



Indiana State Department of Health

Project: Indiana State Trauma Care Committee (ISTCC)

Date: October 11, 2019

Attendance: Committee members present: Kristina Box, MD, FACOG (Chair); Michael Kaufmann, MD (proxy for Bryan Langley); Jill Castor, MSN, RN, TCRN (proxy for Dr. Peter Hammer); Erik Streib, MD, FACS; Kelly Blanton (proxy for Dr. Lewis Jacobson); Matthew Vassy, MD; Sarah Hoepfner (proxy for Dr. Raymond Cava); Bekah Dillon, RN, MSN, CEN; Lisa Hollister, RN; David Welsh, MD; Scott Thomas, MD; Ryan Williams, RN, BSN, EMT-P; Dawn Daniels (proxy for Dr. Thomas Rouse – via webcast); Andy VanZee; Kevin McConnell, MD; Chris Hartman, MD; Mark Lynch, MD; and Rong Yang, MD

Committee members not present: Bryan Langley (Vice Chair); Peter Hammer, MD, FACS; Michael McGee, MD, MPH; Elizabeth Weinstein, MD; Dave VanRyn, MD; Raymond Cava, MD; Pradeesh George, DO; Thomas Rouse, MD; Lewis Jacobson, MD, FACS; Doug Randell; Ruban Nirmalan, MD; Joseph Baer, MD; Benjamin McCurdy, MD; Luis Benavente-Chenalls, MD; Eric Woo, MD; John Francis, MD; Jason Kennard, MD; Donald Vennekotter, MD; Thomas Grayson, MD; Christine Toevs, MD; Reuben Rutland, MD; and Tony Murray

ISDH Staff Present: Eldon Whetstone, 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 10:09 am. She welcomed everyone and asked for introductions from all attendees.	N/A	N/A
2. Approval of Minutes from the August 16, 2019 meeting – Kris, Box, MD, FACOG, State Health Commissioner (Chair)	Dr. Box entertained a motion for approval of the minutes of the August 16, 2019, meeting of the Indiana State Trauma Care Committee. Dr. Welsh made a motion to approve the minutes as distributed, it was seconded by Dr. Hartman and approved unanimously.	Minutes approved as distributed.	N/A



Indiana State Department of Health

<p>3. Opioid Crisis & the Physician: Changing the Culture of Pain Management – Dr. Brandy Padilla-Jones</p>	<p>Brandy Padilla-Jones, MD, Department of Surgery, IU School of Medicine, presented the history of opioid use and the public health crisis; the changing culture of pain management; the provider’s role in opioid reduction and responsible prescribing practices.</p> <p>Opioids have been around for thousands of years. Addiction came from the use of opium and the progression to morphine, heroin, OxyContin and the new synthetic drugs. Today’s drugs of choice added to the list are Tramadol and Fentanyl. These drugs are becoming street drugs but without the knowledge of how potent they actually are.</p> <p>Dr. Padilla-Jones reviewed national and state data. She explained statistics regarding recent waves of overdosing drugs and statistics on Indiana’s ranking noting Indiana is not the worst state in the country, but not the best either. The alarming statistics show in Indiana every 2.5 hours someone is hospitalized for an overdose. 1,700 Indiana residents died from an overdose while 70,000 died nationwide in 2018 with these rates becoming steadily worse.</p> <p>She noted this has become a public health crisis in the US as this country makes up 4% of the world’s population but we consume 80% of the opioids.</p> <p>The culture is in need of change and will require:</p> <ul style="list-style-type: none">• Government regulation and monitoring• Reduction in the number of prescriptions issued• Proper disposal of unused prescriptions when no longer needed which stops drugs from falling into the wrong hands• Ensure proper treatment		N/A
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Indiana State Department of Health

