4-14-26 Trauma Executive Committee Minutes

Roll Call:

Trauma Chair – Orlando Regional/Orlando Health: Jeana Swain, Eric Alberts,

Trauma Co-Chair – Halifax/Halifax Health: Rachel Hamlett

Level II Rep – Lake Monroe Hospital/HCA: Rick Ricardi, Melissa Ell

EMS Chair – Martin County (South): Christian Montoya

EMS Co-Chair – Brevard (North): Dr. John McPherson

EMS Central Rep – Orange (Central):

County DOH – St. Lucie County:

Acute Care Hospital – Nemours: Kari Rubles, Mallory Danner

Extended Care – Advanced Rehabilitation Institute: Annette Seabrook

Seven of nine voting members were present for a quorum

Ex Officio
Raul Pino, Orange County
John Wilgis: FHA

Other Stakeholders:

Ayanna Baker
Bernie Maldonado
Dr. David Rubay
Eddie Brooks
Gene Buerkle
J. Henderson
Jenn Hulse
Julie Frey
Justin Narvaez
Karissa Perry
Kimberly Waters
Lily Huong Nguyen
Lina Chico
Lynne Drawdy
Michelle Rud
M. Wolcott
Dr. Patty Byers
Dr. Peter Pappas
Robert Kirk
Dr. Scott Zenoni
Shauna Young
Stacy Brock
Suzi Mitchell
Olive Gaye

Call to Order: Jeana Swain called the meeting to order.

Review and Approval of Minute: Jeana stated that the February minutes were previously sent out and asked if there were any changes or discussion. A motion was made and seconded to approve the minutes. There was no discussion or opposition and the motion carried.

CFDMC/RDSTF Update – CFDMC Exercise:

- **April 9th MCI Exercise**: Lynne advised that the exercise is the largest hospital-based exercise in the country, and this year was our largest exercise ever, partnering with Region 4. Almost 100% of the hospitals in Region 5 participated, with more than 60 hospitals playing full scale with 2,200+ students as victim volunteers going into hospital emergency departments and more than 30 hospitals and free standing emergency departments playing functional with 500 triage tags. There were five emergency management offices playing full scale, and the FBI and the National Weather Service also played in the exercise. The first

attack in the scenario was an attack on the FBI headquarters in Tampa and they COOPed during the exercise. The FBI was also in the Orange County EOC. About 30 hospitals in Region 4 participated.

At about 10:30 am, there was a real world event with a patient committing suicide in the ambulance bay at a hospital in Brevard County. No students were present in the ambulance bay at that time. The hospital stopped exercise play and students were released. About 10 minutes later we heard from another Brevard County hospital that shots were heard, and just after we heard about an active shooter at a St. Pete hospital. At that point, we called a halt to the exercise and transported the students back to their schools. Just after that, there was another real world event with a patient presenting with a gun at an Orlando hospital. We were disappointed with having to end early but felt that the lessons learned from the unfolding real world events were significant. We are now working on gathering data through surveys with participants and partners and a formal debrief on May 8th and will then prepare an after action report which we will share with the trauma stakeholders. Eric Alberts stated that there are mass casualties happening around the nation and the world and these exercises are so important in ensuring that hospitals are ready to respond. He stated that it can and has saved lives in the paste. He thanked the Coalition for coordinating this event.

Update on Cybersecurity/Current Threat Environment/CFIX: Eric stated that the Central Florida Intelligence Exchange released a safety briefing with numerous types of threats in our region, such as active shooters, critical infrastructure attacks, violent extremism, anti-government (which we used in the exercise last week), and cyber attacks which are happening frequently. He stated that we need to continue to remain vigilant and we need to reinforce the "see something, say something" campaign.

FHA Updates/Legislative Updates: John Wilgis stated that on top of our ongoing vigilance with domestic threats, there are also threats from overseas, including cyber attacks and we need to continue to be vigilant. In addition, there is a threat of supply chain disruption. Petroleum goes into about every product and in healthcare this is not just fuel, it's IV tubing, medication bottles, gloves, PPE, and there is significant concern over extended supply chain disruptions form the blockade and this could extend from two to five years and we could see increased costs. He will continue to share information on this. The legislative session ended in March and there were 1,925 bills filed, and 237 passed both chambers. FHA tracked 270 of the bills related to hospitals or impacting hospitals and did a significant amount of work on these. One thing they are paying attention to is legislative turnover and those whose terms are ending; new members may not have a lot of experience or knowledge of hospitals and FHA is preparing to educate these. The legislature is required to pass a budget and this year they adjourned without a state budget; there is a focus on a lean budget for this year. The potential tax cuts, decreases to Medicaid, state employee health insurance, the big beautiful bill impacts and SNAP impacts, shortfalls in AIDS assistance – all of these could impact hospitals. There is a proposal to end property taxes and there are concerns about the impact from this. We are expecting special sessions regarding the budget and property taxes. Next week there is a special session on congressional redistricting. FHA has had ongoing work around payor accountability (keeping healthcare insurance companies accountable for contracts with providers, denials, etc.). There is more than $3.9 billion in reimbursement to hospitals that is over 30 days. FHA is also looking at issues such as medical smoke, vaccine requirements, and tort reform. They are also monitoring artificial intelligence definition, legislation. investors and strategies, etc. He offered to have his Government Relations do a more detailed report on state or national policy and legislation.

