	Notes approved by committee	None		
<ul style="list-style-type: none"> • Mention sign-in sheet, WebEx info, Call in info 	Nakia reminded online attendees to make sure they registered for mtg to get attendance credit.			
NCTTRAC Update			NCTTRAC Staff	
<ul style="list-style-type: none"> • GETAC Meeting 	Next meeting: 2/27/19 – 3/1/19	Wyndham Hotel, Austin, TX		
<ul style="list-style-type: none"> • General Membership Meeting 	Next Meeting: 4/09/2019	Lux Hotel & Spa, Arlington, TX		
Trauma Scorecard				
<ul style="list-style-type: none"> • Regional Trauma Plan 	<p>Discussion of revisions – sent out via listserv 1/23/19</p> <ul style="list-style-type: none"> • New organization to the plan • 18 pages of content with Appendices • Section by section review to allow for questions, comments <ol style="list-style-type: none"> 1. Scope: No comments 2. Regional Demographics: <ol style="list-style-type: none"> a. Comments re: the number of designated trauma centers by level in the paragraph since the number of centers is fluid and ever changing. <ol style="list-style-type: none"> i. Add verbiage - For most updated list, see the appendix 3. List of RAC Officer: Complication in progress and final before Feb BOD meeting 4. Standing committees: No comments 5. Evidence of System Participation: No comment 	Requested changes will be made.		

<p>6. System Access: No comment</p> <p>7. Communications:</p> <ul style="list-style-type: none"> a. Is there a frequency for EMResources updates? <ul style="list-style-type: none"> i. Frequency is situations based on regional needs and not in the TS Plan. <p>8. Medical Oversight: No comments</p> <p>9. Pre-hospital triage criteria:</p> <ul style="list-style-type: none"> a. Typographical correction on <i>Resources for Optimal Care of the Injured Patient</i> <p>10. Diversion and Bypass :</p> <ul style="list-style-type: none"> a. Noted the addition of Advisory-Surge status <p>11. Regional Medical Control:</p> <ul style="list-style-type: none"> a. Each EMS agency has their own oversight <p>12. Facility Triage Criteria: No comments</p> <p>13. Inter-hospital transfers: No comments</p> <p>14. Transfer agreements: No comments.</p> <p>15. Plan for Designation: No comments</p> <p>16. SPI: No comment</p> <p>17. Rehabilitation:</p> <ul style="list-style-type: none"> a. Will be adding an Annex for list of Regional Rehab centers <p>18. IP / Education: No comment</p> <p>19. Coalition Building:</p> <ul style="list-style-type: none"> a. Not a required component but thought to be worthwhile addition b. Q: vagueness on the participation in coalitions. <ul style="list-style-type: none"> i. Intended to not be prescriptive ii. Suggested Change to Coalition and Partnership Building <p>20. Disaster Preparedness and Response:</p> <ul style="list-style-type: none"> a. Not a required component but thought to be worthwhile addition <p>21. Research: No comment</p> <p>Other:</p> <ul style="list-style-type: none"> a. Thanks from Dr. Carrick to the revision team (Nakia, NCTTRAC staff, Cassie) for completing the revisions 			
---	--	--	--

	<ul style="list-style-type: none"> b. Annex additions will be built in to make this a complete document which will be presented to the NCTTRAC BOD and sent to committee members for final comments c. Thanks from Dr. Carrick to the revision team (Nakia, NCTTRAC staff, Cassie) for completing the revisions d. Annex additions will be built in to make this a complete document which will be presented to the NCTTRAC BOD and sent to committee members for final comments e. Request for approval of the Trauma System Plan made – there were no objections or abstentions pending the previously suggested revisions. 			
<ul style="list-style-type: none"> • RCC Transfer agreement revision 	<p>Nakia updated the committee on the taskforce outcomes –</p> <ul style="list-style-type: none"> • Low RCC utilization • Only 1-2 centers using RCC • Continue to be available until August 30, 2019 • Trauma Transfer Guideline Handout updated with Level 1 and Level 2 trauma centers in the region to be resource. Education should be completed with hospitals. • NCTTRAC will create 11x17 posters for each hospital and will make electronic version accessible online. • Upcoming enhancements to EMResources to include hospital capabilities • Thanks to the workgroup 	<p>Suggestions:</p> <ul style="list-style-type: none"> • Add verbiage “including but not limited to” to the list of Conditions for Transfer • Committee will make a recommendation to the board based on committee support of the RCC dissolvent 		
Standing Agenda Items				
<ul style="list-style-type: none"> • SPI Dashboard 	<p>Andy presented the dashboard report of SPI standards.</p> <ul style="list-style-type: none"> • 49 trauma centers in the Region (5 in active pursuit) • Those with capable registries will submit – 27 of 39 member hospitals with capable registries are submitting quarterly. <ul style="list-style-type: none"> ○ Reminder that trauma committee participation has a requirement for data submissions. Submissions or lack thereof will be reflected in the NCTTRAC participation letters 	No action items	NCTTRAC Staff	

