



Indiana
Department
of
Health

INDIANA TRAUMA CARE COMMISSION

August 7, 2026

Email questions to: indianatrauma@health.in.gov

OUR MISSION:

To promote, protect, and improve the health and safety of all Hoosiers.

OUR VISION:

Every Hoosier reaches optimal health regardless of where they live, learn, work, or play.



AGENCY PRIORITIES

1. Promote Maternal and Infant Health Outcomes
2. Prevent Chronic Disease
3. Improve Data Quality and Transparency



Housekeeping

- Please take breaks as needed.
- There will be opportunity for Q & A during the meeting.

This meeting has been public noticed.

Welcome and Introduction

Lindsay Weaver, M.D., FACEP

State Health Commissioner

IDOH Leadership - Welcome



Dr. Eric Yazel

- Chief Medical Officer for Public Health Practice



Dr. Emily Fitz

- Chief Medical Officer for Clinical Health

Rural Health Transformation Program

Brian Busching, MPH

Director, Trauma and Injury Prevention

GROW Statewide Initiatives

1. Growing Care Coordination: Medical Operations Coordination Center
2. Growing Community Connections through Indiana 211
3. Growing Improved Patient Outcomes - Interoperability and Technology
4. Growing Pediatric & Obstetric Readiness in Rural Emergency Departments
5. Growing Cardiometabolic Health Standards of Care in Rural Indiana
6. Growing Access to Hospital Post-Discharge Medications
7. Growing Specialty Provider Access through Expanded Teleconsult
8. Growing Telehealth Access and Infrastructure
9. Growing our Rural Health Paraprofessional Workforce
10. Growing Clinical Training and Readiness
11. Growing our Rural Behavioral Health Workforce

I1: Growing Care Coordination – Medical Operations Coordination Center (MOCC)

Executive Steering Committee – presentations from OR and STRAC, planning presentation from AL and AZ

MOCC RFP – includes Service and System components, establishes an advisory committee to guide implementation

- Preliminary Awards
 - Patient Flow Innovations (BlackBox Healthcare Solutions)
 - Collaborative Fusion, Inc (Juvare)
 - Communicare Technology (Pulsara)
- Next Steps:
 - Execute Agreements
 - Begin planning/stakeholder engagement
 - System Architecture
 - MOCC Advisory Committee

- **Activities Focus**

Hiring and onboarding operational staff and establishing Advisory Committee

Planning for 1) implementation of Healthcare Emergency and Hospital Capacity System and 2) pilot programs, including identification of pilot areas

Operationalize and begin utilization of Healthcare Emergency and Hospital Capacity System for facility status and patient tracking

Implementation of MOCC utilization within pilot areas (TBD) for interfacility transfers (7/31/2027)

- **Future Activities**

Implementation of MOCC utilization within pilot areas (TBD) for behavioral health triage

All Hospitals/EMS submitting data to the Healthcare Emergency and Hospital Capacity System

I4: Growing Pediatric & OB Readiness in Rural Emergency Departments

Past

- Finalized agreements with IDHS/EMS and IU School of Med.
- Identified **143 pre-hospital** entities who qualify for the I4 grant
- Identified **56 rural EDs** who qualify

Present

- Working on BP2 deliverables and budget
- Establishing contracts for IDHS/EMS
- Updating CMS language to better demonstrate workplan
- Launch OB readiness plan to hospitals
 - First of its kind

Future

- Amend contract with IUSM to incorporate BP2 work
- Complete readiness assessment for OB/PEDs for EDs and Pre-hospital
- Begin analysis of assessment and work on messaging.

TCC - Operations

Current TCC Vacancies

- Prospective members being reviewed by Governor's Office
- Recommendations shared

Ethics Training

- Pursuant to 42 IAC 1-4-1(b)(2), each agency's appointing authority shall ensure that all state employees and special state appointees with the agency complete ethics training.
- **Due by September 10**

ACS COT - RMOCC Standards Feedback

- [Survey Feedback](#) – shared with TCC and stakeholders, was due 8/6

Welcome Central RCC!

