



Indiana State Department of Health

Project: Indiana State Trauma Care Committee (ISTCC)

Date: August 16, 2019

Attendance: Committee members present: Kristina Box, MD, FACOG (Chair); Bryan Langley (Vice Chair); Michael Kaufmann, MD; Peter Hammer, MD, FACS; Erik Streib, MD, FACS; Melissa Smith (proxy for Dr. Lewis Jacobson); Dawn Daniels (proxy for Dr. Thomas Rouse); Matthew Vassy, MD; Ryan Williams, RN, BSN, EMT-P; Tim Smith; Bekah Dillon, RN, MSN, CEN; David Welsh, MD (via webcast); Scott Thomas, MD; Tiffany Nudi (proxy for Dr. Michael McGee); Andy VanZee; Raymond Cava, MD; Kevin McConnell, MD; Chris Hartman, MD; and Rong Yang, MD

Committee members not present: Michael McGee, MD, MPH; Elizabeth Weinstein, MD; Dave VanRyn, MD; Lisa Hollister, RN; Pradeesh George, DO; Thomas Rouse, MD; Lewis Jacobson, MD, FACS and Tony Murray

ISDH Staff Present: Katie Hokanson; and Ramzi Nimry

Agenda Item	Discussion	Action Needed	Action on Follow-up Items
1. Welcome and Introductions – Kris Box, MD, FACOG, State Health Commissioner (Chair)	Dr. Box called the meeting to order at 10:03 am. She welcomed everyone and asked for introductions from all attendees.	N/A	N/A
2. Approval of Minutes from the June 21, 2019 meeting – Kris, Box, MD, FACOG, State Health Commissioner (Chair)	Dr. Box entertained a motion for approval of the minutes of the June 21, 2019, meeting of the Indiana State Trauma Care Committee. Dr. McConnell made a motion to approve the minutes as distributed, it was seconded by Dr. Thomas and approved unanimously. NOTE: The August 16, 2019 meeting was cancelled.	Minutes approved as distributed.	N/A
3. Division Updates – Katie Hokanson, Director, Trauma and Injury Prevention Division	Katie reported that the 7 th Annual Labor of Love Summit will be held on December 11, 2019 at the JW Marriott, 10 South West Street, Indianapolis. She asked everyone to mark their calendars for this event which has, in the past, brought in some of the best subject matters experts in the country in the field of infant mortality. More information will be shared as the plans for this event are finalized.		N/A



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	<p>Katie reported she is very proud to share that the Division applied for and was awarded/funded a three-year grant from the National Violent Death Reporting System (NVDRS). Coroners as well as law enforcement are collaborating with the ISDH on this effort. Dr. Box shared it isn't often that a grant is requested and then awarded/funded for everything asked for in the grant but the Trauma and Injury Prevention Division did it. She congratulated the Division on its great work.</p> <p>Katie reported the Division also has been funded/awarded another three-year grant which is the largest grant the Division has ever applied for. \$7.1 million per year for three years from the Overdose Data 2 Action (OD2A) Comprehensive Opioid Abuse Site-based Program (COAP). \$1.2 million of these funds will be granted out to local communities. A webinar is planned in early September to share the specifics of the grant and some of the funding will be shared with other entities around the state.</p> <p>The Stepping On Program continues to gain momentum. One leader course has been completed and another one is planned for September 16-18, 2019. It will be held at St. Vincent on 86th Street in Indianapolis. Please get registered for this session quickly because it will fill up.</p> <p>Booster Bashes continue to be held around the state with much success. Clinton, IN in Vermillion County held a session on August 2, 2019 with several more planned.</p> <p>The Division had a bigger presence at the Indiana State Fair this summer. Rally Indiana partnered with the ISDH by supplying 25,000 medication bags for the safe disposal of unused or unwanted drugs.</p>		
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	<p>Katie was proud to announce that she received a phone call while working in the booth at the Fair telling her that Governor Holcomb was on his way to her area to speak with her about Indiana's great work thus far in reducing opioid use. Indiana is well below the national average for opioid use at this time. She and her staff visited with the Governor for quite a while. She was also interviewed on camera by Channel 8 News while working the Fair booth.</p>		
4. Regional Updates	<p>District 1 (Jasper, Newton, Lake, Porter, and LaPorte Counties) Tiffany Nudi is the new trauma program coordinator at Methodist Northlake. They have a Stop-the-Bleed training scheduled in conjunction with emergency medical services. Katie mentioned that the Indiana Department of Education (IDOE) sent a survey to schools to see if they have the Stop-the-Bleed kits and training. IDOE will work with the Indiana Hospital Association to make sure that those needs are met.</p> <p>District 2 (Elkhart, Fulton, Kosciusko, Marshall, Pulaski, Starke and St. Joseph Counties) District 2 has focused on keeping emergency department length of stay (ED LOS) under two hours, getting ambulances in a timely fashion, and increasing non-trauma center participation at the district meetings.</p> <p>District 3 (Adams, Allen, DeKalb, Huntington, LaGrange, Noble, Steuben, Wells and Whitley Counties) District 3 discussed Stop-the-Bleed, mass casualties, child maltreatment, and falls at their last meeting. They have an awareness campaign for falls prevention, starting with primary care offices. They created a District committee to focus on child maltreatment. District 3 is modeling their work on their trauma system after District 10.</p>	N/A	N/A



