



# Mile-High Regional Emergency Medical and Trauma Advisory Council

## Second Quarter Report

### October 1, 2006 to December 31, 2006

#### Current Goals and Objectives:

1. Create a solid identity for the MHRETAC
2. Integrate with other organizations to assist the medical community in preparation for an all-hazards event
3. Develop a quality improvement process for the MHRETAC
4. Serve as active members of the Trauma Care Preservation Coalition
5. Administer the C-DOT injury prevention grant
6. Participate in the Multi-County Ambulance Licensing Committee as Members
7. Conduct 800 MHz survey
8. Develop Regional EMS Council with regional partners
9. Develop Regional Hospital Council with regional partners

**Partners are listed at the end**

Goal	EMTS System Component	Description of Accomplishment(s)
<b>Goal 1 Create a solid identity for the MHRETAC</b>	1- Integration of Health Services 3- Legislation and Regulation 4- System Finance	-Coordinator and Council represent the MHRETAC at meetings -SEMTAC, SEMTAC Committees, UASI, NCR, MMRS, State All-Hazard meetings, Trauma Care Preservation Coalition and MHRETAC Committees, EMS Councils, Trauma related meetings, conferences, events and community meetings.

	<p>5- Human Resources 12- Public Education</p>	<p>-All contract deliverables were submitted per contract; Budgets for current contract year Biennial Plan with Priority Goals Quarterly Progress Reports Financial Report for Prior Contract Year Regional Funding Overview for Prior Contract Year</p> <p>-Council approved deliverables requiring approval. -Council attendance was tracked and reported on a regular basis-good attendance by Council Members. -New Council Members; Justin DeMello for Denver County, Tom Pedigo for Adams County and Jackie Fitch for Douglas County. -MHRETAC approved a new logo, new tag line, a more comprehensive mapping for the new web site location with plans to go live in January. -A MHRETAC Website Team continues to provide oversight for the final steps in the development of the web site.</p>
<p><b>Goal 2 Integrate with other organizations to assist the medical community in preparation for an all-hazards event</b></p>	<p>1- Integration of Health Services 3- Legislation and Regulation 4- System Finance 8- Communication Systems 10- Clinical Care 11-Mass Casualty 12- Public Education 14- Information Systems</p>	<p>-Coordinator serves as a member of the NCR and UASI Grants Committee. -Coordinator and Dr. Mains participated in the target capabilities assessment for NCR and UASI which included the Regional Hospital Council and Regional EMS Council. -Coordinator and various Council Members attend the committees and sub committees of NCR, UASI, MMRS, and NDMS. - Coordinator continues to serve as Chair of the UASI Medical Community Strategic Planning Committee, a member of the UASI Board and an alternate for Dr. Mains on the NCR Board. -Dr. Jan Dehler works closely with NDMS, MMRS and the final phase of the recent exercises- Hot Tamale that focused on dispensing prophylaxis to first responders. -Coordinator serves on the Steering Committee with UASI to develop the goals and objectives for the coming year and current grant cycle.</p>

		<p>- All medically related disaster preparedness meetings have agreed to meet on one day which will be held on the 4<sup>th</sup> Thursdays starting in January- this includes Regional EMS Council, Regional Hospital Council, Medical Community Strategic Planning Committee, and NCR Public Health.</p> <p>-The Medical Community Strategic Planning Committee will now be a joint UASI/NCR Committee. The Public Health Committee will be having some joint meetings with the Medical Community Committee to enable them to carry out their CDC goals.</p> <p>-The Medical Community continues to update the strategic plan with a more expanded community focus.</p>
<p><b>Goal 3</b>  <b>Develop a quality improvement process for MHRETAC</b></p>	<p>1- Integration of Health Services  2- EMTS Research  3- Legislation and Regulation  9- Medical Direction  10- Clinical Care  15- Evaluation</p>	<p>-100% of the hospitals participated in the hospital data collection project and sent data for over 20,000 patients to Clinical Data Management (CDM) with the exception of North Suburban who has not been collecting data using Trauma Base, not a requirement for Level IV trauma centers.</p> <p>-Data collected included patients from January 1, 2004 to December 31, 2005.</p> <p>-Goal is to evaluate the effectiveness of the MHRETAC Trauma Triage Algorithm.</p> <p>-As per contract, CDM produced an overview report regarding MHRETAC data and produced a more specific report at the next meeting.</p> <p>-Trauma Coordinators will meet monthly to review the data with CDM prior to the reports and will work to assure that all hospitals are collecting data using the identical interpretation of data to assure validity of data.</p>
<p><b>Goal 4</b>  <b>Serve as active members of the Trauma Care Preservation Coalition</b></p>	<p>1- Integration of Health Services  3- Legislation and Regulation  4- System Finance  15- Evaluation</p>	<p>On hold due to no current activity</p>

