



**Triad Regional Advisory Committee  
Trauma/Disaster Meeting  
May 14, 2009**

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

**Attendance List:**

The attendance list is on file and available upon request.

**Welcome and Introductions:** Dr. Burke Thompson

**Approval of Minutes**

February 12, 2009 T-RAC minutes approved as written.

**T-RAC Reports**

**1. Regional Disaster Preparedness Update - Mary Beth Skarote  
Grant Update: Executed 4/24/09 and have until 07/15/09 to complete  
purchases of approximately \$900k.**

**Training** - added ADHLS, CISM, FCCS, Rural Trauma increased to four classes, improvements to training room - NDMS travel.

**Project 9** - was to assess and evaluate all regional dialysis centers and purchase transfer switches for generators. Requesting to eliminate this project as the timeframe to complete is not within the grant timeline. Will review for next grant year.

**SMAT II** - Requesting to move funds from Project 9 to here for completion of the burn surge trailer; after review with Randy Kearns more is needed.

**Exercise Committee** - Will meet and discuss plan for SMAT exercise. Preparations to exercise the MSS operation; consultant to develop regional plan - hold on this (state is developing template so that the regional plans have consistency). Same funds approved to conduct regional HVA to help with the development of the plan next grant year.

**Regional** - Surge cases still on the list. Mobile radios VMN capable for all ambulances - multiyear project, Regional Disaster Communications/Response System. Web EOC is likely system; requesting to move additional funds from Project 9 to here to support cost of Web EOC.

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

Gail reports at the last PI meeting deaths <24 hours after admission and deaths/no deaths in transfers >6 hours were reviewed. Refer to 021209 minutes.

Dianne Wheaton continues to send issues to EMS training officers for their review, and Dr. Alson sent followup letters to Davidson Co. EMS and Iredell Co. EMS. We are waiting for loop closure. Continue to send Gail PI issues. In today's meeting will be reviewing January, February, and March 2009 data.

If you did not receive a RAC affiliation form see Gail today. Each EMS and hospital system is to declare a RAC for annual membership based on transfer patterns of trauma patients. If you want to change RACs you will have to prove through supporting documentation that you have changed transfer patterns. Gail will send the completed forms to Holli Hoffman with the state.

Fundamentals in Critical Care Support - course offered free of charge, room for 25 participants in this class. Certification for physicians also available in this 2-day course regarding management of critically ill and injured patients.

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

Since grant was instituted Linda reports two TNCC and two ENPC courses held.

Another ABLS course will be held at Forsyth Medical Center June 17th with a nominal fee of \$25 (normally \$200). Contact Linda for more information.

Also, upcoming TNCC and ENPC instructor classes being offered June 29 and 30.

There are four Rural Trauma Team Development classes being offered this year (Surry Co., Wilkes Regional, Rowan Regional, and HPRHS). It is a one-day course, underwritten by grant funds, for physicians, nurses, EMS personnel which talks about basic trauma life support, lecture and case studies. Trauma systems will also be discussed as well as definitive transfer. Dr. Shayn Martin of WFUBMC also explained what the Rural Trauma Team Development class will encompass. Check the TRAC web site for class dates/times/locations.

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

Leigha reports they are working on the final stages of strategic planning; met last month to work on action plan for the goals and objectives. There will be working groups to help institute the plan. Focus on motor vehicles, unintentional poisoning, suicide, and violence (leading causes of injury and death). Let her know if you want to serve on this committee.

NC Falls Prevention Coalition - Sharon Rhyne chairs this committee; contact her for information.

Falls - A Matter of Balance program - training to be able to facilitate sessions. Very good program supported by research. There will be training for facilitators

throughout our region over the next few months. The Piedmont Triad Council is offering the training sessions. Two-day, four-hour each day training.

Grant funds available for permanent checking station for car seat installation and education; child passenger safety technicians to provide services.

Finally, out of 50 positions at SafeKids Worldwide they had to lay off 15 people (who had been there many, many years). They are reorganizing to be able to provide the level of service as in the past.

#### **4. H1N1 Flu Update - Eleanor Lunasin**

Update from the public health sector re worldwide, US, and NC cases. North Carolina has 12 confirmed cases. Learning exercises regarding recent events but now better prepared. Stockpiling of assets - have asked State for guidance. Thanks to Emergency Management coordinators as well as OEMS and hospitals providing support. Questions, contact your public health office.

#### **Emergency Department Reports**

- **High Point Regional - Meg Cashion**

Meg reports having an ENPC class- see her if interested.

- **Moses Cone - Jody Moore**

Received Chest Pain Center accreditation; also received Stroke Center accreditation. Pediatric ER will open end of June. Successful partnership/merger with WFUBMC physicians effective May 1. National Trauma Center Accreditation site visit is scheduled for September 2009. Opening June 1 of Med Center High Point. Invited to Open House May 31st 1-4p.

- **NC Baptist Hospital - Michelle Collins**

Michelle reports the Magnet site visit a couple of months ago and expecting results in June 2009. Opportunity for ED nurses to have poster presentations accepted at two national conferences. ED Academy in July will take 10 new graduate nurses for six months and train them by emergency nurses association orientation guidelines, provide TNCC, ENPC, ACLS, PALS, ATLS and NRP. During the six month time they will have class and clinical experience as well as other types of things. After the academy they will be contracted to work for WFUBMC for two years. At the end of the two years we will provide with CEN exam fee as part of their agreement.

