



AGENDA

**Injury Prevention and Public Education Committee Meeting
Governor’s EMS and Trauma Advisory Council (GETAC)**

Department of State Health Services (DSHS)
Omni Hotel Fort Worth
1300 Houston Street, Fort Worth, Texas
76102 Saturday, November 18th, 2017
1:00 P.M.

Call to Order/Roll Call Shelli Stephens Stidham, Chair
Reading of the GETAC Vision and Mission Statements Shelli Stephens Stidham, Chair

GETAC

Vision:

A unified, comprehensive, and effective Emergency Healthcare System.

GETAC

Mission:

To promote, develop, and advance an accountable, patient-centered Trauma and Emergency Healthcare System.

Shelli Stephens-Stidham, Marisa Abbe, Mary Ann Contreras, Cassandra Dillon, Courtney Edwards, Kevin Rix, Mark Sparkman present. Julia Perez, Rohit Sheno and Stewart Williams absent. Sandra Williams resigned

Recognition of outgoing members, announcement of new members Shelli Stephens Stidham, Chair

The Committee will expand from 11 members to 13 members. Mary Ann Contreras, Kevin Rix, Stewart Williams and Dr. Sheno were re-appointed. Sandy Williams has resigned, and her unexpired term will be filled, and 2 more committee members will be added on January 1.

Review and Approval of August 2017 Meeting Minutes Shelli Stephens Stidham, Chair

Courtney motioned for approval and Kevin seconded.

Discussion and possible action on the following items: Committee Members

GETAC Chair Report on the October 2017 GETAC Planning Retreat ...Robert Greenberg, MD, GETAC Chair Council committees, organization and function were reviewed and updated during the GETAC Council strategic planning retreat. The mission and vision were also revised. Utilization of the word “effective” was stressed in the mission statement. Meeting structures were discussed, including physical room lay out which will be horizontal to allow for better vision of the screens and communication. The council looked at committee names and their historical function. Council member liaisons were assigned committees. No specific term limits set for Committee Chairs. Committees can have a membership between seven and 17. This is designed to flux based on the work of the committee. Shelia Vaskey is the IP and Public Education Committee liaison from the Council. Education committee will continue to be focused on EMS education. Medical Director Committee is focused on EMS

medical director. Air Medical has expanded its focus to include specialty care transport, including critical care. IP committee's name is now Injury Prevention and Public Education which includes the work already being done. Dr. Jeff Jaris is now the Chair of EMS Medical Director Committee. Shawn Salter is the chair for Air Medical and Specialty Transport Committee.

- May council and committee meetings are busy times for academia, legislation etc.... so in 2019 the second quarter meeting will be in June and the third quarter meeting will be moved to September.
- Updated for GETAC Council agenda and committee reports: Verbal report is optional- unless the committee is requesting action items of the Council. This process will be the same with the State's report.
- The Council can also assist committees in finding specific committee appointments that are needed due to particular skill or knowledge sets, and liaisons to other organization.
- Regarding conflict of interest- there are no restrictions due to employment- but if there is a potential conflict, it needs to be cleared up front, declared, or person may excuse themselves in the instance of conflicts, during voting matters.
- Kevin Rix: With the change of committee name regarding "public education": is it an expectation we are to educate the public on items such as stroke or cardiac?
- Greenburg- this should be discussed within your committee to identify opportunities and potential committee collaborations as needed.
- Shelli- IP and Public Edu- if there are no action items for a year, is it necessary to provide an annual report to the GETAC council?
- Greenburg- there hasn't been an annual report in the past, but there is a provision for it.

Presentation from the Texas Council on Sexual Violence
None available at this time.

Presentation from the Poison Control Network

- Dr. Eldos from UTSW: See PP presentation on the GETAC website. Opioid crisis in the US. Methods to consider for prevention was introduced including education to make addiction and dependence and behavioral health concern less of a stigma. Other opportunities such as prescription drug monitoring, take back opportunities, SBIRT within the health care setting and increasing naloxone access were reviewed. Increasing treatment capacity, which currently has very limited options, partnering with criminal justice are other potential strategies to reduce opioid use. Differentiation between addiction and physical dependence was defined with physical dependence displaying symptoms of withdrawal. Addiction has more behavioral health concerns. Methadone can be used for an opioid substitute allowing for personal function in life. Methadone actually reduces death rates and infectious disease transmission.
- Kevin: Texas has not been as impacted as other states in the US. Is there something Texas is doing better? What can we expand on to continue this low rate of opioid use?
- Dr. Eldos: Access to opioids is more difficult in Texas; it is more easily accessed on the East and West coasts. Public education and awareness is a protective factor.
- Mark: Heroin is relatively inexpensive.
- Courtney noted that Texas uses different types of substances.
- Colin: to post PP on website. How does big pharma trend on regulation/deregulation impact opioid use.
- The foundation of the crisis began with prescription use of opioid, then progresses to street drugs. Physical/dependent use is easier to stop. Addiction is more difficult,
- Jennifer Northway: What opportunities are available for hospital based prevention: drug take back day, drug court collaboration?
- Dr. Eldos: Consider addiction as any other treatable chronic disease and approach in a public health manner.
- Audience: Tye Hogan from El Paso – What is the incidence of accidental exposure to providers and should we be concerned?
- Dr. Eldos: Usually opioid accidental exposure does not produce great risk- can use an N95 mask for

protection, but overall, no special equipment is needed.

