



**CTN, Inc. Board Meeting Minutes
February 23, 2007**

Members Present: Jean Marso, Mary Shelton, Shirley Terry, Theresa Dorsey, Don Ehrman, Terry Olson, Cris Geist, Phyllis Uribe, Kathy Hoyland, Chris Duran, Sherri Nugent, Craig Gravitz, Margie McElroy, Kim Muramoto, April Settell, Lynanne Granado, Karin Whinery.

Teleconference: Nancy Frizell, Nicola Hopkins, Peggy Ray, Dee Crump

Guests: Holly Hedegaard, Nancy Canty (CDM), Skip Tinnell (CDM)

Excused: Karan Hutchins

Quorum: Yes

Meeting Minutes:

Minutes from the December 1, 2006 were approved as written. Membership cards were distributed at the meeting for all those who have paid their dues.

Treasurer's Report:

The most recent spreadsheet distributed. The year end summary shows \$5942.57 in checking. Deposits from dues are \$1140.00. Payments in 2006 were made for t-shirts, the safe deposit box, attorney fees for the 501c3, coding class expenses, web site and food for the meetings.

Old Business:

Secure Web Link:

Mary has not worked on this yet.

Resource Manual/CD:

The documents are in the process of being classified as to the Trauma Center levels. These will be completed and put on the web site in the secure area.

Mentoring Program:

Don sent letters out to review information as to who is willing to help other coordinators by phone verses those who wish to obtain a membership packet with a CD. The packets are not together at this time. We need to meet and formalize the program. This may best be accomplished by adding subcommittee groups to the meeting as we have done in the past.

New Business**Meeting Structure:**

There has been some confusion about the meeting times in the past. There was a general discussion regarding the length of the meeting. We need to decide what we want to accomplish in the meetings. It was offered by Kim that the meeting be kept to 2 hours including education unless there is a specific education presentation that would take longer. Nancy suggested that the afternoon following the SEMTAC may be good for those who have to travel. At present the length of the SEMTAC is somewhat varied. It was also suggested that the meeting be held on the subcommittee meeting day, the day before SEMTAC, may be a better choice. It may be possible to survey the group to see if there is an open time that the group would like to meet at the time of one of the scheduled subcommittee meetings. Public policy doesn't always meet and that is a block of time that could be a consideration. Space at the CDPHE may be another issue. If we could meet on the day of SEMTAC it may not be as much of an issue. When an educational presentation is offered that could present another problem. Holly offered that there may be another place close to the CDPHE that we can use. Phyllis will survey the group for member feedback.

New Projects:

We want to focus more on professional education that will help us with our daily job. Pam Bourg has requested that CTN sponsor another TOPIC seminar. In the past the CTN has not contributed much in the way of a financial commitment other than the travel for speakers. In the last course CTN sponsored Denver Health managed the registration aspect and that was difficult but they will help in obtaining a space if we were to go forward with the project. We could consider attaching it to another conference, the AIS course for example, as the Rocky Mountain conference has a CDM course and an AIS course already offered consecutively with it. Craig brought attention to the first draft of the agenda for the Rocky Mountain Emergency and Trauma Conference was out today.

Pre-hospital Trip Report CQI Project:

Holly Hedegaard explained the trip report project history which was done as a pilot study and in its present state is not publishable. The way it was done may not have been a good representation of the trip report compliance in the entire state. Timeliness may have been a factor as to whether it was followed as closely on the weekend was a question and the fact that it only involved trauma patients and not all ED patients who arrive by EMS may skew the results. If this

study were to be repeated it would be a good idea to add the ISS of the patients included in the study. It is possible to wait until discharge for the patients to get the ISS out of the data base. The tracking number can be used so Holly can link the data after she receives it. It will not be announced in advance of the data collection date for the study. The group felt it was feasible to repeat the study using more facilities and discussed what an optimal time would be for those involved. The Excel file format used before can be used again. It may be useful to provide the number of agencies and we may want to add degree of completion of the trip reports. In the previous study the full trip report was all that was recorded. There are a fair number of people from this group who are willing to participate in this study. Linda Underbrink or Shirley Terry will communicate further information by e-mail to the group. Compliance rates are high after 48 hours but not as much so in the first 24 hours following patient arrival in the ED. Patient care reports for transfers and direct admits often are not left with the patient just those patient reports that are transports from the scene. Shirley requested a commitment as to how many facilities will participate from the Mile High RETAC.

