

**Washington State Department of Health
Office of Community Health Systems
EMS & Trauma Care Steering Committee**

MEETING MINUTES

September 20, 2017
Creekside Conference Room
20809-72nd Avenue South, Kent, WA

ATTENDEES:

Committee Members:

Saman Arbabi, MD Cameron Buck, MD Peggy Currie Scott Dorsey Tony Escobar Jr., MD Mark Freitas	Madeleine Geraghty, MD Beki Hammons Denise Haun-Taylor Rhonda Holden Erica Liebelt, MD Valerie Lyttle	Brenda Nelson Susan Stern, MD Mark Taylor David Tirschwell, MD Melody Westmoreland
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DOH Staff

Tony Bledsoe Ben Booth Steve Bowman Christy Cammarata Eric Dean	Hilary Dykstra Dawn Felt Dolly Fernandes Hailey Green Catie Holstein	Jim Jansen Kim Kelley Matt Nelson Jason Norris Tim Orcutt
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Guests:

Karrie Austin Chris Boyd Chris Clutter Rinita Cook Rachel Cory Tyler Dalton	Karen Kettner Traci Larrabee David Lynde Denise McCurdy Jim Nania, MD	Martina Nicolas Tammy Pettis Adam Richards Cynde Rivers Becky Sterner
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Call to Order: Sam Arbabi, MD, Chair 9:29 a.m.

Introductions: Dr. Sam Arbabi began the meeting by introducing newly appointed members: Peggy Currie, representing the Washington State Hospital Association and Scott Dorsey, representing the Washington Fire Chiefs Association. Peggy Currie has many years' experience in clinical and acute nursing administration, and is the Chief Operating Officer at Sacred Heart Hospital. Scott Dorsey has served in prehospital care since 1990 and is the Deputy Fire Chief of EMS Snohomish County Fire District Seven.

Review of previous meeting minutes: Sam Arbabi MD, Chair

Handout: Minutes from the May 17, 2017, EMS and Trauma Care Steering Committee meeting.

The following changes were requested to be made to the May 17, 2017 minutes: Dr. Susan Stern and Rhonda Holden be taken off and Dr. Cameron Buck be added to the listed meeting attendees.

Motion #1: Approve May 17, 2017 meeting minutes with requested changes.
Approved unanimously.

DOH & OCHS Updates: Steve Bowman, DOH

State Budget Update: Steve Bowman noted that the Emergency Medical Services and Trauma section at DOH emerged relatively unscathed in the recent state budget cuts; however, the Health Systems Quality Assurance division where EMS and Trauma resides is experiencing budget challenges in some other areas, such as credentialing services. These challenges could affect some EMS credentialing processes and may result in longer times for the issuing of credentials.

Legislative Update & DOH Decision Packages 2019: Steve Bowman, DOH

Behavioral Health Integration: the proposed bill to integrate behavioral health did not pass, however it is still on the Governor's agenda for next legislative session.

Certificate of Need program: As part of the operating budget, the Legislature required DOH to submit a report on this program, including recommendations for improvements.

Cardiac and Stroke and Trauma Care Fund Decision Packages: There is interest at DOH in taking forward a cardiac and stroke and a trauma care fund decision package (legislative budget proposal) in 2019. The cardiac and stroke proposal would support verification of cardiac and stroke hospitals including data collection for quality improvement. The Trauma Care Fund proposal would increase the fees to support current system needs. We are looking into whether these two packages could fit together or not and how to assure broad stakeholder support for any proposed package.

WEMSYS: DOH is looking at whether WEMSYS could be used for opioid surveillance. Discussions are being held about how to assure complete reporting needed for a viable surveillance system. A legislative mandate for EMS reporting is needed to implement WEMSYS across the state, as well as obtain additional money to support rural agencies in meeting their WEMSYS reporting requirements.

Trauma Registry: Ben Booth, DOH epidemiologist, has had success in linking Version 4 and Version 5 of the trauma registry software. DOH is looking into a web-based option for trauma registry, rather than the current software-based platform. This would cut down the work and cost for hospitals because they would not need to maintain software. Dr. Booth has been getting out to Regional QI meetings. He will be sharing later the reports he can provide from the registry. Dr. Arbabi emphasized the importance of each region reviewing their data from the registry and looking for quality improvement opportunities. DOH has also upgraded the contract with Digital Innovations, the vendor for the Trauma Registry software, from a tier 2 to a tier 1 service. This upgrade seems to be appreciated by the registrars at trauma designated services. Donna Bybee at DOH was handling a substantial number of patches at the tier 2 service level and now she has more time to spend on quality improvement and data reliability.

