STAC MEETING MINUTES

OCTOBER 12, 2011

Location: DOC Time: 1PM-3PM

Facilitator: Joel Schaefer

Committee members present: Walt Biffl ✓ Ray Coniglio ✓ Kyle Dahm ✓ Kris Hansen ✓ John Nichols ✓ Maura Proser ✓ Joel Schaefer ✓ Randy Lesher✓ Rob Handley✓ Lara Rappaport ✓

Committee members absent: Maura Proser, Charles Mains

EMTS staff: Randy Kuykendall ✓ Krystel Banks ✓ Michelle Reese ✓ Jesse Hawke ✓ Holly Hedegaard ✓ Grace Sandeno✓ Margaret Mohan✓ Art Kanowitz✓

Attendees: Mary Shelton, Nancy Frizell, Phyllis Uribe, Eric Schmidt, Pat Tritt, Tracy Lauzon, Shirley Terry, Sherrie Peckham, Toni Moses, Travis Polk, Tessa Muenier, Lew Gaiter, Anna Seroka, Robert Hudgens, Karen Maciejko, Charles Rael, Fred Morrison, Kim Schallenberger, Hollie Hendrikson, Craig Gravitz, Dale Quimby, Lori McDonald, Jeff Beckman, Dr. Lopez, Carolyn Opatik, Cassie Green, Karen Masters, Dee Crump, Roberta Keller, Tim Dienst, Janine Pieterse, Tamara Connell, Nicola Hopkins, Sarah Gahagan, Paula Holman, Ralph Vickrey, Kathy Mayer, Tina Gemelli, Peggy Berkey, Gail Finley, Dana Kluk, Sue Kern, Dr. Williams

Review of Minutes: Motion to approve minutes from the July 6, 2011and August 16, 2011, meeting Joel Schaefer, second by Walt Biffl and passed unanimously.

Welcome New Members: Rob Handley and Charles Mains

Report on Rural Task Force/ Supporting TNC's

Discussion: The trauma website will soon have several resources for rural trauma centers, just waiting for some final approvals. Some of the resources will include questions/answers asked at a survey, how to prepare for a survey, there will be useful resource links that are in and out of Colorado, CMS document that talks about the trauma fees what they will or will not pay for, CME hours for physicians, and tips for reviewing a trauma medical record. All of these resources will be considered living documents and feedback is always accepted.

Action Item(s) None. Information only.

Report on Benchmarking Task Force

Discussion: Benchmark results are being finalized. Current project care of older trauma patients with rib fractures, chest injuries and different age groups. Will look at outcome depending on facility, will have a conference call at the end of October.

Action Item(s) None. Information only.

Keefe Waiver Application

Discussion: Proposal from the facility to have a mid-level practitioner ACLS trained who is 20 minutes away and give the doctor 30 minutes to get to the facility when trauma activation is started. Nearest facility is 40 minutes away located in Burlington. Other issues to consider:

Nurse practice act is changing the scope of care. This part of the rule hasn't been looked at in a very long time, This can be used as a test case that may give us more reasons to change the current rule. Bottom line is that our focus should be on the level of care to our trauma patients. Waiver applications should be looked at on a case by case basis.
Action Item(s) Waiver is accepted as is without any changes, Nichols proposed, Biffl second. Consensus to make recommendation to SEMTAC.

Interfacility Transfer Rule Rewrite Project

Discussion: Group reviewed draft rules as proposed at meeting. Comments/questions included: Should the rules be broader and less specific? Make sure that it is clear that the rules are NOT to get in the way of transferring a patient. Check on what standards are (maybe COPIC) on telephone consults/diagnoses. Check on issues of credentialing at remote hospital. Need to address Level Is and IIs in rule also – is there anything that a Level II should transfer? (or at least check that all is covered in current rule.) Need to address issue of patients requesting palliative care only. Make it clear in rule that the attending surgeon at the Level III facility makes the final decision. Look for way to cover middle ground if neuro is temporarily unavailable. (need to decide how much is "temporary." Look for samples on protocols for keeping TBI…ask Summit for its protocol and ask Poudre Valley for its clinical practice guideline. Discuss requirement for QA filter for timely neuro care of the patient. Need to get feedback on proposed rules from level III and Level IV facilities.
Action Item(s): Feedback to be given to Nichols via email. Next meeting decision will be made on proposals. Work groups will then be formed to focus on each of the elements.

Next meeting

An interim meeting will be held on November 30, 2011, from 2pm-4pm at CDPHE, in conference room C1A (Building C).