

# State Trauma Advisory Council

## Minutes

June 6, 2023

Minnesota Department of Health  
Shoreview Community Center, Shoreview

### Attendees

#### Members Present

Tami Bong, R.N.

Rick Breuer

Aaron Burnett, M.D.

Kris Drevlow, D.O.

Mark Ebeling, Paramedic

Angi Grimm, R.N.

Julie Gutzmer, M.D.

Denise Klinkner, M.D.

Col. Matt Langer

John Lyng, M.D.

Michael McGonigal, M.D.

Kyle Nelson, M.D.

Thomas Pahl, PA-C

Robert Jacobs, M.D.

#### Members Absent

Farha Ikramuddin, M.D.

#### MDH Staff

Chris Ballard

LynMaree Harris

Tim Held

Tammy Peterson

Zora Radosevich

Gina Vue

### Call to Order and Welcome

Dr. McGonigal called the meeting to order at 12:31 p.m. The State Trauma Advisory Council (STAC) members, MDH staff, and the audience members introduced themselves.

### Approve Agenda and March 7, 2023, Minutes

Dr. Lyng moved to adopt the agenda and minutes from the March 7, 2023 meeting as published; Dr. Burnett seconded. **The motion carried by unanimous consent.**

## Executive Committee Report

Dr. McGonigal presented a plaque for Dr. Darrell Carter in recognition of his contributions to emergency trauma care through the development of Comprehensive Advanced Life Support and for his contributions as a trauma system site reviewer since 2006. Dr. Carter recently retired from being a site visit reviewer.

Dr. McGonigal reported:

- In April, the Executive Committee acted on behalf of the STAC to recommend Sanford Worthington Medical Center for designation as a Level 4 Trauma Hospital.
- The Executive Committee took some action on the Level 4 admission criteria before it went out for public comment. It will be addressed later in the agenda.
- He reviewed the proposed 2024 STAC meeting dates and noted the new location beginning in September: Northeast Metro Event Center/Best Western, Shoreview. The proposed 2024 meeting dates were adopted.

## Staff Reports

Mr. Held reported that the MDH trauma program's office is moving from the Golden Rule Building to the capital complex to consolidate space.

Mr. Breuer reported that during the closing days of the legislative session 18 million dollars was allocated for hospitals to defray costs associated with uncompensated boarding.

Ms. Radosevich reported on several legislative initiatives recently passed related to the nursing workforce, health care workers' mental health, the addition of hospital nurses to the loan forgiveness program, and a workplace safety grant.

Mr. Held reported that the trauma system funding bill passed which will increase the budget and allow for the hiring of a third designation coordinator and at least a part-time epidemiologist.

Mr. Held then introduced Olivia Houck, a PhD candidate from the University of Minnesota who is interning with the trauma system this summer.

Mr. Ballard reported:

- Several STAC members' terms will be expiring in January. The vacancies will be posted in the fall.
- He will be attending the annual National Association of State EMS Officials (NASEMSO) meeting in Nevada next week, meeting with other state trauma system managers. Agenda topics include data quality and compliance, AIS15, changes in trauma registry, workforce challenges, and the National Roadway Safety Strategy to improve post-crash care.
- A recently purchased conferencing system will allow STAC meetings will be streamed beginning in September, allowing remote attendees to observe but not participate in the meetings.

- The legislature established a new advisory council on traffic safety. The 31-member council includes a seat for a member of the STAC. He will provide more information as it becomes available.
- Mr. Ballard announced his retirement at the end of September after 17 years with the trauma system. Mr. Held noted that Mr. Ballard's position will be posted tomorrow with the intention of hiring his replacement before he leaves.

## Emergency Medical Services Regulatory Board (EMSRB) Update

Dylan Ferguson highlighted several EMS bills, including:

- Paramedic scholarships of \$5,000
- Grants to high school programs to provide courses related to emergency medical services
- An expansion of the Department of Public Safety soft body armor reimbursement program to include emergency provider services
- Funding to the EMSRB operational budget
- Regional EMS systems had their funding restored
- Increases to course reimbursement for volunteers
- Flight control service funding

Mr. Ferguson noted that several open EMSRB board member positions are posted on the Secretary of State website.