DOH Staff Update: Steve introduced two new DOH staff members, Hailey Green and Christy Cammarata. Hailey Green is the new Regional Liaison for the North, Northwest, West, Southwest and South Central regions. She is a University of Washington graduate, and has experience in the medical field through an internship at Tacoma Fire Department on community paramedicine. She most recently worked as a Medical Assistant for Multicare. Christy Cammarata is the new Regional Liaison for the

Central, North Central and East regions. Christy is a California State University graduate and came to the Department of Health from the Department of Labor and Industries where she worked on injured worker claims and contracting. The Office of Community Health Systems is thrilled to have both Christy and Hailey on board. Last, Steve congratulated Dolly Fernandes on 30 years of public service.

Trauma Lobby Day at Capitol: Sam Arbabi, MD, Chair

Dr. Arbabi announced that Dr. Eileen Bulger is organizing a trauma lobbying day on January 10, 2018, sponsored by the American College of Surgeons, at the Capitol in Olympia. All are invited to attend. The goals for the lobbying day are: 1) Support for the Washington Trauma System, especially rural areas and 2) Need for public education on Stop-the-Bleed.

Mark Taylor noted that because the trauma system works so well, it is easy for those who have the key to the chest to ignore it, even though the costs have gone up. He said that we need to provide some basic knowledge of what the program is and what it involves, and we need to show support for facilities in rural areas. Harborview Hospital has been doing public education classes on Stop-the-Bleed. There is interest in mandating Stop-the-Bleed public education similar to public CPR training.

Discussion ensued on whether this lobby day needed to also include cardiac and stroke. There was concern about diffusing the focus from trauma and stop-the-bleed by including cardiac and stroke. Cardiac and Stroke deserves its own day and it was pointed out that the American Heart Association will be holding a lobby day at the Capitol in 2018 and it will most likely include support for a cardiac and stroke system for Washington state. The committee encouraged seeking support for all system components, stressed needing to be clear on what specifically is being asked for, encouraged seeking support from all associations and recommended using data and success stories to demonstrate value of the system.

Implementation of Legislation Passed: Catie Holstein, DOH

ESSB 5751: This bill allows agencies in rural areas to use non-medical personnel to drive ambulance. We are almost completed with our work around implementation and are reviewing the process with our EMS stakeholders.

SHB 1258: This bill is also known as the “Travis Alert” bill and mandates education to enhance capabilities of emergency response personnel to care for people with disabilities at the scene of an emergency.

E2SHB 1358: This bill concerns Health Care Authority reimbursement standards for CARES (community paramedic) programs.

Rules Update: Dolly Fernandes, DOH

The Trauma Designation Rules are currently undergoing review and amendment and DOH is in the process of opening up the Trauma Registry and EMS Prehospital rules. Tim Orcutt will lead the rulemaking and amendment process for the Registry rules and Catie Holstein will be taking on the task of revising the EMS rules.

Trauma Designation Rules: Tony Bledsoe, DOH

Handout: Draft Trauma Designation Rules WAC 246-976-70

The Trauma Designation rule revisions draft is in the handout packet for the committee’s review. Tony noted that the Hospital TAC has been actively involved in the rule revision. He indicated that the draft

Trauma Rules are posted on the DOH website. Currently, Tony is working on the significant analysis for the designation rules which is a part of the CR 102 package.

EMS & Trauma Strategic Plan Review: Dolly Fernandes, DOH

Handout: 2015-2017 Strategic Plan

Presentation: EMSTS Annual Report 9-20-2017

Dolly Fernandes presented a review of the Emergency Care System 2015-2017 Strategic Plan goals and accomplishments, provided a snapshot of the current system, highlighted critical and emerging issues, and recommended next steps.

