

12/11/18 RTAB Executive Committee Meeting Minutes

Welcome & Roll Call: Dr. Pappas welcomed the group and called roll:

Executive Committee Members:

Orlando Health: Dr. Ibrahim, Susan Ono, Tina Wallace

Halifax: Lindsay Martin & Robert Love

CFR: not represented

Martin EMS: Chief Chris Stabile

Indian River EMS: not represented

Palm Bay: not represented

Florida Hospital/Advent: Margot Ververis

Extended Care: Tom O'Neill

DOH: Clint Sperber

City of Leesburg: not represented

Orange County: not represented

Ex-Officio Members:

FCOT: not represented

FTC: not represented

EMSAC – Chief Matt Kemp

FHA: not represented

CFDMC: Clint Sperber

Guests:

Kate Kocovar, DOH

Dr. Larry Reed, FL State Trauma Director

Mike Poniatowski, Florida Hospital North

Lisa Livingston, Osceola Regional Medical Centre

Nicole Johnson, Nemours

Adriana Patel, Orlando Health

Kelley Jenkins, Lawnwood

Matt Meyers, DOH

Lynne Drawdy, CFDMC

Lynne advised that we will need to seek a new Orange County government representative. Susan Ono will contact Orlando Health Government Relations to assist with this.

Call to Order: Under the new bylaws, eight members are needed for a quorum; a quorum was not reached.

Dr. Ibrahim and Chief Stabile called the meeting to order and added that all items needing a vote will be pended until January.

Review and Approval of Minutes: This will be held until the January call.

CFDMC/RDSTF Update: Clint reminded the group that the Coalition's quarterly meeting is scheduled for Thursday, December 13 at Viera, and will focus on lessons learned from the Hurricane Michael response, and a briefing on the ED lockdown at ORMC. The agenda has been sent out to the trauma stakeholders and is posted on the coalition website.

Executive Director's Report: Dr. Pappas stated that we have focused on improving communications with stakeholders, via use of Constant Contact and posting information to the Trauma page on the Coalition website. He asked if there were any issues.

Budget Request: Dr. Pappas advised that we submitted a request for budget to fund a part-time position to support the trauma executive committee and other committees. Lynne stated that we expect to hear about the preparedness special projects by the end of the year. Kate Kocovar agreed to follow-up on the request to the Office of Trauma.

Data Request Letter to DOH: Dr. Pappas stated the Trauma Advisory Board sent a letter to DOH requesting access to data. Michael Leffler stated that DOH is comfortable with this request. Kate explained there has been a delay in responding due to hurricane response but she will follow-up on this.

Bylaws Formatting: Dr. Pappas stated that he will work with Lynne on formatting the bylaws.

General Meetings: Dr. Pappas stated that the next face-to-face meeting will be held in March, and thanked Florida Hospital/Advent for sponsoring this meeting. He stated that the Executive Committee call in March is March 12 and suggested making that the date for the face-to-face meeting. Margot will secure a meeting room. Dr. Pappas asked for input on venues for future meetings. He suggested holding the July meeting in conjunction with ClinCon and suggested holding the July meeting at Osceola Regional Hospital.

New Orleans National Healthcare Coalition Preparedness Conference: Dr. Pappas reported that he participated on a Florida best practices panel presentation at this conference, and presented on the Region 5 Trauma Advisory Board. He stated there were approximately 120 attendees and the presentation were well received. He stated that he spoke with the ASPR Assistant Secretary about the Advisory Board and he has very pleased with our efforts and stated that this is a federal priority.

Proposal - Clinical Leadership Committee: Dr. Pappas stated that in November the ad hoc committee suggested connecting with trauma and EMS leaders in each county. He suggested that a Clinical Leadership Steering Committee comprised of trauma and EMS leaders from each county be formed to guide clinical projects, and identify best practices. He asked for all to consider this and it will be pended until the January meeting.

System Support Committee Update: Adriana Patel reported that the committee had a call earlier this morning and laid out goals for 2019, including collaboration and supporting each other in injury prevention activities. She stated that the committee is making a list of resources to be posted on the Coalition website by February.

Preparedness Committee Update: Susan Ono stated that the committee met this morning and discussed how to connect with Coalition projects. They have asked the Coalition to provide an update on projects at each meeting and will identify projects that impact trauma and/or need trauma input. Eric Alberts stated that the group discussed how to get physicians engaged in exercises, and developing recommendations to acute care hospitals on preparing for an influx of trauma patients in a mass casualty event. They will bring both of these items to the Executive Committee next month. Eric stated that the hospitals will pilot the mass casualty triage forms during the April regional hospital exercise. Tina Wallace agreed to provide final versions this week.

Ad Hoc Agency Committee Update: Dr. McPherson stated that he is working on identifying an EMS representative from each county to provide bidirectional feedback. He has identified willing participants in three counties and hopes to have a representative in each county.

Dr. McPherson stated that the ad hoc committee recommends that we continue the Region 5 Trauma Advisory Board and not seek to create a regional trauma agency. He recommended that the ad hoc committee become the best practices committee. Dr. Pappas stated that he had a similar thought in making the ad hoc committee the clinical leadership committee. He stated that with the committee structure, he feels we cover the requirements of a trauma agency, in collaborative vs. regulatory format. He asked if there were any comments on the recommendation from the ad hoc agency committee and none were expressed.

Bylaws Review: Dr. Pappas reviewed the current draft bylaws, including his suggestions and those from Orlando Health. He asked if the discussion today regarding a clinical leadership/best practices satisfies the membership issues raised by Orlando Health. Dr. Ibrahim stated that he feels it is important to give all a chance for representation and involvement and the proposed new committee will help with that. Chief Stabile asked if the air medical representative was ex-officio or a voting member. All agreed that no organization should have two voting members on the Executive Committee and this has been added to the bylaws. Tom O'Neill stated that he wants to learn how rehabilitation centers can work with hospitals. He stated that we learned a lot from recent hurricanes, and there were opportunities identified in communication and coordination of patient placement/transport. Lynne will send Mr. O'Neill information on the coalition surge tool exercise. Chief Stabile stated that he has received good response from EMS leaders in the northern end of the region. He stated that they meet monthly in the south end of the region, and the metro Orlando area also has regular EMS chief meetings. He stated that we need to capitalize on this and suggested looking at north, central, south EMS representation on the Executive Committee.

The bylaws will be pending until the January meeting.

Next Conference Call: January 8 at 11 am

Adjourn: The call adjourned at 11:59 a.m. Dr. Pappas wished all Happy Holidays!

Committee minutes, bylaws and overview of the Trauma Advisory Board are posted on the Trauma Page of the CFDMC website. Go to www.centralfladisaster.org and select the Trauma hyperlink from the menu at the top of the webpage.

**November 8, 2018 RDSTF Region 5 Trauma Advisory Board
Executive Committee & General Meeting Minutes**

Welcome & Roll Call: Dr. Pappas welcomed those attending and conducted a roll call.

Executive Committee Members:

Trauma Chair: Dr. Joseph Ibrahim, Orlando Health

Trauma Co-Chair: Robert Love, Halifax

EMS Chair: Chief Chris Stabile, Martin Fire Rescue

EMS Co-Chair: Not present

Level 2 Trauma Center: Dr. Erik Barquist, Central Florida Regional Hospital

Noon-Transporting EMS: Not present

Acute Care Hospital: Margot Ververis

Public Health: Clint Sperber, DOH-St. Lucie

Extended Care: Not present

County Government: Not present

Municipal Government: Commissioner Elise Dennison, City of Leesburg

Dr. Pappas reported that seven of the 11 voting members were present, and a quorum was reached. Chief Stabile called the meeting to order.

Ex-Officio Members:

Dr. Peter Pappas, Executive Director

FCOT: Not present

EMSAC: Not present

FHA: Not present

CFDMC: Clint Sperber & Lynne Drawdy

Guests:

Rob Spivey, Holmes Regional

Susan Ono, Orlando Health

Christine Wallace, Orlando Health/ARH

Dustin Pierce, Orange County Fire Rescue

Adriana Patel, Orlando Health

Melissa Smith, OCFRD

Brian Brink, OCFRD

Eric Alberts, Orlando Health

Karen Thurmond, Air Care

Andrew Watts, Florida Department of Law Enforcement

Rachael Kobb, Orlando Health

Carlos Carrasco, Orlando Health

Dr. John McPherson, Brevard County Fire Rescue

Michael Leffler, Florida Department of Health

Kate Kocevar, Florida Department of Health

Tim Cook, Florida Hospital

Richard Nettles, Florida Hospital

Approval of October 2018 Executive Committee Minutes: Dr. Pappas advised that the minutes were posted on the website and members were noticed. Dr. Ibrahim moved to approve the minutes as submitted; Chief Stabile seconded the motion. There was no discussion and the motion carried.

CFDMC/RDSTF Report: Agent Watts stated that he had no report from the RDSTF. Clint Sperber reported that the coalition has several trainings and exercises scheduled over the coming months. A mass fatality tabletop will be held in December, focused on testing mutual aid among the region's medical examiners. An emerging infectious disease tabletop will be held in December with the Central Florida EID Collaborative. The next coalition meeting is scheduled for December 13 in Viera and will focus on lessons learned from Hurricane Michael response. He stated that the coalition submitted special projects requests for unspent federal grant funds to cover needed hospital equipment that could not be funded out of last fiscal year's project, a mass casualty cache in the south part of the region, Aeroclave cleaners for each county EMS, and support for the Trauma Advisory Board. We expect to hear about that funding by the end of the month. Lynne reported that several training sessions are scheduled in December including incident command system and continuity of operations planning; these are posted on the website under Hot Topics.

