

Maine EMS Trauma Advisory Committee
Meeting Minutes - Tuesday, October 28, 2014

Present: Pret Bjorn – Chair, Gail Ross, Chris Paré, David Burke, Joanne Lebrun, Anna Moses, Tammy Lachance, Julie Ontengco, James Reilly, Joseph Taddeo, Dave Ciraulo, Tom Judge, Norm Dinerman, Kim McGraw, Heather Cady, Mike Holcomb, Matt Sholl, Marc Minkler, Geno Murray, Carlo Gammaitoni, Ian Reight, Kristen Sihler, James Curtis, Shawn Anderson

Staff: Rick Petrie

Topic	Discussion	Action/Follow up
Called to order at 12:30; Introductions	The meeting was chaired Pret Bjorn. Members and others in attendance were introduced. The confidentiality policy was stated by the chair, and the confidentiality statement was circulated for signature.	
Minutes of July 2014	The minutes of the previous meeting were reviewed.	Motion by Dr. Burke; second by Joanne Lebrun. All in Favor. Approved.
Case Review (MMC)	Dr. Ciraulo presented a case involving a 60 yo male run over by a tractor-trailer; presented with multiple injuries; patient was sent back to the local hospital to continue his recovery because of the bed needs of the Trauma Center; case highlighted the value of the TSH's and TC's working together to care for the long-term needs of the patient. Raised an interesting discussion about the financial considerations with transporting a patient back to the local hospital for recovery. MMC indicated that it didn't seem to be a problem, but other hospitals have indicated that they have had issues in the past.	Pret will work with Tammy to put together information for a future discussion about the financial concerns surrounding transporting a patient back to the local hospital for recovery.
Trauma Plan review	Rick presented that final revision to the Trauma plan that had been sent out to all members following the changes that were made after the last meeting. There was a discussion about the data collection request for TSH's followed by a consensus to remove the requirement to participate in trauma-oriented public education	

	<p>and data collection activities, and add “as resources allow to the request for information under the TSH responsibility section.</p> <p>Also, add the following to the TSH responsibility section: <i>A commitment to optimum patient care, including participation in pre-hospital, in-hospital, and patient transfer quality improvement activities and education.</i></p> <p>Strike the following language from the Trauma Center responsibility section: <i>While the new capability of a Level III or IV center might alter the decision process regarding keeping or transferring a trauma patient who was transported directly to that facility, it could not be used to alter the established referral patterns between Maine Trauma System Hospitals and Trauma Centers (e.g., Level III and IV centers would not be considered receiving hospitals for interfacility transfers).</i></p> <p>Lengthy discussion about trauma transfer destinations</p>	<p>Motion to strike this particular language from the Training Center Responsibilities section: Motion by Ian Reight, second by Chris Pare: All in favor</p> <p>Motion by Ian Reight to table further discussion on Trauma Plan until the group could work out the transfer destination language, second by Carlo Gammaitoni. Discussion among the group; Motion withdrawn by Ian Reight and agreed by Carlo Gammaitoni.</p> <p>Motion by Mike Holcomb and second by Carlo Gammaitoni to leave section as amended. All in favor</p> <p>Motion by Kristen Sihler, second by Carlo</p>
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		<p>Gammaitoni to strike the word “national” from the last bullet point regarding benchmarking under the “specific features of the RTC commitment include” section. All in favor</p> <p>Motion by Ian Reight, second by Matt Sholl to add the words “risk-adjusted” to the last bullet point regarding benchmarking under the “specific features of the RTC commitment include” section. All in favor</p> <p>Motion by James Reilly, second by David Ciraulo to accept the distributed Trauma Plan with the amendments and send it to the Maine EMS Board for approval. All in Favor</p>
Spine Injury Management	With a brief amount of time remaining, Matt Sholl gave a quick overview of the proposed Spine Injury Management consensus document that he and Tim Pieh wrote and distributed to the group prior to the meeting. He asked for comments and requested that we add the topic to the agenda for January	Informational
TAC Chair	Geno Murray has been nominated to fill the TAC Chair position. Geno is the CEO of CA Dean Hospital in Greenville. Rick reported that there have been no other nominations, and there were no nominations from the floor	Motion by David Burke, second by Ian Reight to approve Geno Murray as the Chair of the Trauma Advisory Committee. All in Favor
Adjourn	Next Meeting: January 27, 2015. 12:15 – 2:30 at Maine EMS.	Meeting was adjourned at 2:40. (Reight/Pare) All In Favor