

PI Subcommittee Meeting

January 28, 2014 – 10am EST to 11pm EST

Notes

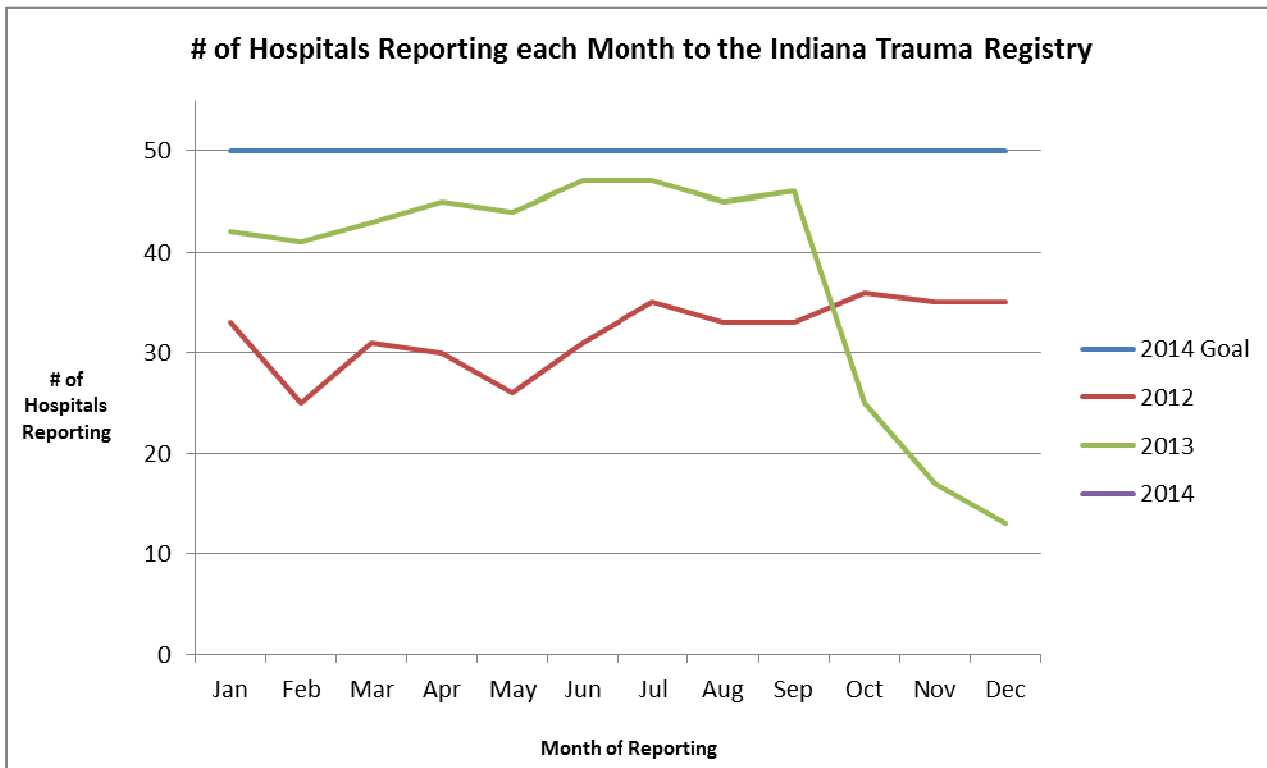
1. Welcome & Introduction – Attendance:
 - a. *ISDH: Katie Gatz & Camry Hess (ISDH)*
 - b. *Phone:*
 - i. *Deaconess: Amanda Elikofer*
 - ii. *Eskenazi Health: Chuck Stein & Kris Hess*
 - iii. *Franciscan St. Elizabeth – East: Regina Nuseibeh*
 - iv. *IHA: Spencer Grover*
 - v. *IU Health – Arnett: Amanda Rardon*
 - vi. *IU Health – Bloomington: Lesley Lopossa*
 - vii. *IU Health – Methodist: Dr. Reed, Cindy Loop, Missy Hockaday, Tracy Spitzer*
 - viii. *IU Health – Riley: Dawn Daniels & Jodi Hackworth*
 - ix. *Lutheran: Annette Chard & Lisa Smith*
 - x. *Methodist Northlake: Latasha Taylor & Jennifer Mullen*
 - xi. *Parkview RMC: Lisa Hollister*
 - xii. *St. Mary's of Evansville: Lana Seibert*
 - xiii. *Terre Haute Regional: Carrie Malone*
 - xiv. *Union Hospital (Terre Haute): Kelly Mills*
2. Update of goals for 2014 (see additional pages for updates of each goal)
 - a. Increase the number of hospitals reporting to the Indiana trauma registry
 - i. Trauma Registry Rule update – increased communication with hospitals
 1. *ISDH shared information about the letter that was sent out by the State Health Commissioner, Dr. VanNess at the beginning of December 2013.*
 - ii. Information on trauma registry training events
 1. *ISDH shared information about the upcoming training events around the state during the months of February and March, as well as the training events that will be hosted at ISDH.*
 - iii. Trauma Center mentor program
 1. *ISDH asked the group to review the excel spreadsheet of hospital reporting status and reach out to facilities that ISDH has had 0 contact with.*
 2. *Updates: St. Elizabeth – East is working with St. Elizabeth - Crawfordsville*
 - b. Decrease average ED LOS at non-trauma centers
 - i. Discussion of transfer data sent to trauma centers (& some other facilities receiving transfer patients)
 1. *Prior to the meeting, Katie sent each individual trauma center a list of patients into the state registry that were brought to their facility for quarter 3 2013.*
 2. *Missy Hockaday asked Katie to walk through the data at the next ITN meeting.*
 - ii. Review of current average ED LOS
 - iii. Discussion of educational materials for non-trauma centers regarding timely transfers