Executive Director Report: Dr. Pappas reported that the coalition also submitted the special project request for funding for a part-time position and meeting support for the Region 5 Trauma Advisory Board to the Florida Department of Health Office of Trauma. Dr. Pappas also submitted a letter to the Office of Trauma asking for needed data. Kate Kocevar stated that they will support the data requests but are currently working through some technical issues. Michael Leffler stated that he will follow-up on the budget request.

Dr. Pappas proposed that for 2019, the Region 5 Trauma Advisory Board will hold three face-to-face meetings, in March, July and November, at various stakeholder locations around the region. He proposed holding conference calls in months without a meeting. Those present agreed. Dr. Pappas will work with Margot Ververis to schedule the March meeting at Halifax.

Dr. Pappas advised that we were asked to participate in a Florida best practices panel presentation at the national health care coalition conference in New Orleans later this month. He will present on the Region 5 Trauma Advisory Board. The presentation is posted on the website.

Dr. Pappas advised that all information, including minutes, are now regularly posted to the Trauma tab on the coalition website. The website was previewed: www.centralfladisaster.org/trauma.

Committee Reports:

System Support: Adriana Patel reported that all trauma centers submitted the top five injuries and the most common are falls and motor vehicle accidents. She stated they are reaching out to see which are working on fall prevention. The committee has also invited the Safe Kids Coalitions to participate.

Susan Ono raised the issue of the use of TXA. Dr. Ibrahim stated that use has become controversial as there can be harmful effects, it is only recommended if there are long transport times, and use requires extensive training. Dr. Barquist discussed results from recent studies. Others shared their decisions to use or not use; those who use experience longer transport times and include robust training. Dr. Pappas asked if the System Support Committee could provide recommended guidance on this issue to the Executive Committee.

Preparedness Committee: Mass casualty triage forms for adults and children were distributed to trauma stakeholders for review and input. Tina Wallace advised that Arnold Palmer Hospital is providing recommended changes for the pediatric form. The revisions will be brought back to the Executive Committee for approval and recommended use across the region. Susan Ono pointed out that this is for use by hospitals and does not replace the triage tags.

Trauma Agency Plan Ad Hoc Committee: Dr. McPherson stated that the committee has drafted a communications plan which was sent to the entire trauma stakeholder group for comments; no comments were received. Susan Ono previewed the plan, which includes the use of stakeholder groups in each county to ensure bidirectional communication between the counties and the Region 5 Trauma Advisory Board. Each group is to designate one individual as a liaison with the Region 5 Trauma Advisory Board. Dr. Pappas asked that the title be changed from Trauma Advisory Committee to Trauma Advisory Board; this change has already been made. Dr. Pappas asked that all stakeholders review this document and this will be placed on the November agenda for approval.

Regarding development of a trauma agency, Susan asked DOH Trauma representatives to share any guidance on timelines, reasons for a regional trauma agency, and the goal. Michael Leffler stated there is no timeline for this, it is up to the group. There is a statutory requirement for trauma agencies in each RDSTF region. Region 5 agreed to pilot this in Florida. Michael stated that Region 5 has met the pilot deliverables with the submission of a regional trauma agency plan template. Dr. Pappas asked Michael to supply the latest version of the statutes and codes related to a regional trauma agency. Dr. McPherson stated that we need to educate the counties on this effort. Clint Sperber stated that there are public health preparedness coordinators in each county who can assist in this effort. Lynne advised that the county preparedness planners were added to the trauma stakeholder list and she will add the county health officers to the stakeholder list.

New Business: No new business was raised.

Next Call: The next Executive Committee call is scheduled for December 11 at 11 am.

The Executive Committee adjourned at 9:55 am

General Meeting

No new participants joined the meeting

Mass Casualty Tabletop: Eric Alberts from Orlando Health reported that Central Florida is extremely vulnerable to a mass casualty event like the November 7 shooting event in California. Eric walked the group through a discussion using the upcoming Electric Daisy Carnival as an example. This mass gathering event is a techno-carnival with extensive alcohol and drug use. For the past three years, the Coalition's regional medical assistance team has operated an alternate care site at the event, designed to triage and treat patients on site and reduce the number of transports to hospitals. This has been extremely successful. Eric posed a series of questions about an active shooter at this event. What would the local hospitals do? Most agreed that they would activate the hospital incident command system and their mass casualty plans. Eric stated that Orlando Health would also lock down its facilities. The group discussed how regional hospitals would be notified of this event. In Las Vegas, 35 patients arrived at the hospital before any notification was made. Chief Stabile advised that in last night's shooting in California, 17 patients were self-transported and only 2 arrived by ambulance. The group discussed the use of EMResource and other reporting mechanisms. The group discussed self-transports; not all data supports the concept that self-transports are lesser acuity. In the Las Vegas shooting, 80% of the victims were self-transported. The group discussed the Pulse event and the need to share lessons learned. Eric Alberts

advised that they have presented extensively on the Pulse event and he will share information (see below). The group discussed the need to develop guidance on patient distribution in a large-scale event. Dr. Barquist asked about the mass casualty plan for the concert. The regional medical assistance team will serve as a casualty collection point to triage patients in the event of a mass casualty at the event. Dr. Pappas asked the Preparedness Committee to review this information and make a recommendation on a mass casualty distribution plan.

NOTE: Below is the weblink to access the digital book Orlando Health put together to help others be better prepared following the Pulse tragedy:

www.orlandohealth.com/disasterresponse

Bylaws Review: Dr. Pappas walked the group through his recommended bylaws revisions. There were previously distributed to stakeholders and posted on the website.

The group reviewed the revisions on Pages 1, 2 and 3. Dr. Barquist moved to accept the changes; Commissioner Dennison seconded the motion. There was no further discussion, and a roll call vote was held and the motion carried with unanimous consent.

The group reviewed revisions on Pages 4, 5 and 6. Susan Ono moved to approve and Commissioner Dennison seconded. There was no further discussion and no opposition; the motion carried.

The group reviewed revisions to Page 7. Commissioner Dennison moved to accept and Dr. Barquist seconded the motion; there was no further discussion and no opposition; the motion carried.

The group reviewed the revisions to Page 8 and 9 and had extensive discussion regarding a quorum. Dr. Barquist suggested changing the language to round up. For example, there are 11 Executive Committee members so a simple majority is 5 ½. He suggested that this be rounded up to 6, and with plus one, a quorum would be 7. The group also agreed to delete the language regarding voting by electronic means. Dr. Barquist made a motion to change the language as follows: A quorum of the Executive Committee shall constitute a simple majority rounded up plus one. Chief Stabile moved to add voting either in person or by phone. Commissioner Dennison seconded the motion. There was no further discussion and no opposition; the amended motion carried.

Susan Ono walked the group through the changes proposed by Orlando Health. These changes were previously distributed to the trauma stakeholders for review. She reviewed the proposed changes to the Mission and Vision. Dr. Pappas asked that the wording on trauma quality be changed to trauma system quality. Chief Stabile suggested removing the words to allow for in the Vision statement and replace them with the word by. Susan Ono moved to change the Mission and Vision statements as follows:

Mission: To provide a collaborative forum for communication among trauma system stakeholders within the RDSTF of Region Five with emphasis on trauma system quality, injury prevention, and disaster preparedness.

Vision: To create a forum for communication and collaboration among trauma system stakeholders in RDSTF 5 by sharing of best practices and opportunities within the regional trauma system with the goal of achieving optimal patient care.

Dr. Barquist seconded the motion and there was no further discussion and no opposition; the motion carried.

Susan Ono previewed recommended changes to the voting member. In the proposal, several voting members are moved to ex-officio members and other voting members representing the four organizations with trauma agencies and

an EMS representative for each county are added, bringing the total voting members from 11 to 17. Susan stated that the goal is to ensure voting members are patient care providers, and to ensure that there is representation from every county. There was extensive discussion, including opposition to having one organization representing different trauma centers, difficulties in engaging EMS, the difficulties that smaller jurisdictions would have in rotating EMS membership, use of this structure for committees in engaging committee members vs. the executive committee, difficulties in managing a larger group, challenges in reaching quorum, the mechanics of voting for representatives, the trauma advisory board structure vs. the structure of the regional trauma agency, and who ultimately must approve the regional trauma agency plan. Concerns were raised by Orange County Fire Rescue; they have just been informed of this effort. Chief Stabile stated that we have been working on reaching out to EMS contacts and have had difficulty in getting responses. Dr. Pappas advised that Dr. Zuver has been engaged, and Lynne advised that a stakeholder distribution list has been distributed and we are asking for additional stakeholders. Michael Leffler stated that the only statutory requirements for the trauma agency is to demonstrate that it is operated by or contracted with the involved counties, and there must be a public hearing within 60 days of submitting the plan to secure stakeholder input. He suggested that the group look at the Palm Beach agency; and will provide contact information for that group. Dr. Pappas stated that perhaps we could look at grouping EMS representation (e.g. one representative for Orange, Osceola, Seminole, one for Lake, Volusia and Brevard, and one for Indian River, St. Lucie and Martin). No agreement was reached, and Dr. Pappas advised that these changes will be pended to the December call.