	<ul style="list-style-type: none"> ○ Q: what happens when there are technical difficulties with the vendor? Reach out to Andy for assistance. ● Patients will be transferred only one time: double transfers should be referred through the SPI system ● Transfers within TSA E ● Timeliness of transfers: 2017 55% and 2018 72% <ul style="list-style-type: none"> ○ Reminder this is skewed due to some facilities not submitting or having a capable registry ○ The goal is 75% by the end of FY 2019 (August 30) 			
● Registry Wkgrp Update	Anne presented: <ol style="list-style-type: none"> 1. Over- and Under-triage 2. 2019 NTDS changes 3. Trauma Cloud 4. New BAA requirements 5. TQIP conference 6. Moving to every other month 			
● Trauma Psychosocial Support Wkgrp Update	No updates			
● EMResources	Jacob presented on enhancements to EMResources: <ul style="list-style-type: none"> ● New hospital capability matrix ● Data base used by EMS and hospitals prior to transfer ● Comments: <ul style="list-style-type: none"> ○ Add Hand Coverage 	No action items.		
Old Business			Chair	
● None				
New Business			Chair	
● Upcoming Events				
● What data do we want to look at from ASN?				
● Open Discussion				
Adjourn	Next Meeting: 3/6/2019			



TRAUMA SPI DASHBOARD 2018

STANDARDS	INDICATORS	SOURCES	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEPT	OCT	NOV	DEC	YTD					
*Hospitals will meet and maintain the appropriate trauma facility designation at all times	*NCTTRAC will be immediately notified if designation lost or in jeopardy.	Member facilities or state notification	41 with 5 in pursuit	41 with 5 in pursuit	41 with 5 in pursuit	41 with 5 in pursuit	41 with 5 in pursuit	41 with 5 in pursuit	42 With 4 in pursuit	42 With 4 in pursuit	42 with 4 in pursuit	42 with 4 in pursuit	44 with 4 in pursuit	44 with 5 in Pursuit						
Hospitals will communicate their diversion status through EMResource		NCTTRAC staff	5/46	2/46	0/46	0/46	4/46	4/46	3/46	1/46	3/46	1/46	1/48	3/49						
Hospitals with capable registry will submit data to the NCTTRAC ASN software.		NCTTRAC staff	9/28	12/28	14/28	20/28	21/28	22/28	22/28	23/28	24/28	25/30	26/35	26/39	67%					
*Trauma patients will only be transferred one time to the appropriate higher level of designated facility (single system injuries with ISS less than 9 excluded)	*Receiving facility shall report double transfer to NCTTRAC	Submitted tickets to website	0	0	0	0	1	1	2	1	0	1	0	0	6					
*All trauma patient transfers will be managed within Trauma Service Area-E as the capacity of the tertiary care facilities allow and the patient's condition dictates.	*All patients transferred outside RAC-E will be reported.	Submitted tickets to website	0	0	0	0	0	0	0	0	0	0	0	0	0					
Trauma patients will be transferred within 2 hours of arrival (single system injuries with ISS less than 9 excluded)		ASN 54% 400/744 for 2017	44%, 31/70	41%, 19/46	54%, 28/52	57%, 31/54	38%, 19/50	55%, 32/58	60%, 30/50	68%, 31/54	58%, 23/34.	64%, 23/36	47%, 17/36	50%, 7/7	53% 307/578 for 2018					

44 designated/ verified Trauma Centers. 5 In pursuit.

This information comes from Jacob Seil

Of the total potential trauma facilities, only 39 have a registry. Of the 39 that do have a registry, only 26 are actively submitting data.

This information is collected from the ticket system.

This information is collected from the ticket system.

Using the following filter we were able to capture the monthly rate of transfers within two hours. That number is shown over the total number of transfers from the ED to another hospital per month.