DOH Update: Gene Buerkle stated that there will be a trauma advisory council meeting on June 4th at 4 pm Broward County Convention Center in Ft. Lauderdale (in person only). A survey was sent out to solicit topics. The agenda will be sent out in advance. He encouraged all to register on ReadyOps to get on their mailing list for Trauma meetings and updates. They sent out a reminder member regarding the standard on quality improvement from 2019 which has an alternate reporting criteria by participating in TQUIP and providing presentations or poster

sessions every three years. He stated that John provided a great update on legislative issues. Most of the bills they were monitoring died.

Committee Updates:

- System Support Committee: Lina Chico provided an update from their meeting this morning, including updates from Orlando Health, Holmes, HCA Lawnwood, and Nemours. They discussed top mechanisms of injuries, Stop the Bleed activities, falls prevention programs, helmet safety related to e-bikes, teen drivers, etc. All are preparing for Stop the Bleed Day on May 21st.

- Clinical Leadership Committee: Dr. McPherson stated that they received an update on the exercise, discussed whole blood programs, and discussed concerns re e-bikes.

- Extended Care Committee: Annette Seabrook stated the committee met Monday and they are still struggling with membership and attendance. They did reach out to other counties and there is no other extended care group that we can model. They are working with Florida Hospital Association Rehab Council to discuss what rehab is, and they are working with a group on issues such as access to care. They will want to get input from the trauma stakeholders in five areas to improve access. There was discussion regarding difficulty in tracking data such as trauma length of stay and readmission and wanted to know if trauma centers can share that data. They discussed compiling a list of rehab facilities and specialties and other resources such as brain and spinal cord injuries. Jeana asked when their meetings are held. They meet the day before the Executive Committee at 1 pm. Lynne offered to assist in putting out a survey to the trauma centers to get their input on gaps or ways the committee can support them. Annette will get with Lynne on this.

Executive Director's Report: Dr. Pappas thanked John Wilgis, Eric Alberts and Gene Buerkle for great updates. He thanked Annette for her efforts in getting the extended care committee up and running.

- Field Transfusion programs for EMS: FCOT surveyed trauma centers on this and they will look at the May 1st meeting. He reminded all that Chief Kamel in Martin County worked with the Trauma Advisory Council to put together a whole blood toolkit.

- FCOT Virtual Speaker April 21st RMOCCs and LSCOs: He stated that the webinar is scheduled and Dr. John Armstrong will be keynote speaker. We will send out the invitation.

- FCOT Visiting Professor April 27th – May 1st: Dr. John Holcomb will be visiting trauma centers throughout the state, including Sacred Heart, Shands Gainesville, Orlando Regional, St. Mary's Hospital and Memorial Hollywood. CMEs are available. Brian Hart has the link to attend.

- Guest Speaker for June - Scott Wilson BA EMT-P, Metrolina Trauma Advisory Council (Charlotte, NC): Dr. Pappas has invited Scott Wilson to share their efforts, lessons learned and best practices.

New Business: John Wilgis stated FHA is working with EMSC on pediatric readiness. He will keep this group informed.

Next Executive Committee Meeting June 9, 2026

Adjourn: There was a motion to adjourn, second, and no opposition.

4-13-26 Trauma Clinical Leadership Committee Minutes

Participants: Ayanna Baker, Dr. Christian Zuver, Dr. David Rubay. Dr. Desmond Fitzpatrick, Jeffrey Katz, Dr. John McPherson, Dr. LeeAnne Lee, Lynne Drawdy, Dr. Peter Pappas, Dr. Robert Ford, Dr. Scott Zenoni, Dr. Tracy Zito

Welcome/Call to Order: Dr. Pappas welcomed all to the call. Dr. McPherson called the meeting to order.

Review and Approval of Minutes: Dr. Zuver moved to approve; there was no discussion or opposition and the motion carried.

CFDMC Update:

- **April 9th MCI Exercise**: Lynne advised that the exercise was challenging. The Region 5 exercise is the largest hospital-based exercise in the country, and this year was our largest exercise ever, partnering with Region 4. Almost 100% of the hospitals in the region participated, with more than 60 hospitals playing full scale with 2,200+ students as victim volunteers going into hospital emergency departments and more than 30 hospitals and free standing emergency departments playing functional with 500 triage tags. There were five emergency management offices playing full scale, and the FBI and the National Weather Service also played in the exercise. The first attack in the scenario was an attack on the FBI headquarters in Tampa and they COOPed during the exercise. The FBI was also in the Orange County EOC. At about 10:30 am, there was a real world event with a patient committing suicide in the ambulance bay at a hospital in Brevard County. No students were present in the ambulance bay at that time. The hospital stopped exercise play and students were released. About 10 minutes later we heard from another Brevard County hospital that shots were heard, and just after we heard about an active shooter at a St. Pete hospital. At that point, we called a halt to the exercise and transported the students back to their schools. Just after that, there was another real world event with a patient presenting with a gun at an Orlando hospital. We were disappointed with having to end early but felt that the lessons learned from the unfolding real world events were significant. We are now working on gathering data through surveys with participants and partners and a formal debrief on May 8th and will then prepare an after action report which we will share with the trauma stakeholders. Dr. Zito stated that the threat in Orlando was credible and was a military veteran with PTSD; he was apprehended without anyone being harmed. She was glad that we stopped the exercise when we did. Lynne stated that the FBI stated that it was the right call to stop the exercise and they felt that we learned more from these events than if we had continued normal exercise play.

- **Future planning for MCI events**: Dr. Zito is the champion for this and she is currently reviewing a 200 slide report from the national RMOCC workgroup who held summit in Washington DC. She will be meeting with her FCOT disaster committee tomorrow and will share this information. She said that it appears they are separating this into separate plans for adults and pediatrics. She stated that she feels this may come with structure and funding.

Old Business:

- **EMS engagement:** Dr. Zuver stated this is a work in progress.

- **E-bikes:** Dr. McPherson stated that he heard EMSAC was going to join the national e-bike compact. Dr. Pappas stated that Florida has expressed interest in joining the national EMT/paramedic compact. He stated that FCOT has sent out a survey to get an idea of the volume of and magnitude of the burden of injuries from e-bike and scooter crashes. Dr. Rubay stated they are seeing a significant increase and feels there is a need to educate lawmakers on this issue. Dr. Pappas agreed that we need to advocate and stated that FCOT is gathering data to inform a coordinated effort at the state and local levels. Dr. Zenoni stated they are seeing an increase, with one on almost every shift.

- **Whole Blood Programs:** Dr. Zuver stated their program continues and he is happy to assist others who are interested. Dr. Pappas stated that it appears the line item for funding to support this was removed from the state budget. He stated that FCOT has surveyed state trauma centers with a 70% response and they will present at the May meeting on relationships between hospitals and EMS. Dr. Pappas stated that Dr. John Holcomb will be at Orlando Health to speak on whole blood and field transfusions and will speak at the May EMS meeting. Dr/ Fitzpatrick stated that there is money for whole blood programs from US Department of Transportation - See Safe Streets and Roads for All Grants or reach out to Ty Carhart at FDOH.

  Dr. Katz from St. Cloud Fire representing Dr. Baker, stated they are looking at implementing a whole blood program and have been approached about trauma gel, and asked if anyone uses this or has experience. Dr. Zito stated that the FCOT does not support this. She knows some agencies are using this but does not know of any surgeon who does and she has not had a patient with this. Dr. Pappas stated that he has heard there are some research projects but he feels this is in the exploration phase. Dr. Zuver stated that there is no human data on this. Dr. Ford stated that Brevard looked at this but stopped.

New Business: None

Next Meeting **June, 2026**

4-14-26 Trauma System Support Committee Meeting

Updates were provided from ORMC, Arnold Palmer, Holmes, HCA Lawnwood, and Nemours. The group discussed top mechanisms of injuries, Stop the Bleed activities, falls prevention programs, helmet safety related to e-bikes, teen drivers, etc. All are preparing for Stop the Bleed Day on May 21st.

4-13-26 Trauma Extended Care Committee Minutes

Participants: Annette Seabrook, Fanley Romelus, Matt Meyers

Annette called the meeting to order at 1:03 pm and stated that the minutes were sent out from the last meeting. The group agreed to approve these as submitted. Following the last meeting, Lynne reached out and none of the other Florida trauma agencies have extended care committees.

The meeting focused on the Extended Care Committee's challenges and potential improvements for post-acute care for trauma patients. Annette and Fanley discussed the committee's limited representation and difficulties in tracking unplanned readmissions for trauma patients across different care settings. They explored ways to gather more data, including compiling lists of common diagnoses requiring post-acute care placement and rehab facility certifications. Fanley shared updates about Health Central Park's new high-acuity unit opening May 1st, which will better serve complex trauma patients. The committee also discussed potential collaboration with trauma centers on injury prevention and brain injury/spinal cord injury resources. Matt provided an overview of Pulsara and EM Resource systems for information sharing across disciplines, though these were not immediately applicable to the committee's current focus areas.

Next Steps

1. Annette will provide an update at the Executive Committee and pose questions (e.g., populations lacking access to post-acute care, important data points such as readmissions, wound care, infections, and the value of compiling resources such as BSIP, support groups and facility lists.

2. Annette & Lynne will solicit a list of questions from committee members to send to trauma centers.

3. Look into compiling a list of rehab facilities and skilled nursing facilities in the area and their relevant certifications/abilities for next discussion

4. Continue efforts to recruit more dedicated members to the committee.