1. *Regina Nuseibeh provided an anecdote of a patient whose transfer was delayed due to transportation.*
2. *Katie shared with the group that the Indiana State Trauma Registry has the following data elements that can be captured by non-trauma center facilities:*
 - a. *Time of Decision to Transfer*
 - b. *Transfer Delay*
 - i. *Yes*
 - ii. *No*
 - c. *Reason for transfer Delay (if Transfer Delay was marked "Yes")*
 - i. *EMS Issue*
 - ii. *Other*
 - iii. *Receiving Hospital Issue*
 - iv. *Referring Physician Decision Making*
 - v. *Referring Hospital Issue – Radiology*
 - vi. *Weather or Natural Factors*
3. *Amanda Elikofer talked about how Illinois looks at transfer delays and because the "Reason for Transfer Delay" data element is so broad, ideally someone reviews the patient's chart to identify a more specific reason for the delay.*
4. *Katie asked the group if these transfer data elements should be required.*
 - a. *Some said it should, further discussion is needed.*
5. *Jennifer Mullen shared how her facility is utilizing the state trauma registry and these data elements to provide education to her emergency physicians.*
6. *Suggestion was made for trauma centers to create educational material around why initial facilities don't need to scan every patient.*
7. *Spencer Grover brought up what Kentucky uses for education and suggested that the Indiana State Trauma Care Committee review and make something similar available to Indiana.*
 - a. *Spencer will send document to Katie Gatz.*
8. *Missy Hockaday suggested identifying other states that have ED LOS < 2 hours as one of their performance measures and find out how they are tracking, providing education, etc.*
 - a. *Missy & Katie will provide information at the next PI subcommittee meeting.*
9. *Katie talked about the National Association of EMS Officials annual meeting and the regional trauma system involvement with PI in other states.*
10. *Amanda Elikofer talked about the RTTDC and how it is difficult to target the right people to attend the course.*
 - a. *The group discussed presenting the importance of timely transfers to the following groups:*
 - i. *American College of Emergency Physicians*
 1. *Katie Gatz will talk to Dr. Chris Hartman at the next trauma care committee meeting about presenting to the group*
 - ii. *Indiana Rural Health Association.*
 1. *Katie Gatz will find out if the IRHA conference has scheduled all of their presenters yet.*
 - iii. *Family Practice Doctors*
 1. *Need to identify a group / association*

