

Committee on Pediatric Emergency Care

Agenda November 8, 2018

Mission - To ensure that every child in Tennessee receives the best pediatric emergency care in order to eliminate the effects of severe illness and injury.

Vision - To be the foremost advocate for children throughout the continuum of care in Tennessee and the nation.

MEETING CONFERENCE CALL

Time: <u>Central Time Zone</u> - Call to Order following CoPEC	PLACE: TENNESSEE HOSPITAL ASSOCIATION
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MINUTES OF PREVIOUS MEETING: Previous Meeting Date August 9, 2018
Minutes: Approved Not Approved Distributed prior to Meeting Not Submitted – Not Completed

PRESENT:
Voting: Kara Adams, Lee Blair, Kevin Brinkmann, Seth Brown, Chris Clarke, Kate Copeland, Beckye Dalton, Yvette DeVaughn, Jennifer Dindo, Joel Dishroon, Alicia Duck, Joann Ettien, Trey Eubanks, Amber Greeno, Katherine Hall, Sheila Jones, Deena Kail, Lonnie King, Rudy Kink, Dawn Morrow, Marisa Moyers, Matthew Neal, Lisa Nistler, Kevin Nooner, Maureen O’Connor, Theresa Drewry, Miguel Rodriguez, Samir Shah, Brittany Stover, Brad Strohler, Deborah Tuggle, Michele Walsh, Rita Westbrook, Cynthia Work, Amanda Yarber
Non-Voting: Corrie Berry, Sue Cadwell, Colleen Costello, Paula Denslow, Cristina Estrada, Kevin Hammeran, Deborah Newton, Wes Rainbolt, Anissa Revels, Chris Siano, James Tabor, Mollie Triplett, Purnima Unni, Ben Welch, Rich Wendorf, Tammie Alexander,
Voting Absent: Leanne Bilbrey, Oseana Bratton, Christy Cooper, Yuvraj Kalra, Shannon Lankford, Glaze Vaughn, Regan Williams, Ryan Williams, John Wright
Non-Voting Absent: Tammie Alexander, Bracken Burns, Paula Casey, Tracey Davis, Kerry Griggs, Rebecca Kidd, Neil Kooy, Laurie Lawrence, Sam Lynd, Anne Melton, Joshua Roberts, Tara Shivers, Margaret Williams, Jonathan Wood
Guests:
Staff: Rhonda Phillippi
State Liaisons: Robert Newsad, Kyonzte Hughes-Toombs, Ann Reed, Rob Seesholtz, Terry Love
State Liaisons Absent: Rose Boyd, Donna Tidwell, Randall Kirby, Donita Woodall

Committee on Pediatric Emergency Care

Overall Lead/ Time Allotted	Topic	Summary / Decisions
Cristina Estrada, MD Chair of CoPEC	Meeting called to order/Approval of Aug minutes	Approval of minutes with removing Darwin Koller and that the standards committee discussed basic level facilities admission of pediatric patients.
Anissa Revels and Sue Cadwell	Membership Operating Policy review and vote	<p>Make the following changes:</p> <p>Pg 2 Tennessee Association of School Nurses Tennessee Chapter of America Academy of Family Physician Tennessee State of Emergency Nurses Association</p> <p>Pg 3 Correct Advisory Members to Non-voting members Another change was to change TN EMSC to CECA</p> <p>pg5 section 2-C bullet point.</p> <p>pg 7 Section 2 Glossary to be deleted</p> <p>Pg. 7 Change Meeting Rules to Meeting Policy Add a statement that says "Annually every member should sign a conflict of interest statement"</p> <p>Pg 11. Section 1 Change Bylaws committee to Membership Committee</p> <p>Discussions that were tabled Pg2 > Voting Members- tabled on voting members for CRPC- clarifying number of votes for all facilities to see the difference. Look at efficiency of numbers and not the number of each institute.</p> <p>There was suggestions to input more of the responsibilities of the CRPC centers under the bullet point for CRPCs.</p>
Lunch and break into committees		

