

**TRAUMA CARE ADVISORY COUNCIL
MINUTES
Date: August 25, 2020**

VOTING MEMBERS PRESENT	(1) Reagan Bollig, MD (2) Douglas Brown (3) Bracken Burns, MD (4) Brian Daley, MD (5) Brad Dennis, MD (6) Trey Eubanks, MD	(7) Peter Fischer, MD (8) Dustin Greene (9) Amber Greeno, RN (10) Heather Kelly (11) Robert Maxwell, MD (12) Roger Nagy, MD	(13) Rene Saunders, MD (14) Benji Scharfstein, MD (15) Melissa Smith, RN
VOTING MEMBERS ABSENT	(1) Dave Bhattacharya, MD (2) Oseana Bratton, RN (3) Scott Kelsey, MD	(4) Marisa Moyers, RN (5) Sullivan Smith, MD (6) Level III TMD	
GUESTS/ TCOT Members	(1) Jessica Antonino (2) Carrie Austin (3) Melissa Barton (4) Angela Basham-Saif (5) Jennifer Beecham (6) Monica Brady (7) Kevin Brinkman (8) Alli Brogan (9) Helen Brooks (10) Jenifer Conerly (11) Todd Haines	(12) Kyonzte Hughes-Toombs (13) Katherine Johnson (14) David Kerley (15) Terry Love (16) Wanda McKnight (17) Kelly McNutt (18) Brian Metzger (19) Brent Nix (20) Britnei Outland (21) Kelsey Palladino (22) Anita Perry	(23) Melissa Perkins (24) Niki Rasnake (25) Mark Reiter (26) Anissa Revels (27) Emily Roberts (28) Rob Seesholtz (29) Beverly Tester (30) Mollie Triplett (31) Richard Walker (32) Kayla Whiteaker (33) Regan Williams
NEXT MEETING DATES:	2019 Tuesday August 25 th – Webex Tuesday November 17 th – Nashville		

TOPIC	SPEAKER	SUMMARY/DECISIONS	RECOMMENDATIONS/ ACTION	RESPONSIBLE PARTY
Statute Rules	B. Daley	Required to have majority voting members present to have a quorum	Roll call – Quorum present	
I. Approval of Minutes	B. Daley	Minutes from the April 29, 2020 TCAC meeting were presented for approval.	Minutes approved	
II. Old Business a. Trauma Fund	R. Seesholtz	<p>Reported to the council on 1st, 2nd & 3rd qtr. Trauma disbursement amounts:</p> <ul style="list-style-type: none"> • 1st qtr: \$1,822,076.96 - (\$44,240.98 above 2019 amount) • 2nd qtr: \$1,573,716.05 - (\$109,224.86 below 2019 amount) • 3rd qtr: 1,747, 238. 74 – (\$35,116.04) above 2019 amount) 		
III. Subcommittee/Ad Hoc Committee Reports				
a. Registry	B. Dennis	<p>Discussion on the need to vote to confirm the NTDB as the state data dictionary. Additional discussion regarding altering NTDB inclusion criteria re: the disparity between reported trauma volumes with each facility.</p> <p>Britnei Outland provided updates on EMS Elite and hospital hub.</p>	Rob will schedule a meeting with the Registry subcommittee to work on inclusion criteria language	
b. IP / Surveillance	T. Love	Terry reported on the activities of injury prevention, including the Checkpoints program, Suicide prevention task force work.		
c. System Development/ Outreach	R. Seesholtz	Rob gave an opportunity for those present to update the council on any items related to systems/outreach.		

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d. PI/Outcomes	T. Eubanks	<p>UT informed the council on their work related to virtual education.</p> <p>Johnson City informed the council that they are planning on conducting a virtual RTTDC Class and the end of September.</p> <p>Stressed the importance of the need for outcomes data as it is difficult to drive change without needed data.</p>		
e. CoPEC	K. Brinkman/T. Kurth	<p>Dr. Brinkman reported to the council on the standards committee work on Pediatric trauma rules and the intent to present rules and any changes needed at the next Healthcare Facilities Board meeting.</p>	<p>Dr. Eubanks complemented Dr. Brinkman and the standards committee on the work accomplished to get to this point of rule completion.</p>	
f. Legislative	R. Seesholtz	<p>No report</p>		
g. Finance	B. Daley	<p>No report</p>		
VI. New Business				
a. Rule Revision	B. Daley	<p>Representatives from the American Board of Emergency Medicine, Dr's Walker, Brown, Reiter & Barton spoke to the council regarding their concerns of requiring Emergency Medicine (EM) physicians to have current certification in ATLS if employed and working in a state designated trauma center.</p> <p>Several council members offered a rebuttal indicating that surgeons are under the same requirements and the American College of Surgeon verification process for trauma centers will be soon be making this ATLS requirement</p>	<p>Dr. Daley thanked those presenting for their time.</p>	

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VII. Adjourn		<p>mandatory for EM physicians working in ACS verified trauma centers.</p> <p>Rules revision was started, and the following items were discussed:</p> <ul style="list-style-type: none"> • Moving towards an all ACS state and of the concerns if this was to happen. Specifically, how it would exclude current trauma centers that may not be able to meet those requirements and those communities affected by this change. • Page 3: #23 defines physician extender. Request to reword to address APN/PA nomenclature. OGC will review. • Page 3: Under “registry requirements” add additional wording under to address inclusion criteria/potential changes in submission timeframe requirements i.e. 80% of closed records submitted 60 days past closed quarter. • Page 4: #4 Under “surgical specialty availability in-house 24 hrs a day” add an additional line addressing that a backup call schedule must be available for neuro, general, and ortho surgery. (no level requirements defined) • Page 5: #5 Under “surgical specialty availability from inside or outside hospital” add additional requirement to address vascular surgery (essential) for level I & II centers. <p>Meeting was adjourned</p>		