Dr. Pappas asked for comments. Dr. McPherson commended Susan for the communication plan and stated they will work with identifying the county groups and liaisons. Robert Love suggested developing job descriptions for the executive committee members. Commissioner Dennison stated that communications is vital. She stated that she will join the Preparedness Committee.

The meeting adjourned at 12:55 am.

October 12, 2018 Region 5 Trauma Agency Plan Ad Hoc Committee Minutes

Participating: Lynne Drawdy, Dr. Lee, Dr. McPherson, Susan Ono,

Follow-ups:

- Stakeholder gaps. Lynne sent the list of members and stakeholders following the last meeting.
- DOH Direction. Lynne stated that she asked Leah Colston to participate today; but Tallahassee offices re closed due to the hurricane and many DOH staff are responding. Lynne will ask Leah to participate on the next call or designate a trauma representative to provide direction.
- Dr. McPherson stated that we will wait for direction before drafting the mission statement.

Next Call: The next call is October 26 at 10 am.

October 9, 2018 RDSTF 5 Trauma Advisory Board Executive Committee Meeting Minutes

Welcome: Dr. Pappas welcomed the group and apologized for confusion between the webinar and conference call line.

Roll Call:

Executive Committee Members:

Orlando Health: Eric Alberts, Dr. Ibrahim, Susan Ono, Adriana Patel, Tina Wallace

Halifax: Ashley Fisher

Central Florida Region: Dr. Barquist, Bill Campbell

Martin EMS: Chief Stabile

Indian River County: Not Represented

City of Palm Bay: Not Represented

Florida Hospital: Margot Ververis

St. Lucie – DOH: Not Represented

Florida Hospital: - Margot Ververis

City of Leesburg – Commissioner Dennison

Orange County Commission: Not Represented

Dr. Pappas advised that seven of the eleven executive committee members were presented, and a quorum was reached.

Ex-Officio:

CFDMC: Lynne Drawdy

AFTPC: Olga Quintana

Guests:

Parrish Medical Center

Brian Nadler, Florida Fire Chiefs

Chief Fitzpatrick, Lake County

Dr. Chris Zuver, Orange EMS

Wayne Struble, Health First

Kelley Jenkins, Lawnwood

Call to Order: Dr. Ibrahim called the meeting to order at 11:11 am.

Review and Approval of Minutes: The September minutes were previously distributed and posted on the Coalition website. Dr. Ibrahim moved to approve the minutes, and Commissioner Dennison seconded the motion. There was no further discussion and the motion carried.

CFDMC/RDSTF Update: Lynne advised that the RDSTF 5 meeting has been scheduled in early November and the Coalition arranged for another presentation on the Stoneman Douglas response to be presented. Dr. Pappas asked if this is open to the public and Eric stated that these are open only to RDSTF members.

Executive Director's Report: Dr. Papas advised that he presented on the Trauma Advisory Board at an International Chief of Police (IACP) conference last week and stated that he was approached by the medical director for transportation to discuss ways to collaborate.

Dr. Pappas advised that he has sent a letter to the State Trauma office requesting data but has not yet heard back. He will follow-up after the hurricane response is over.

Lynne reported that she submitted a special projects budget request for leftover preparedness funding to support the RDSTF 5 Trauma Advisory Board. She will share this project with the group. Dr. Pappas asked Lynne to submit this budget request to Leah Colston for consideration for Trauma funding.

System Support Committee Update: Adriana Patel reported on the committee's call held earlier today. She stated the group is looking at data including the top five injury mechanisms from each trauma center and will identify the top one or two and work toward collaborating on initiatives with partners across the region.

Preparedness Committee Update: Susan reported that draft adult and pediatric mass casualty triage forms have been distributed to the committee with the goal of standardizing these across the region. These will be posted on the website and to seek input from stakeholders. Eric stated that the group discussed a tabletop exercise; and Dr. Ibrahim will provide an update on this at the winter meeting. Dr. Ibrahim stated that it is important to get law enforcement engaged, both individually and as a group. Susan stated that the group also shared best practices in the Stop the Bleed program. Osceola Regional is working with schools.

Ad Hoc Agency Committee Update: Susan stated that she has drafted a communications plan for the ad hoc committee; once the committee has approved this it will be sent to all trauma stakeholders. She stated that the committee has asked DOH for direction in creating a regional trauma agency.

Dr. Zuver will provide an update on this effort at the Central Florida Fire Chief meeting this week.

Old Business:

Bylaws Review: Dr. Pappas stated that the proposed revisions were sent out to the group and were also posted on the website. Discussion included:

Page 1: Mission – suggest adding after Region 5 “with emphasis on trauma quality, injury prevention and disaster preparedness.”

Page 2: Suggestion adding that each institution will have one vote, and each agency can occupy only one seat on the committee. There was discussion regarding adding all trauma centers to the executive committee, whether all EMS agencies should be represented. Dr. Pappas stated that the meetings are open and we want all voices to be heard, but we need to keep the committee to a

manageable size. Dr. Barquist agreed that stated that with 17 members may present a challenge. Dr. Pappas stated that the executive committee members will rotate, and participation on committees is also open to all Orlando Health proposed changing the executive committee representation to add all trauma centers, one EMS agency per county, and move other positions to ex-officio. Dr. Pappas asked Orlando Health to share the proposed edits; these will be sent out to all to allow review prior to the November meeting.

Dr. Pappas walked through the rest of his proposed changes. He asked all Executive Committee members for input. Chief Stabile said that in the southern end of the region there may only be one agency per type and so can't rotate this duty. Margot Ververis and Ashley Fisher had no input. Commissioner Dennison agreed that it should stay a manageable size and stated that key members can be representative.

Dr. Pappas and stakeholders get in touch with him and Lynne with any additional input on the bylaws. These will be discussed at the November meeting, and if we cannot come to consensus we will appoint a bylaws committee.

Next Meeting: Dr. Pappas stated that the next meeting is face-to-face on November 8 at Orlando Regional Medical Center. He stated that he will add an hour to the agenda to finalize the bylaws, and will add ta discussion on the tabletop. An agenda will be sent prior to the meeting.

New Business: TXA (Pre-hospital and at Trauma Centers). Susan Ono will present this at the next meeting.

Adjournment: The call adjourned at adjourned at 12:17 p.m.

9-11-18 RDSTF-5 Trauma Advisory Board Executive Committee Meeting Minutes

Welcome: Dr. Pappas, Executive Director, welcomed and thanked all those participating.

Roll Call of Members:

Executive Committee Members:

Orlando Health: Susan Ono, Adriana Patel, Christine Wallace

Halifax: Rob Love for Lindsay Martin

Central Florida Regional: Dr. Barquist, Amy Bottoms for Bill Campbell

Martin Fire Rescue: Chief Chris Stabile

Indian River Fire Rescue: Chief Cory Richter

Palm Bay/Non-Transporting EMS: Chief Gaius Hall

Florida Hospital/Adventist: Margot Ververis

DOH-St. Lucie: Clint Sperber

Southern Healthcare Management: Tom O'Neill

Orange County Commission: Not represented

City of Leesburg: Commissioner Elise Dennison

Dr. Pappas welcomed Tom O'Neill as a new member and reported that 10 of 11 voting members are present for a quorum.

Ex-officio members present:

FCOT: Not represented

Trauma Coordinators: Not represented

FHA: John Wilgis

EMSAC: Dr. Joe Nelson

CFDMC: Lynne Drawdy and Matt Meyers

Guests:

Dr. McPherson, Brevard EMS

Melissa Hall, Osceola Regional

Matt Kemp, EMSAC

Andy Watts, FDLE

Karen Thurmond, Air Care Team

Eric Alberts, Orlando Health

Wayne Struble, Holmes Regional

Call to Order: Susan Ono & Chief Stabile called the meeting to order.

Review and Approval of Minutes: The minutes were previously distributed to all stakeholders. Dr. Pappas asked if there were any questions or comments. There were none. Chief Richter moved to approve as submitted, the motion was seconded and passed.

CFDMC/RDSTF Update:

Andy Watts stated there are no RDSTF updates.

Lynne reminded the group that the next Coalition meeting is September 20 and will include presentations on the Parkland school shooting and active shooter education, as well as best practices on hospital evacuations and alternate care sites.

Executive Director's Report: Dr. Pappas stated that we are now using Constant Contact to optimize communications. Lynne reported that all committees now have regularly scheduled meetings, including:

Second Tuesdays:

9 am – Preparedness Committee

10 am – System Support Committee

11 am – Executive Committee

Second and Fourth Fridays (through 2018):

10 am – Trauma Agency Plan Ad Hoc Committee

All use the conference call line: 1-888-670-3525, Passcode 7425562401#

Lynne apologized and advised that at the moment, the coalition email does not include calendar invitation capability; she asked members to mark their calendars for these meetings.

Dr. Pappas stated that he is working with the Florida Highway Patrol on bleeding control training for troopers, including ALS, BLS with tourniquet and will be setting a training schedule. He stated that he would appreciate participation from the trauma centers in this training which is once per month.

DOH Data Request Letter. Dr. Pappas has been working with Michael Lufkin from DOH on obtaining data needed by the trauma advisory board.

