

2-15-22 RDSTF-5 Trauma Advisory Board Executive Committee Minutes

Welcome: Dr. Pappas welcomed the group and thanked all for participating.

Roll Call:

Trauma Chair/Orlando Regional: Eric Alberts, Dr. Tracy Bilski, Susan Ono, Tina Wallace
Trauma Co-Chair/Halifax Health: Rachel Driscoll
Level II Rep/Central Florida Regional/HCA: Not present
EMS Chair/Martin County (South): Chief Chris Kammel
EMS Co-Chair/ Brevard (North): Dr. John McPherson
EMS Central Rep/Orange (Central): Not present
County DOH/St. Lucie County: Clint Sperber
Acute Care Hospital/Sebastian River Medical Center: Rebecca Wilson
Extended Care/Orlando Health and Rehab: Not present
Municipal Government/City of Leesburg: Not present
County Government/Orange: Dr. Yolanda Martinez

7 of 11 voting members were present and a quorum was reached.

Ex-Officio Participating:

Dr. Peter Pappas, RTAB Executive Director
John Wilgis, Florida Hospital Association

Other Stakeholders/Guests:

Beverly Cook, CFDMC
Lynne Drawdy, CFDMC
Kate Kocevar, Florida Department of Health
Matt Meyers, CFDMC

Call to Order: Dr. Bilski called the meeting to order at 11:07 am.

Review and Approval of Minutes: The December minutes were previously distributed. Clint Sperber moved to approve the minutes as submitted and Rebecca Wilson seconded the motion. There was no discussion or opposition and the motion carried.

Executive Director's Report- Dr. Pappas stated the Trauma Advisory Board is off to a great start in 2022. He stated that the Whole Blood Committee has created a guidance document for agencies that wish to implement a whole blood program. He thanked all those who participated in the committee. They are meeting on Friday to finalize the draft and then the draft will be shared with trauma stakeholders. He stated that he is excited about the April 21 regional full scale exercise, which will include an expanded test of the regional trauma coordination center plan. He thanked Dr. McPherson for his stakeholder spotlight presentation at the December Executive Committee meeting.

CFDMC/RDSTF Update:

Clint Sperber reported there were no RDSTF updates.

Regional Medical Surge/Trauma Coordination Center Exercise: Lynne reported on the April 21 regional mass casualty exercise. She stated that hospitals are excited to have an opportunity to exercise for the first time since 2019. She reported that there is a new federal requirement to demonstrate a 20% surge in the region's staffed beds. This number would overwhelm the hospital's emergency departments. We requested and have received federal approval to allow hospitals to

request the number of victim volunteers they want to come into their emergency departments, and we will use the regional trauma coordination center to simulate the rest of the required 20% surge, including determining level of care, finding a bed placement, and finding a transportation asset.

Update on Communications Pilot: Lynne stated that we will also test the new communications products from Juvare during the April exercise, and she thanked John Wilgis and Florida Hospital Association for sponsoring the region's communications pilot. John reported that he used CARES Act dollars for the pilot. The pilot includes several products. The first is e-ICS, a hospital event management software. EMResource is used by EMS and hospitals for patient placement, alerts, and includes a bed tracking, bed availability function. Users can set up a dashboard to display information of interest. The Exchange includes GIS mapping features. A new addition is EMTrack which is a patient tracking system. He stated that the Coalition and FHA have been working for months to get users on the system and trained. We have begun biweekly practice sessions to allow users to get familiar with the system and will fully test the system during the April exercise. Lynne stated that the goal of the pilot is to demonstrate if these products can close our communications gap. If so, the Coalition will then find ways to sustain these. John stated that he has included DEM, DOH and AHCA so that they can see the power of these communication tools and hopefully be interested in implementing these statewide.

Florida Infectious Disease Transportation Network (FIDTN) Exercise: Lynne advised the Coalition is participating in this exercise with the state on March 24. An Ebola patient will present at a local hospital and the hospital will perform the frontline hospital requirements to identify, isolate, inform, stabilize and prepare for transport. The FIDTN team from Orlando Fire Department will pick up the patient from the hospital and transport the patient to Orlando Executive Airport for a simulated flight to the treatment center in Atlanta. It was suggested that the FIDTN be a future stakeholder spotlight agenda item.

