

**MINUTES OF THE MEETING**  
**of the State Trauma**  
**Advisory Board**  
July 30, 2021

**CALL TO ORDER**

The meeting of the State Trauma Advisory Board was called to order by Sandy Kirchner, Board Vice-Chairperson, at 10:35 a.m., on July 30, 2021. The meeting was held via Zoom. Copies of the agenda were emailed in advance to the Board members, interested parties, and posted on the Department of Health and Human Services Open Public Meeting Calendar and on the website on July 28, 2021.

**ROLL CALL**

The following board members were present to answer roll call:

- Dr. Zachary Bauman
- Diane Canedy
- Ryan Hamburger
- Sandra Kirchner
- Chad Reutlinger
- Dr. William T. Sorrell
- Dr. Lori Terryberry-Spohr
- Benjamin Tysor
- Dr. David Voigt
- Laken Vrbas

The following Board members were absent: Dr. Juan Asensio, Mike Bailey, Tami Bokelman, Dr. Emily Cantrell, Dr. Rick Fermelia, Pete Festersen, Dr. Rommie Hughes, and Robby Rhembrandt

The following staff members from the Department were also present during all or part of the meeting:

- Carol Jorgensen
- Andrew Ngochoch
- Tim Wilson
- Sherri Wren
- Diane Schoch

A quorum was present, and the meeting convened.

**ADOPTION OF THE AGENDA**

**MOTION:** Canedy made the motion, seconded by Tysor, to adopt the agenda for the July 30, 2021, State Trauma Advisory Board meeting.

Voting Yes: Canedy, Bauman, Hamburger, Kirchner, Reutlinger, Sorrell, Terryberry-Spohr, Tysor, Voigt and Vrbas. Voting No: None. Abstain: None. Absent: Asensio, Bailey, Bokelman, Cantrell, Fermelia Festersen, Hughes and Rembrandt. Motion carried.

**APPROVAL OF THE MINUTES**

**MOTION:** Motion made by Dr. Sorrell, seconded by Dr. Voigt, to approve the draft minutes of the April 12, 2021 meeting.

These minutes have been approved by the  
State Trauma Advisory Board on  
12/13/2021.

Voting Yes: Bauman, Canedy, Hamburger Kirchner, Reutlinger, Sorrell, Terryberry-Spohr, Tysor, Voigt and Vrbas. Voting No: None. Abstain: None. Absent: Asensio, Bailey, Bokelman, Cantrell, Fermelia, Festersen, Hughes and Rembrandt. Motion carried.

#### **AGENDA ITEM: REGIONAL AND COMMITTEE UPDATES**

Regional updates were compiled and provided to the Board prior to the meeting. See July 30, 2021 meeting handouts for a complete briefing.

Jackie Wright, Region 2 stated that they did not submit a report, but the region had been working with York, Beatrice and Seward on designation. She gave an update on recent activities in the region.

Renae Jacobson, Region 3 stated that their Region 3 report should state July and not June.

There were no additional questions or comments. See July 30, 2021 meeting handouts for a complete briefing.

#### **AGENDA ITEM: EHS DEPARTMENT UPDATE**

Information was compiled from the Office of Emergency Health Systems and provided to the Board prior to the meeting. No additional questions or comments. See July 30, 2021 meeting handouts for a complete briefing.

#### **AGENDA ITEM: DATE UPDATE**

- a. Data Dictionary. The data dictionary was sent out to the board and work group members for comment prior to the board meeting. A worksite will be set up via google documents for additional comments and revisions by the Data/QA Committee. The goal is to have the draft data dictionary ready for the October 8, 2021 Trauma Advisory Board Meeting.

There was discussion on the admissions section of the data dictionary as it excluded patients transferred to other hospitals and there were questions as to why they may be excluded in the trauma registry. It appears that admissions excludes patients transferred to other hospitals. Is it possible they might be missing some cases? There was a discussion on how readmissions and how they are pulled. It may have to be refined as people may be entering data differently. There was a discussion on why scene vital signs are missing for EMS. Wilson stated he thinks the reason is that vitals were taken after the ambulance went en route to the facility. They may have to look at how the vitals come across.

