



**Triad Regional Advisory Committee  
Trauma/Disaster Meeting  
February 14, 2008**

**Quality Inn – Hanes Mall  
Winston-Salem, NC**

**Attendance List:**

The attendance list is on file and available upon request.

**Welcome and Introductions:** Dr. Jay Wyatt

Would like feedback after today's combined meeting as to whether this format is liked or if we need to return to separate disaster and TRAC meetings.

**Approval of Minutes**

Minutes approved as written.

**Old Business**

**1. Regional Disaster Preparedness - Mary Beth Skarote**

- 2007 HazMat certificates are ready for pickup from the front table.
- Disaster Medical Conference - April 17-19, 2008 at Koury Convention Center. TRAC will fund 40 registrations through regional grant (15 for SMAT II teams, 10 for SMAT II team members and 15 for RAC. We really want to focus on long term care, community health, hospice and home health, so please make this information available. Forms are available on the front table and on our website.
- 2007-08 ASPR grant execution is expected soon and we will begin purchasing for our projects. Regional exercise is planned with preliminary information with notification being given to the vendor this week. We know that we are picking EnviroSafe - we have just asked them to send back an updated proposal as we have added a few things. We will also have a severe weather event with objectives being to test the ability of all agencies in response to notification of a hazardous incident and provide overall management and coordination of operations according to NIMS standards; evaluate the ability of affected facilities to activate alternative care sites and overflow emergency medical care facilities to manage hospital surge capacity and special needs population in the event of a hazardous incident to their facility specific emergency operations plans; and evaluate the ability of all participating entities to implement incident response communications (NCMCN) within the triad region in the event of a hazardous

incident to specific emergency operations plans; and test the ability of all facilities to transition from surge to normal operations when the hazardous incident has been cleared according to their facility specific emergency operations plan. This will be a two phase exercise. On June 23 we will do a tabletop exercise - we have asked the vendor to provide this at one location for us to bring everyone in and we will have a day of training and do this tabletop exercise there. You will be hearing more about where this will be scheduled. On August 1st there will be a functional exercise. The primary piece of this exercise will take place in Iredell County with all agencies and facilities within our region will participate at some level. We know we need about 200 volunteers, so if you know of any groups that we may pull from please give the information to our vendors so we can get a good volunteer base. The vendor will provide a 4-hour controller and evaluator training.

- Communications: Part of our grant is to supplement a VHA grant that was awarded to Moses Cone. Jody Moore of Moses Cone will give a presentation later in the meeting.
- Summer education and training courses: A Difficult Airway course for EMS (grant is offering this at \$100 eligible agency/\$150 ineligible agency) will be on May 17, 18 in Watauga and June 21, 22 at Davidson Community College with 50 seats per class - eligibility is according to grant funding guidelines. Contact Mary Beth for eligibility listing. TNCC - Linda Kalafut will have information on these classes. There will be two courses on prehospital trauma with dates to be announced. There will also be some ABLS classes in this grant with dates to be announced. All information with class dates, times, and locations will be posted on our website, so check regularly.
- Emergency Operation Plan: Most received letter from Mary Beth indicating she needs a copy of your plan. There is a February 15th deadline and 30% have been submitted, so please submit your plan to her as soon as possible.
- SMAT II team update: We currently have new tow vehicle for our four trailers. We are in the process of finalizing a grant for emergency management to purchase a tractor-trailer to haul the M8 field hospital. We did training on January 16 and 18 and we have an initial training on February 23, 24. Anyone needing registration information see Mary Beth. SMAT II and some SMAT III partners are going to be a large static display and booth in the parking lot at the disaster conference in April.
- SMAT III
  - Guilford - Dwayne reports they just completed a mass shooting exercise at GTCC.
  - Davidson - Jeff reports they just completed SMAT III training which was contracted through SORT. There was very positive feedback from the class. Also, looking into training on weapons of mass destruction - meth lab response as well as several big field projects for 2008, i.e. Lexington BBQ Festival and the Thrasher's Convention in Denton.
  - Surry - Mary Beth reports there is a SMAT III class in March at Surry Community College.
  - Randolph - No report.
  - Watauga - No report.