<b>Goal 5 Administer the C-DOT Injury Prevention Grant</b>	1-Integration of Services 2- EMTS Research 5- Human Resources 12- Public Education 13- Prevention 15- Evaluation	- The toolkit was completed by December 1. - Annual and final reports were submitted per contract. - School observations took place at 3 of the schools. - Grant funds have been spent keeping well within budget. - Videos and Fatal Vision goggles have been ordered. - Business cards and letterhead have been developed. - Volunteers are being requested to assist with school screenings and school presentations.
<b>Goal 5 Participate in the Multi- County Ambulance Licensing Committee as Members</b>	1- Integration of Services 3- Legislation and Regulation 4- System Finance 9- Medical Direction 10- Clinical Care	- The entire MHRETAC is now standardized with respect to ambulance licensing and inspections. - All the counties in the Multi-County Ambulance Licensing Committee have passed their respective county resolution except Denver which is still in process. - All the counties have signed the IGA except Denver who is still working on it. - All documents will be standardized including ambulance inspections, complaint forms, applications and reciprocity. - All documents are in compliance with the State's Ground Ambulance Rules that went into effect November 1, 2006. - MHRETAC will no longer be able to give funds directly to Jefferson County per the new rules. - MHRETAC voted to develop an Ambulance Inspection Mini Grant to continue to support the regional ambulance agencies with the inspection fees.
<b>Goal 6 Conduct an 800MHZ Survey</b>	1-Integration of Services 4-System Finance 8- Communication Systems 10- Clinical Care 11- Mass Casualty	- Coordinator will now work with HRSA and CDPHE to complete the survey. - Responses are slow coming in. - The survey is still in progress

	12- Public Education 14- Information Systems	
<b>Goal 7 Establish a Regional EMS Council</b>	1-Integration of Services 4-System Finance 8- Communication Systems 9- Medical Direction 10- Clinical Care 11- Mass Casualty 12- Public Education 14- Information Systems 15- Evaluation	-The Regional EMS Council has four projects with project leaders; EMS Caches PPE Survey Trip Reports Regional Mutual Aid Agreements -Council will now meet monthly on the fourth Thursday with the other medically related disaster preparedness meetings.
<b>Goal 8 Establish a Regional Hospital Council</b>	1-Integration of Services 4-System Finance 8- Communication Systems 9- Medical Direction 10- Clinical Care 11- Mass Casualty 12- Public Education 14- Information Systems 15- Evaluation	-The Regional Hospital Council will meet on the fourth Thursdays with the other medically related disaster preparedness meetings. -A target capability assessment was conducted. -Goals remain the same and include developing regional medical surge plans, developing evacuation plans, supporting medical supply planning with ChemPAK and SNS, and developing altered standards of care for patients during an event and the feasibility of developing a medical assessment tool. -ACEP survey was conducted in October with on site surveys conducted at Denver Health, St. Anthony Central and Sky Ridge Medical Center. -An overview of NIMS training for hospitals was provided.
<b>Additional Tasks: Radiation Detector</b>	1-Integration of Services 4-System Finance 8- Communication	-Coordinator organized a Radiation Detector Planning Committee to develop guidelines for the radiation detectors purchased by the NCR grant. -Goal is to develop guidelines for use of the radiation detectors and hand held meters, develop protocols for use of detectors, response protocols,

<b>Planning Committee</b>	Systems 9- Medical Direction 10- Clinical Care 11- Mass Casualty 12- Public Education 14- Information Systems 15- Evaluation	location of detectors and on-going maintenance. -Committee plans to develop a training seminar for hospitals receiving the radiation detectors. -Agreements will be developed for hospitals to sign prior to receiving the radiation detectors.
<b>Additional Tasks: Recruitment and Retention Grant</b>	1-Integration of Services 4-System Finance 8- Communication Systems 9- Medical Direction 10- Clinical Care 11- Mass Casualty 12- Public Education 14- Information Systems 15- Evaluation	-MHRETAC voted to write an R and R grant for the region. -A survey was developed and will be sent to all agencies in the MHRETAC.

**Partners**

- All members of the MHRETAC and Coordinator
- Members of CDPHE, HRSA, MMRS, UASI, NCR, NDMS
- UASI Public Health and Medical Committee Members, Participating Facilities, hospitals, EMS agencies, public health agencies, environmental health agencies
- Denver Sheriff Credentialing Department, Medical Personnel, Physicians, Nurses
- Attorneys from hospitals and related agencies
- Medical Directors, Medical Staff Officers, Trauma Nurse Coordinators, Quality Improvements Departments
- Trauma Registries, Trauma Care Preservation Coalition Members and Staff
- MHRETAC Stakeholders, CDM, MHRETAC Web Site Design Team

- Level I hospital Injury Prevention Coordinators, C-DOT Staff, MHRETAC C-DOT Advisory Board
- Ambulance Licensing Committee members and county representatives
- Emergency Managers, Fire, EMS Agencies, Mental Health, Animal Health, Community Health Partners
- Radiation Safety Officers, Medical Physicists, CDPHE Radiation Department, Ludlum, representatives