

IDAHO TSE COUNCIL MEETING MINUTES

September 4, 2014

A meeting of the Idaho Time Sensitive Emergency (TSE) Council was held on this date at the Oxford Suites, 1426 S. Entertainment Avenue, Boise, Idaho.

Council Members Present:

Member's Position:

Bill Morgan, MD

One representative from a facility that either holds or is seeking designation as an Idaho trauma center. Representatives may be either the medical director, coordinator or program manager responsible for their respective facility's trauma program.

Jami Thomas, RN

One representative from a facility that either holds or is seeking designation as an Idaho stroke facility. Representatives may be either the medical director, coordinator or program manager responsible for their respective facility's stroke program.

Marshall Priest, MD

One representative from a facility that either holds or is seeking designation as an Idaho heart attack center. Representatives may be either the medical director, coordinator or program manager responsible for their respective facility's heart attack program.

Harry Eccard

One representative from an EMS agency licensed by the department that serves a primarily urban response area.

Bill Spencer

One representative from an EMS agency licensed by the department that serves a primarily rural response area.

Greg Vickers

One licensed health care provider who routinely works in the emergency department of a hospital that serves a primarily urban area that either holds or is seeking trauma, stroke or heart attack designation.

Mike McGrane

One representative from an air medical EMS agency licensed by the department.

Kelly McGrath, MD

One licensed health care provider who routinely works in the emergency department of a hospital that serves a primarily rural area that either holds or is seeking trauma, stroke or heart attack designation.

Drew Forney

One Idaho citizen with an interest in furthering the quality of trauma, stroke and heart attack care in Idaho.

Casey Meza for Jon Ness

The administrator of an Idaho hospital that either holds or is seeking Idaho trauma, stroke or heart attack designation.

Council Members Not Present: Member's Position:

Carl Hanson

The chief executive officer or administrator of an Idaho critical access hospital that that either holds or is seeking Idaho trauma, stroke or heart attack designation.

Others Present:

Wayne Denny
 Nicole Noltensmeyer
 Dennis Carlson
 Toni Lawson
 Bev Barr
 Ron Loomis
 Frank Powell
 Elke Shaw-Tulloch
 Chris Wey
 Christina Shirazi
 Jana Perry
 Nichole Whitener
 Kate Barnes
 Teresa Smith
 Mike Weimer

Other's Position:

Idaho Bureau of EMS & Preparedness
 TSE Administrative Assistant
 Portneuf Medical Center
 Idaho Hospital Association
 Department of Health & Welfare Rules Unit
 AHA/ASA
 Department of Health & Welfare Rules Unit
 Department of Health & Welfare
 Kootenai County EMS
 SARMC
 SARMC
 SARMC
 St. Luke's
 St. Luke's
 Life Flight Network

Welcome and Introductions

Dr. Morgan called the meeting to order and established a quorum. Greg Vickers moved to approve the agenda for today. Kelly McGrath seconded the motion. Vote to approve agenda was unanimous. Greg Vickers moved to approve the July 29th meeting minutes. Bill Spencer seconded the motion. Vote to approve minutes was unanimous.

Review Council's Timeline and Objectives

Bill Morgan discussed the plan to have temporary rules in place by November and the Regional TSE Committees formed by December.

Overview of Candidates for TSE Program Manager

Wayne Denny reviewed the job description and gave a brief overview of each candidate. A power point slide of highlights from each candidate's resume was displayed.

Q & A with Candidate #1

Christian Surjan was brought in. He introduced himself and the Council was given the opportunity to ask him questions.

Q & A with Candidate #2

Chris Szabo was brought in. He introduced himself and the Council was given the opportunity to ask him questions.

Executive Session: Recommendation for TSE Program Manager

A motion was made by Mike McGrane for the Council to go into Executive Session for the purpose of discussion and to recommend a candidate for TSE Program Manager. Jami Thomas seconded. The vote was as follows:

Bill Morgan – aye
 Jami Thomas – aye
 Marshall Priest – aye
 Harry Eccard – aye

Bill Spencer – aye
Mike McGrane – aye
Greg Vickers – aye
Kelly McGrath – aye
Drew Forney – aye

During the executive session, the council recommended Christian Surjan to the bureau for the position of TSE Program Manager.

Bill Morgan then ended the executive session, and the meeting was reopened to the public.

Feedback from Drafted Rules

Toni Lawson from the Idaho Hospital Association discussed concerns from the hospitals. Some of the items in question were:

- The opportunity for hospitals to participate in multiple regions.
- What was the purpose and benefit of having a Council member present at site surveys?
- What if there is a lack of site survey resources? Will hospitals lose their designation through no fault of their own?
- Department of Health & Welfare Rules Unit
- Make it clear in the rules that the TSE does not set referral patterns.

Bill Morgan recommended that the Council review the proposed changes before the next Council meeting and that there would be time in the agenda for discussion and decisions.

Divide into Workgroups and Discuss Today's Goals and Objectives

The Council and attendees were split into three workgroups; trauma, stroke/STEMI, and designation procedures. The groups were tasked with determining the levels of care and how the designation process will work.

