

State Trauma Advisory Council

Minutes

September 13, 2022

Minnesota Department of Health
Shoreview Community Center, Shoreview

Attendees

Members Present

Tami Bong, R.N.

Rick Breuer

Kris Drevlow, D.O.

Mark Ebeling, Paramedic

Angi Grimm, R.N.

Julie Gutzmer, M.D.

Denise Klinkner, M.D.

Steven Lockman, M.D.

John Lyng, M.D.

Michael McGonigal, M.D.

Kyle Nelson, M.D.

Thomas Pahl, PA-C

Robert Jacobs, M.D.

Col. Matt Langer

Members Absent

Aaron Burnett, M.D.

MDH Staff

Chris Ballard

LynMaree Harris

Tim Held

Tammy Peterson

Gina Vue

Call to Order and Welcome

Dr. McGonigal called the meeting to order at 12:35 p.m. and introduced Dr. Robert Jacobs, the new Orthopedic Surgeon representative. The STAC members, MDH Staff, and the audience introduced themselves.

Approve Agenda and June 7, 2022 Minutes

The agenda and minutes from the June 7, 2022 meeting were both approved by general consensus.

Staff Reports

Mr. Held reported:

- LynMaree Harris has joined the trauma system team as the new designation coordinator.
- The trauma system's proposal to add a full-time epidemiologist to the staff and restructure the system's funding was part of the Governor's supplemental budget but did not receive a vote by the legislature. Staff hope to renew the request next year.

Mr. Ballard reported:

- Several STAC members' terms will expire in January. Members who are eligible for reappointment may reapply.
- The e-learning trauma education modules for nurses are expected to be released early next year. He expressed gratitude to the STAC members and trauma program managers who helped review the curriculum.
- A Trauma Program 101 class will be held on September 22nd in Grand Rapids. This offering is tailored to Level 4 Trauma Hospitals, but leaders from Level 3 Trauma Hospitals are welcome to attend. A bridge seminar will be offered for Level 3s the following week.
- The temporary Level 3 and 4 Trauma Hospital Designation Criteria adopted during the pandemic will expire at the end of the year. He highlighted the temporary criteria that will be reverting to the regular criteria.

Mr. Pahl expressed concern about continued difficulty transferring patients. The Level 4 criteria include a temporary clause that permits Level 4s to admit patients that can't be transferred, but that will expire at the end of the year.

Dr. McGonigal indicated that the difficulty transferring patients is not likely to change and suggested that the system may have to adjust to the new reality.

Dr. Klinkner questioned the utility of the current policy requiring most trauma patients to be transferred from Level 4s.

Mr. Held suggested that the criterion could be extended while the STAC considered its options more deliberatively.

Mr. Ballard cautioned the STAC against acting hastily, noting that previous Council members developed the current criterion after considerable deliberation. He suggested a subcommittee or work group to address the issue.

Dr. Lyng moved to extend the temporary transfer clause in Section 10.1 of the Level 4 Trauma Hospital Designation Criteria through June 30, 2023; Mr. Breuer seconded. The motion carried.

Dr. McGonigal invited STAC members and stakeholders to volunteer for a work group to address the transfer challenges with Level 4 Trauma Hospitals. Ms. Grimm, Dr. Drevlow, Mr. Pahl, Mr. Ebeling, Dr. Gutzmer, Mr. Breuer and Dr. Lyng all volunteered. Interested stakeholders should contact Mr. Ballard.

Emergency Medical Services Regulatory Board Update (EMSRB)

Mr. Ferguson reported:

- Numerous topics were discussed at the Minnesota EMS Medical Directors Conference last weekend.

- The Board expected to publish its intent to undertake rulemaking in September and plans to propose the repeal of some obsolete rules, particularly around radio communications.

American College of Surgeons (ACS) Committee on Trauma (COT) Report

Dr. Klinkner reported:

- The Minnesota Surgical Society meets on September 30 where the trauma paper competition will occur.
- COT Region V will be hosted in Ohio.
- The next Trauma Quality Improvement Program (TQIP) meeting is in December.
- The first *Stop the Bleed* club has been organized by a student group.

