

South Central Regional Trauma Advisory Council
 Executive Council Meeting
 March 24, 2009
 - Minutes -

1) Welcome and Introductions (*Williams*)

a) Sign-in sheet

Lynne Sears	UWHC	Connie Rigdon	WHEPP
Chris Hammes	Madison FD	Dan Williams	SCRTAC/MFD
Janet Volk	Reedsburg Med. Center	Tina Strandlie	Stoughton Hospital
Linda Tyler-Doudna	Richland Hospital	Terri Kelm	Columbus Hospital
Shabvon Johnson	Beaver Dam Hospital	Terry Wise	Baraboo EMS
Connie Henry	Sauk Prairie Hosp&EMS	Bill Schrack	UW Student EMS
Theresa Weiland	St. Clare, Baraboo	Tiana Riebe	UW Student EMS
Amy Franklin	Boscobel Health Care	Katie Egan	UW Student EMS
Cella Janisch-Hartline	Grant Regional Hospital	Joe Ketarkus	Meriter Hospital
Tim Houslet	Marquette Co. EMS	Diane Eberdt	Lodi EMS
Brian Cushman	Upland Hills/D'ville EMS	Paul Wittkamp	DHS/X-Plains EMS

2) Approval of the January 2009 minutes

a) Motion by Sears, 2nd by Volk, Unanimous approval

3) Contract update (*Sears*)

a) Lynne introduced Connie Rigdon, the new Wisconsin State Trauma Coordinator.

b) Connie, after a drum-roll, presented Lynne Sears with an approved and signed SCRTAC contract for 2008-2009. Ovation and clapping followed.

4) State Updates (*Rigdon*)

a) New Trauma Coordinator!

i) The Trauma System is now under Hospital Preparedness.

(1) This move of trauma out from under EMS in no way suggests that EMS is not a very important aspect and component of the Trauma System.

(2) The new location of Trauma in Hospital Preparedness may help Trauma to gain access to increased areas of funding and grants that may have been previously unavailable under EMS.

- ii) With the move to Hospital Preparedness, comes changes, including new philosophies and structure. We must evolve and mature together.
 - iii) Connie Rigdon comes to this position with a strong background in administration, systems development, data and info systems, etc. She admits she is not a strong trauma care practitioner. She insists that the care is up to us, she will make sure administrative details are addressed that allow us to practice optimal trauma care and build a great trauma system.
 - iv) Connie's email address is Connie.Rigdon@dhs.wisconsin.gov
 - v) WARD (question by Ketarkus): WARDS remains under EMS. Rigdon will investigate more with how this important data component will be implemented into the new state trauma structure.
- b) State trauma structure
- i) See above
- 5) SCRTAC Updates
- a) EMS (*Williams*)
 - i) Trauma Education Program (TEP)
 - (1) TEPs continue to go well with positive feedback
 - (2) Recent TEPs include Beloit FD (3), and Marshall EMS
 - (3) With an approved contract, TEPs will continue to be scheduled
 - (4) Upcoming TEPs include the following:
 - (a) April TBD, Richland Hospital
 - (b) May 12, Oregon EMS
 - (c) May 19, Sauk Prairie EMS/Sauk Prairie Memorial Hospital
 - (d) May 21, DeForest FD EMS
 - ii) Pig Labs
 - (1) SCRTAC pig labs continue to be a great learning tool for A&P, and advanced skills for EMS and ED providers. Contact dan@scrtac.org for additional information.
 - iii) Scheduling
 - (1) With the confirmed contract, scheduling is taking place for any/all educational requests. Contact dan@scrtac.org for more info and to book an educational session for your agency.
 - iv) PPE for EMS
 - (1) The PPE for EMS program offering is rapidly coming to a close. Applications must be submitted on-line by March 31st. Visit www.scrtac.org/PPEforEMS.pdf for additional info and to register.

- (2) Please encourage all transporting EMS agencies to participate in this program. It brings useful PPE directly to the EMS agencies door, free of charge. EMS agencies must only maintain the inventory for 5 years, and can rotate the stock with daily operations.
- (3) The State hopes to expand this offering to all EMS agencies next year, including 1st responders.
- (4) To see which agencies in our RTAC have applied, please visit www.scrtac.org/documents

b) Hospital

- i) 'Trauma Coordinator' group update (*Volk*)
 - (1) PI Indicator worksheet.
 - (a) Janet distributed a handout of a PI data collection worksheet that she developed. The PI indicators listed are those dictated by the STAC:
 - (i) EMS Scene time >20 minutes
 - (ii) GCS ≤ 8 without an advanced airway, interfacility (hospital to hospital) transport.
 - (iii) Delay in transferring (>3 hours) to a Level I or II
 - (b) Significant discussion ensued, dealing with these indicators, other indicators, inability to upload and download data, inaccurate data, missing data, etc.
 - (c) Connie Rigdon identified that many of the challenges being experienced are state level issues, and that we should not be expected to complete tasks that are basically not able to be completed due state level inadequacies.
 - ii) Other: None
- 6) SCRTAC Elections (*Williams*)
 - a) Williams explained that the proposed elections for the March SCRTAC meeting were in response to directives from our previous contract administrator, who stated we were in violation. Connie Rigdon has now reassured us that we are not in violation, never were in violation, and will not be in violation if we choose to keep our current structure.
 - b) Williams stated pros and cons of having formal committee officers.
 - c) Motion by Volk, Second by Henry, to cancel the scheduled March elections for the SCRTAC positions of Chairperson, Vice-Chairperson, and Secretary/Treasurer and maintain our current format of an Executive Council that is comprised of all members present at the general SCRTAC Meeting. Vote was unanimous.

- 7) 2008-2009 State RTAC Objectives (*Williams*)
 - a) Work-plan review and update
 - i) Based on information from a meeting with Connie Rigdon, the current objective work-plan is suspended. A revised set of reports for objectives will be determined in the near future.
 - (1) Many shared their support for this action
 - b) Designation of work-plan objectives
 - i) Small group assignments and deadlines
 - (1) Williams shared his feelings about continuing to move forward with some of the work-plan items, as some are vitally important to improving our system. Williams recommended that surveys be constructed by the group that would target our peers in our region that would provide measurable data on trauma system issues.
 - (a) Needs
 - (b) Challenges
 - (c) Insufficiencies
 - (d) Goals
 - (e) Etc
 - (2) Williams separated the group into three work-groups: EMS, Trauma Coordinators, and Trauma Registrars. Each group worked to develop pertinent survey questions for their respective peers. These surveys will provide measurable data that can be used in future regional trauma system improvement initiatives
- 8) Other
 - a) Volk: Med-Surge floor RN trauma assessment training.
 - i) We had hoped to organize and deliver this training session during April, but due to a number of reasons, it was not able to be accomplished.
 - ii) This remains a priority with the SCRTAC, and it will be discussed at the May SCRTAC meeting.
- 9) Next Meeting: May 26th, 4 PM, Middleton EMS
- 10) Adjournment
 - a) (Motion by Janisch-Hartline, Second by Volk): Unanimous