Taylor Eck, RN



North Trauma Regional Advisory Council Update

JEN HOMAN

TRAUMA PROGRAM MANAGER, FRANCISCAN CROWN POINT

NTRAC Strategic Plan Progress

- Dr. Bill Beck, Trauma Medical Director at Parkview Health, is the new Vice Chair!
- N-TRAC PI subcommittee has decided to focus on under triage through an EMS awareness campaign and looking at data missingness in our registry.
- Initial planning meeting was held for our regional disaster drill.
- Continue to work with TechServ on website development.
- Planning two cadaver labs for the fall in districts 1 and 3.
- Developing a framework to incentivize hospitals to not only submit their data to the trauma registry, but also make sure it is correct and accurate data by utilizing their data quality reports

NTRAC Quarterly Report

July N-TRAC meeting participation

19 of 45 hospitals represented

5 of 5 trauma hospitals

HCC representation (1 of 3)

EMS district manager representation

Rehabilitation representation

Budget spenddown

Initial budget for FY27: \$741,883

Amount spent: \$4,904

Amount remaining: \$736,979

NTRAC Quarterly Report - FY26 Wrap Up

Course	Number of students
TNCC	177
ENPC	90
ENPC Instructor	1
TNCC Instructor	1
ATLS Instructor	2
ATLS	1
ATCN	7
ICD-10	6
AIS-15	5
Rehab education course	2

Other Funded Projects:

- Thermoreflective caps for Parkview EMS
- Point of care ultrasound for Elkhart
- Three trauma manikins (one for each region, housed at Franciscan Crown Point, Memorial, and Parkview Regional)
- Equipment for a critical access hospital to host their own TNCC courses
- Equipment for a Stepping On injury prevention course
- Car seat technician training and car seats
- Stop The Bleed kit supplies (chest seals and tourniquets)
- Regional website
- Contracting with third-party company to conduct a regional disaster drill
- Trauma registry data reimbursement

Questions?

Jen Homan

NTRAC Treasurer

Jennifer.Homan@franciscanalliance.org



Central Trauma Regional Advisory Council Update

TRACY SPITZER

TRAUMA PROGRAM MANAGER, IU RILEY CHILDREN'S
HOSPITAL

CTRAC Strategic Plan Progress

Changes in CTRAC Officer positions

- Tracy Spitzer, Trauma Program Manager at IU Riley is new Chair
- Dr. Chelsea Horwood, Assistant Trauma Medical Director at IU Methodist is new Vice-Chair

Started report outs from previously awarded funds

- Share outcomes and lessons learned

“Best Practice Spotlight” segment- share information on trauma topics across continuum of care

All CTRAC facilities completed NPRP pediatric readiness survey!

Recent Approved Initiatives include:

- Bring first Pediatric Trauma Across the Care Continuum (PTACC) course to Indiana!
- Stop the Bleed kits/trainers
- Hospital Violence Intervention Program
- Child Passenger Safety Seat Resources
- Fall Prevention Program
- Peds Simulation Mannequin for regional education

CTRAC Quarterly Report

July CTRAC meeting participation

13 of 43 (30%) non-trauma hospitals

12 of 13 (93%) trauma hospitals

Various EMS/FDs throughout region represented

HCC representatives

Budget spenddown

FY26: Exhausted All Funds.