- b. Trauma Registry Report. Ngochoch gave a PowerPoint Trauma Registry report. Topics covered included number of cases, case fatality rate, readmissions and prehospital vital signs using from data submitted from the time period of 2016 to 2020. See July 30, 2021 meeting handouts for a copy of the presentation.
- c. TQIP Collaborative. The group met to review the spring 2021 TQIP report. Schoch gave an update on recent workgroup activities to include the identification of collaborative performance improvement and shock cohorts that have been targeted as areas for improvement. The group would like to identify how patients can be better resuscitated prior/during to transfer and determine if being a designated trauma center improves outcomes. The group plans to meet again to look at the fall TQIP report and report back. It was asked if the TQIP report can be shared with the public. Wilson will check with the collaborative agreement head and see if it can be shared and report back.
- d. EMS Data. This report was covered in the EHS written report. There were no further comments or questions.

**AGENDA ITEM: STATEWIDE TRAUMA MEDICAL DIRECTOR**

Dr. Bauman updated the group on a June 2021 Fireside Chat. There are plans to do more in the future. He thanked the board for their help with the letter of recommendation to the Department to keep ATLS as a requirement in the Trauma Regulations.

**AGENDA ITEM: DISCUSSION ON APP SITE REVIEWERS**

Kirchner lead the discussion on the potential option of APP's being the lead designation reviewer. She shared a handout describing the potential qualifications for the APP site reviewer. See the June 30, 2021 meeting handouts. Kirchner asked Dr. Bauman and Dr. Cantrell for their advice and incorporated their thoughts. She asked the board for their opinions. Kirchner felt that based on the qualifications, there would be a limited number of APP's that would be qualified to go on reviews. Dr. Bauman asked if other states use APP's for designation reviews. Wren stated that she polled other states and they do not use APP's for designation reviews. Dr. Voigt stated that when they are reviewed they are asked how many resuscitations they have performed, so should this be a consideration? Dr. Bauman asked if there is a number that they feel like is appropriate to put in this criteria? Dr. Voigt suggested a minimum of 15 resuscitations. A hybrid designation review was discussed. It was discussed that other board members feel it is important to have the physician be the leader reviewer. It was decided to table the discussion and to discuss the topic more at the next Designation Committee Meeting.

Festersen jointed the meeting the specific time was not noted.

**AGENDA ITEM: RULES AND REGULATIONS UPDATE**

Wilson stated that at the third public hearing in May 2021 there were some public comments mainly regarding ATLS certification. There was a new comment about which accreditation or verification agencies could be used for the Rehabilitation certification. The Department had to respond to all of those comments. The Department agreed with keeping ATLS in the proposed regulations as they move through the process. They will not expand the agencies for the Burn accreditation or verification.

The proposed regulations and responses were sent out to stakeholders. Next in the process is the Board of Health and then Governor's office for review. Wilson clarified the draft was sent out and has not been changed from the third public hearing. He reviewed the draft with the board. He clarified that Chapter 2-11 are being deleted from the regulations. These are consolidated into Chapter 1. Wilson clarified that content had not been deleted just incorporated into one chapter.

It was motioned by Dr. Voight and seconded by Dr. Terryberry-Spohr to approve Dr. Cantrell to sign two certificates; one for adoption for proposed regulations to move forward and another to repeal (deletion) of 185 chapters 2-11.

Voting Yes: Bauman, Canedy, Festersen, Hamburger, Kirchner, Reutlinger, Sorrell, Terryberry-Spohr, Tysor, Voigt and Vrbas. Voting No: None. Abstain: None. Absent: Asensio, Bailey, Bokelman, Cantrell, Fermelia, Hughes and Rembrandt. Motion carried.

**AGENDA ITEM: REGIONAL BOARD DISCUSSION**

There has been discussion at the spring regional board meetings of eliminating the Regional Trauma Advisory Boards. Dr. Bauman without these boards there is a concern there would be no official way for the regions to advise the state in an official capacity and community engagement may be lost. Wilson