	<p>The role of the provider is to:</p> <ul style="list-style-type: none">• Raise awareness of addiction possibilities• Educate patients on proper use of the medication and• Continue to counsel and educate the patient while watching for signs of abuse of the medication <p>Patient counseling could include expectations and norms i.e., can you eat, breath, sleep, and move. Counseling could also include information and guidance for non-opioid use, appropriate use and the adverse effects.</p> <p>Dr. Padilla-Jones briefly discussed a grant IU Methodist received from the ISDH describing the ACS Multimodal pain protocol project. This grant has enabled them to hire nurses as patient educators, provide formal education sessions for providers and learners, provide for the monitoring protocol adherence, and data collection.</p> <p>She summarized by sharing that opioid use has been going on for centuries and in current times pharmaceutical advancements and the lack of monitoring of prescribing practices have led to the opioid epidemic.</p> <p>Dr. Scott Thomas noted that it is a challenge to manage when patients sometimes see multiple physicians for a variety of issues. He also invited her to present to the Indiana Chapter of the American College of Surgeons.</p>		
4. Trauma & Injury Prevention Division Update – Katie Hokanson, Director	<p>Katie reminded all that the 7th Annual Labor of Love Infant Mortality Summit will be held on Wednesday, December 11, 2019 at the JW Marriott in downtown Indianapolis.</p> <p>The Overdose 2 Action (OD2A) grant webinar was October 2, 2019. This grant focuses on funding opportunities to local communities.</p>		



Indiana State Department of Health

	<p>The goal is to have one organization apply from each county and to have multiple opportunities for collaboration within each county.</p> <p>Extension for Community Healthcare Outcomes (ECHO) sessions will begin in December, 2019 or January, 2020. These sessions will be once a month lasting 90 minutes each for 9-10 months. Sessions will include a didactic presentation as well as a case presentation and discussion. The didactic topics will include:</p> <ul style="list-style-type: none">• Tackling the stigma of addiction• Increasing access to naloxone• Using data to better understand overdose deaths and more <p>The request for proposals (RFPs) are out now and the contracts will begin in December or January.</p> <p>Katie introduced Lauren Harding, Drug Overdose Prevention Epidemiologist. The Division also has several interns including Maria Cariaso, Madelynne Wright, Jacqui Langer and Crystal Cating.</p> <p>Katie also mentioned Eskenazi Health has a new Frostbite initiative. Tami Barrett will distribute information to the Committee.</p>		
5. Regional Updates	<p>District 1 (Jasper, Newton, Lake, Porter, and La Porte Counties) District 1 focused on the Stop the Bleed course training.</p> <p>District 2 (Elkhart, Fulton, Kosciusko, Marshall, Pulaski, Starke and St. Joseph Counties) District 2 met on September 3, 2019 at St. Joseph Regional Hospital in Plymouth. They focused on case reviews and provided some trauma education on junctional tourniquet use as well as mass casualties.</p> <p>One case review involved a motor vehicle accident where extensive amounts of coordination was required because there were multiple</p>	N/A	N/A



Indiana State Department of Health

	<p>injuries and air transport was not an option at that time. Alternate methods of transport had to be arranged in a very short period of time.</p> <p>They also discussed the impact of anti-coagulant and anti-platelet agents on the trauma population, especially elderly patients, and the importance of preventing secondary brain injury in TBI patients.</p> <p>The District held five Stop the Bleed courses and trained 200 individuals. At this time, the campaign has trained nearly 900 people in District 2 alone. Three Training Nurse Core Courses were held sharing additional trauma education.</p> <p>Memorial Hospital of South Bend is preparing for their ACS reverification on November 7 and 8, 2019.</p> <p>Site Transport Teams will be carrying blood products on helicopters starting in November, 2019. This is a big accomplishment because of all the certification steps that needed to be completed. They are still struggling with ground transport carrying the same products on their runs.</p> <p>District 3 (Adams, Allen, DeKalb, Huntington, LaGrange, Noble, Steuben, Wells and Whitley Counties) District 3 has reviewed their district level data and would like to see more case level data so they can learn which patients are not meeting the less than two-hour goal of arrival at a trauma center. They will make an official request to the state for this data.</p> <p>They discussed child abuse cases in District 3. In Indiana the child abuse death rate is very high. At one hospital there were 14 child abuse deaths. They have no solutions but are searching for answers to fix the problem. They are beginning a pilot program that every</p>		
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Indiana State Department of Health

