

STATE OF IOWA DEPARTMENT OF
Health AND **Human**
 SERVICES

MEETING AGENDA

DIVISION	Public Health – Bureau of Emergency Medical and Trauma Services		
MEETING TITLE	Trauma System Advisory Council (TSAC)		
FACILITATOR	Margot McComas, Bureau Chief		
DATE	01/17/2023	TIME	1300-1600
LOCATION	Zoom		

MEETING OBJECTIVES

TSAC serves in a leadership role to develop and support the trauma system. The committee provides recommendations to the Iowa Department of Health and Human Services on issues and strategies to achieve optimal trauma care delivery throughout the state of Iowa.

MEETING PARTICIPANTS (Voting Members)

Name	Organization	P / A / E
Jeri Babb	Urban ITC	P
Anthony Camodeca, DO	ACEP	P
Veronica Fuhs	IHA – Hospital Administrator	P
Kenny Hansen	Rural ITC	P
Nicole Nigg <i>*Vice-Chair</i>	Rehab Services	P
Carlos Pelaez, MD, FACS <i>*Chair</i>	ACS, Iowa	P
Sarah Solt	IEMSA	P

AGENDA TOPIC

ITEMS

Introductions and welcome	Meeting called to order by Carlos Pelaez at 1300. Quorum present.
Review of Minutes	Nikki Nigg motioned to approve the October 2022 meeting minutes. Veronica Fuhs seconded. Motion carried unanimously.
Subcommittee Reports: <ul style="list-style-type: none"> • Verification • System Development • Triage & Transport • SEQIS 	<p>Gary Hemann provided a Verification Subcommittee update. There is a Level III trauma criteria checklist draft for Iowa that was developed within the subcommittee during several workshops. The group will propose to omit the Level III-N (neurosurgery) designation for Iowa and adopt almost all of the 2022 ACS guidelines as written for Level III facilities. The national ACS COT has already released a change log (as of December 2022) with some clarifications but have not yet released guidance/standards for Level IV trauma care facilities. We will continue with the 2014 (orange book) standards until further notice for Level IV's and work to get the 2022 standards through the legislative process.</p> <p>Margot McComas provided a System Development Subcommittee update. A partnership evaluation for trauma stakeholders across the state was</p>

	<p>completed. Each partner was graded on a continuum that helps us identify where we may have partnership gaps that could be addressed within the system. A form will be completed that helps us identify these partnership gaps in order for us to better concentrate some time on system development with new partners and reaffirming old partnerships.</p> <p>Margot McComas provided a Triage and Transport subcommittee update. The subcommittee is currently working on updates to the Out of Hospital Trauma Triage Destination Decision Protocol (OOHTTDDP). A draft protocol has been created and a joint meeting with QASP has been scheduled. This will allow us additional stakeholder feedback and we look forward to garnering additional EMS support as we move through this process.</p> <p>Danny Dowd provided a SEQIS committee update. The out of hospital trauma indicators (from the EMS registry) for 2021 were shared with the group. Danny will be visualizing the 2017-2022 data and will share with QASP when it is completed. Dr. Dionne Skeete noted that the indicator list is determined by SEQIS members and feedback on these is welcome.</p>
<p>Organizational Reports:</p> <ul style="list-style-type: none"> • EMSAC • ACS Committee on Trauma • Iowa Trauma Coordinators (ITC) • Iowa HHS / BEMTS • EMS for Children • Office of Disability, Injury, & Violence Prevention • Open Partner Sharing 	<p>Brad Vande Lune provided an EMS Advisory Council (EMSAC) update. They have 2 new voting members in the committee. There was a discussion regarding the Tipton pilot project for point-of-care ultrasound, which has been completed and sent to the EMS physicians' workgroup. The next EMS pilot project is coming soon.</p> <p>Carlos Pelaez provided an update on the ACS COT. The current chair for the Iowa chapter is Dr. John Hartman, while vice chairs are Dr. Pat McGonagill and Dr. Carlos Pelaez. Iowa has a strong presence with COT, as 7 physicians in Iowa participate. The 44th annual Region VII Advances in Trauma meeting was held in Kansas City in December 2022. Sessions to note were the National Guidelines for the Field Triage of Injured Patients; The Future of Healthcare Shortages; Trauma Systems as the Framework for Disaster and Pandemic Response; The Value of Regional Coordination; and 2022 ACS Verification standards. The resident paper competition was a success, with 2 papers from Iowa. Nara Tashjian's (from UPH IMMC) paper regarding Improving trauma opioid prescribing was the winner selected for advancement to the National COT meeting in March.</p> <p>The IHA Iowa Trauma Coordinator's update was provided by Jennifer Nutt. The next conference is on May 26th. There are currently 154 Trauma Coordinators in the group. They are in the renewal process, so be sure to renew so you don't fall off the list. There was a bill dropped for the Rural Emergency Hospital. Very few facilities are considering this designation.</p> <p>Margot McComas provided an Iowa HHS/BEMTS updates. There are no current bill watches at this time. During the Condition of the State address</p>

