

**TRAUMA CARE ADVISORY COUNCIL
MINUTES**

Date: February 10, 2021

<p align="center">VOTING MEMBERS PRESENT</p>	<p>(1) Dave Bhattacharya, MD (2) Reagan Bollig, MD (3) Oseana Bratton, RN (4) Douglas Brown (5) Bracken Burns, MD (6) Brian Daley, MD</p>	<p>(7) Brad Dennis, MD (8) Peter Fischer, MD (9) Dustin Greene (10) Amber Greeno, RN (11) Andrew Hopper, MD (12) Robert Maxwell, MD</p>	<p>(13) Anissa Revels (14) Rene Saunders, MD (15) Benji Scharfstein, MD (16) Melissa Smith, RN (17) Sullivan Smith, MD</p>
<p align="center">VOTING MEMBERS ABSENT</p>	<p>(1) Trey Eubanks, MD (2) Heather Kelly (3) Scott Kelsey, MD (4) Level III TMD</p>		
<p align="center">GUESTS/ TCOT Members</p>	<p>(1) Brittney Aiello (2) Jessica Antonino (3) Carrie Austin (4) Mark Baltau (5) Jennifer Beecham (6) Kathy Berrie (7) Monica Brady (8) Alli Brogan (9) Helen Brooks (10) Jenifer Conerly (11) Vincent Davis (12) Pam Finnie (13) Todd Haines</p>	<p>(14) Estie Harris (15) Kyonzte Hughes-Toombs (16) Allison Johnson (17) Carol Jones (18) Natasha Kurth (19) Glenn Linnane (20) Terry Love (21) Wanda McKnight (22) Kelly McNutt (23) Brian Metzger (24) Edward Nix (25) Britnei Outland (26) Anita Perry</p>	<p>(27) Niki Rasnake (28) Ann Reed (29) Brian Reed (30) Emily Roberts (31) Rob Seesholtz (32) Ashley Smith (33) Stephanie Spain (34) Brittany Stover (35) Beverly Tester (36) George Testerman (37) Kayla Whiteaker (38) Regan Williams</p>
<p align="center">NEXT MEETING DATES:</p>	<p align="center">2021 Monday May 5th – Webex Friday August 6th – Memphis Monday November 22nd – Nashville</p>		

TOPIC	SPEAKER	SUMMARY/DECISIONS	RECOMMENDATIONS/ ACTION	RESPONSIBLE PARTY
Statute Rules	B. Daley	<p>Required to have majority voting members present to have a quorum</p> <p>Dr. Saunders has been appointed to serve another term as the HCF Board representative on the council</p>	Roll call – Quorum present	
I. Approval of Minutes	B. Daley	Minutes from the November 17, 2020 TCAC meeting were presented for approval.	Minutes approved	
II. Old Business a. Trauma Fund	R. Seesholtz	First quarters disbursement amounts are currently being calculated buy fiscal.		
III. Subcommittee/Ad Hoc Committee Reports	B. Dennis	<p>Requested vote from the council on the approval a revision to registry inclusion criteria.</p> <p>Britnei Outland provided updates on EMS Elite and hospital hub.</p>	Vote to accept was made by Dr. Bolig and seconded by Dr. Maxwell. Majority vote to approve was received with one nay vote and one abstention.	
b. IP / Surveillance	T. Love	Terry Love gave report on the core injury prevention grant and current suicide initiatives.		
c. System Development/ Outreach	R. Seesholtz	The state trauma symposium is currently planned for Thursday August 5 th in conjunction with the TN Chapter of the ACS meeting held at the Westin, Memphis. The TCAC meeting will be held the following day at the same location.		
d. PI/Outcomes		No Report		

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e. CoPEC	N. Kurth	Natasha informed the council of the pediatric emergency care conference scheduled for April 15 th and 16 th and reminded all of the star of life banquet scheduled for May 12 th .		
f. Legislative	R. Seesholtz	No report		
g. Finance	B. Daley	No report		
VI. New Business				
a. Level III TCAC Members	R. Seesholtz	As level III TMD voting members terms are expiring, new members will need to be recommended by the remaining level III TMD's to serve as voting members on the council. Two positions are available.	Rob will survey level III TMD's to solicit nominations as a voting member on the council.	R. Seesholtz
b. 2021 Trauma Center Reviews	R. Seesholtz	Rob solicited guidance from the council on how to best move forward with the number of site reviews due this year due to COVID desi extensions. Specifically, either move to develop a virtual site review format or wait until in-person visits are allowed.	Rob to convene an ad-hoc meeting to discuss.	R. Seesholtz
c. Interpretive Rule Guidance	R. Seesholtz	A waiver was granted for cardiopulmonary bypass capabilities for Regional One at the last HCF Board meeting. The HCF Board asked the council to weigh in for discussion at the next HCF PI Subcommittee meeting. The question for the council is: does the council support an interpretive guideline of this rule allowing a transfer agreement, 100% chart review, etc. of patients needing this capability if not having this capability? Essentially mirroring the same language as the ACS Orange book.	After much discussion, a motion was made and seconded to adopt the guidance granted to Regional One pending rule change within the state as interpretative guidance. Majority vote to approve received with two abstentions. TCAC motion will be discussed at the next HCF Performance Improvement Subcommittee.	
d. Additional interpretive rule	K. Whitaker	Kayla Whitaker asked the council opinions on the following rules:	The council responded with the following responses:	

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<p>guidance request</p> <p>e. TCAC Membership on EMS Clinical Issues Committee</p> <p>VII. Adjourn</p>	<p>R. Seesholtz</p>	<p>1.1200-08-12-.04(2)5: “Are all surgical specialty availability from inside or outside the hospital – is this a 24/7 call need, or can the non-emergent subspecialties be available during certain hours (not 24/7)? Example: Dentistry (not OMFS), psych, ENT.</p> <p>2.For those subspecialties listed in the above rule that are not utilized by the trauma service, can the trauma service cover these call schedules? Example: Some centers within the state utilize ENT emergently for emergent airways/trachs, but others do not and trauma does those. Any center can still consult those services if they have them, but why is it a trauma requirement?</p> <p>3.Can the subspecialties referenced in the above rule (excluding those with a 30 minute response time) be covered by a transfer agreement if there are times in which those subspecialties are not available?</p> <p>Marissa Moyers was the TCAC representative on the EMS Clinical Issues Committee and has since retired. Need a new TCAC representative to serve.</p> <p>Meeting was adjourned</p>	<p>1. Subspecialties do not have to be onsite but must be available 24/7.</p> <p>2. All required subspecialties are to be available. Trauma surgeons cannot replace those subspecialties.</p> <p>3. No. Transfer agreements are not allowed. Subspecialties are to be available if required by rule.</p> <p>Dr. Bracken Burns volunteered to serve as the TCAC representative. Rob will forward his contact information to EMS Clinical Issues Committee administrative staff.</p>	