FY27:

- Initial budget: \$1,159,430
- Amount allocated: \$322,123.80
- Amount remaining: \$837,306.20

CTRAC Quarterly Report – FY26 Wrap Up

Course	Number of Students
TNCC	394
TNCC Instructor	28
ENPC	125
ATLS	97
ATCN	7
PHTLS	8
RTTDC	13
MHFA	25
TCAA Finance	3
ABLS	64
BDLS	41
ICD-10	10
Cadaver Lab	124
TOPIC	5

Other Funded Projects:

- Point of care ultrasound for Elkhart
- Trauma mannequins – for hospital and EMS training
- Falls Prevention support
- Car passenger safety seat technician training and car seats
- Stop The Bleed kit supplies (chest seals and tourniquets) and trainers
- Trauma Symposium support (adult & pediatric)
- Pre-hospital whole blood equipment
- Hospital Violence Intervention Program
- Trauma registry data stipend for non-trauma centers
- Educational Infographics and Resources for best practice
- CTSR exam preparation course

Questions?

Tracy Spitzer

CTRAC Chair

tspitzer@iuhealth.org



South Trauma Regional Advisory Council Update

DR. DAVID WELSH

SURGEON, MARGARET MARY HOSPITAL

STRAC Strategic Plan Progress

- **Advisory Committee Identified Three Regional PI Goals this FY**
 1. Increase % of high-risk patients with EMS Scene Time <10 minutes
 - Awareness Infographics, EMS Cadaver Lab
 2. Decrease % of data missingness
 3. Decrease % of admitted patients with any hospital event
 - Share Best Practices for Care of Delirium Pts
- **Community Outreach Initiative to Assemble and Distribute STB Kits**
- **Request for Logo Development for Increased Awareness of Regional Trauma Efforts**
- **Shared Regional High-Fidelity Simulator Delivered**
 - Targeting non-trauma centers to schedule simulation with developed scenarios, a skills checklist & debriefing tool
 - Dual focus to improve front-line data at the time of injury
- **Developed Trauma Micro Quizzes to Share with Non-Verified Hospital Front-Line Staff**
- **Collaborating with District HCCs to not Duplicate MCI efforts**
- **All Southern Region Hospitals are Actively Submitting 2026 Trauma Data**

STRAC Quarterly Report

July STRAC Meeting Participation

10 of 20 non-trauma hospitals joined

5 of 5 trauma hospitals joined

EMS managers for all districts

11 EMS/FDs throughout region

1 HCCs represented

Budget Spenddown

FY26: Exhausted All Funds

Initial FY27 Budget: \$598,687

Amount Allocated: \$2,450

Amount Remaining: \$596,237

STRAC Quarterly Report - FY26 Wrap Up

Course	Number of Students	District Safety Days (Districts 8, 9, 10)	Number of Items Distributed	Other Projects	
TNCC	114	Bicycle Helmets	2340	Prehospital Blanket Warmers	125
TNCC Instructor	4	Reflector Lights	2250	Trauma Simulator- Full Body	1
ENPC	27	Fall Prevention Magnets	1000	Prehospital Blood Programs	6
ENA Triage Curriculum	23	Injury Prevention Coloring Books	3000	Stop the Bleed Trainers	3
ATLS	2	Gun Locks	460	MCI Inflatable Trainers	150
ATCN	26	Life Jackets	306		
TCRN review	149	Car Seats	222		
OB Emergencies	18	Grab Bars	250		
PHTLS	40	STB Kits	420		
ITLS	24	Reach Aid Devices	200		
ITLS Instructor	19	ID Fingerprint Kits	200		
ABLS	8	Mini First Aid Kits	600		
TECC	14	Fire Blankets	100		
<u>FOAMfrat</u>	47	DOT Certified ATV Helmets, Goggles, Gloves Adult/Child	40		
Trauma Registry	4	BAC Goggles	2		
ICD-10	19	Various Injury Prevention Flyers			
AIS-15	11				
Cadaver Lab	68				

Questions?

David Welsh

STRAC Co-Chair

djwelsh_1980@yahoo.com





INDIANA EMS State Update

Dr. Eric Yazel, State EMS Medical Director/IDOH CMO

August 2026



EMS and GROW

[About](#)[Regional Grants](#)[GROW Initiatives](#)[Contact](#)

Initiative #1 -- Medical Operations Coordination Center (MOCC)

Initiative #3 -- Growing Improved Patient Outcomes Through Enhanced Interoperability

- Could include EMS care report integration into EHR
- Includes MIH incorporation into data including a data platform for MIH and MIH liaisons.