Possible development of an unintentional drug poisoning “spectrum of prevention” tool

Courtney: Committee is trying to be proactive instead of re-active in the area of drug poisoning – looking at evidence informed strategies- including CDC guidelines while developing the Spectrum guideline on opioid use prevention.

Update about pilot test of submersion report form Marisa Abbe

The committee is currently validating the States submersion report form, including a literature review of drowning risks. This includes looking at the reliability of State submersion report form, with reference to completion of information in a standardized manner across the state. The next step is to pilot a new form in several hospitals with the goal to have a standardized form and reporting method across the state. Marisa Abbe is leading this strategy.

Evidence-Based Childhood Drowning Prevention Fact Sheet Marisa Abbe

This is the second fact sheet from the committee. It is focused on childhood drowning what efforts work, what clearly doesn't work and what is potentially harmful. Marisa noted a review of 542 articles. Of those, 19 met specific defined criteria. She explained the utilization of the GRADE analysis, addressing the methodology of the research including interventions such as barriers, and legislative efforts to validate effectiveness. Again, Marisa is the lead for this strategy.

Shelli noted the distracted driving document is on IP page. The goal is to continue these documents with the drowning prevention fact sheet to be completed in 2018. Utilization of interns- Shelli has someone to help, Kevin as well.

Developing and implementing an injury prevention orientation for trauma managers ...

Shelli announced this will be included in the revision of the Texas Core Components document.

Revision of the Hospital-Based Injury Prevention Components document...Shelli Stephens Stidham, Chair

- *Shelli: in 2014, the committee took on the role of developing Core Components for Hospital Based IP programs. Standards and indicators have now been added to address how to meet these 5 core components. Safe States has recently developed and released a national document Standards and Indicators for Model Level 1 and 2 Trauma Center Injury and Violence Prevention Programs. **SHELLI to send this PDF to Colin.** The Texas document is being updated to align with the national document. The Texas document will continue to address Level 3-4 centers.*
- *Courtney suggests continuing this Texas update at the next workday meeting, and to provide the document to the audience via the website. **Shelli to send most current version to Colin to post***
- *Jennifer Northway:– **Present to TTCF in February, to continue and bring stake holder input during TTCF IP meeting. Potential role out in May.***
- *Shelli- **Potential role out of finalized Standards and Indicators document in May.** Content and background information to be included in the orientation training. Resources will be included in both documents.*
- ***Keep Texas document on the website and add national document as well.***
- ***Colin to post, and ask for comment by email. Shelli –E-mail document to Jennifer to send document to TTCF***
- ***Karen Mynar- asking to bring this information to trauma system committee-Shelli to announce at Trauma System meeting, and on Monday to GETAC.***
- ***Jennifer Card from Corpus Christi- Noted there is not a way to report 0 submersions in the monthly report. This brings a concern of under-reporting. Asking for a box to check for no data to report. Include this submersion information in the orientation packet to educate trauma coordinators***
- ***Dan Dao- agreed, most hospitals do not understand to report submersion data.***

Presentation format and criteria for presenting to the committeeShelli Stephens Stidham, Chair

- *The committee is inviting stakeholders to present their IP strategies and efforts utilizing the format*

developed. The programs must meet criteria, including evaluation that is listed on the instruction and template for presentation. The potential presentation will go through a review process before acceptance. Please submit to committee at least 8 weeks in advance of a scheduled committee meeting. Courtney to provide presentation format and criteria to Colin to post on website.

Review the following palliative care documents: *Palliative Care Guidelines (American College of Surgeons), Adult Comfort Care Order Set Sample (Vanderbilt University Medical Center), and the Best Practices Guide: Palliative Care for Review (American College of Surgeons)* Committee Members

- *Postponed to next meeting*

Recommendation to GETAC regarding committee appointmentsShelli Stephens Stidham, Chair

- *We have a good mix of disciplines in the committee.*

Initiatives, programs, and potential research that might improve injury prevention efforts in Texas

- *Committee manuscript on distracted driving article was submitted to Texas Journal of Public Health Association.*
- *The Evidence Based Distracted Driving Prevention Fact Sheet that mirrors this article is on table outside the meeting room.*

General Public Comment

(Comment time may be limited at Chair's Discretion)

- *Registry reports currently available were announced by Dan Dao. To be found on website, and available for use and dissemination.*
- *Courtney: The State is looking for a trauma registrar to be added to the team. Provided kudos to Dan and his team for elevating the registry reports, data dissemination and over all data collection work.*

Summary for GETAC meeting report Committee Members

Announcements Shelli Stephens, Chair

- *Lifesavers Conference in San Antonio-April 22-24*

Review and list agenda items for next meetingShelli Stephens Stidham, Chair

Next meeting date Shelli Stephens Stidham, Chair

- *2018 workday meetings: Monday 1/29 in El Paso, Friday, April 20 in San Antonio, July 27 in Amarillo*
- *Colin- Announced Shelli Stephens-Stidham won the Safe States Alliance 2017 Alex Kelter/Vision Award. It is the highest honor-recognizing individuals that bring leadership and vision to the field of violence and injury prevention. Congratulations!*
- *Jo Santos-is now the representative with Texas EMSC will be added to the agenda as a standing item for IP & PE.*

Adjournment Shelli Stephens Stidham, Chair