# Minnesota Trauma Registry Alliance

### **Minutes**

February 18, 2021 09:00 am

WebEx

### **Attendees**

Chris Ballard (MN Dept of Health)

Leslie Seymour (MN Dept of Health)

Attendance was not officially recorded (approximately 37 participants)

### Opening:

The Meeting of the Minnesota Trauma Registry Alliance was called to order at 9:00 AM on Thursday, Feb 18, 2021 by Carissa Wilcox, MTRA Meeting Chair. Meeting was held via WebEx due to the Covid-19 travel and social distancing restrictions.

### **Approval of Meeting Minutes:**

The minutes of the October 22, 2020 meeting are posted on the MTRA site.

#### **Announcements:**

Welcome Jacque from M Health Fairview as a new trauma registrar.

Next meeting will be in June 2021.

#### **AGENDA ITEMS:**

# Trauma System Update - Chris Ballard:

#### ESO-TraumaBase users:

• 2020 update for TraumaBase has been released/installed and it appears everyone has got it (who uses TraumaBase). People have been sending prolific amounts of data, which is greatly appreciated by the State.



- Please limit your submissions to 2020. The 2021 submissions will have to wait for your 2021 patch from ESO/CDM. The 2021 export will be created soon, date TBD (fingers crossed for April). Not a lot of data changes from 2020 to 2021.
- NTDB changed a few things with their 2021 data dictionary. Regarding those changes<sup>~</sup> a reminder that the State's inclusion criteria and data set have not changed, and we must report data appropriately to each entity.
  - There is a <u>What's ne</u>w! section that is updated in the beginning of the data dictionary each year, including new facility's, etc. Take a peek to see what's changed.
- One known error is occurring in the system, on the MN State side. It has been a
  problem for a couple of years and Chris is negotiating with the vendor to create a
  solution for it.
  - When a record/file is exported from TraumaBase, and (for example) the patient was received from "DeerRiver" hospital, or you are reporting data on behalf of "DeerRiver" hospital and they send that patient to "Duluth", when you record that information about hospital identities in your registry, the export does not report the name of the hospital they export the hospital ID code (usually 6 digits written in the background). That is what gets sent in the export. When the file comes into the MN system, the MN registry finds that identifier, matches it up with the hospital and writes the hospital name into the database. (The lookup table has traditionally been the facility ID. The State published a list of the facility ID's for hospitals. It is a part of the data dictionary)
  - The problem is when the ITDX format came in, our vendor had to change the look up table used to associate that code with the hospital name. Instead of looking at the facility ID table to identify that hospital, they now are looking at the NTDB identifier to find that hospital. The problem is that for the State of MN, our NTDB identifiers are only populated for data importers. Direct entry users do not use this identifier. As a result, we are sending the data with the code the State told us to use, but the system is looking at the wrong look up table and what gets sent back is a wrong value or a null value because they do not match. The vendor pitched this solution: change all the facility ID's to match the NTDB numbers, which Chris pushed back on, as this would be a labor-intensive solution for the registrars. There are several hospitals that have a NTDB ID number that is different than their Facility ID number. The other solution proposed would be for these hospitals, to change their Facility ID's to be associated with a new number and by doing so, he thinks it



would prevent everyone from going into check codes, etc and doing a lot of extra work. CDM/ESO will likely need to go into our registry (or us if we are able to do so) and change these numbers. Chris will float this project to ESO. He thinks around 15 hospitals will be affected and they will be contacted by ESO to figure out the changing of these numbers.

#### Status of TBI/SCI Registry Reporting – Dr. Leslie Seymour, Epidemiologist

- Shout out of appreciation to those who submitted TBI/SCI cases last year while a lot of cases were unable to be submitted in 2020.
- However, there are still months of missing data yet, anywhere from 2-12 months' worth of 'zero' TBI/SCI cases reported for some hospitals.
- For 2021, Leslie will send out a template to the hospital users who are sending their data 'separately' from the registry, in hopes to get the data sent in a similar format.
- A trial is being set up with 3 hospitals, to get TBI/SCI records sent automatically via an electronic data transfer, based off TBI/SCI ICD 10 CM specific codes. Stay tuned for more information regarding that trial method.

#### **Open Forum:**

Group discussion about ICD 10 training options and the possibility of the State providing some funding for scholarships.

Process: Survey group for interest. Contact vendor. Someone (facility/system) must take the responsibility to host- sign the contract with the vendor, etc. The State will provide support, seek money, promote, and help with registrations; however, they cannot be in a contract with the vendor. Possible idea of RTAC assisting with funds as well.

Several members expressed interest, helped look up information and offered insight during our meeting about courses. Training courses appear to be online only at this time. A few sites expressed interest in being a host/sponsor.

Carissa will send a survey to the group soon, regarding which course they prefer-full or refresher, how many would attend, if there is interest in attending with or without scholarship opportunity, etc.

## Adjournment:

Meeting was adjourned at 9:35 am by Carissa Wilcox, Meeting Chair.

The next meeting will be held **TBD**, via WebEx due to Covid-19 restrictions.



The Meeting minutes are respectfully submitted by Carissa Wilcox, Chair.