Initiative #4 – Pediatric and Obstetric Readiness in Rural Emergency Departments

- IDHS to conduct a needs assessment of EMS Prehospital Pediatric Readiness Project
- IDHS to conduct a needs assessment for training and equipment for EMS agencies related to OB care.

Initiative #12 -- Make Rural Indiana Healthy Again Regional Grants (eight regions)

- Mirrored after the Federal RHTP concept with sending money to regions for one single, unified regional application.
- The grants will require collaboration across hospitals, federally qualified health centers (FQHCs), mental health providers, community-based GROW: Cultivating Hoosier Health | Page 43 Section 3: Proposed Initiatives and Use of Funds organizations, local health departments, schools, the business community, and other key players in the delivery of local healthcare.

OPERATION READY

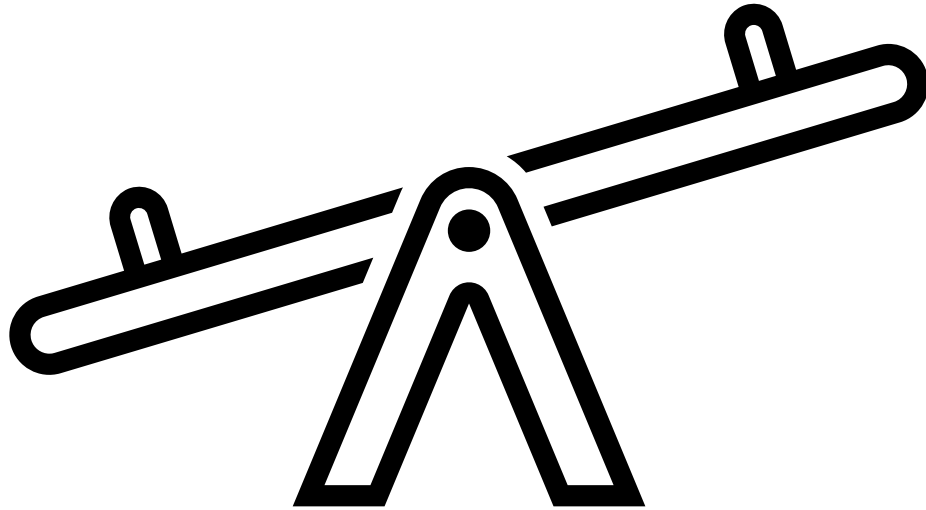
Obstetrics, Pediatrics, EMS Rural Emergency Department Readiness

- Next Steps

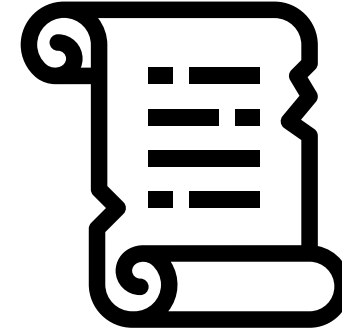
- Actual Survey planned in the next few months.
- While survey has written questions, the actual survey will be done either virtually or in-person for most organizations in order to better discuss and understand the readiness environment and ensure accuracy.



EMS Rules Discussion



The update the Field Triage Scheme is in the draft packet



- Goal for 2026 is revisions of the “EMS Rule Re-Write” in progress for many years and approved in draft form in 2025.
- However, we need to balance the need to improvements & clarifications with the directive to look for ways to streamline and reduce rules that both the Governor and the Legislature support.