	<p>suspected child abuse case will receive a medical evaluation to allow the medical community to become more engaged. Dr. Box asked if the patients involved thus far are or will be connected with Happy Families or the Division of Child Services (DCS). Dr. Box suggested earlier involvement with DCS to ensure needed services are provided before the abuse happens.</p> <p>They also discussed mass casualties. They will reach out to Megan Lytle, Interim Director of the Emergency Preparedness Division at the ISDH, to discuss this topic and arrange for one of her staff to present to the District during one of their upcoming meetings.</p> <p>District 3 also held a massive drill at Parkview Hospital. All 103 patients were triaged within 30 minutes. A lot of pre-planning and preparation went into this drill.</p> <p>District 4 (Benton, Cass, Carroll, Clinton, Fountain, Montgomery, Tippecanoe, Warren and White Counties) District 4 had a guest lecturer present on active shooters in order to assist them in planning their drills. There is a drill scheduled for November 15, 2019.</p> <p>District 5 (Boone, Hamilton, Hancock, Hendricks, Johnson, Marion, Morgan and Shelby Counties) District 5 met in September with more area personnel participating than before and with more EMS providers involved. They have been working with data collection but will be researching the EMS data to assist hospitals. Resources will be used to help prevent falls. Data was collected from each hospital on falls prevention and will be compiled into a booklet for distribution to EMS departments throughout the District.</p>		
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Indiana State Department of Health

	<p>Dr. O'Donnell attended a recent meeting to discuss the 2020 EMS MC protocols. Some new practices have been adopted. They will be using new applied ballistics triage utilizing protective equipment with a focus on extraction. All Level I trauma centers have agreed to the updated triage system in the case of a mass casualty event with a variety of injuries.</p> <p>District 6 (Blackford, Delaware, Fayette, Grant, Henry, Howard, Jay, Madison, Randolph, Rush, Tipton, Union and Wayne Counties) District 6 met in August and continues to schedule meetings at the smaller, outlying hospitals to network and meet staff and EMS personnel in the District. The District also meet with the Health Care Coalition.</p> <p>The trauma transfer times continue to be a work in progress for the District. They have also worked on Stop the Bleed and falls prevention trainings.</p> <p>District 7 (Vermillion, Parke, Putnam, Clay, Vigo, Owen, Sullivan and Greene Counties) - No Report</p> <p>District 8 (Brown, Monroe, Bartholomew, Jackson, Lawrence, Orange, and Washington Counties) The District held a meeting in September and IU Health presented. They are focused on their top two priorities which are older adult falls and motor vehicle crashes. They discussed injury prevention programs for these priorities. They also discussed seatbelt utilization, and distracted driving, as well as a training course on Stop the Bleed.</p> <p>District 9 (Clark, Dearborn, Decatur, Floyd, Franklin, Harrison, Jefferson, Jennings, Ohio, Ripley, Scott and Switzerland Counties) - No Report</p>		
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Indiana State Department of Health

	<p>District 10 (Crawford, Daviess, Dubois, Gibson, Knox, Martin, Perry, Posey, Spencer, Vanderburgh and Warrick Counties)</p> <p>Dr. Welsh noted Ripley County’s Stop the Bleed campaign is expanding to businesses and are training delivery drivers as well as other types of service professionals.</p>		
<p>6. Introduction to the ISDH OB Navigator Program – Kris Box, MD, FACOG, State Health Commissioner (Chair)</p>	<p>Dr. Box stated that Indiana ranks 7th worst in the U.S. and last in the Midwest for infant mortality. Governor Holcomb has challenged Indiana to achieve the lowest infant mortality rate in the Midwest by 2024. In real numbers affecting real people, which means Indiana needs to be saving the lives of at least 200 babies per year by 2024. As part of this work, on May 8 the Governor signed House Enrolled Act 1007 into law, charging the ISDH with creating a perinatal navigator program, which currently is being called the OB Navigator Program. Though not specifically mentioned in the new law, the Indiana Family and Social Services Administration (FSSA) and Indiana Department of Child Services (DCS) are equal partners in attacking this problem.</p> <p>The goal of this program is to identify women as early in their pregnancy as possible and connect them with an OB navigator – a home visitor who provides personalized guidance and support to a woman during her pregnancy and at least the first six to 12 months of her baby’s life. To begin that effort, ISDH, FSSA and DCS will be focused on connecting pregnant women who are covered by Medicaid and are living in Indiana’s highest-risk areas to these home visiting services.</p> <p>In the months ahead, we will be leading community engagement meetings in those parts of the state where the OB Navigator program will be rolled out in 2020.</p>	<p>N/A</p>	<p>N/A</p>