Regional Trauma Advisory Committee (RTAC) Briefings

Melanie Smalley reported on behalf of the Minnesota Metropolitan Regional Trauma Advisory Committee (MMRTAC):

- The RTAC is working to increase pediatric trauma knowledge and best practices.
- There are plans to form a geriatric work group.
- MMRTAC staffed a booth at the state fair for one day where *Stop the Bleed* and injury prevention was highlighted.

Dr. McGonigal reported on behalf of Jane Smalley for the Northeast Minnesota Regional Trauma Advisory Committee (NERTAC):

- Several cases have been presented and reviewed by the RTAC.
- NERTAC is pursuing several standardized guidelines.
- The members are looking forward to once again engaging in community outreach and offering injury prevention education.

Dr. Stephens reported on behalf of Southern Minnesota Regional Trauma Advisory Committee (SMRTAC):

[Recording inaudible]

The Southwestern Minnesota Regional Trauma Advisory Committee (SWRTAC) was not represented.

Applicant Review Committee Report (ARC)

Ms. Peterson reviewed the hospitals recommended by the ARC for designation:

- Level 3: Grand Itasca Clinics and Hospital, Grand Rapids
- Level 4: Mayo Clinic Health System-Waseca; Stevens Community Medical Center Morris

Dr. Klinkner and Ms. Grimm recused themselves from voting on Mayo Clinic Health System-Waseca. **The ARC's motion carried.**

Ms. Peterson then reviewed the hospitals recommended by the ARC for a 12-month extension of their current designation due to deficiencies:

- Level 3: Lakewood Health System, Staples
- Level 4: Sanford Canby Medical Center; Sanford Jackson Medical Center; Welia Health System, Mora

Mr. Ebeling recused himself from voting on Sanford Canby and Sanford Jackson Medical Centers. **The ARC's motion carried.**

Ms. Peterson reviewed a self-report letter from CHI St. Joseph's Health. The identified issues have been resolved since receiving the report.

The STAC and all present recognized the hospitals recommended for designation, acknowledging the hard work invested.

-Break 1:37 – 2:00 p.m.-

EMS Field Triage

Mr. Ballard introduced the new EMS field triage recommendations developed by a panel of experts, noting that the previous recommendations were published in 2021 by the Centers for Disease Control.

Mr. Held reviewed the history of EMS field triage guideline development in Minnesota, noting that it was published in 2009 and was based on the 2006 recommendations. It reflects compromise and attempts to preserve EMS medical directors' authority to determine transport destinations for trauma patients.

Dr. Lyng acknowledged the work that went into developing the 2009 version, suggesting that after 12 years a review may be in order. He then reviewed the new recommendations noting that the updated format that better aligns with EMS providers' triage process and improves triage of pediatric patients. It was designed to facilitate ease of use, increase speed of decision making, and promote compliance.

Mr. Ferguson suggested that the Joint Policy Committee review the new recommendations along with the system's current guideline and make recommendations as needed. Dr. McGonigal agreed.

L3 & L4 Designation Criteria Housekeeping

Ballard reviewed proposed updates to the Level 3 and Level 4 Trauma Hospital Designation Criteria, characterizing them as largely housekeeping changes that improve clarity of the STAC's existing intent.

One change to the criteria was proposed: To require Level 3 and Level 4 Trauma Hospitals to stock any type-O blood rather than O-negative blood.

There was general agreement to publish the proposal and collect public comment.

Trauma Program Manager Networking Meeting Report

There was a request to move this standing agenda item to earlier in the meeting in the future. Dr. McGonigal concurred.

Open Floor

Mr. Pahl mentioned a grant opportunity offered by the Helmsley Foundation for critical access hospitals to acquire ultrasound equipment and education.

Adjourn

Mr. Ebeling moved to adjourn; [inaudible] seconded. The motion carried by general consensus and the meeting adjourned at 3:40 p.m.

The next STAC meeting is Tuesday, December 6, 2022, from 12:30-3:30 p.m. at the Shoreview Community Center.

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