<p>Rhonda Phillippi</p> <p>Committee on Pediatric Emergency Care</p>	<p>Executive Director report</p>	<p>Review hospital facility assessment results for Performance Measures 6 & 7.</p> <table border="1" data-bbox="940 168 1474 337"> <thead> <tr> <th colspan="3">INTERFACILITY TRANSFER AGREEMENTS AND GUIDELINES:</th> </tr> <tr> <th></th> <th>TENNESSEE</th> <th>NATIONAL</th> </tr> </thead> <tbody> <tr> <td>Percent of hospitals that have interfacility transfer agreements:</td> <td>93%</td> <td>69%</td> </tr> <tr> <td>Percent of hospitals that have interfacility transfer guidelines:</td> <td>88%</td> <td>76%</td> </tr> </tbody> </table> <p>Interfacility Transfer Agreements ensure the transfer between facilities is established in writing, whereas, Interfacility Transfer Guidelines contain the steps and procedures necessary to ensure that children are rapidly and properly transferred.³</p> <table border="1" data-bbox="940 555 1675 1198"> <thead> <tr> <th colspan="2">KEY ELEMENTS OF INTERFACILITY TRANSFER GUIDELINES:</th> </tr> </thead> <tbody> <tr> <td colspan="2">Of the 88% of hospitals that reported having interfacility transfer guidelines, the following are in place:</td> </tr> <tr> <td>Defined process for initiation of transfer, including the roles and responsibilities of the referring facility and referral center</td> <td>100%</td> </tr> <tr> <td>Process for patient transfer (including obtaining informed consent)</td> <td>99%</td> </tr> <tr> <td>Plan for transfer of patient medical record</td> <td>99%</td> </tr> <tr> <td>Process for selecting the appropriate care facility</td> <td>97%</td> </tr> <tr> <td>Process for selecting the appropriately staffed transport service to match the patient's acuity level</td> <td>96%</td> </tr> <tr> <td>Plan for transfer of copy of signed transport consent</td> <td>95%</td> </tr> <tr> <td>Plan for transfer of personal belongings of the patient</td> <td>92%</td> </tr> <tr> <td>Plan for provision of directions and referral institution information to family</td> <td>87%</td> </tr> </tbody> </table>	INTERFACILITY TRANSFER AGREEMENTS AND GUIDELINES:				TENNESSEE	NATIONAL	Percent of hospitals that have interfacility transfer agreements:	93%	69%	Percent of hospitals that have interfacility transfer guidelines:	88%	76%	KEY ELEMENTS OF INTERFACILITY TRANSFER GUIDELINES:		Of the 88% of hospitals that reported having interfacility transfer guidelines, the following are in place:		Defined process for initiation of transfer, including the roles and responsibilities of the referring facility and referral center	100%	Process for patient transfer (including obtaining informed consent)	99%	Plan for transfer of patient medical record	99%	Process for selecting the appropriate care facility	97%	Process for selecting the appropriately staffed transport service to match the patient's acuity level	96%	Plan for transfer of copy of signed transport consent	95%	Plan for transfer of personal belongings of the patient	92%	Plan for provision of directions and referral institution information to family	87%
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<p>Data committee report</p>	<p>Robert Newsad</p>	<p>In attempt to increase simulations working with CRPC coordinators to offer breakout sessions at EMS conferences</p> <p>The new state EMS database is being tested</p> <p>Requests a NEMSIS presentation at the 2020 PEM conference</p>																																
<p>Standards committee report</p>	<p>Kevin Brinkmann</p>	<p>Review of the Strategic Plan was performed with update on current status of projects. Decision made to meet again on January 8th for further work on the PECF Rules.</p>																																
<p>Disaster committee report</p>	<p>Amanda Yarber</p>	<p>Provided an update on tasks completed on strategic plan. See attachment</p>																																