Strategic Plan Accomplishments for 2016 - 2017:

- Rules amended for air medical services
- Revised 12 trauma guidelines for trauma designated hospitals
- Revised/updated 102 prehospital patient care procedures (PCP)
- Revised the stroke triage tool
- Updated 5 PCP's for Stroke Triage Tool.
- Supported EMS response for emergent diseases / epidemics, e.g. Ebola, Zika, influenza
- Planning pediatric disaster triage readiness
- Revised Rehab trauma registry and data submission process resulting in 100% Rehab data submitted for 2016.
- Improved Rehab services participation in WA State Trauma Program
- Pediatric successfully contracted and supported bus back media campaign focused on reducing Non-Accidental Trauma (child abuse).
- Pediatric supported the creation of a series of pediatric education training videos.
- Pediatric currently supporting pediatric medication standardization tool implementation in King County with plans to expand.
- Publication on pediatric spleen injury
- Revised Cardiac & stroke prehospital stroke triage tool and currently rolling out communication/education tool.
- Cardiac and stroke currently focusing on standards and identifying facilities who provide care for Large Vessel Occlusion.
- Cardiac & stroke formed verification workgroup to examine different ECS system models and came to consensus on DOH/Outside accreditation model.
- Comprehensive data quality analysis of stroke data from WEMSYS.
- RAC rural EMS volunteers video <https://vimeo.com/233546298/6bc7ab7141>
- Central and North regions produced area videos
- Increased partnership with emergency preparedness & EMS
- RAC developed statewide template for PCPs
- Medical Program Director transitions in Grays Harbor, Kitsap, Adams, Lincoln, and Columbia counties.

- New awesome people additions:
 - DOH Team: Steve Bowman, Ben Booth, Hilary Dykstra, Elisabeth Molina, Hailey Green and Christy Cammarata
 - EMST SC: Beki Hammons, Tim Hoover, Sam Mandell, Erica Liebelt, Cameron Buck, Dan Hall, Cindy Button, Scott Dorsey, Peggy Currie

Critical/Emerging Issues:

- Changing healthcare landscape: mergers, ACA, insurance, workforce
- Hospital diversion / surge capacity
- Rehab access
- Suicide now most common cause of death for youth ages 10-14

Dr. Stern recommended that the Rehab TAC benchmark the state’s trauma rehab capabilities by providing data on 1) the number of rehab facilities in state, 2) the number of trauma patients that go to rehab, and 3) where our state’s trauma rehab sits in the nation. Dr. Stern noted that this data could be helpful in lobbying efforts. Tim Orcutt, DOH, will take Dr. Stern’s recommendation to the Rehab TAC.

Update the Strategic Plan: Sam Arbabi, MD, Chair

Dr. Arbabi asked members how they would like to update the strategic plan. The two methods could be: 1) each TAC meet and update objectives and bring that back to the Steering Committee for approval, or 2) TACs and members split up into groups at a future Steering Committee meeting to update objectives and add new ones to incorporate into plan.

The committee opted to work on updating their respective TAC objectives and strategies during future TAC meetings and report back to the Steering Committee at a later date. Since several TACs have already updated their strategic objectives going out to 2021, Dolly recommended that the Steering Committee change the strategic plan end date from 2017 to 2021.

Motion #2: Update the Washington Emergency Care System strategic plan end date from 2017 to 2021. Approved unanimously.

Regional QI Data Presentation: Ben Booth, DOH Trauma Epidemiologist

PowerPoint Presentation: Regional QI Reports

Ben Booth reported that he has done QI data report presentations for three Regional QI committees, and Tim Orcutt has presented to one regional QI committee. The idea behind these efforts is to standardize QI reports across regional QI committees. Ben presented examples of what the standardized QI reports could look like.

The goal for these standardized QI reports is to take hospital-specific data to regions to be used for quality improvement. Dr. Arbabi encouraged all designated hospitals and EMS to participate in the Regional QI forums and use the data Ben provides to benchmark hospital standing and seek ways to improve patient care and overall patient outcomes.

Strategic Plan Annual Reports: Emergency Cardiac and Stroke TAC and Prehospital TAC

Emergency Cardiac and Stroke TAC Annual Report: David Tirschwell, MD, ECS TAC Chair *PowerPoint Presentation*

Dr. Tirschwell's presentation covered the progress of the ECS TAC goals, objectives and strategies.

2017 Accomplishments:

- Finalized prehospital stroke triage tool and received approval from Steering Committee and MPDs
- Five of eight regions have revised stroke tool in regional plans
- Stakeholder driven workgroup tasked with standardizing inter-facility transport guidelines – first draft
- Regular data presentations at TAC meetings provide opportunity to examine trends and identify areas of improvement
- Finalizing recommendations for formally identifying thrombectomy capable hospitals through attestations
- Convening regularly scheduled data workgroups after period of stagnation
- Educational work session in House Health Care and Wellness Committee in Spring of 2017

Future Goals:

- Continue support and collaboration to pursue sustainable funding for ECS system
- Complete inter-facility transport guideline including thrombectomy capable centers
- Analyze triage tool data and make adjustments if necessary (to improve, or with new time frame)
- Complete identification process for thrombectomy capable centers

Dr. Madeleine Geraghty, a member of the ECS TAC, recommended increasing cardiac representation on the ECS TAC be added to the ECS TAC's goals.

