

Connecticut Trauma Committee
Connecticut Hospital Association
March 15, 2018

Present: Shea Gregg, Chairman; Deborah Bandanza, Recorder; Kim Barre; Brian Cournoyer; Brendan Campbell; Kevin Dwyer; Ann Dyke; Tara Elliott; Jean Jacobson; Richard Kamin; Jacqueline McQuay; Monika Nelson; Laurie O'Brien; Paul Possenti; Kevin Schuster; Jennifer Tabak

Meeting was called to order at 14:05

TOPIC	ISSUE	DISCUSSION	ACTION
Approval of minutes		Minutes for January 2018 were approved.	
OEMS Report		There were no updates.	
State Trauma Registry update		<p>As of March 5, data from 2012 forward can be submitted to the state trauma registry. Ann Kloter sent an email to the centers detailing the submission process, however the trauma centers have not submitted data. The upload option is functioning but there is no way to specify which date range to submit so each center would be submitting their entire registry.</p> <p>Two questions were raised by committee members: are there any threats to the longevity of the registry, and how would data from non-designated hospitals be collected. Dr. Gregg assured the committee that there is a strong interface and infrastructure to the registry and there should be no longevity issues. As for the non-designated hospitals, the trauma centers need to have a seamless process first. A needs assessment will have to be done to determine what data these hospitals are able to collect.</p>	Dr. Gregg will contact Ann Kloter to have DI fix the upload issue.
Legislative Update	HB-5163	This year, the field guidelines and NTDB Data Dictionary aspects will be inserted into the DPH technical bill HB-5163 and has been referred for a public hearing. After the hearing, it will go the DPH for a vote, then onto the House and Senate, and finally the governor. Once passed, work on Collector updates and data	Dr. Gregg will keep the committee informed of progress.

		migration as well as the driller package can commence.	
B-Con for EMS & Stop the Bleed		<p>Stop the Bleed was the focus of discussion(B-Con for EMS was discussed in the Hemorrhage control training for EMS time period). The DPH supports the Stop the Bleed campaign. Committee members reported the courses that have been held in the various trauma centers and in the community. There is some resistance from Boards of Education due to liability issues.</p> <p>Although military data is extraordinary, there is some concern about how to translate the military experience to the civilian population. Very little data exists and there is concern about how the layperson will respond in a stressful situation.</p>	
Proclamation for Stop the Bleed Day		Dr. Campbell read a message from Dr. Jacobs about other states issuing a proclamation for Stop the Bleed Day on March 31 and the suggestion that Governor Malloy be contacted about issuing a proclamation for the State of Connecticut.	Dr. Gregg will contact DPH and will keep the committee informed of progress.
Injury Prevention Subcommittee		The committee decided that data from the trauma centers need to be submitted to the state registry first. The data can then be analyzed to determine potential injury prevention initiatives.	
Hemorrhage control training for EMS		CEMSAB felt that Stop the Bleed was geared more toward the layperson and the EMS providers would benefit from formal hemorrhage control training. The course was developed by the education training subcommittee and brought to CEMSAC and referred to the State Trauma Committee for comment.	Dr. Gregg asked committee members to send comments about the course to Dr. Kamin.
Liaison to the ACS COT		The liaison position to the ACS COT is open. This is a legislative position that was held by Dr. Jacobs. Committee members felt that Dr. Gregg should hold the position. Dr. Gregg relayed that the	Dr. Gregg encouraged committee members to apply for the position ACS-COT liaison position.

		Chair of the State Trauma Committee is not a legislative position and is appointed by DPH, whereas the ACS-COT liaison is appointed by the Governor. The focus of the two positions are also different; the ACS-COT has their charter for training and trauma systems, and ACS matters, whereas State Trauma Committee is a regulatory board with a focus on state regulations.	
Duties and Goals for 2018		The Duties and Goals for 2018 were submitted to the committee for suggestions or changes.	The committee approved the Duties and Goals.
Educational Opportunities		Hartford Hospital is sponsoring an ASSET Course in June. Cost is approximately \$2500.	

The meeting was adjourned at 15:00.

Respectfully submitted,

Shea C. Gregg, M.D.