Mr. Ballard reported that there was concern from the Data Policy Standing Advisory Committee for emergency department nurses to have a written record of the EMS findings and therapies provided with the transfer of care for some at-risk patients. Dr. McGonigal announced the formation of a short-term work group to develop a short report template that could be used for this purpose. Interested persons should contact Angi Grimm or Chris Ballard. Mr. Ferguson noted that while the EMSRB has no authority to require this, implementing a short form on a local or regional level makes sense since hospitals access EMS report information differently. The EMSRB previously developed a short form and will provide it for consideration.

Ms. Grimm added that the goal of this work group is improve information transfer without increasing EMS providers' workload.

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

Dr. Klinkner reported that the 11<sup>th</sup> edition of ATLS is underway, noting the introduction of the new mnemonic "X-A-B-C" which aligns with Stop the Bleed principles.

Several best practice guidelines in the works include chest, neurology, traumatic brain injury, and geriatrics.

The fall ACS meeting will be in Boston.

## Applicant Review Committee Report (ARC)

Ms. Peterson reported the following hospitals were designated as trauma hospitals following successful ACS verifications:

- Level 1: Children’s Minnesota – Minneapolis (pediatric); Hennepin Healthcare, Minneapolis
- Level 2: Mercy Hospital, Anoka

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

- Level 3: Abbott Northwestern Hospital, Minneapolis; CentraCare Health – Rice Memorial Hospital, Willmar; Cuyuna Regional Medical Center, Crosby
- Level 4: Allina Faribault Hospital; Essentia Health- Deer River; Glencoe Regional Health Services; Johnson Memorial Health Services, Dawson; M Health Fairview Lakes Medical Center, Wyoming; M Health Fairview Northland; Pipestone Medical Center; Sanford Canby Medical Center; Sanford Thief River Falls Medical Center; Sleepy Eye Medical Center

Ms. Bong recused herself from voting on CentraCare Health – Rice Memorial. Dr. Drevlow recused herself from the vote on Abbott Northwestern, M Health Fairview Lakes, and M Health Fairview Northland. Dr. Nelson recused himself from voting on Abbott Northwestern. Mr. Ebeling recused himself from the vote on Sanford Canby and Sanford Thief River Falls Medical Centers.

**The motion carried.** The hospital representatives were congratulated!

Ms. Peterson reviewed hospitals recommended by the ARC for extension of their current designation:

### **12-month extensions**

- Level 4: Ridgeview Two Twelve Medical Center, Chaska; River’s Edge Hospital, Saint Peter

### **6-month extensions**

- Level 4: Mille Lacs Health System, Onamia; Sanford Westbrook Medical Center

Dr. Drevlow recused herself from voting on Reiver’s Edge Hospital. Mr. Ebeling recused himself from voting on Sanford Westbrook Medical Center.

**The motion carried.**

## Joint Policy Committee (JPC) Report

Dr. Burnett reported that the JPC reviewed the 2021 national recommendations for EMS trauma field triage, comparing it to Minnesota’s current EMS field triage guideline. He presented the committee’s proposal for an updated field triage guideline that incorporates some of the recommendations from the national committee while retaining the current philosophy of providing broad guidance that provides local medical directors flexibility to adapt the guideline to their services.

Ms. Bong moved to adopt the JPC’s proposed EMS field triage guideline; Dr. Lyng seconded. **The motion carried.**

Mr. Ferguson and Dr. Burnett will present the same recommendations and STAC's support to the EMSRB for final review and approval.

Mr. Held acknowledged Dr. Lyng for efforts to bring this issue forward and for guiding the JPC to a full understanding of the 2021 recommendations.