Discussion ensued on various related topics including: 1) concerns about the rollout of the revised prehospital stroke triage tool, 2) a recommendation to measure the door-in-door-out time or stroke patients, 3) concerns about stroke level II hospitals that don't have endovascular care, and 4) concerns about going beyond self-categorization to requiring outside accreditation.

Coverdell Stroke Outcomes & WEMSIS Validation: Jim Jansen, DOH Stroke Epidemiologist

Handout: EMS Stroke Data Validation and Performance Project

PowerPoint Presentation: Coverdell Stroke Outcomes and WEMSIS Validation 2017

Jim Jansen summarized the Coverdell Stroke Outcomes and WEMSIS Validation Project and identified the following gaps, takeaways and next steps:

3 Causes of Gaps in EMS reporting:

- Manual entry error at EMS agency: Incorrect field, failure to record, proper method
- Entry form design: Placement of important fields, “Smart” features lead to over reporting
- ePCR Vendor / WEMSIS Mapping errors: Vendor/WEMSIS linking, update frequency
- Other causes to be determined as project continues

Takeaways:

- DOH working with EMS and Hospitals to improve stroke care through QI, education, collaboration, reporting systems and sustainability planning
- WEMSIS data necessary for state level EMS stroke care improvement/tracking
- Entry accuracy, form design and vendor mapping are main sources of data gaps
- WEMSIS essential for measuring and understanding stroke care improvement efforts and needs both at local and state level

Next Steps:

- Pierce EMS data collection continues through December 2017.
- WEMSIS data validation continues through December 2017.
- ePCR vendor calls: Fall 2017
- WEMSIS primary data collection begins January 2018.
- EMS QI efforts to improve data quality continues through June 2020.
- Expanding Coverdell to other counties and regions continues through June 2020.

Coverdell Stroke Grant—Second Year Update: Kim Kelly, DOH Stroke Grant.

PowerPoint Presentation:

Kim Kelly presented on the progress of the Coverdell Stroke program in the second year of the grant. She thanked contributors to the grant project work and encouraged support for the decision package and resources for a cardiac and stroke system.

Break 12:00-12:20

Prehospital TAC Annual Report: Scott Dorsey, Prehospital TAC Chair

Handout: PHTAC Strategic Plan 2014-2017 v4 08.07.2017

PowerPoint Presentation: PHTAC Annual Report 2017

Prehospital TAC Chair Appointment: Dolly Fernandes announced that Scott Dorsey has been appointed the new Prehospital TAC chair.

Prehospital TAC Annual Report: Scott Dorsey, Prehospital TAC Chair.

Scott Dorsey’s presentation covered the progress of the PHTAC’s goals, objectives and strategies and accomplishments for the following:

- Prehospital Emergency Preparedness
- Community Paramedic/MIH
- Prehospital Education
- Prehospital Data/WEMSIS
- Prehospital Clinical Standards

Plus: a healthy committee, updated the Emergency Care Systems GIS Map, revised the Air Ambulance rules and used technology for shared work

Future 2017-2019 objectives:

- EMS Preparedness: Patient movement in surge scenarios
- EMS Clinical Standards: National Scope Update, Community Paramedicine/Mobile Integration Health, Implementation of 1721, EMS protocols
- EMS Education: Education for Travis Alert, Training Program challenges, Assess Con-education model
- Data Registry/WEMSIS Vision: Data quality focus, measure EMS performance, Health information exchange
- Air Ambulance Services: Update state air medical plan, Statewide guidance for air medical PCP, Auto launch
- EMS Service Licensure/Verification: Review and recommend updates and process, Focus work assessing Rural EMS

Surge Capacity Update: Eric Dean, DOH.

Drs. Lofy and Duchin convened a state work group that has had one in-person meeting and two conference calls. The steering committee had delegated Dr. Stern and Karrie O'Brien as representatives. DOH also asked Chris Martin and Adam Richards to participate. The group has focused on understanding and characterizing capacity issues. The group also discussed issues related to: bed type, bed availability, and throughput. Next steps are focused on short term actions for the pending respiratory season and discussion of long-term solution exploration.