Winter Meeting: Dr. Pappas thanked Orlando Health for hosting this meeting, which is scheduled for Thursday, November 8 from 9 am to noon at ORMC. Dr. Pappas asked the executive committee to let him know of any desired speakers.

System Support Committee Update: Tina Wallace stated that the group had a call earlier today and will be focusing on injury prevention initiatives. Adriana Patel stated that we are waiting on regional data for the most common injury mechanisms to identify how we can collaborate. She stated the group recommends asking the trauma centers to submit the top five mechanisms while we are waiting on data. The executive committee agreed and Dr. Pappas asked Lynne to create a survey to send to the trauma program managers and medical directors.

Preparedness Committee Update: Susan Ono reported that a call was held earlier today and a brief overview of the group's work over the past year was provided for new members. She stated that the draft triage form for mass casualties is being sent out for review. She advised that the group will look at the new fire standards, and are also requesting a listing of EMS contacts in the region to try to engage EMS in the trauma committees.

Susan recommended that the executive committee develop a communication plan. Constant Contact is the communication mechanisms and Lynne has shared a list of stakeholders. Susan suggested that we identify who is missing and what needs to be communicated. Susan stated that she has reached out to another trauma agency for their communication procedures.

Trauma Agency Plan Ad Hoc Committee Update: Dr. Pappas advised the group held its organizational meeting recently and elected Dr. McPherson as spokesperson. He stated that Dr. Zuver from Orange County EMS has

been added to the group, as well as an additional member from Mt. Dora. Dr. McPherson stated that the group will identify benchmarks at the regional level for quality improvement, with disaster preparedness and injury prevention as priorities.

Old Business:

Bylaws Review: Dr. Pappas advised that the draft revisions to the bylaws were sent to the stakeholders last month. He reviewed the changes and asked if there were any concerns. Susan stated that her concern is that not all stakeholders were involved. Dr. Pappas stated that EMS, trauma, acute care hospitals, public health, rehabilitation, city and county government are all represented on the executive committee. The structure for the voting members was based on the DOH requirements and statutes. EMS and Trauma leaders throughout the region, as well as the acute care hospitals, are on the stakeholder list. Lynne advised that all information is now sent to all stakeholders, not just the executive committee. Susan asked how the voting members were identified. Dr. Pappas stated that he hopes that the executive committee will communicate with their peers across the region. Susan stated that she wants to be sure that we are not excluding anyone, and that the executive committee have the right contacts to reach out to their communities. Lynne will share the lists that she has but that she expects that the executive committees have better contacts. For example, she stated that she does not have a list of all nursing homes in the region, but for the coalition she sends information to the four district presidents in the region and ask that they share with their members. She will add them to the trauma stakeholder list and share their contact information with Tom O'Neill.

Dr. Pappas asked if the committee was ready to vote on the bylaw revisions. Chief Stabile said that he saw these but cannot find them. Lynne advised these are posted on the coalition website and she will resend the link. Dr. Pappas asked the voting members to review and be prepared to vote during the October call. Susan asked if the structure is part of the agency plan, and if so suggested that the Trauma Agency Plan Ad Hoc Committee address this. Dr. Pappas stated that the Trauma Agency Plan Ad Hoc Committee is focused on creating a regional trauma agency plan and the bylaws for the trauma advisory board are separate. Susan asked if the regional trauma agency plan would be voted on by the executive committee, and Dr. Pappas stated that it would. She suggested that all stakeholders be allowed to provide comments on the bylaw revisions. Dr. Barquist stated that there may be difficult levels of understanding of the bylaws and suggested that a bylaws committee be formed and meet face to face. Susan agreed. Lynne advised that the bylaws have evolved over the past two years, but as yet we have heard no concerns about the bylaws, just concern that not all have had an opportunity for input. Dr. Pappas asked Lynne to send the bylaws out to the entire stakeholder group and to set up a webinar for the October call to review and finalize these.

New Business:

Tom O'Neill advised that he represents short and long-term care, and has a close relationship with ORMC. He stated their goal is to work with the trauma centers to ensure appropriate discharge placements for trauma patients, to minimize the return to hospitals, and to partner with hospitals to learn so that the patients and family members see similar programs across the continuum of care. He stated he is vice president of program development for his organization, is a skilled nursing facility administrator and social worker, and has 43 skilled nursing facilities, the majority of whom are in Florida. He advised that he also runs the organization's command center, and they are currently evacuating a facility in North Carolina due to the approaching hurricane. He stated that he may also want to join the system support committee.

Next Conference Call: This is scheduled for October 9 at 11 am. Lynne will send out the webinar link.

The group adjourned at 12:04 pm.

8-14-18 RDSTF-5 Trauma Advisory Board Executive Committee Minutes

Welcome: Dr. Pappas, Executive Director, welcomed and thanked those participating.

Roll Call of Members:

Orlando Regional Medical Center: Dr. Ibrahim, Dr. Plumley, Susan Ono, Tina Wallace
Halifax: Lindsay Martin
Martin County Fire Rescue: Chris Stabile
Indian River Fire Rescue: Cory Richter
Central Florida Regional Medical Center: Bill Campbell, Joe Khayat, Connie Humenik
Florida Department of Health in St. Lucie: Clint Sperber

Six of the eleven voting members were represented for a quorum.

Others participating: FDLE Special Agent Andy Watts, Clermont Fire Department Captain Sacco, Florida Highway Patrol Lt. Freebern, Health First, Holmes Regional Robert Spivey, Dr. Meredith Tinti, Tiffany Bassani, Dr. Todd Husty, Kate Koccevar, Lake EMS Dr. Fitzpatrick, Osceola Regional Melissa Hall, Karen Thurmond Air Care

Call to Order: The co-chairs called the meeting to order at 11:09 a.m.

Review and Approval of Minutes: Dr. Pappas announced that the June minutes were approved via email vote (7 members responded with approval with no corrections). Bill Campbell moved to approval the July minutes as submitted; Chief Stabile seconded the motion. There was no discussion and the motion carried.

CFDMC/RDSTF/Coalition Updates: Clint invited trauma stakeholders to attend the September 20 Coalition meeting, from 9 am to noon at the St. Lucie County EOC and also available via webinar. He stated that there will be a presentation on the Parkland school shooting response and a presentation by the St. Lucie Sheriff's Office on active shooter tips and resources. There will also be presentations on evacuation best practices. Clint stated that an alternate care site tabletop has been held in county in the region, an overview will be presented on September 20, and the next step will be planning a functional exercise. Lynne will send the trauma stakeholders the September 20 agenda. Lynne advised that the Coalition is holding a regional community-based functional exercise for healthcare organizations on September 12. She will send the flyer to the trauma stakeholder group and asked that they share with their healthcare partners.

Executive Director's Report:

Stakeholder Communication Plan: Lynne stated that we have been maintaining multiple lists for trauma, including the executive committee, trauma leaders, EMS leaders, and the committee lists. We've heard from the Executive Committee that they want to share all information with all stakeholders. She suggested that we begin to use Constant Contact, a communications software used by the Coalition, to send out information to the trauma stakeholders. This will allow us to better manage the distribution list and also provides data on engagement (such as who opens messages). We will create a separate distribution list on Constant Contact for the trauma stakeholders. She suggested that the trauma stakeholders may also be interested in information shared with the Coalition (such as training and exercise opportunities). She will encourage trauma stakeholders who want that information to join the coalition to get on that distribution list. Chief Stabile moved to approve creating a trauma stakeholder list on Constant Contact; Clint seconded the motion. Lynne asked that the group let her know of others who should be added

Representatives: Dr. Pappas welcomed Andy Watts from FDLE to the group. Andy stated that FDLE is the state investigative police, including protecting the Governor, counter-terrorism responsibilities and responsibility for the RDSTFs. He stated that Florida Highway Patrol is also state law enforcement. Andy stated that his unit investigates corruption complaints and officer-related shootings. Andy has also joined the Preparedness Committee.

Dr. Pappas stated that we lost the member from Consulate and we have reached out to seek a replacement to represent rehabilitation. Dr. Pappas asked members to let him and Lynne know of any suggestions for a replacement.

Ad hoc Trauma Agency Committee Update: Dr. Pappas stated that he put out a request for volunteers for this committee and so far we have the following individuals: Dr. Todd Husty, Dr. John McPherson, Tiffany Bassani, Robert Spivey, Dr. Tracy Bilski, Dr. Gary Curcio, Melissa Hall, Dr. LeeAnne Lee, Sean Sacco, and Dr. Christine Van Dillen. Dr. Pappas stated that we will the group a link to the pilot plan and a Doodle poll to schedule the first call. He stated that he put together a brief summary of the structure and function of the committee which reports to the Executive Committee and he has received no comments on this draft. Dr. Plumley stated that we previously discussed the need to update the bylaws and that update may provide direction to the ad hoc committee. Dr. Pappas stated that we will discuss the bylaws update on today's call but he doesn't feel we need complete the bylaws update before we begin the ad hoc process. He stated this will be a long-term process. Rob Spivey asked for the contact list for the ad hoc committee and Dr. Pappas stated that it was included in the email he sent August 14. He asked that anyone else interested in serving on the committee let him and Lynne know.

System Support Committee Update: Tina reported the committee has no updates. She stated that there is an international walk to school day event coming in September. Dr. Pappas asked if she could share that information with the other counties. Tina stated that this was a grant, but anyone could work with their local schools to promote safety. Tina is available as a point of contact for this information.

