



State Trauma Advisory Committee (STAC) Meeting

Minutes

Date/Time: July 20, 2011
Location: High Point Regional Hospital
High Point, NC

Chair: Michael Chang, MD
Recorder: Jennifer Hinson

Members Present: Kim Bailey, Michael Barringer, Michael Chang, Thomas Clancy, Regina Crawford, Carolyn Foley, Brenda Harrington, Jennifer Hinson, Mark Johnson, Claudia McCormick, Betsy Tesseneer, Michael Thomason, Osi Udekwu, Tripp Winslow, Cheryl Workman, Jay Wyatt.

Introduction of Dr. James "Tripp" Winslow: Dr. Winslow was introduced to the group as the new Office of Emergency Medical Services Medical Director.

Trauma Registrar Representation to the STAC Executive Committee: Debra Petrarca will succeed Brenda Eggers as the representative from the registry group. It was pointed out that the by-laws of the registry, by default, make the chair the representative of the Executive Committee meeting.

April 16th Tornado Response: Dr. Roy Alson, who is the Disaster Medical Advisor for OEMS, gave an in depth discussion of the response to the tornados from his groups perspective. The NC COT, based upon their meeting earlier today, has plans to draft a letter to NC OEMS that requests the creation of a data dashboard system to look at real time availability of beds across the state and participating hospitals and trauma centers. This letter will also include within in the need for such a system to be created, using the April 16th events as an example.

Dr. Alson also stressed we bring a message to all our local disaster coordinators that if the magnitude of the state's response needs to be increased for any given event, that the local disaster coordinator should take the appropriate steps to have the ESF-8 desk notified when local resources are overwhelmed. The ESF-8 desk will get notified with all of the ESF functions when the emergency operations system is activated.

NC State Trauma Registry (NCTR): At the April meeting, it had been resolved that the group would come up with a plan to be "Foxpro-Free" over a designated timeline. The Trauma Program Manager group and the Registrar group is working on this.

This effort to go Foxpro-Free is the first step towards a coordinated approach towards improving the relationships between the individual trauma centers with Digital Innovations and obtaining a more functional state trauma registry. There is a list serve in place for North Carolina currently serves as a sounding board for registry issues, but this is not an action group.

Consideration was made to consolidate our questions at a statewide level, and approach Digital Innovations to provide a North Carolina specific customer service representative. It was pointed out that currently this is Tom Ellenbecher, but the service has been somewhat spotty.

Carolyn Foley has been working a list of questions for the DI group. Anybody that has any other questions or comments is welcome to route those questions and comments to Carolyn.

There was then a question about the possibility a monthly conference call with Digital Innovations.

Another consideration was to ask Digital Innovations to generate a data dashboard for North Carolina.

Action Plan:

1. Nadine will head a group with representation from the Trauma Program Managers, Registrars, Performance Improvement Group and COT to present an organized list of needs and a suggested plan to Digital Innovations. Among the requests will be a list of standardized reports that will encompass all the data requirements necessary to be designated as trauma center by NCOEMS and verified as a trauma center by the American College of Surgeons.
2. The Performance Improvement subcommittee will submit a list of data elements for these reports described above to go to this committee.

Research/Registry STAC Subcommittee: This group came up in the context of a discussion about the state trauma registry and the difficulty in getting useful information out of the registry for research. It was pointed out that Dr. Udekwu was the head of this committee before the broad and sweeping registry changes that occurred which have led to the registry being in its current condition. Part of this issue relates back to the issues of using Foxpro versus ReportWriter to generate information from the registry. It was felt that the trauma centers in the state needed to be Foxpro free, all using ReportWriter to "hold Digital Innovations feet to the fire" regarding the generation of meaningful reports from the registry. Currently, it is felt that Digital Innovations is using the excuse many of us are using Foxpro as the reason why meaningful reports are not generated.

Action Plan:

1. Create a state standard of data elements for research requests and reports.
2. Dr. Udekwu and Nadine are also going to review the NCTR data request procedure.
3. The Committee on Trauma will need to review the membership of the Research Review Committee before or at the time of the next meeting.