## **2. Performance Improvement Subcommittee - Gail Kluttz**

Excellent turnout for the last PI meeting with many physicians representing several areas. We are reviewing deaths <24 hours after admission for July, August and September 2007. WFUBMC reviewed 10 cases, all deemed nonpreventable. Moses Cone reviewed 17 cases; two are still in the process of being reviewed. High Point Regional did not have any cases to report. Forsyth Medical Center reviewed one traumatic death. The other criteria we looked at were deaths from transfers >6 hours for July, August and September 2007. WFUBMC has no cases. Moses Cones reviewed 10 cases which were transfers out; only two were >6 hours and neither of them involved trauma services. High Point Regional did not have any cases to report. Forsyth Medical Center did not have any cases to report. Gail also reported that there was extensive discussion about pediatric head trauma. These minutes are not published on the website due to confidentiality reasons, but if you need a copy of these minutes please let her know.

## **3. Education - Linda Kalafut**

- TNCC - three classes within our region - all in April - at High Point Regional, Randolph and Watauga. Registration forms available. A total of 30 applicants will be funded within the three classes. Normal registration fee is \$150; the (grant funded) fee will be \$50 for participating hospitals.
  - Rural trauma classes. No dates yet.
  - Difficult Airway - two classes, one in May and one in June.
  - ABLIS - two classes will be offered, one May 9 at WFUBMC and one the end of May at Watauga Medical Center. The registration fee will also be \$50 for the one-day class. Check the website frequently for dates, times and locations.
- Dr. Wyatt announced that Moses Cone will hold their annual trauma symposium on April 29 at the downtown Marriott in Greensboro. Contact Dr. Wyatt or Cheryl Workman for more information.

## **4. Injury Prevention - Leigha Shepler**

- Lifesavers Conference (National Highway Safety Conference) is being held in Portland, Oregon, April 13-15, 2008. \$250 registration fee.
- STIPDA Conference (State and Territorial Injury Prevention Directors Assn.) is being held April 20-23, 2008. Sharon Rhyne will be there along with other people from North Carolina. The theme for the conference is "Give Them Something to Talk About - Making Our Messages Stick" in Oklahoma City, Oklahoma. \$525 registration fee that does include \$75 membership for one year.

## **5. EMS - Myron Waddell - no report.**

## **6. RACE Stephanie Starling-Edwards and Lisa Monk**

In November the RACE data was released at the American Heart Association scientific session and the article was published in JAMA. Results were very good. Slide presentation with review of data for door to lytics times as well as door to depart emergency department times. As you can see, times are increasing and this is very concerning. When reviewed as a region there were 25 patients, looking at August-October, second round of date runs through the end of January. Similar number of patients, however, time has actually gone up. The AMA did a big push a few years ago to educate the community to call 911 and getting medical help as quickly as possible after symptoms present. Unfortunately, there is not a lot we can do to make patients come to the hospital;

however, the number has increased in the last three months. Stephanie recommends EMS to use the checklist for the door to lytics if the patient calls EMS. It will save them some time as they can hand the ED physician the lytic checklist to deem eligible or ineligible. Prehospital EKG - It is recommended that this not be repeated if the EMS has brought a good quality EKG into the ED. For walk-ins, EKG should be done in <10 minutes. Of note, there is no EKG data provided due to the way the Action Registry asks questions. Most of the time the times are not available for the outlying EDs. Regarding the door to transfer, what was found in the data was that patients that are lytic ineligible should spend less time in the ED and they actually spend more time in the ED. Call immediately for transfer, don't wait. Keep patient on EMS stretcher - ideally the EMS transport can stick around if the patient does need transport to save time. According to RACE protocols, IV drips can be avoided.

**7. Stroke - Lynn Stevens (FMC) and Sharon Petticord (WFUBMC)**

Although new to this group, their hope is to be able to set up data review similar to the RACE data review. The EMS toolkit for stroke was announced last month and will be starting in March 2008 for a three-month period as a data collection tool. They would also like to set up something for local EMS to measure times and get feedback. New training - ASL for Stroke for EMS; \$300,000 grant through the CDC to the NC Stroke Collaborative and they are offering four (4) train-the-trainer classes beginning in April. This training will be free to the participants through the grant and they encourage all EMS trainers to attend this free training. Lynn will also be teaching one of the classes in Greensboro. This is great education for EMS at all levels, basics through paramedics. Members of the national stroke organization agree that ASLS is an excellent tool for EMS. Also recruiting members of this group who would like to work with them in obtaining feedback for EMS.