Daytona International Airport Exercise: Lynne advised that the Coalition's family assistance center (FAC) response team is participating in the March 18 exercise. The scenario is a plane crash, and the airport will request deployment of the coalition FAC response team, to set up and operate an FAC until the airline takes this over.

Florida DOH Trauma Update: Kate Kocevar stated that January 18 was the first Trauma Advisory Council meeting for the year. Michael Leffler has taken a new position in community paramedicine. A new moderator and co-moderator have been elected. Committees worked on standards and put together a document for Council review; this was delayed due to COVID but was reviewed at the January meeting. The draft is out for Council and stakeholder review and Kate thanked Dr. Pappas for putting this on the FCOT website. She asked that comments be provided to her and Dr. Pappas. The American College of Surgeon publication will be out in March, and they will crosswalk that against the state draft, and send out a final draft for review. The standards are tied to a state statute and must have a listed date, which makes it difficult to continuously update. They are working with Legal on how to meet the statute while standards are being updated. Kate advised that a Florida Trauma Advisory Committee member formally resigned at the January meeting. She stated that anyone interested in serving should apply on the Governor's website, under the appointments tab. The Governor makes the appointment.

Kate reported that they are meeting with five trauma centers for surveys in 2022-2023 and are planning how to move forward with the site survey process. She stated that the pandemic taught us that some things can be done virtually. The ACS surveys are going virtual and DOH is looking at a hybrid model, with medical records conducted virtually and some face-to-face connection. She stated that this new process was reviewed yesterday with the five centers. They have also streamlined the process for facilities to upload documents.

Kate advised that over the past two years, ESO, a large company that started with EMS software, has purchased several trauma registry programs. Information on this was sent out. The Florida program will sunset over the next three years, and we will receive a new program. Additional information on this will be forthcoming after the April conference.

Dr. Pappas thanked Kate for the comprehensive report.

Committee Updates:

System Support Committee: Tina stated the committee had a very interactive call this morning, with seven participants. All programs are doing the best they can virtually, with some getting back into schools. She stated that Arnold Palmer Hospital had 81 participants in a recent car seat program. Counterfeit car seats are a big issue. The Best Foot Forward program is underway. Most are working on burn prevention week activities. She stated that there is exciting news from St. Lucie County. Land has been donated and they are getting a new Safety Village through the Safe Kids Coalition.

Preparedness Committee: Eric stated that the group meet on Monday and planned the regional trauma coordination center portion of the regional exercise. We have a good plan in place for managing the required 20% surge through the trauma coordination center so as not to overwhelm the hospitals. He stated that Dr. McPherson has volunteered to be the medical officer in the exercise. The exercise should identify any gaps or deficiencies and help us improve the plan.

Clinical Leadership Committee: Dr. McPherson stated that their committee also discussed the exercise. They also had an update on the whole blood committee progress, and he gave kudos to Chief Kammel and that committee for developing a draft guidance document. He stated that he presented on the new Brevard County ultrasound for EMS project. They have purchased two devices and will begin training paramedics in two stations with higher volume of significant trauma. He thanked Dr. Bilski and Dr. Zuver on their feedback on trainings and use of mannequins. Chief Kammel stated they have been using ultrasound in training for several years now and he will share their experience.

Whole Blood Ad Hoc Committee: Chief Kammel stated he has completed a draft methodology for pre-hospital agencies who wish to engage in this, including equipment, an example grant application, and a step-by-step protocol to implement this. He thanked Dr. Pappas and Lynne for their support. Dr. Pappas thanked Kammel for leadership. Lynne will send the draft to the Whole Blood Committee who will meet and finalize on Friday. The draft will then be sent out to all trauma stakeholders for review and comment, and then ask the Executive Committee to vote via email so that the final document can be presented in April.

Old Business: There was no old business raised.

New Business: There was no new business raised.

Executive Committee and General Meeting: April 14, 2022

Adjourn: The meeting adjourned at 11:50 am.