**INDIANA EMERGENCY MEDICAL SERVICES COMMISSION
NONRULE POLICY DOCUMENT**

TITLE: EMS – Do Not Resuscitate Devices

DOCUMENT #: 2026-1 – EMSC

DATE ADOPTED: March 13, 2026

ADOPTED BY: Indiana Emergency Medical Services Commission (EMSC)

Overview

The Indiana Department of Homeland Security (IDHS) and the Indiana EMS Commission develop this policy to provide guidance on Do Not Resuscitate devices and recognition by field clinicians.

Background

This policy addresses identification devices for do not resuscitate (DNR) orders.

[IC 16-36-5-17](#) assigns the Indiana EMS Commission with developing out of hospital DNR identification devices.

Policy

- A. The Indiana EMS Commission recognizes and authorizes any field clinician to recognize any medical DNR identification device, regardless of vendor, that meets the following standards:
1. The device must be a bracelet or necklace.
 2. The device must be inscribed with all the following elements at a minimum:
 - a. the declarant's name;
 - b. the declarant's date of birth; and
 - c. the words "Do Not Resuscitate".
- B. Because [IC 16-36-5-17](#) requires an actual DNR declaration and order meeting the statutory requirements, therefore only a bracelet and necklace that complies with the foregoing and issued based upon an actual DNR declaration and order will be accepted. Any vendor shall produce the actual DNR declaration and order upon request by an EMS provider if the DNR order is recognized and relied upon in the prehospital setting.
- C. Because of the time constraints related to cardiac arrest and a need for timely determination of DNR status, a field clinician may rely upon a DNR bracelet or necklace with the above elements when acting in good faith. The actual DNR declaration may be requested from the vendor post-response.

Replaces Policy Document: New

Posted: 03/25/2026 by Legislative Services Agency

**Non-Rule Policy
on DNR devices
has been
published
(3/25/2026) and is
active after the
March 13, 2026,
EMS Commission
approval.**



FEDERAL REGISTER

The Daily Journal of the United States Government



Ⓡ Rule

Registering Emergency Medical Services Agencies Under the Protecting Patient Access to Emergency Medications Act of 2017

A Rule by the Drug Enforcement Administration on 02/05/2026



PUBLISHED DOCUMENT: 2026-02288 (91 FR 5216)



PDF



Document
Details



Document
Dates



Table of
Contents



Related
Documents



Public
Comments

DOCUMENT HEADINGS

Department of Justice
Drug Enforcement Administration
21 CFR Parts 1300, 1301, 1304, 1306, and 1307
[Docket No. DEA-377]
RIN 1117-AB37

AGENCY:

Drug Enforcement Administration, Department of Justice.

ACTION:

Final rule.



Indiana Paramedic Providers Holding an Indiana CSR

Indiana CSR: 217 ALS Organizations



EMS District Forums - 2026

North	Thursday, June 25, 2026, 0830-1400 CST Health Foundation of La Porte, 140 E. Shore Parkway, La Porte IN 46350
Northwest	Thursday, August 6, 2026, 0830-1400 EST Franciscan Health Learning Center, 1501 Hartford St., Lafayette, IN 47904
Northeast	Thursday, July 9, 2026, 0830-1400 EST Central Christian Church, 500 Macgahan St, Huntington, IN 46750
Central @ MADE	Thursday,, May 21, 2026, 0830-1400 EST MADE, 1610 Reeves Rd., Plainfield, IN 46168
Central @ IFCA Fire & EMS Leadership Conf. ** Abbreviated Version	Thursday, September 10, 2026, 1330-1430 Embassy Suites Noblesville, 13700 Conference Center Dr., Noblesville, IN 46060
East	Thursday, October 8, 2026, 0830-1400 EST Reid Health, 1100 Reid Pkwy, Richmond, IN 47374
West	Thursday, October 22, 2026, 0830-1400 EST Landsbaum Center for Health Education, 1433 N. 6 ½ Street, Terre Haute 47807
Southwest	Thursday, September 17, 2026, 0830-1400 CST Vincennes Univ. Gibson County is 8100 US Hwy 41 Fort Branch, IN 47648
Southeast	Thursday, August 20, 2026, 0830-1400 EST Redeemer Lutheran Church, 504 N Walnut St, Seymour, IN 47274 (back entrance)