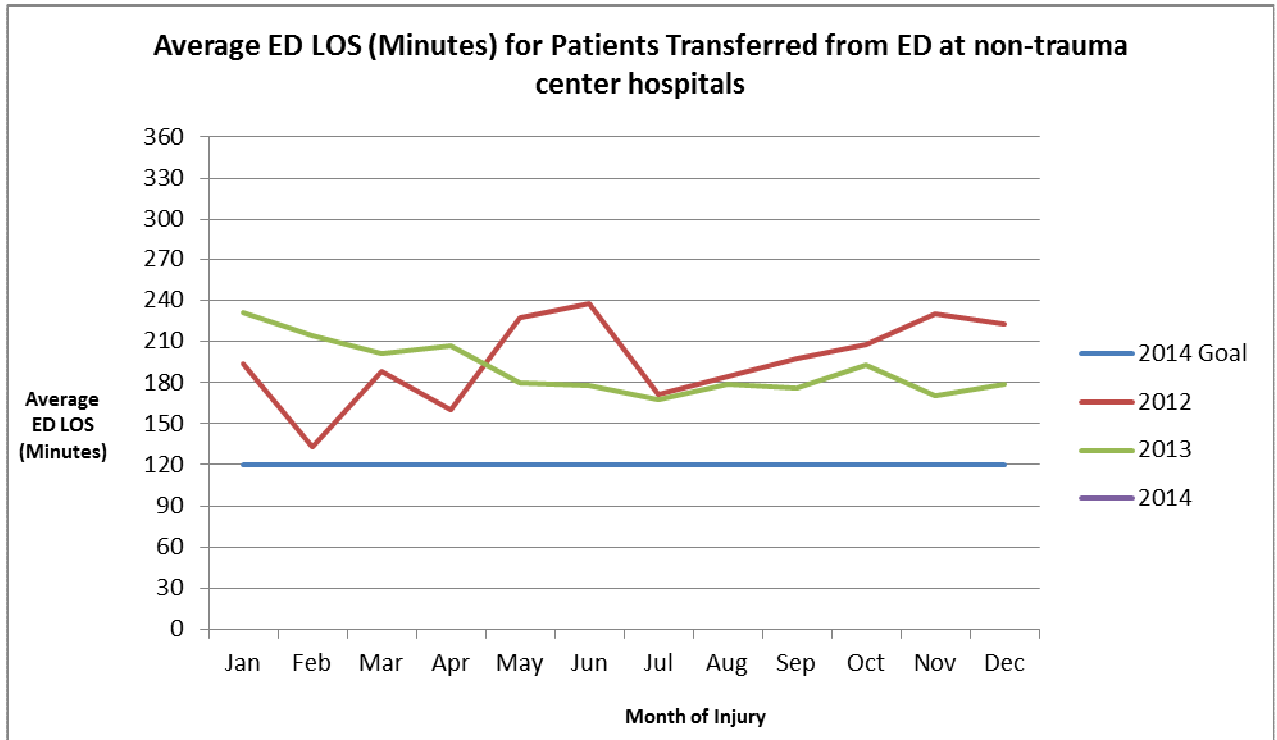
- iv. *ED Directors*
 - 1. *Need to identify a group / association*
- v. *EMS Medical Directors*
 - 1. *Katie Gatz will work with Brian Carnes regarding this group*
- 11. *Amanda Elikofer asked for a list of facilities that have recently completed RTTDC.*
- 12. *Carrie Malone shared the process she went through when she worked at Sullivan Hospital to reduce transfer times.*
- c. *Increase EMS run sheet collection*
 - i. *ISDH EMS Registry handout for hospital EMS break rooms*
 - 1. *The Office of Public Affairs at ISDH has created a handout and Katie will send out.*
 - ii. *PowerPoint slides about the ISDH EMS registry*
 - 1. *Katie will resend the slides after today's meeting.*
 - iii. *Review of EMS run sheet collection by hospital*
 - 1. *Katie explained the methodology used to calculate the percentage of EMS run sheets collected.*
 - 2. *Discussion around breaking this information out into two categories:*
 - a. *Interfacility Transfers*
 - b. *Scene*
 - i. *Katie will make this change for the next PI subcommittee meeting*
 - 3. *Regina Nuseibeh shared the challenges her facility experienced with capturing EMS run sheets and the processes they have put into place to increase the collection of run sheets within the registry.*
 - 4. *Carrie Malone shared the challenges her facility experienced with capturing EMS run sheets and the processes they have put into place to increase the collection of run sheets within the registry.*
 - 5. *Someone asked what was being done with the information regarding specific providers not leaving run sheets.*
 - a. *Katie will compile the list which will be passed on to Mike Garvey at the EMS Commission.*