Participants in Trauma Workgroup:

- Bill Morgan
- Chris Wey
- Kelly McGrath
- Bill Spencer

Participants in Stroke/STEMI Workgroup:

- Jami Thomas
- Dennis Carlson
- Harry Eccard
- Teresa Smith
- Kate Barnes
- Marshall Priest
- Nichole Whitener
- Christine Shirazi
- Ron Loomis

Participants in Designation Procedures Workgroup:

- Wayne Denny

- Toni Lawson
- Drew Forney
- Casey Meza
- Nicole Noltensmeyer
- Jana Perry

For discussion notes from trauma workgroup, see Appendix A

For discussion notes from stroke/STEMI workgroup, see Appendix B

For discussion notes from designation process workgroup, see Appendix C

Discuss Progress and Recommendations from Workgroups

The trauma workgroup recommended 5 levels of designation. Level I & II would be designated by the American College of Surgeons. Level III and IV would have the option to be designated by the American College of Surgeons or the state. Level V would be designated by the state. All designations would be good for 3 years, and all would be required to participate in the current state trauma registry. Proposed membership fees would be; Level II \$36,000, Level III \$24,000, Level IV \$10,000, Level V \$3,000. There would also be an additional fee for site survey costs.

The stroke/STEMI recommended using the AHA/ASA guidelines for designation. They recommended 3 levels of designation for stroke. Level 1-Comprehensive Stroke Center, Level 2-Primary Stroke Center, and Level 3-Acute Stroke Receiving Hospital, with a possible fourth designation for facilities that would only identify a potential stroke patient and then transfer them. The workgroup recommended 2 levels for STEMI. Level 1-STEMI Referral Facility and Level 2-STEMI Receiving Facility. The only fees discussed were the costs of a registry.

The designation procedures workgroup came up with many unanswered questions. See Appendix C for a list. The group recommended having a pre-application for facilities seeking a designation that would require a site survey, and that as much work as possible be complete before the physical site survey. They recommended that the length of designation correspond to the accrediting bodies. It was also recommended that there be a membership fee for designation and a separate fee for site surveys.

Plans and Goals for Regional TSE Committees

The Council's goal is to have the regional committees somewhat formed before the end of the year. There was discussion about holding the first meeting on the same date as RAC meetings because most of the same people would be participating in both groups. Bill Morgan suggested that he and Wayne Denny be present at all of the initial regional meetings to present the TSE program to potential committee members.

Open Comment Period

There was a short discussion about dates and locations for upcoming council meetings. The next meeting is Tuesday, September 23, 2014 at the SpringHill Suites in Boise. No other discussion.

Adjourn

Appendix A

Trauma Workgroup

- What levels of designation?
 - 5 levels
 - Level I & II designated by ACS
 - Level III & IV designated by ACS or the state
 - Level V designated by the state
- How often?
 - 3 years, to correspond with ACS designation
- Designation standards?
 - Use ACS standards for Level I-IV
 - Use Utah standards for Level V
 -
- Registry?
- Use the current trauma registry
- Fees?
 - Level II - \$36,000 for three years
 - Level III - \$24,000 for three years
 - Level IV - \$10,000 for three years
 - Level V - \$3,000 for three years

Appendix B

Stroke/STEMI Workgroup

- Designate stroke every 2 years, and STEMI every 3 years.
- For stroke designation, use the AHA/ASA guidelines (2013)
 - TIA/ischemic stroke protocol
 - Hemorrhagic stroke protocol
 - Expansion of timeframe for tPA
 - Definition and evaluation of transient ischemic attack
 - Guidelines for the prevention of stroke in patients with stroke vs. TIA
- For stroke, use these levels of designation:
 - Level 1 - Comprehensive Stroke Center – accepted accreditation by a nationally accredited body
 - Level 2 - Primary Stroke Center
 - Level 3 - Acute Stroke Ready Hospital – as outlined by AHA/ASA
 - ?Level 4? – Transfer Only Facility
 - Arrival time, last known well time, door in and door out.
- Stress the regional committees need to be involved in the feedback loop
- EMS needs to be involved in feedback loop
- Patients should go back to their community if appropriate for recovery/rehab
- 2 Levels for STEMI
 - Level 1 – STEMI referral facility
 - Level 2 – STEMI receiving facility
- Resource requirements for STEMI accreditations as in the:
 - Ahajournals.org/content/127/4/529
 - ACCF/AHA Guideline
 - 2013 ACCD/AHA Guideline for the Management of ST-Elevation Myocardial Infarction:
 - Executive Summary
 - A report of the American College of Cardiology
 - Foundation/American Heart Association Task Force on Practice Guidelines.
- Discussion was had amongst the workgroup as to whether or not PCI capable facilities would have extended time (ex. Until January 1, 2017) to receive accreditation before being bypassed. The point was made that studies show patients treated at facilities not accredited statistically will have poorer outcomes than those treated at accredited facilities. This point was discussed and the workgroup decided not to “grandfather” or make a time allowance to any facility that has PCI capabilities, but is not accredited.
- The Mission Lifeline will create a “Regional Report” that has a one-time reporting writing fee of around \$500 that could compile certain data points. This may be an area to discuss with the Council for the STEMI/Heart Attack data points.

Appendix C

Designation Procedures Workgroup

- The length of designation should correspond with accrediting bodies.
- Reciprocity from other states?
 - If there standards are equal to or exceed Idaho's standards, they should be accepted.
- A pre-application would allow for work to be done before the site survey.
- Will we allow probationary designation?
- Can CAH's use the same surveyors at the same time for all 3 designations
 - Give hospitals the option to do them together or separately.
- Fees?
 - Membership fee separate from site survey fee?
- Determine criteria before deciding who would be appropriate to do the surveys (i.e. ED physicians, neurologists, cardiologists, program managers)
- Site survey teams would have to have no conflict of interest. Surveyors may need to come from other states. Potential problems with licensure.
- Recommend not duplicating surveys.