Dr. Stern noted that participation on the workgroup has been great and that the main objective now is getting good data. It was noted that it is very challenging to pull all data from EMS to hospital to home care together and then determine what the main issues are and figure out what needs to be addressed.

Steve Bowman explained that the discussion on the workgroup has since changed from surge capacity specifically to hospital capacity. A question that needs to be answered is how to ensure that capacity policies are keeping up with things like population growth and patient trends. We are trying to find out where we can meet hospital needs so they can remain as full as possible at all times, while also providing for patient needs. It was noted that part of the problem is getting placement for those patients who are difficult to place. This often holds up hospital beds that would otherwise be available.

Scott Dorsey mentioned that Dr. Eric Cooper, Snohomish County MPD, looked at EMS prehospital data from last year and found that Snohomish County essentially lost an ambulance off the street for 24 hours because of diversions and hospitals continuing to do elective procedures despite a season of crisis.

TAC Reports: TAC Chairs and DOH staff leads

Hospital/Trauma Medical Directors: Denise Haun-Taylor - thanked everyone who helped with the Trauma Designation Rules revision. The Hospital TAC is looking forward to revising the trauma registry WAC.

Rehabilitation: Tim Orcutt, DOH - it has been a busy summer of collecting rehab data. Right now there is no standardized software for submitting rehab data. One hundred percent of Rehab facilities submitted data by the due date July 1, 2017. The Rehab TAC completed a list of recommended QI filters this summer. These filters were added to the statewide system evaluation QI filters developed by Ben Booth.

Cost Reimbursement: Eric Dean, DOH - the Cost TAC held a conference call 9/6/17. DOH will be using CHARS patient charges data to calculate the level 3-5 uncompensated care grant for state fiscal year 2018. The CHARS charges data is more complete than the registry data. The Cost TAC added a strategy to support a DOH legislative proposal that will increase trauma fund revenue by increasing existing fees. DOH is considering proposing this legislation in the 2019 session.

Injury & Violence Prevention: Mark Freitas - the Injury & Violence Prevention TAC is going through a process of changes, especially working on anticipating what changes might be in light of the many different trends going on nationally and statewide. The TAC has had some technical issues in meetings. The TAC is recruiting for volunteers.

Pediatric: Mauricio Escobar, MD - the last Pediatric TAC discussed pediatric EMS designation and recommended that any trauma facility should also have a pediatric EMS categorization; the Broselow project to reduce pediatric medication errors in King County is progressing well and should have outcome data soon; Ben Booth, Steve Bowman, Dr. Sam Sharar and Dr. Escobar had an abstract accepted by the Pediatric Trauma Society (PTS) on the Washington Pediatric Spleen project that showed sustainability of the state-led program. Dr. Escobar will present it at the 4th Annual PTS meeting in November; the Period of Purple Crying bus campaign was recently published in the Pediatric Surgery online textbook entitled "Not a Textbook." Dr. Escobar co-authored the Non-Accidental Trauma chapter. "Not a Textbook" is the main Pediatric Surgery textbook sponsored by the American Pediatric Surgical Association; this week's Pediatric TAC meeting has been moved to September 27, so that it will be held in conjunction with a site visit from our federal partners at HRSA. The meeting will offer a conference call option if anyone is interested to join; and last, PTS is recommending that adult tourniquet guidelines still be used for pediatrics because not enough literature is out there for pediatric-specific tourniquets.

Regional Advisory Committee: Melody Westmoreland - the RAC TAC went through an annual review and update of the TAC's charter. Catie Holstein, DOH, also gave overview on some of the legislative work and draft guidelines around ESSB 5751. The TAC discussed where they are going with their strategic plan and the next round of updating strategies. The TAC worked on a draft Patient Care Procedure based on guidelines for ESSB 5751.

Medical Program Directors TAC: Catie Holstien, DOH - Dr. Wittwer has participated on the National Model EMS Clinical Guidelines Version 2 project with the National Association of State EMS Officers (NASEMSO), and is working on integrating that into the guidelines to help guide MPD County protocols. Dr. Wittwer has also filled in during recent MPD transitions.

Closing Remarks: Dolly Fernandes, DOH, closed the meeting on behalf of Dr. Arbabi and reminded the committee that the next meeting in November will focus on the Rehab and Cost TACs.

Meeting Adjourned at 12:59 pm