Governor Reynolds announced a comprehensive review of government operations. There are no current impacts expected for the Bureau of Emergency Medical and Trauma Services, but if any changes should be announced we will communicate those in a timely manner. The Governor's executive order 10 that put a moratorium on new rule making and called for a review of all administrative rules. It is unclear what effect, if any, this will have on EMS and Trauma administrative rules, but the bureau will be sure to include TSAC in any updates as we learn them. We continue to watch for rural emergency hospital bills, but as a pre-session review an REH bill was reviewed that has REH defined under 135B. This is consistent with our trauma administrative rules and would still keep REH's under the trauma system rules.

The state trauma system coordinator role is moving through the interview and hiring process. We hope to have an announcement within the upcoming weeks.

The bureau will start distributing a newsletter as part of a new initiative. This newsletter is intended to increase the communication EMS and Trauma stakeholders across the state of Iowa receive from the bureau. We want to provide you with timely updates and information on a more consistent basis that not only increases your knowledge of regulatory requirements and resources, but also provides additional transparency to the varied public health work our programs are completing. The newsletter is initially scheduled on a quarterly basis, but as we receive stakeholder feedback and have additional information to share, we may look into an increased frequency.

There is no update from Maggie Ferguson for the Office of Disability, Injury, and Violence Prevention.

Open partner sharing:

Iowa Hospital Association is sponsoring a Mass Casualty Incidents Conference on January 19, 2023 at the Community Choice Credit Union Convention Center in Des Moines. There are 330 registrants.

An extensive discussion surrounding the recent field amputation in Iowa commenced. Dr. Azeem Ahmed shared his perspective on the event. The event went well because the UI Med I group has had a system in place for the past 3-4 years, preparing for a potential field amp event such as this. They conduct annual training, have a fully equipped SUV, an amputation kit that is checked weekly, verification that they are covered by their malpractice insurance to perform the task, among many other logistics. Dr. Ahmed and Dr. McGonagill are willing to share technical advice to any regional hospital systems in the state that are interested in building a similar program. To notify this resource in Iowa City, the Johnson County dispatch line needs to be contacted at 319-356-6800 to dispatch UI Med I, which is the group of EMS Physicians. Chuck Gipson provided his

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	<p>perspective on the event in that things lined up very well this time, but may not be so fortunate for the next time (i.e. weather). Dr. Carlos Pelaez discussed a similar event in the Des Moines area this past summer where they gathered resources and deployed to the scene but did not need to proceed with the actual field amputation. Dr. Ahmed noted it makes sense for larger hospital systems in the state to consider similar systems for success in the rare event. Dr. Joshua Pruitt suggested the Iowa Task forces could be involved as potential resources to deploy in these scenarios.</p> <p>Jill Wheeler screen-shared the TSAC budget for FY22-23. No questions.</p>
Old Business	Nothing to follow up on.
Announcements and Adjournment	<ul style="list-style-type: none"> • There were around 97 participants during this meeting – a very positive indicator for meaningful involvement in Iowa’s trauma system. • Tentative Meetings for FY22-23 <ul style="list-style-type: none"> ○ April 18, 2023 • Tentative Meetings for FY23-24 <ul style="list-style-type: none"> ○ July 18, 2023 ○ October 17, 2023 ○ January 16, 2024 ○ April 16, 2024 • Nikki Nigg motioned to adjourn the meeting. Jeri Babb seconded. Motion carried unanimously. • Carlos Pelaez adjourned the meeting at 1415.