

## SEMTAC Meeting Notes, January 12, 2012

SEMTAC Chair Dan Noonan called the meeting to order with a quorum.

Dr Chris Urbina (Executive Director and Chief Medical Officer of CDPHE) provided those present with an update on the Rapid Improvement Event which he has requested to consider issues within the Colorado EMTS System. The RIE team will meet twice for three days to consider topics within the trauma system. There will be a gallery for those who wish to attend but they are not allowed to provide comment except during specific and limited windows. This is part of the LEAN improvement process which the Governor has asked all state departments to undertake. There is not a great deal of information about what the topic(s) will be but rumor has it that several items regarding trauma designation are on the table including: the number of Level I Trauma centers, the amount of high acuity trauma cases required to be a Level I, and others. The RIE will take place in Denver on March 5-7 and May 9-11, 2012. The exact location has not yet been determined. Nancy McDonald (HFEMS Division director) will be the facilitator and Randy Kuykendall (HFEMTS interim Deputy Division director) will be the team leader. The SEMTAC members selected to be on the RIE are: Dr Dave Dreitlin, Dr Gene Eby, Dr Ed Lopez, Dr Walt Biffle, Dr John Nichols, Dr Joel Schaffer, Commissioner Lew Gaiter, Chief Dan Noonan, Travis Polk, and Dale Quimby. The RIE team will have the opportunity to request that subject matter experts provide information to the group as needed.

The SEMTAC meeting will be held in Glenwood Springs, April 11-12, 2012. This is an effort to bring the SEMTAC meetings to places across Colorado. Another location will be selected for 2013. All other meetings will continue to be in Denver at CDPHE.

Jeanne Marie Bakehouse (EMTS Provider Grants Manager) provided an update on the CREATE grant program. From July 2011 through now, there have been 121 applications for educational grants and \$385,000 awarded. In the regular Provider grant program, the FY12 grants are moving forward with agencies/facilities implementing the objectives of the grant. For FY13, the grant is now open and the deadline is February 15<sup>th</sup>. The financial waiver review will take place on March 2<sup>nd</sup>. The financial waiver review team is: Ralph Vickery, Eric Schmidt, Brandon Chambers, Travis Polk, and Jeff Schanhals. The RETAC grant hearings will take place in March and April (Plains to Peaks is March 22<sup>nd</sup> at BFFR). The Public Policy and Finance committee will review all System Improvement grants on April 11 in Glenwood Springs. The SEMTAC hearings will take place May 16-17, 2012.

The possibility of selecting priority items for the Provider grant program was discussed. This idea allows for the SEMTAC to choose specific categories of items to be offered through the grant program at a 25% match instead of the regular 50%. This was done in the past with Ambulance Safety equipment and Pediatric equipment. The PPF committee decided to create a process for such a request and then consider proposals at the April SEMTAC meeting.

Commissioner Linda Joseph discussed the EMTS Day at the Capitol which is scheduled for January 13, 2012. All were invited to attend.

Grace Sandeno, Trauma Program manager, provided an update on the EMTS Trauma Program. Northern Colorado Medical Center in Greeley was recently reviewed to continue their Level II designation. While there were a couple Not Met criteria, they were approved by SEMTAC with plans of correction in place. Grace informed the SEMTAC that the waiver request from Keefe Memorial Hospital in Cheyenne Wells which was approved in October needed to be considered again as the current designation period will conclude in February. The SEMTAC approved the request for the waiver through the next year of the facility's designation period. Dr Charles Mains, Dr Gene Eby, and Phyllis Uribe were reappointed to the Designation Review Committee. Grace presented her quarterly Positively Collaborative aware to Dr Chris Collwell.

Randy Kuykendall presented Marilyn Bourn with an appreciation gift for her time with the EMTS section. She is moving on to a new job with St Anthony's EMS.

#### Committee Reports:

Injury Community Planning Group: Nancy Frizell, committee chair, provided an update on the groups work. I was unable to attend the actual committee meeting due to heavy traffic on committee day. Nancy indicated there will be a webinar on February 2<sup>nd</sup> regarding Concussion Evaluation education for providers.

Emergency Medical Practice Advisory Council (EMPAC): Dr Gene Eby provided the update on the work of the EMPAC. They have completed a CQI guide for medical directors and it is available on the state website under "Medical Direction". The group approved 67 waivers at the last meeting; 33 of those were renewals. The next meeting of the EMPAC will be Feb 13<sup>th</sup>. Waiver requests must be in by January 17<sup>th</sup> for the meeting.

The biggest area of discussion for the EMPAC at their meeting and then again during the SEMTAC meeting was regarding Pediatric RSI. While civil, Dr Eby indicated that Dr Art Kanowitz and Randy Kuykendall had convinced the EMPAC "at the eleventh hour" to approve the option of applying for Pediatric RSI waivers. Dr Eby felt that the Pediatric Emergency Care Committee and others had presented evidence that the procedure was dangerous and unnecessary. Ultimately, the EMPAC had voted 5-2 to allow waiver requests for the procedure. Dr Kanowitz took the opportunity to defend the decision and indicated that the committee had indeed weighed the testimony of the experts and the opinion of the PECC. Dr Kanowitz provided evidence that prehospital Pediatric RSI was being done safely and assured the SEMTAC that reporting requirements were going to be very strict for the procedure if waivers were granted. His feeling was that the benefit outweighed the perceived risk brought forward by the PECC and that evidence not emotion should drive the discussion.

Designation Review Committee: Dr Charles Mains provided the update. He indicated that only three redesignations had occurred during the last quarter and all were approved automatically with no deficiencies.

Pediatric Emergency Care Committee: Dr Lara Rappaport provided the update. Their next meeting will be February 23<sup>rd</sup>.

Statewide Trauma Advisory Committee: Dr Joel Schaffer provided the update. He informed the group that technical assistance for Trauma Coordinators is available on the state website at [www.cotrauma.info](http://www.cotrauma.info) . He described the discussion during Wednesday's meeting regarding revisions to the Chapter two rules for interfacility transfer requirements for Level III facilities regarding Neurotrauma. Dr John Nichols has done considerable work on these revisions and the group is now reviewing his recommendations. This is a long process and was highlighted by the group coming to consensus on the definitions for mild, moderate, and severe TBI. The next meeting will be February 22<sup>nd</sup>.

Public Policy and Finance Committee: Randy Lesher provided the update. Information about the grants program was discussed earlier in this document. Randy brought forward the draft document entitled "RETAC Opportunity Paper" for discussion. The group decided that the document needed to be reviewed by more stakeholders prior to being brought before the SEMTAC as a whole. The document is available online on the state website and any comments are encouraged to be provided by March 28<sup>th</sup>.

EMTS Section Report: Randy Kuykendall didn't have a written report this quarter but did provide an update on activity within the Section. Nick Boukas and Marilyn Bourn have accepted other positions and their jobs will be posted in the near future. Randy thanked his whole staff for their continued hard work as always. Randy informed the group that Governor Hickenlooper is proposing a program which would assist active duty military and their spouses who are deployed outside the county to maintain their certification/licenses while deployed. If approved, it would grant a six month window upon return to state side for the personnel to obtain the necessary CEUs to recertify if their certificate had expired while they were deployed. There are currently still 22 agencies using the MATRIX to input prehospital data. The MATRIX will go offline at the end of March and those agencies will need to either move to the ImageTrend product or purchase a product on their own.

These are my notes of the recent committee meetings and the SEMTAC meeting. They are not minutes. If you have any questions about the meeting, please feel free to contact me or any of the various stakeholders from the Region who also attended.

Kim E Schallenberger