

# Indiana State Trauma Care Committee (ISTCC) – Designation Subcommittee Meeting Notes

**Time:** Monday, February 3, 11:30am EST

**Location:** Conference Call Line & St. Vincent Indianapolis

**Called by:** Dr. Lewis Jacobson, Chair, ISTCC Designation Subcommittee

## I. Attendees

<b>ISTCC Designation Subcommittee Members</b>	
<b>ISTCC members</b>	
Lewis E. Jacobson, MD, <i>Chair</i>	St. Vincent Indianapolis Hospital
Andy VanZee	Indiana Hospital Association
Bekah Dillon	IU Ball Memorial Hospital
Erik Streib, MD	Smith Level I Shock Trauma Center at Eskenazi Health
Lisa Hollister	Parkview Regional Medical Center
Peter Hammer, MD	IU Health – Methodist Hospital
Ryan Williams	Reid Health
Scott Thomas, MD	Memorial Hospital South Bend
<b>Subcommittee participants</b>	
Emily Fitz, MD	Indiana American College of Emergency Physicians
Jackie Martin	Union Hospital
Jennifer Konger	Parkview Regional Medical Center
Judi Holsinger	St. Vincent Indianapolis Hospital
Kelly Blanton	St. Vincent Indianapolis Hospital
Kevin Loeb, MD	Indiana American College of Emergency Physicians
Matthew Sutter, MD	Indiana American College of Emergency Physicians
Michael Carroll	Franciscan Health Indianapolis
Wendy St. John	Smith Level I Shock Trauma Center at Eskenazi Health
<b>ISDH Staff</b>	
Katie Hokanson	Director, Trauma and Injury Prevention
Ramzi Nimry	Statewide Trauma System Development & Training Mgr

## I. Agenda

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1. Welcome & Introductions
2. Application review – Franciscan Health Indianapolis
  - Action requested:
    - Trauma Surgeon Response Times:
      - Please add timeframe to response times.
      - Please note that each trauma surgeon must respond within 30 minutes 80% of the time.
        - **Please provide updated response times. The designation subcommittee will not approve the application until we see 80% for each individual surgeon.**
        - If you have a system that shows that each patient that comes in has a surgeon at the bedside within 30 minutes for their highest activations.
      - Please note: a trauma surgeon needs to physically attend at least two meetings of the Disaster Committee meetings.
      - Please provide in writing from the American Board of Surgery that Dr. Murage is eligible to sit for the board certification exams and when he is planning to sit for his boards. Dr. Murage is listed on the St. Francis website as being board certified.
    - ICU:
      - Please clarify: For trauma patients, who covers them while they are in the ICU?
    - Meetings:
      - **All trauma surgeons and liaisons did not meet the requirements of attending at least 2 operational meetings and 2 peer review meetings. This is required by the Designation Subcommittee to show engagement by the facility to pursue trauma center verification.**
  - Recommendations:
    - TMD Section:
      - Phone conferencing is not optimal. Physical attendance is required by the ACS.
      - When the TMD is not available to attend in person, another trauma surgeon should facilitate the meeting in person and the TMD video calls in. Criteria 6-8.
      - Provide January peer review meeting roster that reflects that he attended in person.
    - Registrar section:
      - Encourage Registrar Michael to attend ATS training. The American Trauma Society Trauma Registry course. Indiana currently does not have a trauma registrar course.
    - OR/Post-anesthesia care unit
      - Please note: The ACS is really focused on call logs. For the call logs, how do you ensure that they arrive in 30 minutes? How do you bump elective cases to care for emergent cases?
    - Nursing credentialing:
      - Please note: The ACS will ask for the percentages. The designation subcommittee recommends expanding education to not just new hires in orientation but provide other forms of ongoing education for existing nursing who may be taking care of trauma patients for the first time. The designation subcommittee noted that there is a lack of trauma education in ED and ICU nursing staff.
3. Additional Discussion/Topics
  - a. Edits to make to application:
    - i. TMD Section:

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1. Add “in person” requirement for TMD peer review and operations meeting.
  2. Physically present to at least 50% of meetings.
- ii. Registrar section:
1. Mirror ACS language.