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	<p>District 4 (Benton, Cass, Carroll, Clinton, Fountain, Montgomery, Tippecanoe, Warren and White Counties) District 4 reported their healthcare coalition is very active. Katie and Ramzi attended one of their recent meetings and presented information. They have a goal of increasing EMS participation at the meetings. They have continued their fall prevention efforts. There are two Stepping On Programs scheduled in the near future.</p> <p>District 5 (Boone, Hamilton, Hancock, Hendricks, Johnson, Marion, Morgan and Shelby Counties) District 5 has not had a recent meeting but the next two are scheduled for September 18 and December 18. They have a goal of having more non-trauma centers participate.</p> <p>District 6 (Blackford, Delaware, Fayette, Grant, Henry, Howard, Jay, Madison, Randolph, Rush, Tipton, Union and Wayne Counties) District 6 will meet in two weeks. They have continued to do Stop-the-Bleed events and have been to multiple school districts. They worked with the hospital foundation which provided \$25,000 to fund kits for schools. They discussed TQIP data, what has been going well and where improvements can be made? Their next meeting is at St. Vincent Mercy Hospital.</p> <p>District 7 (Vermillion, Parke, Putnam, Clay, Vigo, Owen, Sullivan and Greene Counties) District 7 has asked the non-trauma centers what they need from the TRAC. Non-trauma center participation has been an ongoing goal.</p> <p>Region 8 (Brown, Monroe, Bartholomew, Jackson, Lawrence, Orange, and Washington Counties) District 8 has not met since the last meeting of the full Committee but will be meeting in September. They will tour with partners around the District to see what they are actually doing.</p>		
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	<p>Leslie Meyer, the injury prevention coordinator, has worked with the IU Foundation to get Stop-the-Bleed kits for the IU football stadium and assembly hall.</p> <p>District 9 (Clark, Dearborn, Decatur, Floyd, Franklin, Harrison, Jefferson, Jennings, Ohio, Ripley, Scott and Switzerland Counties) Dr. Welsh and Rex McKinney, President/CEO of Decatur County Memorial Hospital have been great resources in coordinating to get the District 9 TRAC up and running.</p> <p>District 10 (Crawford, Daviess, Dubois, Gibson, Knox, Martin, Perry, Posey, Spencer, Vanderburgh and Warrick Counties) District 10 met two weeks ago. Katie attended the meeting and there was a good discussion on data and a frequent scenario where there is overlap with trauma and cardio and how to prioritize tasks and treatments for that combination.</p>		
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<p>5. Traumatic Brain Injury & Opioids – Lance Trexler, PhD, Rehabilitation Hospital of Indiana</p>	<p>Dr. Trexler stated that over the past year Indiana has made lots of progress both in fighting opioid use and learning more about it at the same time. He explained there have been many collaborations between the partners to study and deal with opioid use as it relates to TBIs during this past year, but there is much more to learn and do.</p> <p>He summarized his presentation with one statement – substance abuse is a risk factor for TBIs and 51.5% of people with TBIs will have chronic pain while 70% of people with TBIs are prescribed opioids.</p> <p>TBIs result in neuropsychological impairments that affect self-regulation and self-management of drug-taking behavior. Treatment with opioids treat some of the consequences of TBIs i.e., mood. People with TBIs are at a significantly greater risk for opioid misuse and accidental overdose. People who have a TBI during childhood are 17 times more likely to be in the criminal justice system compared to those who did not have a TBI.</p> <p>Dr. Trexler stated most substance abuse professionals don't realize they are treating someone with trauma. TBI patients are high risk candidates for other TBIs and it becomes a cycle.</p> <p>He described new resources in prescribing recommendations for people with TBIs. He outlined both acute settings as well as outpatient. A newly developed TBI-Opioids webinar will be introduced soon.</p> <p>The new Opioid Tool Kit is currently under construction. He listed the contents of the kit and asked for suggestions from the Committee. Currently, the tool kits include:</p> <ul style="list-style-type: none">• How to screen for lifetime exposure to TBIs• How to make basic accommodations for TBI patients• Alternative pain control strategies		
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	<ul style="list-style-type: none">• Prescribers risk factor checklist• Patient self-monitoring checklists• What to do when risks increase		
6. Indiana Sexual Assault Nurse Examiner (SANE) Training Project – Ashli Smiley, ISDH Office of Women’s Health and Angela Morris, SWI-AHEC	<p>Dr. Box introduced Ashli Smiley and Angela Morris. They comprise the staff of the SANE Program and they provided a brief overview of their work. Ashli stated the theme of the program is “what is not working and how do we fix this?” Some of the issues found in Indiana are:</p> <ol style="list-style-type: none">1) Indiana ranks among the highest in the nation for sexual assault2) Indiana ranks 2nd for child abuse and neglect	N/A	N/A