stated that the regional boards are duplicative in efforts and are more work for the state staff, five boards are a lot of work when there are one to two board meetings a year for each board. Wilson said that the committees can make recommendations to the State Trauma Advisory Board. Dr. Terryberry-Spohr reiterated this concern from the perspective of the Region 1 Board regional board and they would want to ensure that there would be a mechanism in place to advise the state. Dr. Sorrell added that eliminating the regional boards would save state time and effort and the regions could do their own PI meetings. Region 2 felt the same and were in favor of regions having their own PI instead of formalized regional board meetings. The general consensus was to revise the statute to eliminate the regional boards. Wilson stated that elimination of the regional boards would need to go through the formal legislative process of a statutory revision. It was clarified that the regions would still have their regional PI meetings with the leadership of each Trauma Medical Director. The TMD's would remain on the State board. Wilson suggested that a committee be formed to review changes to the trauma statute. A recommendation could be made of the trauma board composition and changes to the regional board. A senator would need to introduce proposed legislative changes.

Canedy made the motion and Festersen seconded that the Legislative Committee update the trauma statute eliminate the Regional Trauma Advisory boards by the October 8, 2021 meeting.

Voting Yes: Canedy, Festersen, Hamburger, Kirchner, Reutlinger, Sorrell, Terryberry-Spohr, Tysor, Voigt and Vrbas. Voting No: None. Abstain: None. Absent: Asensio, Bailey, Bokelman, Cantrell, Fermelia, Hughes and Rembrandt. Non-Voting: Bauman. Motion carried.

#### **AGENDA ITEM: TRAUMA BOARD COMPOSITION**

Wren stated currently there are three vacant positions on the board to include: Pediatric professional, 911 Dispatcher and COT Chair. The current and proposed Trauma Board Composition was discussed. The proposed list was reviewed by the board as well as a plan to transition to a new list if adopted. It was suggested that we transition in the regional TMDs and the regional nurses. Wren asked if we go with the new list who replaces the 911 dispatcher since that representative is not on the new proposed list. EMS Board Liaison and State Medical are listed as non-voting. Why can't they vote? Wilson said the liaison to another board can vote. Wilson will check with legal to see if the State TMD can vote. Wilson said he would like to see the State EMS Board Liaison or EMS Medical director remain on the board. The size of the board was discussed. Wilson reminded the board that a 30 member board would require 16 members for a quorum. Are there term limits on the board? Wilson says there is no limit of how many times you can be on the board. Festersen asked about the role of the Consumer. Wilson said this is intended to be the role of consumer of the trauma system.

Wren is going to post the pediatric representative and COT as they are currently vacant. Wren asked who to rotate into the category, because the 911 is no longer on the proposed list? It was asked if we could just add to the list and the list would fluctuate from 20-30 members. Are members who are not on the proposed list category immediately off the board? No, they would need to be replaced as terms expire. Wilson suggested that we should see first who is currently filling each slot, what is open, what is not open and then post. Wilson said it is possible for one person to hold two roles on the board. Sorrell recommended that we fill in the names into the roll and go from there.

Canedy motioned and Kirchner seconded to approve the proposed draft board composition list.

Voting Yes: Canedy, Festersen, Hamburger, Kirchner, Reutlinger, Sorrell, Terryberry-Spohr, Tysor, Voigt and Vrbas. Voting No: None. Abstain: None. Absent: Asensio, Bailey, Bokelman, Cantrell, Fermelia, Hughes and Rembrandt. Not voting: Bauman. Motion carried.

The board suggested that the level 3 or 4 TNC be filled next.

#### **AGENDA ITEM: ABLs**

Dr. Voigt asked if there was funding available for ATLS and proposed that there be funding available for ABLIS. Wren stated she has a \$25,000 education fund to supplement trauma center education. Wilson asked for Dr. Voigt to get a budget on what he think might be needed to supplement ABLIS education.

**AGENDA ITEM: STRATEGIC PLANNING**

The Trauma Advisory Board Committees were discussed. A handout was provided of board members that have volunteered for each committee. See July 30, 2021 meeting handout. Board members are needed for the Legislative Committee there are only two members. Festersen suggested the state review the statute first and then have committee members review it. As long as there are identified board members on the committees, members of the public can join. It was suggested that TQIP remain as its own committee. Kirchner suggested sending out the committees to the public and seeing who is interested on being on the committees. Maya will be at the next board meeting for strategic planning.

**AGENDA ITEM: PUBLIC COMMENTS**

Diane Canedy announced her retirement and resignation from the board.

There being no further business, the meeting adjourned by Kirchner.