In Memory:

Jill Allen, the first trauma registrar in the State of Colorado, died recently. There is a web site that people who knew her can access to add stories about her life that will provide memories for her family. She has worked at many facilities in the beginning stages of the Colorado Trauma program who needed her help. She was ill for quite some time and has been living in Texas and has children in middle and high school. A web site has been set up to share memories of Jill with her family:

Directions to the Web-site...

www.legacy.com

Enter Jill Allen

Look for the name Jill Jeannine Allen

Click on Guest Book and follow directions from there.

Announcements:

Shirley Terry: Decontamination training may be offered June and there is \$29,000 from the Homeland Security grant for this project. A grant for all-in-one fax/printers for all the ED s in the North Central region has been submitted. There is also a grant for EMS caches which will be kept in a warehouse and is climate controlled that is close to completion. There is \$120,000 available for hospital medical personnel training as well as the backfill for training. There will be a cap per hour for each position, i.e. RN, MD, etc. There has also been grant money allocated for Radiation detectors and they are all in. Safety officers will be writing the policies for their use and there will be a half day training in the use of the detectors. Each hospital will receive a detector and a DVD concerning their use. There is also a grant for the purchase of an inventory system which can be a computer program for hospitals and EMS. There is also a patient

tracking system for use by EMS and that will go into the HC standard. Two systems are being tested which are mobile and along with this there is a satellite phone and all users can get these. It is predicted that the system will be 99% effective. The Trauma Care Coalition Preservation was passed at the local government level and will be moved to the Senate Appropriations Committee next week. Approval of this legislation may bring trauma funding back.

Chris Duran announced the HealthONE day and a half conference which features national keynote speakers. Brochures were distributed and more information is available on the HealthONE website as a link. It will be held on the 13th and 14th of April.

Cris Geist announced that Medical Center of Aurora has the Trauma Program Director position available.

Skip Tinnell announced that CDM has added changes in the next update for the AIS 05.

AAAM Conference:

Nancy announced that Robert Walker has sent information to the AAAM personnel. To guarantee the promised conference dates with the organization we need to pay \$15,000 in advance and \$15,000 shortly before the class dates. The results of the CDC grant may be known by the end of March. Grace Sandeno has indicated that there may be other funds that can be accessed to help support the project. We don't want to be in a situation to commit to the dates with the AAAM until we have an answer on funding. There will be an AIS class at the Rocky Mountain conference that overlaps the dates of the conference and following the CDM conference. It is hoped that this may attract people at the conference from out of state. CDM will encourage Colorado people to attend the local conference we anticipate sponsoring. The question was raised concerning the registration process. Phyllis has offered the Swedish Medical Center trauma office to assist with registration. The CTN mail presently goes there and they have the support staff who can assist with the process. The subcommittee will do a phone conference call after we hear about the CDC grant. Skip has checked with AAAM and currently there are not many registrants and there is one Colorado person who has registered. Jan Price will be teaching the June class and she is scheduled to teach the one in November also.

Version 7 Trauma Base:

Skip Tinnell provided an overview of the new Version 7 for the group as the educational presentation.

2007 Meeting Information:

June 20, 2007 (during the Rocky Mountain Trauma Conference, time to be determined)

September 28, 2007, 10 AM

December 7, 2007, 10 AM

All meetings will be held at the Medical Center of Aurora EMS Office with the above exception. The meeting will be a general meeting and will start at 10:00 AM. If there are subcommittees or the board needs to meet this will be done immediately following the general meeting.

Respectfully submitted:
Mary E. Shelton, Secretary