Dr. Pappas stated that he drafted a request for data letter to DOH and asked if there were any additional comments. Clint moved to approve sending the letter, and Chief Stabile seconded the motion. There was no further discussion and the motion carried. Dr. Pappas will finalize and send the letter.

Preparedness Committee Update: Susan Ono provided updates from today's call. She stated the group will listen to the best practice presentations at the next coalition meeting. Orlando Health is working on distributing best practices from Pulse. She stated the committee is also working on an MCI triage sheet for standardizing across the region. Chief Stabile stated that he has reached out to the EMS community across the region for engagement, and has received a few responses. He will continue to reach out.

Stop the Bleed Training for Law Enforcement: Dr. Pappas advised that the Florida Highway Patrol Troop D has approached the Trauma Advisory Board for assistance with this training for 20 troopers this fall at their Orlando headquarters near State Roads 436 and 50 in Orlando. The request for support was sent out to local trauma centers but is open to all. Clint reported that this training was provided in the southern part of region by the Palm Beach advisory group. Lindsay Martin stated that Halifax volunteered support. Dr. Pappas will send out additional information on dates/times and stated we need 2-3 trainers for each session (teaching the Academy-approved course), and may also need some tourniquets, etc. He stated that this is a great opportunity to continue to build bridges.

New Business:

Future meeting sites and dates: Dr. Pappas thanked Orlando Health for volunteering to host the winter meeting, and Florida Hospital for hosting the meeting in spring 2019. The winter meeting will be in early November. Susan stated that that we need to avoid the TQIP meeting and suggested the first week of November. Dr. Pappas stated that we will use this meeting to formally launch the advisory board to the whole community.

Mission Statement: Dr. Pappas sent the mission statement from the original 2016 draft and received some positive comments but no suggested changes. He asked if there any additional comments. Bill Campbell moved to approve the mission statement, and Dr. Ibrahim seconded the motion. There was no further discussion and the motion carried.

Bylaws Update: Dr. Pappas has integrated suggestions and edits into the document. He suggested three-year terms as the group has already been in existence close to two years. He stated that concerns have been raised regarding the number needed for a quorum. He pointed out that we have had a quorum for all but one meeting over the past year and that voting by email has also worked. Dr. Pappas suggested that this item be tabled until the September.

Next Conference Call. The next call is September 11 at 11 am. Dr. Pappas will send out an agenda prior to the call.

Adjournment: The co-chairs adjourned the call at 11:57 am.

RDSTF-5 Trauma Advisory Board Minutes

July Conference Call

July 9, 2018

10:30 to 11:25 AM

Welcome – Executive Director Peter Pappas

Roll Call of Attendees

Executive Director – Peter Pappas

Voting Stakeholders Represented

Trauma Co-Chair Orlando Health/ORMC/APH - Joseph Ibrahim, Dr. Donald Plumley, Susan Ono, Christine Wallace

Trauma Co-Chair Halifax - Robert Love Nurse Leader

Trauma Level II Representative HCA/Central Florida Regional- William Campbell TPM

EMS Co-Chair Martin County Fire - Chris Stabile

EMS Vice-Chair Indian River Fire - Chief Cory Richter

Acute Care Hospital Representative Florida Hospital/Adventist Health - Margot Ververis

Public Health St. Lucie County DOH – Clint Sperber

Voting Stakeholders not present

Extended Care Representative

County Government Representative

Municipal Government Representative

911 Responding Non-transporting Agency Representative

Ex-Officio Represented

FCOT – Nicholas Namias

EMSAC – Joe Nelson

FHA – John Wilgis

CFDMC – David Freeman

Not Represented

AFTPC

No guests were on the call

Lynne Drawdy was not present

Peter Pappas informed the Co-Chairs that a quorum had been established

Meeting called to order by co-chairs

Peter Pappas informed committee that June minutes would be ready this week and recommended they be sent to committee members by email with an electronic vote for approval. There was no objection.

Peter Pappas also informed the committee that Lynne Drawdy could not be present due to a scheduling conflict and that he would be taking minutes. Minutes for July call would be sent by email as soon as available. There was no objection.

CFDMC/RDSTF Update

David Freeman had nothing to report. Clint Sperber spoke on Coalition contract deliverables now available online. Donald Plumley asked for a copy of the document. David Freeman said he would provide a link that would be forwarded to the executive committee members.

Executive Director's Report

Peter Pappas informed the committee that the Agency Plan reviewed and approved at the June 8th workshop was submitted to meet requirements of the contract between the Florida Department of Health and the Central Florida Disaster Medical Coalition. Peter Pappas proposed emailing a link to the Agency Plan document to all Region 5 Trauma Stakeholders and using that email as an opportunity to call for volunteers for the ad hoc Trauma Agency Development Committee

Susan Ono and Donald Plumley stressed the importance clarifying that the document submitted to DOH for the contract with CFDMC was not a formal submission of an Agency Plan. Concern was raised that stakeholders would be confused if email was not specific enough. Committee agreed that clear and specific language should be used in

the email to the stakeholders. There was no objection to calling for volunteers at this time for the ad hoc Agency Development Committee

Clint Sperber recommended that when a final Agency Plan is developed, the Trauma Advisory Board consider enhancing the document's visual style

Peter Pappas reviewed the Trauma Advisory Board draft fact sheet with the committee.

System Support Committee Report

System Support Committee Leads Clint Sperber and Christine Wallace spoke on Committee activity. Clint Sperber had nothing new to report. Christine Wallace spoke on supporting the upcoming National Walk to School Day. Peter Pappas suggested Christine Wallace leverage the Trauma Advisory Board as a means of raising awareness and participation. The suggestion was well received. There was no objection.

Peter Pappas discussed the first draft of the letter requested by the executive committee to the Department of Health for registry data to support injury prevention initiatives. Donald Plumley suggested the committee review and return edits to Peter Pappas within one week's time. This was met with no objection. Clint Sperber recommended the letter include a specific time for the DOH to provide the data to the Trauma Advisory Board and that the letter should also request a commitment from the Department of Health for an ongoing collaboration for access to de-identified aggregate data to support Advisory Board initiatives.

Preparedness Committee Report

Joseph Ibrahim stated the committee continue to work on strengthening collaboration among stakeholders for disaster management support and preparedness. The committee is currently working on a triage scoring sheet that can be used by health care providers

Peter Pappas mentioned RDSTF-5 stakeholder participation in an upcoming Stop the Bleed program on July 12th. At least four of six Region 5 Trauma Centers were participating in some capacity. This was held as an example of the important role the Trauma Advisory Board can serve in fostering communication and collaboration among stakeholders.

New Business

Peter Pappas informed the committee of the invitation to present on the Trauma Advisory at the October meeting of the International Association of Chiefs of Police. The presentation is scheduled for October 7th at the Orange County Convention Center. Peter Pappas also informed the committee of the CFDMC's Board selecting the Trauma Advisory Board for presentation at the National Healthcare Coalition Preparedness Convention in New Orleans in December. Peter Pappas asked for volunteers from the Executive Committee who would be willing to develop and participate in the presentations.

Peter Pappas reviewed the Ad Hoc Agency Development Committee draft document, reviewing it line by line. Peter Pappas informed the committee that Robert Spivey and Tina Bassani had volunteered after the June 8th workshop to participate on the committee there was no objection.

Joseph Ibrahim led a discussion regarding ad hoc committee formation in the context of the future direction and development of the Trauma Advisory Board. He recommended another attempt be made at establishing a set meeting time each month and that bylaws be reviewed. Specifically, it was mentioned that the majority rule for motions be amended to a super majority. Nicholas Namias concurred. Both Nicholas Namias and Joseph Ibrahim cited their experience in helping craft bylaws for the State Trauma Advisory Council as influencing their support for a super majority in voting. Joseph Ibrahim also raised the importance of maximizing inclusiveness and communication as the Board grows.

Joseph Ibrahim also mentioned that the RDSTF-5 Trauma Advisory Board was on the Agenda for the next meeting of the Florida Trauma Advisory Council. Peter Pappas confirmed that he had received a copy of the Agenda today and that a power point had been prepared. This power point would be made available to Executive Committee members for review today. Peter Pappas stated that the power point was informational in nature and in line with previous presentations given on the advisory board.

Peter Pappas stated that a copy of the existing bylaws will be sent to Executive Committee Members for review and a new survey to select a monthly meeting time by Lynne Drawdy. A super majority for voting in principal found no objections. Susan Ono asked if meeting appointments and documents could be forwarded to other stakeholders. This found no objection. Peter Pappas reminded the committee that they were representatives of their respective stakeholder sections and were free to communicate Trauma Advisory Board activity with their colleagues. This found no objection.

The Committee decided that the draft Fact Sheet, Ad hoc committee plan and data request letter would be reviewed by committee members and revisions/corrections

returned to Peter Pappas within 7 days. The Executive Director was asked to finalize draft documents prior to the August meeting.

The August meeting would focus on approving draft documents, reviewing proposed amendments to bylaws and organizing the ad hoc Trauma Agency Development Committee.

Meeting was adjourned on a motion by Donald Plumley, Clint Sperber seconded.