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	<ol style="list-style-type: none">3) 54 out of our 92 counties are without any type of medical forensic services4) Low prosecution rate5) Lack of acute services is leading to chronic illness and recurring victimization6) Poor outcomes7) Long term economic health burdens on the community8) Increased propensity to violence <p>Some suggestions that would be helpful and hopefully work for Indiana would be:</p> <ol style="list-style-type: none">1) Increased availability of education and training for new and current SANEs2) Multi-disciplinary collaborations3) Community engagement4) Breaking down silos a/k/a TEAMWORK <p>They also discussed how Trauma and Injury Prevention could become part of the solution:</p> <ol style="list-style-type: none">1) Train nurses in adult, adolescent and pediatric continuing education2) Build and expand programs to include IPN, sexual abuse, child abuse and neglect, elder abuse, physical assaults and violent crimes.3) Become involved along with nurses in SART teams, and committees as well as professional organizations. <p>They also suggested sustaining programs for peer review, administrative engagement, and case reviews where opportunities for improvement would be addressed and continued improvement with quality of care through evidence-based practice standards.</p>		
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	<p>Ashli encouraged the Committee to reach out to the ISDH to help in forming collaborations, to organize and connect to educational opportunities and give clinical support as well as resources.</p> <p>Dr. Box asked Ashli and Angela to briefly discuss the length of training and how they train regionally. The initial training is on-line and generally takes from three to six months to complete. Katie suggested the Districts pick up on this initiative and utilize it as yet another training tool.</p>		
7. Subcommittee Updates – Trauma System Planning Subcommittee	<p>Dr. Vassy made a motion that the Committee request funds from the Indiana Health Association to bring in subject matter experts (SME) in the field of trauma to share what should and should not be done.</p> <p>Katie provided some history on this funding request. In 2008 when the Committee was in its early stages, all parties pooled monies which were kept by the Indiana Hospital Association to bring in experts to assist Indiana in the planning process. Katie reported the money was well spent but it was time for a second round of updates to ensure Indiana was still heading in the right direction.</p> <p>Dr. Vassy’s motion was seconded by Dr. McConnell and passed unanimously. The plan is to bring the SME to Indianapolis on a Thursday evening prior to the full Committee meeting for a dinner discussion and then he/she can present at the Committee meeting on Friday.</p>	N/A	N/A