3. Next Meeting (TENTATIVE): Wednesday, May 7th at 10am EST

Call-in number: 1-877-422-1931, participant code is 2792437448# (music will be heard until the moderator joins the call)

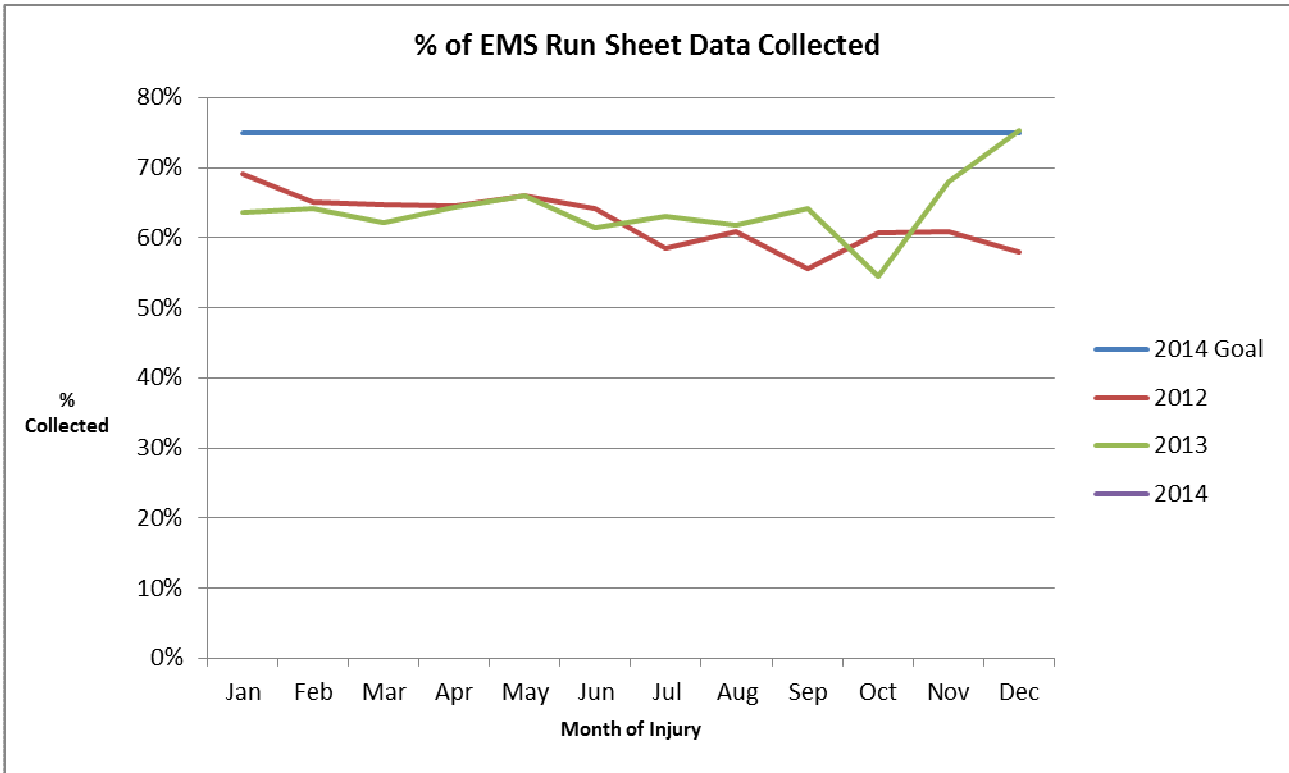


| Action | Owner | Status |
|--|-----------------------|-----------------|
| Letter from Dr. VanNess to non-reporting hospitals | ISDH | Complete |
| Mentorship Program between trauma centers and non-reporting hospitals | trauma centers | In progress |
| IU Health - North mentorship | IU Health - Methodist | In progress |
| St. Vincent Anderson mentorship | St. Vincent - Indy | In progress |
| Perry County, St. Mary's – Warrick, & Terre Haute Regional mentorship | St. Mary's | In progress |
| Deaconess Gateway & Perry County mentorship | Deaconess | In progress |
| Elkhart General, IU Health - LaPorte, & IU Health - Starke mentorship | Memorial South Bend | In progress |
| Waiting on mentorship status | IU Health - Riley | |
| Waiting on mentorship status | Lutheran | |
| Waiting on mentorship status | Parkview RMC | |
| Waiting on mentorship status | Wishard | |
| 2nd Letter from Dr. VanNess to non-reporting hospitals about trauma registry rule | ISDH | Complete |
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| | | |