EMS District Forum Schedule of Events

0830-1150	Indiana State EMS Updates
1150-1200	Indiana Emergency Services for Children Update.
1200-1230	Lunch: Provided by the Indiana EMS Association
1230-1245	Indiana EMS Association overview and project review
1245-1400	Breakout Sessions 1) Medical Direction / Hospitals; 2) Mobile Integrated Health 3) EMS Education and 4) Pediatric Emergency Care Coordinators (PECC)

All times will be local time zone.

- All sessions count for EMS continuing education.
- Attend part or all of the sessions.
- Please register in your ACADIS account for attendance counts and space planning. Under “Training and Events” tab then select “Browse or Sign up For Training” and then filter “District Forum”
- No registration/participation fees.



HAVE FEEDBACK?

We want to hear from you!

Kraig Kinney kkinney@dhs.in.gov

Dr. Eric Yazel eyazel@health.in.gov

Trauma System Planning Subcommittee

Erik Streib, MD, Co-Chair

Trauma Medical Director, Eskenazi Health

Andy VanZee, Co-Chair

Vice President of Regulatory & Hospital Operations, IHA

Trauma Planning (Aug 5th)

Trauma System Financing

- Recommend Requesting at Current Levels
- Encourage Non-reverting Fund as Part of 2027 Legislative Cycle
- Develop Plans for Long-Term Sustainability Beyond State Line Item

Trauma Regional Advisory Committees

- Discussed Funding Pathways and Sustainability on TRACs
- Recommend Updated Naming Convention (Vote Requested)

RFA Proposals

- Need to Garner Additional Concepts to Ensure Current Budget Allocations

Trauma Planning (Aug 5th)

Trauma System Designation

- Reviewed Possible Expansion Sites
 - Seymour, New Albany, Columbus, Greenfield, Warsaw, Valparaiso
- Discussed ACS Level 4 Standards and Applicability
- Discussed Draft In-Process Review Forms

Regional Medical Operations Center Coordination

- Update on RHTP RMOC Initiatives
- Discussed Role of TCC in RMOC efforts

Trauma Planning (Aug 5th)

Verification Activity since last meeting

Good Samaritan Hospital – Vincennes

- Renewal of level 3 adult – 4/28/2026
- One year verification – 6/24/2027

Franciscan Health- Indianapolis

- Renewal of level 3 adult – 5/20/2026
- Renewed through 5/10/2027, corrective action review must be done by 5/21/2027

Lutheran Hospital of Indiana- Fort Wayne

- Renewal of level 2 adult and Peds through 3/3/2026 (site visit was 2/3/2025)
- Corrective action must be submitted by 2/4/2026
- Renewed through 3/3/2028, peds & adult

Ascension St. Vincent Evansville

- Renewal of L2 adult and peds- 6/11/2025
- L2 peds extended one year through 8/24/2026
- L2 adult corrective action corrected, verified through 8/24/2028

Trauma Planning (Aug 5th)

Verification Activity since last meeting

Franciscan Health Lafayette

- Renewal L3 adult verification- 10/21/2025
- Renewed through 12/15/2026
- Corrective action complete, verified through 12/15/2028