Indiana State Department of Health

	<p>Dr. Box asked Tami to send the OB Navigator pamphlet that includes the number for the MOMS Helpline to all. The MOMS Helpline will connect the moms with all types of resources. The number is 1-844-MCH-MOMS (844-624-6667).</p> <p>You do not have to wait until 2020 to refer women to the MOMS Helpline. While it is true that with OB Navigator we are adding a feature of MOMS Helpline reaching out to women in the Medicaid program, any woman can call us today to learn what resources in her community she may be eligible for.</p> <p>Dr. Chris Hartman asked if there were any HIPAA issues. Dr. Box responded that the physician could briefly explain the program and what services are available in their area to the patient and see if they are open to participating.</p>		
7. Subcommittee Updates	<p>Trauma System Planning Subcommittee – Dr. Matt Vassy/Dr. Scott Thomas</p> <p>An ISTCC Trauma Center Reporting Form and power point template were distributed for discussion. The goal of using a consistent format is to showcase the work of trauma centers in Indiana, highlight educational opportunities, increase communication and discussion among trauma centers, and look toward the future of trauma care in Indiana.</p>	N/A	N/A



Indiana State Department of Health

	<p>Dr. Matthew Vassy mentioned it would be helpful if staff from trauma centers could interact more with each other and get to know each other better. It would assist all trauma centers in knowing each other's capabilities.</p> <p>In February 2020 the Trauma System Planning Subcommittee will bring in representatives from other states to assist Indiana in the work to build a trauma system statewide. Drs. Parikh and Kong will co-present in April or June on their research on trauma center location optimization.</p> <p>Performance Improvement Subcommittee – Jill Castor The Subcommittee met in September. The Subcommittee goals are:</p> <ul style="list-style-type: none">• Decrease ED LoS at non-trauma centers• Increase trauma registry quiz participation• Collect hospital level variables on an annual basis and• Continue EMS run sheet collection <p>She reported that hospital reporting is up! There is a decrease in ED/LOS at non-trauma centers. There is an increase in facilities taking the Trauma Registry Quiz. She also reminded all to continue to encourage EMS providers to leave run sheets. Please contact Murray Lawry at the ISDH if you have issues.</p>		
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Indiana State Department of Health

8. American College of Surgeons – Committee on Trauma Update – Scott Thomas, MD	<p>Dr. Scott Thomas reported he will be attending a meeting in two weeks in San Francisco and will provide more information at the December 13, 2019 meeting.</p> <p>The NBATS tool, version 2 is out but has not been validated yet.</p> <p>Dr. Thomas also mentioned taking Stop the Bleed nationally and identifying a state “champion” for Indiana.</p>	N/A	N/A
9. Quarter 2, 2019 Trauma Registry Data Report – Ramzi Nimry, Trauma & Injury Prevention Division	<p>Q2 2019 had 107 hospitals reporting including the 23 trauma centers and 84 non-trauma centers equating to 10,496 incidents. More information on the data presentation can be found on the ISDH website.</p>	N/A	N/A
10. ISTCC Dates for 2019 & 2020 and Adjournment – Kris Box, MD, FACOG, State Health Commissioner	<p>The next meeting is scheduled for December 13, 2019. 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 entertained a motion to adjourn. Dr. Kevin McConnell made a motion to adjourn, it was seconded by Lisa Hollister and passed unanimously.</p>	N/A	N/A