#### **Old Business**

- **T-RAC Trauma System Guidelines - Trauma Triage Policy - Presentation by Bradley Dean**

#### **New Business**

- **Injury Prevention Data - Presentation by Bradley Dean**

Data collected from 1999 - 2003 and compared to a year of data from 2006-07 to see if there has been an increase or decrease in injury prevention within the triad

area, a total of 18 counties (17 in RAC and 1 hospital). Looking at the total number of visits/discharges, not number of patients.

Injuries are not accidents. An injury is the physical damage that results when a body is suddenly or briefly subjected to intolerable levels of energy or is deprived of a vital element(s), i.e. mechanical, radiant, thermal, electrical, and chemical.

Conclusion:

1. Unintentional falls show the highest need for injury prevention.
2. Several counties – missing e-code data (Ashe, Guilford, Rockingham, Wilkes)
3. Second highest cause was MVT – wider distribution due to the wide possibilities
4. MVT – Alexander, Caldwell, Guilford, Iredell, Wilkes
5. Struck-Unintentional – Alleghany, Stokes, Yadkin
6. Third leading cause that needs focused injury prevention is poisoning.
7. Missing e-code was the second highest cause of injury for 7 counties.

What does all this mean? It looks like improving e-coding would be a great help to documenting cause of injury, and injury prevention efforts probably need to focus on adverse effects of meds, unintentional falls, and MVTs.

- **Burn Surge Update - Presentation by Randy Kearns, NC Burn Disaster Program**

Overview of statewide (major burn) disasters in North Carolina; history based on charts and data. Overview of regional disasters in the southeastern US, i.e., most recent in Savannah - sugar dust explosion. Small number of licensed beds in the US; most are at 95% occupancy patient days. Reviewed burn resources in SE region; there are 74 verified beds southeast region. Baptist will be the fifth burn center verified in the US; one of two in NC.

EMS protocols available at [www.ncburndisaster.org](http://www.ncburndisaster.org). Review of radiation (thermal) burns, redirect patients where they need to go. Interface with air facility transport guidelines. Decision trees for hospitals and EMS.

Key is education through ABLs. ABLs class offered at Forsyth Medical Center June 17th. Contact: Linda Kalafut.

This past January they were contacted by Health and Family Service and asked to help with burn disaster planning in the southeastern US. Confirmed burn bed count 400+ burn beds with a 24 hour notice in the southeast US. Southern Burn Disaster Plan is undergoing several revisions. Reviewed the trigger point in NC for a burn disaster is 6:5:6.

- **Triad Field Training Exercise - Presentation by Mary Beth Skarote**  
Spring Fling in the Foothills regional training exercise overview held March at Surry Community College. Many agencies participated, i.e. SORT, SMAT I, SMAT II, Surry Community College, Surry Co. EMS, Moses Cone. The participants SMAT I of WS, SMAT II was primary but there were other teams

from across the state as well. Davidson County and Surry County SMAT III also participated; other emergency services personnel partnered with those in Surry County; the police department; Moses Cone provided a satellite truck. Medical Reserve Corp provided volunteers; North Carolina Baptist Men fed the group. Also, the PA program at Bowman Gray provided researchers; the state OEMS provided evaluators.

The scenario the threat of terrorist attack during a mass gathering (7k in crowd). There were a lot of walking wounded, contaminated patients. Then had a secondary device that exploded resulting in burn patients.

Excellent preplanning (Steve Marks); incident debriefing was excellent. WMD response and decontamination operations need to train together more often with members who have never participated before provide an excellent learning experience as well as training on new equipment. Will offer more training classes. Overall, communications worked well; radios and satellite; triage and prehospital care initial team provided backup support rapidly; forward staff insufficient (staff that went into the field - not enough personnel); 180 committed/100 showed. Ambulatory patients were rescued within 10 minutes; outlying less than 15 minutes - did well. Incident debriefing excellent.

Burn management - PA students observed and assisted with patients. Assessment of triage and management of the burn patients. Data forthcoming for future planning. They did find difficulty using the Rule of Nines; calculated the Parkland Formula well but did not institute it in the right way. Demobilization went well.

Special thank you to Chuck Lineback who wrote the scenario and helped facilitate the exercise. Thanks to Surry Community College who helped with providing their facility as well as community resources. They also used this regional exercise for training. All team members, Surry County EMS, Davidson County EMS, NC Baptist Men's Disaster Relief brought the whole team in and cooked for the weekend as well as providing shower units...many thanks to all. OEMS staff, thanks for supporting the exercise. All-in-all a great event!

**Announcements - Gail Kluttz**

See Bradley Dean if you need Hospital SMART Triage and MedSled training.

The Call for Presentations for Emergency Medicine Today will be on the OEMS web site, June 19th proposal deadline.

Meeting adjourned.

**T-RAC Meeting schedule for 2009**

**Location: Quality Inn, Hanes Mall, Winston-Salem.**

**Dates: August 13, 2009**

**November 12, 2009**