6/8/18 RTAB Executive Committee & Workshop Minutes

Participants: Dr. Donald Plumley, Chief Stables, Lindsay Martin, Dr. Eric Barquist, Margot Ververis, Clint Sperber, Dr. Dudley, Leah Colston, Michael Leffert, Melissa Hall, Michelle Rudd, Allison Erik, Faye Pappas, Rob Spivey, Mark Wolcott, Steve Talbert, Dr. Patty Byers, Kevin Captain, Rick Clow, Dave Freeman, Dr. Joe Nelson, Dr. Sandra Schwemmer, Karen Thurmond, Dr. Larissa Dudley, Lynne Drawdy, Dr. Meredith Tinti, Tiffany Bassani, Lisa Maples, John McPherson

Welcome: Dr. Pappas welcomed the group. A roll call was conducted and seven of the 11 executive committee members were presented and a quorum was reached.

Call to Order: Dr. Plumley called the meeting to order at 9:16 a.m.

Review and Approval of Minutes: Dr. Dudley moved to approve the May minutes; Lindsay Martin seconded the motion. There was no discussion and the motion carried.

CFDMC/RDSTF Update: Clint Sperber reported that an alternate care site regional logistics plan has been developed and a tabletop will be held in each county over the next few months, with a functional exercise next year and a full-scale exercise over the next few years. Dave Freeman reported that although the state medical response teams have been disbanded, Region 5 has kept a regional medical assistance team. Dr. Pappas advised that Clint Sperber has been very active in injury prevention efforts and has shared data that show injuries in the region have increased.

Executive Director's Report: Dr. Pappas stated that the main purpose of today's meeting is to review and approve the draft pilot agency plan. He stated that we have been working on developing the pilot plan since November 2017. Dr. Schwemmer was brought on board to assist in the development of the draft and we will go through the draft in the workshop.

He stated that now that this draft has been completed, he hopes that the Regional Trauma Advisory Board will continue and focus on collaborating to improve patient care. He stated that Dr. Byers and Steve Talbert will give presentations today on two exciting new initiatives.

"Survive the Ride" Presentation: Dr. Byers provided an overview of the program, which works with universities such as University of Miami, UF and USF, to prevent motorcycle and scooter injuries. A toolkit has been developed and they are hoping that trauma prevention groups will help implement this in other universities. Clint Sperber and Dr. Pappas agreed this would be a good project for the Trauma Advisory Board. Dr. Byers' presentation will be shared with attendees.

UF Air Database Initiative: Steve Talbert provided an overview of the project, which analyzed air transport costs and the impact on outcomes in Kentucky. He stated that they have approached UF, UCF, and USF to look at their data and are open to adding additional partners. Dr. Byers stated that she would like to join this effort. Dr. Pappas asked about the timeline; Steve stated

that it depends on how fast he can get the data. Once the data are received it has to be cleaned up and processed for analysis; using registry data makes this faster. He stated that typically they have results within three months of receiving the data. Steve asked that anyone interested in participating contact him, and he agreed to share his presentation with attendees.

Stop the Bleed Training: Dr. Byers stated that this training will be held for first responders and law enforcement on July 12 at the Renaissance Hotel at Sea World. She stated that they are finding in medical examiner evaluations that patients who are not badly injured are dying at the scene and providing this training to law enforcement can save lives. She asked for volunteers to assist in the training. This request was previously sent but will be resent. Dr. Plumley asked if we know how many have been trained within the region. Each trauma center knows their count but this has not been aggregated. Dr. Pappas stated that after we submit the trauma plan, we can focus on this type of effort.

Trauma Agency Development Workshop

The executive committee adjourned and the Trauma Agency Development Workshop convened at 10:16 am. Individuals joining the meeting were introduced.

Presentation of Pilot Plan: Dr. Pappas reminded members that the focus is on development of a regional trauma agency plan template. Dr. Schwemmer apologized for not being able to attend in person and expressed appreciation to all who submitted feedback on the draft. Dr. Schwemmer talked through the process in developing the draft (see attached presentation). She stated that all documents collected have been provided to the coalition, including the trauma transport protocols, and a comprehensive quality manual. Additional information is still being collected.

The floor was then opened for executive committee comments:

Lindsay Martin advised that she previously emailed her comments and had no additional comments.

Susan Ono suggested that we ensure all data are accurate and asked if we could use state trauma registry data. Leah Colston stated that she will look into this. She stated that the new state trauma advisory council will have a role in this but she believes that we will keep the state trauma registry. She stated that the data is publicly available and we will just need to work out the mechanics of providing the data.

Chief Stabile stated that some agencies do not participate in the meetings or calls and are confused when they receive the documents. Dr. Pappas asked how we can engage these groups moving forward, such as the Treasure Coast EMS group. Chief Stabile advised that he has an email list for this group. Dr. Pappas will prepare an email to the group. He stated that yesterday, he spoke on the monthly call with all regional hospitals. Clint stated that we should continue to engage EMS and fire/rescue.

Dr. Dudley stated that there were no comments from the non-transport perspective.

There was a question regarding the coalition deliverable and timeframe. Leah Colston stated that the pilot plan is a coalition deliverable to the Florida Department of Health Bureau of Preparedness and Response. She stated that the plan in its current form will meet that contract deliverable. She stated that submission of a plan to become a trauma agency is submitted to the Florida Department of Health, Bureau of Emergency Medical Operations, Trauma as they are over approval of trauma agencies. As of now, Florida has one regional trauma agency in North Central Florida, but it is based on catchment areas, not the regional domestic security task force regions. Leah stated that she will send that agency's plan and TTP. She stated that her office is not prescriptive, each region must make decisions on how they operate and what they share. Susan asked if the coalition can submit a plan without the executive committee's approval, and Leah stated that all parties must concur in the plan before submission. Susan stated that we need to look at the process to demonstrate consensus by all; for example, some decisions are made by majority vote when not all organizations are present. Dr. Pappas stated that this is addressed in the bylaws; the executive committee can revise this as they wish. Rob Spivey stated that not all organizations are involved in all meetings. Dr. Pappas asked how we can get all organizations engaged. Dr. Barquist stated that he is a member of several organizations and cautioned against requiring that every agency in the region be represented. He stated that the Executive Committee was appointed to engage and communicate with their constituencies. He stated that Region 5's relationships are a model for the state. He stated that he hears the concerns but this plan has no teeth, and this is the group that can move this forward. He said that every county can learn from the others, and we need to look at this as a long-term learning project. Dr. Byers stated that she has a statewide view and was very excited when she read the draft and saw the inventory and the connections. She stated that the region is very representative of Florida with all of the challenges that rural, urban and metro counties face. She stated that if the plan works here, the state will be able to use this as a model. Dr. Plumley stated that there are 34 acute care hospitals and 48 EMS agencies, and we are not communicating well to all of these. Leah suggested that the plan will be a good communication tool. Dr. McPherson asked if we had buy-in from Dr. Ralls, Dr. Hunter and other EMS leaders. He stated that developing a triage process is a key issue. Leah stated that we can use the EMS Advisory Council, the new Trauma Advisory Council and other consortia to communicate and that all members of the Executive Committee should take responsibility for this. She stated that they have pushed for three years to get the Trauma Advisory Council in statute. The members are appointed by the Governor and serve as subject matter expert advisors to the Department of Health. The first meeting was held two weeks ago and went well, and she is hoping this council will go a long way in improving relationships. She stated that these are open meetings and all are welcome to attend and provide feedback.

A question was raised regarding funding. Lynne advised that the funding was for one year only to develop the plan. She stated that the Coalition can continue to provide support to the Trauma Advisory Board and committees.

Stakeholder Comments:

Rob Spivey stated that we need a more integrated approach to disaster management. Dr. Pappas agreed and stated that there is a Preparedness Committee working on this.

Dr. Tinti stated that the current proposal has not identified all issues, such as coordination of care. Dr. Pappas stated that the Advisory Board is meant to be the place to address those issues.

Tiffany Bassani expressed concern that air medical is not represented on the Executive Committee. Dr. Pappas stated that representatives are welcome to participate in the meetings and on the committees.

Dr. McPherson asked how many EMS representatives are on the Executive Committee. Dr. Pappas stated that there is an EMS Chair, EMS Co-Chair and the 911/non-transporting representative as voting members of the Executive Committee.

Leah suggested that the group develop a one-page document that outlines the purpose, members and goals. Dr. Pappas stated that we have that. He stated that this will be resent to members to use in communicating a consistent message. He asked that Executive Committee members share any feedback they receive.

Melissa Hall stated that the American College of Surgeons and HRSA have a trauma system planning and evaluation document which includes pre-hospital, and with a benchmarking and scoring tool. She recommended that we use that. It also addresses core functions such as assessment, policy development and assurance. She suggested that a committee be convened to write the plan.

Discussion and Motions:

Leah Colston stated that she reviewed the Coalition's contract deliverable and sent Lynne an email affirming that the draft plan meets the requirements of a regional trauma agency pilot plan draft. She stated that we need this group's approval to submit this plan as a non-binding draft to meet the coalition contract deliverable. This will not be considered as approval of a formal submission of the plan to BEMO as formal agency plan for review and approval. Prior to that submission, the Trauma Advisory Board would need to hold a public hearing on the draft plan. Dr. Plumley moved that the Executive Committee support submission of the pilot plan as a non-binding living document to the Coalition Board to meet the contract deliverable. Dr. Barquist seconded the motion. A question was raised about the timeline for formal submission of a request to become a regional trauma agency, and it was agreed there is no deadline for this. Dr. Barquist stated that this vote gives the local trauma system a voice. A vote was taken and the motion carried unanimously.