**Emergency Department Reports**

- **WFUBMC - Michelle Combs (ED) and Ricky Harold (AirCare)**  
Michelle reports the pediatric emergency department is expanding at Baptist Hospital. Currently 50% construction is complete - will be adding six beds to serve the pediatric FAST track area. Long term looking at also doing psych holding area in the adult emergency department, probably this summer, and will be expanding bed capacity there as well. Introduce Ricky Harold as the new program manager for AirCare.  
Ricky reports AirCare is working on getting out quicker and therefore improving on scene times. Also, we have a new helicopter which can fly two patients, one pilot, so the aircraft will be shut down at the scene. This is a safer helicopter without the exposed tail rotor and loading from the rear. The pediatric team will also be trained.
- **Moses Cone - Cheryl Workman**  
Today they have 26 holding in the emergency department. They currently have a new project that will be starting within the next several months to expand the emergency pediatric area. There will also be other areas with holding beds.
- **High Point Regional - Linda Newton (new ED director), Angelina Drews (trauma) and Melba Brendle (disaster)**

Linda spoke about her new position and changes from a systems perspective. Shawn Griffin has resigned his position and Angelina has taken over this position with regard to their trauma program. She and Melba look forward to becoming more involved in working with the RAC. High Point will be hosting the next ENA meeting and Dr. Wyatt will be doing an educational presentation.

### **New Business**

- **Formation of Regional Safe Kids Coalition - Angie Gregg**  
Angie presented a slide show regarding the newly revised Safe Kids program, working with community leaders to prevent injuries to children (up to age 14). Lead agency is the Department of Insurance with commissioner Jim Long and the state fire marshall. The NC Hospital Association is also funding a large portion of this program. Mission: To make coalitions of community partners to prevent accidental death and injuries to children 14 and under, and empower families and communities to educate adults and children, create safer environments, conduct research, and advocate for effective laws. Members involved in community coalitions are police, firefighters, paramedics, doctors, nurses, teachers, business owners, law makers, community volunteers and retirees. There are now 34 counties/regions in NC involved with Safe Kids and 72 counties with the Buckle Up Kids (child passenger safety) program. Data collected shows that education does make a difference. Awareness is provided through educational materials, community involvement and media outreach. Motor vehicle crashes are the leading cause of accidental death for children to age 14; this is a national statistic. Find out who your area coordinators are and work with them. Resource number for more information: 1.888.347.3737.
- **Disaster Innovations Grant Presentation - Jody Moore, Moses Cone**  
Jody Moore reports that last year Moses Cone experienced several surge events, to the point where they were at a critical point of no more beds, no more rooms, continued nursing shortage, and depletion of medical supplies/equipment. He presented a slide show outlining how Moses Cone is utilizing a grant to find solutions for varying levels of surge events. Also taken into consideration is how surge solutions will be utilized for hospitals of varying size. He also noted that it is important to have information that works for hospitals, long term care facilities and healthcare agencies. Dr. Alson (WFUBMC) is also working on this project. A prototype case system has just been approved. Jody also conducted an audience response survey to help with feedback. Question and answer period followed. For more information: [www.mcsurgecase.com](http://www.mcsurgecase.com).
- **Trauma Case Presentation - Bradley Dean, WFUBMC**  
Bradley presented slide show for review and discussion. Forsyth Medical Center and WFUBMC as well as EMS were involved in this process. The initiating event was a subject who had utilized an unknown amount of cocaine at an unknown time and proceeded to drive a vehicle. This subject weaved in and out of traffic, passing on the right shoulder of the road. He lost control and at some point while the vehicle was in motion jumped out of the vehicle onto the road. He continued on foot through traffic, trying to get vehicles to stop, and attempting car-jacking several vehicles. During this time an off-duty sheriff's deputy tried to intervene along with several other police officers. As the subject is attempting yet another car-jacking, law enforcement officers became involved and a subsequent struggle

ensued. During this struggle the law enforcement officers tased the subject three times in an attempt to apprehend the subject. A second subject fled on foot and was never located. There were a total of 23 911 calls for this single incident. Discussion followed with regard to transport, diagnosis and outcome of this particular case as well as identification and definition of "excited delirium".

Meeting adjourned.

**T-RAC Meeting Schedule for 2008** - All meetings held at Quality Inn - Winston-Salem.

**May 15, 2008**

**August 14, 2008**

**November 13, 2008**