Eskenazi Health

- Renewal L1 adult verification – 8/24/2026

Memorial Hospital – South Bend

- Renewal L2 adult verification – 9/23/2026

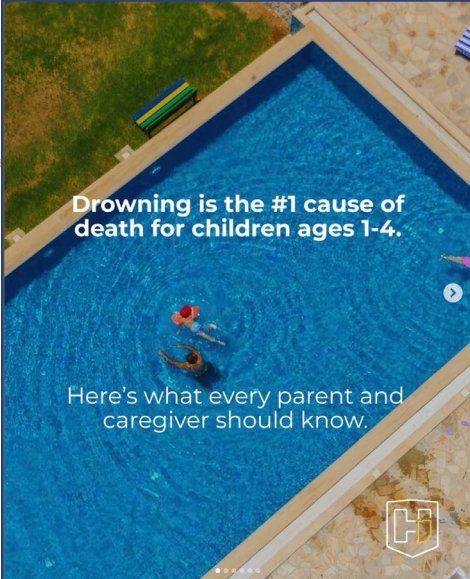
Trauma Education & Outreach Subcommittee

Jay Woodland, MD, Co-Chair
Deaconess Hospital

Matt Landman, MD, Co-Chair
Trauma Medical Director, IU Riley

Education & Outreach Subcommittee

- Meeting 6.3.26
 - Ongoing work on injury prevention activities map
 - Social media awareness
 - Trauma Awareness Month, playground safety, drowning prevention, safe sleep, distracted driving
 - ATLS instructor course - August 27–28 at Ascension Indianapolis
- Presentation
 - Southern Region 2-day cadaver lab hosted at Harrison County Hospital with four cadaver rooms and a Perimortem cesarean station. 68 participants attended across EMS, nursing, and physician groups



Drowning is the #1 cause of death for children ages 1-4.

Here's what every parent and caregiver should know.

statehealthin

statehealthin Water safety starts before anyone gets in the water.

Drowning can happen quickly, but many drownings are preventable. Swipe through for a few reminders that could help save a life.

Learn more about drowning prevention from the CDC: <https://bit.ly/3ubXCev>

#DrowningPreventionDay

1w

Liked by clarkcountyinhealth and others

July 25

Add a comment...

Post



LOOK BEFORE YOU LOCK

Indiana Department of Health

statehealthin

statehealthin Dozens of children in the U.S. die each year from vehicular heatstroke, often because they were accidentally left behind.

Protect kids by:

- Always checking the back seat before you lock.
- Keeping cars locked at home.
- Calling 911 immediately if you see a child alone in a vehicle.

Small steps can significantly reduce these incidents and help keep kids safe this summer.

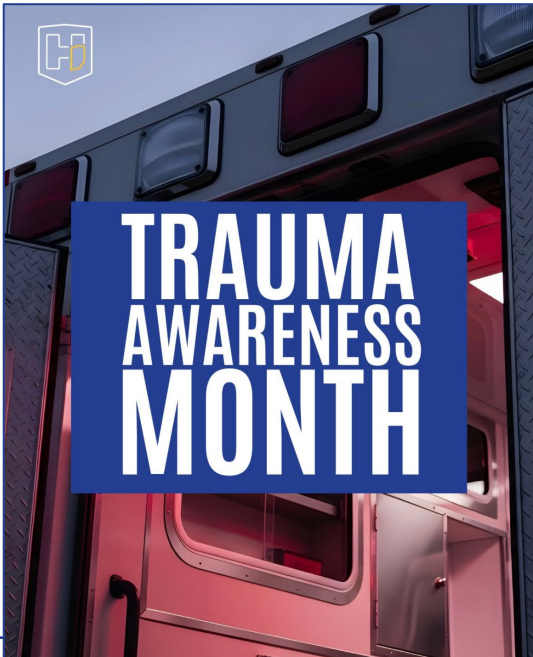
6w

Liked by indianagovinterns and others

June 17

Add a comment...

Post



TRAUMA AWARENESS MONTH

statehealthin

statehealthin The No. 1 cause of death among people ages 1-44 is traumatic injury.

Trauma impacts individuals, families, and communities across Indiana. This #TraumaAwarenessMonth, IDOH encourages you to learn key injury risks, take steps to prevent harm, and connect with local resources that support recovery and safety. Small actions can make a big difference.

Thank you for the work that Trauma Care Commission and the Outreach Subcommittee are doing to advocate for improved trauma systems, increase education, and reduce injuries across Indiana!