Dr. Plumley moved to establish an ad hoc committee under the Region 5 Trauma Advisory Board Executive Committee to review/edit/amend the plan for future consideration by the Executive Committee and all trauma stakeholders. Dr. Barquist seconded the motion. There was no further discussion and the motion carried unanimously.

Dr. Plumley moved to draft a letter asking the state for access to trauma data. Chief Stables seconded the motion. Dr. Plumley stated that we can identify data needed at a later time but for now are just asking for access to data. The motion carried unanimously. Leah Colston asked

that requests for data be very specific. She stated that they have talented epidemiology staff and EMSTARS staff who can assist. Clint Sperber stated that Leah's bureau provides quality products and asked what timeframe is realistic. Leah stated that if the data is readily available, they can respond quickly. If it requires an ad hoc report, it may take a little time for coding. She suggested that we include timeframes in the data requests. Michael Leffert suggested that we frame data request as research questions.

Next Steps:

Dr. Pappas asked that information on additional representatives be sent to both him and Lynne. Dr. McPherson asked if he can reach out to the EMS medical directors and provide an update on progress and Dr. Pappas agreed this would be helpful.

Dr. Pappas stated that he will set up an ad hoc committee to continue plan development and asked for volunteers.

Lynne will send out a survey to schedule a regular monthly call for the Executive Committee.

The group adjourned at 12:45 p.m.

May 15 Regional Trauma Advisory Board Call with EMS & Trauma Leaders

Participating: Dr. Marty Brown, Bill Campbell, Rick Clow, Orlando Dominguez, Lynne Drawdy, Dr. Larissa Dudley, Dr. Fitzpatrick, Dave Freeman, Dr. Joseph Ibrahim, Rob Love, Lindsey Martin, Dr. McPherson, Dr. Joe Nelson, Susan Ono, Dr. Peter Pappas, Dr. Donald Plumbley, Dr. George Ralls, Cory Richter, Dr. Sandra Schwemmer, Jerry Smith, Christopher Smith, Rob Spivey, Karen Thurmond, Christine Wallace, Mark Wolcott, Dr. Chris Zuver

Dr. Pappas welcomed all and provided a brief history of the Region 5 Trauma Advisory Board and its committees. He stated that the purpose of today's call is to seek input from EMS and trauma leaders in the development of the regional trauma advisory plan.

EMS leaders provided input on the draft regional trauma transport protocol. Concerns included local issues impacting the indicators such as time and staffing and concerns over mandating standards that exceed requirements in statute. The consensus was to align the TTP to state requirements and make it less specific. Over time, the group may come to consensus in adding additional requirements based on best practices or review of data.

Trauma leaders were also asked to provide input. It was suggested that the CDC criteria be removed. There was also concern over changes to state statutes over the past year and it was suggested that DOH be asked to provide some new direction. There are also some inaccuracies in the current draft.

Dr. Pappas asked that EMS and trauma leaders put their concerns and suggestions regarding the plan in writing and send to him with a copy to Lynne. He also asked that any questions for DOH be submitted. The group agreed to submit comments/suggestions/question by May 23. These will be incorporated into a final draft for review at the June 8 meeting.

March 22, 2018 Region 5 Trauma Advisory Board Executive Committee Call Minutes

Started at: 3:06

Participating: Sandy Schwemmer, Dan Harshburger, Dr. Peter Pappas, Christine Wallace, Rob Love, Gaius Hall, Chief Stable, Rob Spivey, Erik Barquist, Laura Burke, Cory Richter, Clint Sperber, Kate Kocivar, Lindsay Martin
Dr. Deponte

Dr. Pappas: Welcome everyone.

Asked chairs if they have questions, no questions, called to order.

Should have received minutes from Feb. Meeting, if not contact Lynne, or Dr. Pappas, if any questions or corrections, speak now. Motion and second to approve meeting minutes.

Have 8 online, more calling in. Roll call.

Vote for approval of min- no objections

No updates from CFDMC, can prepare update through minutes as Dave and Lynne are not online.

Update from Dr. Pappas- new trauma services bill/ legislation June or July first, (KATE: takes effect today.)
Governor signed Wednesday.

Kate: has been revisions in some of the TSA, this is more Broward county area. Grandfathering clause, orange park, jackson south, kendall, are other things that were in there, an advisory council was part of it, working with the governor's office on that, anxious to see who he selects by 1st of May, reconvened soon after first meeting which is also soon, getting applications to those who are interested, tight deadlines, anxious to get that underway.

copy of legislation sent out, criteria for new trauma requirements were sent out in packet,
New definition to TSA trauma centers established for TSA's new total of 6.

State trauma advisory council, mirror what is in region 5.

2020, tri-annual basis DOH report additional trauma centers

State organizing committee, looking at data to determine where they go, setting up more at tallahassee

KATE: trying to be more practical with it, state working to determine need. Provides definitive response to where it would need to be.

MIKE: Trauma agency certified in application for new trauma center, requirement does not exist in new statute

Executive committee members: role of trauma agency in setting up trauma centers, this bill can provide a degree of stability, lets us know how many will be in region, lifts burden of where to put them.

Member: Good they did that, lift burden

Dr. Barquist: many changes were made to reduce ongoing judicial challenge / appeals, it speaks to the quality of the people in region 5, but how judicial appeals should be all but eliminated. provides stability.

Dr. Pappas: hope it makes it easier to form, from agency standpoint, hopeful this makes it easier for us to create formal agency for the region

No further comments on this

Continue to roll out own agency plans:

Will be presentation today from Dr. Schwemmer. On where her group stands

Next deliverable due May 30th.

In may planning to get conference calls for key stakeholder groups 3 main ones. Calling on us and CFDMC to publicise, keep people aware child agency plan is nearing completion. Drafting comments that will be sent to tampa with plan.

1st week of june, next formal face-to face meeting trauma workshop, going over plan in detail, finishing, organizing comments, moving to vote of approval of plan in conference call in june

Today, continue discussing plan and in the future, setting up three future conference calls, then set up face-to-face meeting.

Conference calls in may, june workshop, wrap up agency plan.

Support committee update: getting ready for national stop the bleed day March 31st.

Update: Adriana Patel, unable to make call, wanted to relay- multiple hospitals will be talking about on their social media, region 5 council of activity will be participating, in contact with Tim Craft at UCF plan to meet with them on decon class.

Laura FI hospital: planning on doing FB live feed, EMS and marketing working together to make that happen.

Halifax/holmes regional: linked with Health first currently getting personnel to train the trainer events, giving class to people in area, will be using fb twitter feed once approval is given.

Dr. Pappas: If any pics would love to put on the Region advisory section on CFDMC website if comfortable sharing.

Chief Stable: stop the bleed campaign: we have two days scheduled 29th-training for local constitutional officers, during their workday, three sessions Sat. for public to come in on stop the bleed day. Just did conference of 20

paramedic students training them in train the trainer to utilize them. Lisa had already trained some people so they can train school staff as well.

Clint: May initiative set for Martin county for our county as well.

Central fl regional participating as well, events in Seminole county.

Halifax: holding two two hr events march 31st, and FB live event as well.

Dr. Pappas: new business; Email vote. Talking with Dr. Ibrahim transition away from doodle polls, over to set day of the month that can be for meetings. He will get with Lynne, send out two or three different options, get mail vote. Start in May- set day for conference call set would start in May.

Transition to trauma agency plan by Dr. Schwemmer:

Group has been working to put together trauma agency plans for 9 regions. Plan sent out to members. Hope discussion on this continues.

Dr. Schwemmer:

Deliverable 5.2

Required to set out: agency structure, table of organization (is in there twice, in excel sheet, if anything is not correct on organizational structure, can be corrected/modify/add), also is a list of region affiliates, behavioral health affiliates identified, a trauma agency operational view- based off experience of other trauma agencies, JAS are available , struggled with salary range, but more with operational budget, but hopeful details will allow for people of interest to be involved and hired. Additionally required to name specific authorities. Overview of how senate bill will impact 395, included annual agency operating budget for other agencies budgets, came up with number (in powerpoint).

Brief overview is in powerpoint. Organizational structure and table will be in plan. Excel sheet will be submitted with plan as well. Will update this as members update.

Slide 5- identified personnel who will be needed for operational position. Before they are hired, will need to determine where agency will be. Will impact who is available and who to hire

Slide 6- specific authority, will be submitted as well

Slide 7- breaks down budget, used ones in place for other trauma agencies. Ongoing sources finding is critical to budget- structure is vulnerable unless there is a fixed funding to ensure it is sustained. Struggle agencies have is often related to seeing that money continues. Look in materials- (trauma agency operations) used numbers pulled from existing documents, came up with first years operating budget. Is personnel only, does not include renting building, registry software. Will need to speak with center to see how we can get data to be accurate.

Placement of trauma agency will impact the plan.

Questions? none

Dr. Pappas: tell us the mechanics of what you will need from stakeholders going forward

Dr. Schwemmer: this is based off existing trauma agencies. Need to know where each trauma centre will be: number of transfers, resume to trauma directors so they can include that in material, specific info for trauma centers as they put together 3rd deliverable, they will reach out, may need to meet in person, hopeful their contact is met. Will need mutual aid agreements, as they need to be submitted with the plans.