| Action | Owner | Status |
|--|-----------------------|---------------------|
| RTTDC completion by non-trauma center hospitals | Trauma Centers | ongoing |
| Evaluate critical patients (transfers & non-transfers) | ISDH & trauma centers | ongoing |
| Develop educational material for non-trauma centers regarding timely transfers | ISDH & trauma centers | Complete in Q1 2014 |
| | | |
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| January 1, 2013 to December 31, 2013 | | |
|--|---------------|-----------------------|
| Total # of Patients Transferred for 2013 YTD | 2,114 | |
| Measure | # of Patients | Avg. ED LOS (Minutes) |
| Initial Hospital: Shock Index > 0.9 | 181 | 174 |
| Initial Hospital: GCS Total Score ≤ 12 | 93 | 165 |
| Initial Hospital: ISS ≤ 15 | 1806 | 190 |
| Initial Hospital: ISS > 15 | 155 | 163 |



| Action | Owner | Status |
|--|----------------|-------------|
| implementation of ISDH EMS Registry | ISDH | ongoing |
| trauma registry rule | ISDH | in progress |
| EMS registry training tour | ISDH | complete |
| trauma centers communicating to pre-hospital providers ISDH ems registry | trauma centers | |
| | | |

| Facility Name | % of Run Sheets Collected |
|--------------------------------|----------------------------------|
| Cameron Memorial | 100% |
| Community Hospital of Anderson | 0% |
| Daviess Community | 99% |
| Deaconess Gateway | 100% |
| Deaconess | 61% |
| Dukes Memorial | 100% |
| Elkhart General | 76% |
| St. Anthony - Crown Point | 96% |
| St. Elizabeth - Central | 100% |
| St. Elizabeth - East | 46% |
| St. Francis - Indy | 57% |
| St. Francis - Mooresville | 86% |
| St. Margaret - Dyer | 67% |
| St. Margaret - Hammond | 100% |
| Good Samaritan | 74% |
| Greene County General | 100% |
| Hendricks Regional | 0% |
| Henry County Memorial | 0% |
| IU Health - Arnett | 55% |
| IU Health - Ball Memorial | 88% |
| IU Health - Bedford | 78% |
| IU Health - Bloomington | 78% |
| IU Health - Methodist | 56% |
| IU Health - North | 51% |
| IU Health - Riley | 28% |
| IU Health - Tipton | 0% |
| IU Health - White Memorial | 0% |
| Johnson Memorial | 98% |
| King's Daughters' | 100% |
| Lutheran | 76% |
| Major | 97% |
| Marion General | 86% |
| Memorial HHCC (Jasper) | 0% |
| Memorial South Bend | 86% |
| Methodist Northlake | 73% |
| Methodist Southlake | 70% |
| Monroe | 22% |
| Parkview Huntington | 100% |
| Parkview LaGrange | 100% |
| Parkview Noble | 100% |
| Parkview Randallia | 100% |
| Parkview RMC | 81% |

| | |
|-------------------------|------|
| Parkview Whitley | 97% |
| Perry County Memorial | 0% |
| Porter (Valpo) | 99% |
| Pulaski | 100% |
| Reid HHCS | 0% |
| Schneck | 89% |
| St. Mary's - Evansville | 41% |
| St. Vincent - Anderson | 82% |
| St. Vincent - Clay | 14% |
| St. Vincent - Indy | 40% |
| Sullivan County | 100% |
| Terre Haute Regional | 84% |
| Union - Clinton | 54% |
| Union - Terre Haute | 71% |
| Eskenazi | 89% |
| Witham | 0% |
| Witham - Anson | 0% |