## Regional Trauma Advisory Committee (RTAC) Briefings

Sara Stolt reported on behalf of the Central Minnesota Regional Trauma Advisory Committee (CERTAC):

- All but one position on the committee are filled.
- The committee plans to rotate the meeting location within the region.
- Registration for Trauma Care After the Resuscitation (TCAR) June 15-16 is open.
- CENTRAC is planning for the fourth annual Pre-Hospital Conference. It will be offered during the evening hours to reach more volunteer EMS providers.

Deb Syverson reported on behalf of the Western Regional Trauma Advisory Committee (WESTAC):

- The March meeting was cancelled.
- There is a lot of turnover in the trauma coordinator positions.
- WESTAC continues to review cases brought forward by members.
- The committee continues to provide Stop the Bleed education in the region.

There was no report from SWRTAC.

Dr. Greg Beilman presented several slides illustrating joint efforts by some Minnesota Level 1 and 2 Trauma Centers to gather pre-hospital data to better understand unmet needs in pre-hospital care, particularly with respect to rural areas with long transport times. He hopes to share findings in six to nine months.

Colonel Langer recognized an opportunity to tie law enforcement into the analysis since law enforcement officers frequently are first responders. He suggested that the topic would be a good topic for the Toward Zero Deaths conference.

Break 1:50 p.m. – 2:10 p.m.

## Trauma Program Manager Networking Meeting Report

Ms. Peterson and Ms. Harris reported on behalf of the Level 3 and 4 trauma program managers:

- Ridgeview Emergency Department at Two Twelve Medical Center shared reports and simplified trauma team activation indicators that has helped them with under triage. They also shared a transfer and admit checklist.
- The state designation coordinators are offering bi-annual, two-hour webinars to help those preparing for upcoming site visits. They also plan to offer informal quarterly question and answer sessions.

- The Level 3s and 4s are now breaking into their own groups for part of the meeting.
- Ms. Bong reported on behalf of the Level 1 and 2 trauma program managers:
- The group discussed ACS site visits and issues surrounding the TraumaBase registry.
  - Those who perform site visits for the state reflected on the benefits of pre-reviewing cases.

## Unfinished Business

### Proposed Temporary Level 4 Criteria

Dr. McGonigal reviewed the Proposed Temporary Level 4 Trauma Hospital Designation Criteria. He noted that a change proposed to Section 10.1 during the March meeting, adding “Those for whom good-faith transfer efforts have failed [after consultation with a trauma-trained general surgeon]. Such cases must undergo a thorough performance improvement evaluation” was not tenable because the Level 4 criteria would have to be modified to require more comprehensive performance improvement activity and staff would not be able to measure ‘good faith’ effort. Instead, the Executive Committee proposes that the current temporary clause that permits admission of trauma patients if they can not be transferred be amended and extended through the end of 2024.

Dr. Drevlow moved to adopt the temporary proposed criteria as written effective immediately; Dr. Burnett seconded. **The motion carried.**

### Level 4 Admission Criteria Change Recommendations

Mr. Ballard reviewed the Level 4 Admission Work Group’s recommendations from the March meeting, distinguishing it as a proposal for permanent change rather than a temporary change that the STAC just discussed. He noted that three responses were received during the public comment period which STAC members have in their meeting packets.

After brief discussion Dr. Lyng moved to adopt the recommended changes as printed effective immediately; Ms. Grimm seconded. **The motion carried.**

Mr. Ballard indicated that hospitals could update their policies to reflect both changes at any time.

## Open Floor

Mr. Pahl reminded everyone about the grant-funded opportunity to expand point of care ultrasound training and education at no cost. He reviewed the many benefits to participating, noting that the project’s goal is to credential as many providers as possible.

## Adjourn

**The meeting was adjourned at 2:34 p.m. by unanimous consent.**

The next STAC meeting is Tuesday, September 12, 2023, from 12:30-3:30 p.m. at the North Metro Event Center/Best Western in Shoreview.