9w

Liked by gesanderson and others

May 29

Add a comment...

Post



WATER SAFETY WHAT TO KNOW

statehealthin

statehealthin Summer is almost here, and that means more time at pools, lakes, and splash pads across Indiana.

As you head out for fun in the water, remember that a few simple safety habits can make all the difference!

10w

Liked by tenrag33 and others

May 23

Add a comment...

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Indiana Department of Health

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the health and safety of all Hoosiers.



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Social media policy: bit.ly/3xBqlbF

Indiana health.in.gov Joined May 2012

943 Following 36.8K Followers

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Indiana Department of Health

To promote, protect, and improve the health and safety of all Hoosiers

Wellness and Fitness Services · Indianapolis, Indiana · 16K followers · 1K-5K employees



Ramzi & 4 other connections work here

+ Follow

Message



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<https://www.linkedin.com/company/statehealthin/>

Education & Outreach Subcommittee

- No items for vote
- Next meeting dates:
 - Wednesday, August 19th 12:30 – 1:30pm
 - Wednesday, October 29th 12:30-1:30pm

Registry Subcommittee

Missy Smith, Co-Chair

Summer Blakemore, Co-Chair

Registry Subcommittee

Trauma Registry Course:

- In development; (4) modules remaining
- Hosted on the IDOH website once finalized

Registrar Engagement:

- Contact list of all Indiana registrars built to create a Registry Advisory Committee group led by registrars

Data Dictionary Update:

- Prehospital vital sign definitions under review (scene vs en-route vitals)

PI Indicator Report:

- Reviewing during next meeting; September 2nd

Registry Subcommittee

- No Voting Items

Performance Improvement Subcommittee

Eric Yazel, MD, Co-Chair
EMS Medical Director, DHS

Scott Thomas, MD, Co-Chair
Trauma Medical Director, Memorial Hospital South Bend

Performance Improvement Subcommittee

- Last meeting 7/16

KPI Discussion

- Over and under triage/utilization of patients and trauma centers (breakdown by age group and mechanism)

Definition: Percentage of patients transferred to a designated trauma center who had an ISS ≤ 15 , were discharged alive within 48 hours to a destination other than hospice, and had no major procedure performed.

Performance Improvement Subcommittee

- Scene times (minus extrication)
- Number of Pediatric-ready facilities: Currently 8 – 2 advanced, 6 ready with 2 more in process.
- Importance of framing our data

Performance Improvement Subcommittee

- ACS Field Triage Guideline education
- Structure- Commission PI addresses on the macro level- education, processes, etc. Recommend all 3 TRACS have PI Committees that report out to our committee. Bidirectional flow of info and recs.

Trauma Mortality Review

- Current processes look at the system from a macro view – state level or local
- This review would provide a comprehensive view of a patient's flow through the system, potentially giving valuable insight to system challenges
- Looking at current legislative protections
- Gauging interest among partners

Performance Improvement Subcommittee

Nothing to vote on

Next meeting Thursday 9/17 at 1

Any questions, comments, feedback from the commission?

Disaster Preparedness and Military Integration Subcommittee

David Welsh, MD, Co-Chair
Surgeon, Margaret Mary Health

Mark Liao, MD, Co-Chair
Medical Director, Indianapolis EMS

Disaster Preparedness and Military Integration

- Statewide TAA update given: LtCol Stilianos
- Statewide KPIs FY27
- MCI planning update – Mark Liao/Leslie Stewart/Lindsey Musgrave
- MCI training/exercise planning meetings: 2026
- TTX(s) 2027
- Live Exercise 2028

Disaster Preparedness & Military Integration

New Business:

- Urban Search and Rescue
- Homeland Defender
- INSTRAC
- IHEPS Meeting

No vote required at this time

Final Business

2026 Meetings:

November 6, 2026

10:00am to 12:00pm (Eastern Time)