Dr. Pappas: have access to CFDMC and trauma advisory board, please contact directly the members you need, or myself or Lynne.

Questions?

Arnold palmer area: Time to review information?

Dr. Pappas: yes, best if this becomes an ongoing conversation. Hope members will continue to review documents.

Dr. Schwemmer: pulling data that needs to be part of the plan, may be changes between now and the final plan. Needs to be a comprehensive document. May be in different format at the end.

Martin county: no comments, would like time to look it over

Dr. Barquist: briefly looked at it, may need flexibility in salary ranges, and where to base this is key. Large county, to get this kind of individuals, may need to place in in a large metropolitan area. May be difficult, but having these individuals scattered can present difficulties.

Dr. Pappas: satellite offices with DOH collaboration may help.

Clint: how to sustain funding, what grants, what other mechanisms, ongoing partnerships, no funding from DOH

Dr. Schwemmer: ask that you approve this and we can get ready for deliverable 3

Any further questions?

Dr. Pappas: vote through email for 2nd deliverable approval. Open till Monday morning.

Adorned: 4:04

February 19, 2018 Region 5 Trauma Advisory Board Executive Committee Call

Participating: Dr. Erik Barquist, Laura Burke, Bill Campbell, Commissioner Elise Dennison, Giovanni DiPasquale, Lynne Drawdy, Krista Ennis, Dave Freeman, Chief Dan Harshburger, Dr. Joseph Ibrahim, Robert Love, Lindsay Martin, Dr. Joe Nelson, Richard Nettles, Susan Ono, Adriana Patel, Dr. Peter Pappas, Chief Cory Richter, Dr. Sandra Schwemmer, Clint Sperber, Christine Wallace,

Welcome & Call to Order: Dr. Pappas welcomed the group and called the roll. Eight of the eleven Executive Committee members were present for a quorum. Chief Harshburger called the meeting to order at 1:10 p.m.

Review and Approval of Minutes: The minutes of the January Executive Committee were distributed prior to the call. Dan Harshburger moved to approve the minutes as submitted and Christine Wallace seconded the motion. There was no further discussion and the motion passed.

CFDMC/RDSTF Update: Clint Sperber reported that the Coalition Board held a strategic planning session in January, including a review of capabilities, a discussion on a social media strategy, and updating governance policies. He reported that Lynda W.G. Mason has been appointed as the 2018 Vice Chair. An alternate care site regional logistics plan and cache inventory have been completed and we will be completing tabletops of the county plans over the coming months. Clint advised that all counties within the region are prepared for a Strategic National Stockpile point of distribution exercise that will focus on throughput. He stated that last week St. Lucie County participated in the nuclear power plant exercise. Dave Freeman advised that the Region 5 RDSTF meeting is scheduled March 1 in Orlando and he will provide an update on coalition activities, including the regional trauma agency plan. Chief Harshburger asked how engaged health is in the RDSTF and Dave reported that health is always represented.

Executive Director's Report:

- Annual Review: Dr. Pappas sent out a review of the activities over the past year. He congratulated the group on their progress and expressed appreciation from the Coalition Board and DOH to the group.
- 2018-2019 Plan: Dr. Pappas stated that over the next few months the plan will be completed and presented to stakeholders, the Coalition Board and DOH. He included plans for the coming year in the annual review timeline. Dr. Ibrahim asked if the plan development process allows for comments from stakeholders, and Dr. Pappas explained that the trauma medical directors and program managers, EMS chiefs and medical directors, and acute care hospital leaders will all be invited to a stakeholder workshop to provide input on the plan.

System Support Committee Update: Christine Wallace reported that the committee has not met since last month but injury prevention activities are taking place in each county.

Preparedness Committee Update: Dan Harshburger reported that the preparedness committee met earlier this month and they are promoting Stop the Bleed activities across the region. Osceola County will provide a train-the-trainer course next week in Martin County. Anyone interested in participating should contact Dan as quickly as possible. Dan will send details to Lynne for distribution to the Executive Committee. Stop the Bleed activities are being scheduled in each county. Dr. Pappas commended the committee and asked that they take and share photos of events.

New Business: No new business was raised.

Agency Consultant Presentation: Dr. Schwemmer reviewed the PPT and Excel spreadsheet previously distributed with the group. The data are the first deliverable and include regional and county demographics, trauma data, and profiles of the trauma system, hospital system and EMS systems in the region. The interfacility transfer agreements and trauma transport protocols have also been collected. Dr. Pappas asked for the time period and data source for the trauma data and Dr. Schwemmer explained that it is 2015 data from AHCA. Dan Harshburger asked re the EMS data and Dr. Nelson explained that this was from EMSTARS. The group discussed inaccuracies in the data and Dr. Schwemmer pointed out that reporting is not always standardized. Dan stated that he would send a request to EMS for data. He applauded Dr. Schwemmer and her team on the first deliverable. Dan moved to approve the first deliverable as submitted, and Commissioner Dennison seconded the motion. Dr. Pappas called the question and each organization present individually approved the submission. Dr. Pappas suggested moving the second deliverable deadline to March 15 and those present agreed.

Next Conference Call: A Doodle poll will be sent out to schedule the March call.

Adjourn: The call adjourned at 2:24 p.m.

1-9-18 RDSTF-5 Trauma Advisory Board Executive Committee Conference Call Minutes

Attending: Peter Allen, Bill Campbell, Melissa Dudley, Paul DePonte, Lynne Drawdy, Dave Freeman, Chief G. Hall, Chief Dan Harshburger, Kate Kocavar, Rob Love, Lindsay Martin, Dr. Joe Nelson, Susan Ono, Adriana Patel, Dr. Peter Pappas, Dr. Donald Plumley, Chief Cory Richter, Clint Sperber, Tina Wallace, John Wilgis

Welcome & Call to Order: Dr. Pappas welcomed those present and each participant introduced him/herself. Eight of the eleven Executive Committee were represented on the call and a quorum was achieved. Susan Ono and Chief Harshburger called the meeting to order at 1:06 pm

Review and Approval of Minutes: The December minutes were previously distributed. Dr. Plumley moved to accept as submitted and Bill Campbell seconded the motion. There were no issues raised and the minutes were approved.

CFDMC/RDSTF Update: Clint Sperber announced that the CFDMC Board will hold a strategic planning session on January 12 to look at strategic issues over the next five years, elect a new vice chair and approve the regional alternate care site logistical plan. Clint reported that Dave Freeman and the regional medical assistance team have been very active over the past few weeks, including supporting the Disney marathons this past weekend.

Executive Director's Report: Dr. Pappas stated that today's most important issue is to approve selection of the consultant. He stated that there was a call earlier today with the Preparedness Committee.

System Support Committee Update: A link to data on fatalities was shared with the committee. Tina Wallace stated that there is a Safe Kids Coalition meeting at end of the month. The committee will schedule a call to determine next steps. Clint stated that in addition to unintentional injury, the Preparedness Committee will work on a Stop the Bleed initiative. He stated that there is a Safe Kids Coalition in St. Lucie and over 500 coalitions in the US and worldwide. Clint reported that the St. Lucie coalition recently selected to participate in a pilot project on a pedestrian safety project which is being adopted internationally. The St. Lucie coordinator is going to DC next month for training. Lynne is available to support the committee and suggesting setting up routine monthly calls. Dr. Pappas suggested putting out a call to other volunteers.

Preparedness Committee Update: Susan Ono reported that the Preparedness Committee met earlier today and made plans to ensure there are multi-disciplinary Stop the Bleed activities in each county on March 31. Chief Harshburger suggested that all counties use the same materials for consistency. Susan reported that the website has materials approved by the American College of Surgeons. Chief Harshburger stated that he has seen different materials on three different websites and suggested having criteria for these materials. Dr. Pappas asked John Wilgis if FHA could help promote this to acute care and community hospitals and John stated that FHA is happy to support this. Peter Allen reported that St. Lucie is holding a Stop the Bleed train-the-trainer day on February 15 at 6 p.m. at the Milner Center; the course is 75 minutes and there are some prerequisites (must be a nurse, EMT, paramedic and have some teaching experience). Dr. Pappas stated that the committee will look at what is planned across the region and look for opportunities to encourage this initiative and promote the healthcare coalition and the Regional Trauma Advisory Board.

Trauma Agency Consultant: Lynne reported that only one proposal was received, and the selection committee has approved the proposal. Bill Campbell moved to accept the proposal and Chief Richter seconded the motion. There was no discussion and a vote was held by Executive Committee seat and the motion passed unanimously.

Lynne stated that she will develop a service agreement between the Coalition and the consultant. This will include monthly reports to the Executive Committee.

New Business: Lynne reported that scheduling calls via Doodle poll is challenging as not all respond. She asked the group if they had another preference for scheduling calls, such as agreeing to the date for the next call at the end of each call. The group discussed and agreed to continue Doodles with short turnarounds; members are encouraged to respond. Lynne stated that for the committees, we will try to schedule regular calls. There were no other new business items raised.

Next Conference Call: Lynne will send out a Doodle poll to schedule the February call.

Adjourn: Dr. Pappas thanked all for participating and stated that we have a solid start and will continue to build as we move through the year.

Adjournment: The co-chairs moved to adjourn at 1:55 p.m.