**Minnesota Metropolitan Regional Trauma Advisory Committee MMRTAC**

**November 16, 2023**

**Attendance**

Beth Aller, Rachelle Damle, Tom Edminson, Laura Elseth, Maria Flor, Jon Gipson, Teri Herman, Mary Kay Kaiser, Kim Killian, Shannon Lee, Charles Lick, John McCormick-Deaton, Lindsay Miller, Brian Myer, Melanie Smalley, Cori Sybrant, Tanda Tavakley, Robin Trubeck

**Others Present**Greg Hayes

Jacob Kallenbach

**1. Call to Order**

Committee Chair, Dr. Jonathan Gipson, called the meeting to order at 7:03 a.m.

**2. Roll Call**

Dr. Gipson carried out the roll.

**3. Approval of Agenda**

*Motion made by Lick, seconded by Gipson to approve the agenda. Motion carried.*

**4. Approval of August 23, 2023 MMRTAC Minutes**

*Motion made by Lick, seconded by Gipson to approve the August 23, 2023 MMRTAC meeting minutes. Motion carried.*

**5. Old Business – None**

**6. New Business**

**A. MMRTAC Applications for appointments**

Applications are being asked to be resubmitted in an attempt to stay current with record-keeping processes. A paper trail is needed, and former records are nearly non-existent. This is going to clean up the committee participation, pull in some new applicants, and enable the MESB to reach out to “no-shows.” Please reach out to Greg if you have any questions or concerns. Greg will send out an email with details/updates for this process.

**B. Regional Replantation Contingency Plan**

The handout for this specific plan is in the meeting materials. There is a Greybook requirement on replantation. Content is sufficient but the workgroup will work on adding an “and/or” statement, along with combining the last paragraph. A hospital list at the end to add some clarity may also be added. This will be updated showing the changes made and will be sent out via email to gain overall approval.

**C. Metro Region Incident Response Plan**

The handout is attached in the meeting materials. This is a color-coded plan made to be used in the field. The importance of establishing an EMS command role in disasters is discussed. The plan will work to make a uniform response, hopefully leading to a shorter time to patient from initial incident. The plan also works to add ambulances at a rapid rate depending on the coding of the incident in attempts to create a quick, and significant response. This will put the correct number of responders needed at the scene to get patients to the hospital more quickly. A field simulation with this plan at Target Field was carried out and proved to be successful. Real life example of the plan occurred with the Stillwater Prison Incident. Rapid ambulance response occurred, and the event on the EMS side of things was a success.

**D. 2024 Goals/Projects**

Numerous goals/projects for the MMRTAC were discussed. The committee is going to continue to spread and push EMS to Emergency handoff guidelines. The MMRTAC will continue the Peds workgroups and continue onto other extremities. The committee also aims to update their applications and roll. Other goals and projects will be discussed further as we head into the new year.

**7. Updates**

**A. STAC Update**

Last STAC meeting update is from the September meeting. Few new staff appointments. Coffee with coordinators was discussed. This will be a quarterly teams-based meeting forum. Shared the practice management guidelines from the MMRTAC, and the form was put by the phone for ER nurses receiving calls to help with response. There are a few STAC position openings.

**B. Stop the Bleed at the Fair Review**

Stop the Bleed at the Fair had very good reviews and lots of foot traffic and interactions. Gave away over 450 tourniquets. Will attempt to get the same spot and do the same process for the State Fair in 2024. Thank you to those who went for your hard work and dedication.

**C. Peds Workgroup**

The group will continue to work hard and into 2024 while working on other extremities.

**D. Geriatric Workgroup – TQIP Oral Presentation**

The workgroup got their work on Geriatric Patients into the TQIP and will give a presentation. The presentation was given during the meeting and a few tips and pieces of feedback were given. Congratulations on a great presentation and thank you for all your hard work.

**E. Stop the Bleed in Schools Training**

Reach out to Greg and other members if in need of training kits. Post your classes on the national website because people from all over the Midwest could be interested and show up for the training. There are presentations and instruction on the website for class help as well.

**F. EMS to ED Handoff – MIST Format**

Continue to promote the MIST format in the trauma bay. It has been very helpful in creating consistent and uniform reports. Add MMRTAC to letterhead on the MIST document to add weight behind it. Greg will take the initiative on that.

**8. Local Updates**

**A. Runsheets**

Look up runsheets on the EMS website to see the first run of the transfer.

**B. Last Meeting**

This will be the last meeting of the year for the MMRTAC.

**9. Team Picture**

A team picture for the MMRTAC group was taken and will be used within the previously mentioned TQIP presentation on Geriatric Patients.

**10. Adjournment**

Dr. Gipson called the meeting adjourned at 8:39 a.m.