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<p>8. EMS Medical Director's Updates – Michael Kaufmann, MD, Indiana Department of Homeland Security</p>	<p>Dr. Kaufmann gave an update on the number of providers reporting in Indiana which is slightly down from the last meeting. He constantly monitors this number statewide as well as the numbers of training institutions and supervising hospitals. Every ALS/EMS provider is required to have a supervising hospital. Dr. Kaufmann's concern is as hospital/healthcare finances drop system-wide the EMS providers may take a hit as well.</p> <p>He also mentioned the rate of data being reported to the state has declined and encouraged all attending to urge their organizations to continue to report this valuable data.</p> <p>He provided an update on the new stroke rule which is now moving through the promulgation process.</p> <p>He reported that the rewrite of 836 IAC has had its fiscal review and is currently awaiting the Attorney General's review. This too will be set for public hearing as well as a public comment period. Dates will be shared when they are available.</p> <p>Annual updates are being made for clinical data requirements. In the future the national EMS working group will follow these new metrics.</p> <p>He briefly discussed REPLICA – a system that allows EMS and many types of service providers to cross state lines in order to provide needed emergency services.</p> <p>He also briefed the Committee on the following:</p> <ul style="list-style-type: none">• FSSA Social Determinants of Health• Expanding Acadis Training• Stop-the-Bleed Campaign• HB 1063 – School Safety Equipment and SB 498 – Mobile Integrated Healthcare/Community Paramedicine	<p>N/A</p>	<p>N/A</p>
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	<ul style="list-style-type: none">• Potential STEMI registry• IDHS/EMS Division 2018-2019 Goals <p>He also discussed the Cares Registry which records data related to cardiac arrests. This data collection effort is designed to collect data to improve care given to cardiac arrest patients to save lives. Katie stated that this data can be collected by the system.</p> <p>Finally Dr. Kaufmann outlined the new app – a Field Guide – which will be available soon. Dr. Box asked if neonatal transport information could be added to this app.</p>		
9. Quarter 1 – 2019 Trauma Registry Data Report – Katie Hokanson, Director, Trauma & Injury Prevention Division	<p>Katie stated the deadline for data submission has been pushed back to July 12, 2019. There have been some importing issues with Image Trend and vendors.</p> <p>There were 104 hospitals that reported 9,037 incidents for Quarter 1 2019. The majority of patients in the ED go to a floor bed and they are in the ED for 1 to 5 hours. Those in the ED for over 12 hours go to a floor bed or the operating room. Falls are the most common cause of injury. The age range for long ED LOS is large (<1 year to 99 years). Most patients have an injury severity score of 15 or less.</p>	N/A	N/A
10. American College of Surgeons – Committee on Trauma Update – Scott Thomas, MD	<p>Dr. Vassy had no update from the American College of Surgeons – Committee on Trauma except they have a national meeting in October and Dr. Thomas will attend. Dr. Thomas will provide update at the next meeting.</p>	Dr. Thomas will provide an update at the October meeting.	N/A



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<p>11. ISTCC Dates for 2019 & 2020 and Adjournment – Kris Box, MD, FACOG, State Health Commissioner</p>	<p>Dr. Box stated the meeting dates for the remainder of 2019 are October 11 and December 13, 2019.</p> <p>Meeting dates for 2020 are as follows: February 21; April 17; June 19; August 21; October 16; and December 11</p> <p>All meetings will be held at the Indiana Government Center-South and will begin at 10:00 am Indianapolis time.</p> <p>Hearing no further business to come before the ISTCC, Dr. Box adjourned the meeting at 11:40 am.</p>		
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