



**Ky Trauma Advisory Committee  
General Meeting Agenda  
December 17, 2024, 2024 @ 3:00 PM EST [Meeting via UofL Zoom]**

**Minutes**

- Opening & Welcome from Chair Dr. Richard Cales. Fifteen of the appointed committee members were present, which constituted a quorum.
- The Minutes from October 16, 2024 were approved as distributed on a voice vote.
- **KyTAC Membership Updates:**
  - Several appointments pending at this time:
    - Dr. Julia Costich, PhD, JD – Reappointment representing *Injury Prevention Programs*
    - Dr. Ryan Stanton has been nominated by the *Kentucky Medical Association (KMA)* to replace Dr. Bill Barnes as their delegate.
    - Ward Wagenseller, BSN, EMT-P, has been nominated to replace Ellen Williams, as the *UK KY Children’s Hospital (Level-I Pediatric trauma center)* representative.
    - Dale Morton, President of the KY Chapter of the Emergency Nurses Association (ENA) has been nominated to represent ENA. He will replace Patty Howard, who’s term expired in October, but she can continue to serve until Mr. Morton’s appointment is finalized.
    - Dr. Steve Vallance is retiring from *Frankfort Regional Medical Center, a Level-III Trauma Center*. They have named Dr. Bryan Shouse to replace him as their delegate.
- **KyTAC Election of Officers**
  - Based on the KyTAC By-Laws there are three elected officers that serve a term of two (2) years. The officer’s include a Chair and a Vice Chair, which can be re-elected to a second two-year term if that is the pleasure of the committee; and a Secretary, who can be elected to an additional two-year term without term limits.
    - The current officers are: Chair - Dr. Richard Cales, MD; Vice Chair - Dr. Julia Costich, PhD, JD; and Secretary - Richard Bartlett.
    - It was noted that both Dr. Cales & Dr. Costich were elected in December, 2022, and are eligible for a second term if that is the pleasure of the Committee.
    - After a brief discussion there was a motion made to renominate the current slate of officers. That was seconded by Dr. Shah, and the motion was approved on a voice vote without dissent.
  - (Note: The By-Laws are available for review at: <https://www.kyha.com/wp-content/uploads/2024/12/KTAC-Bylaws.pdf>)
- **Committee Reports:**
  - **Outreach/Advocacy** (Dr.Cales/Dr. Bernard) – It was noted that there have been some approaches made to members of the General Assembly related to trauma system funding, but since the 2025 Session does not normally deal with budgetary matters there is no certainty as to how this might proceed. Mr. Bartlett noted that KHA leadership is going to approach the Commissioner’s Office looking for ways to eventually create a budget line item to support the Trauma Care System, but there is no certainty that this will be successful.
  - **Data/Quality/Registrars** (Julia Costich & Trish Cooper)
    - Julia Costich indicated that work has completed on the **2023 Kentucky Data Bank Report**. There were 15,197 trauma cases reported by twenty-six (26) trauma centers in 2023. The top four facilities were UK Chandler (4,460), UofL (4,151), Pikeville (1,118), and Owensboro (1,070). About 59% of the patients involved were male. Alcohol was confirmed in about 64% of the cases. Falls represented 45.4% of the cases, followed by motor vehicle incidences. Saturday saw the highest volume of trauma cases The report, released in December, 2024, can be found on the [KIPRC website](#).
    - **UofL Trauma Registry “Next Steps” work group** update was provided by Samantha Baker. She indicated that they are working on a broad “Memorandum of Understanding” that will be circulated soon, primarily to the Level-IV and III trauma centers, making clear that the data in a shared system is theirs, and not the University of Louisville’s.

UofL is anticipating beginning to use the new Image Trend system by mid to late January. At some

point the facilities should get a copy of their previous data to preserve the information, and could potentially use it for trend analysis.. Those interested in more information, or who would like to help work with UofL on the “Next Steps” forward, should reach out to Samantha Baker at [samantha.baker@uoflhealth.org](mailto:samantha.baker@uoflhealth.org).

○ **Education** (Angie Reed/Amie Peel/Tracie Burchett)

- **Future educational programs being planned?** No one had any immediate program information to share. Pikeville said it is planning on offering some additional RTTDC courses in 2025 to help developing programs in eastern KY.
- Mr. Bartlett noted that he has shared information with the trauma programs to pass along to their Process Improvement/Quality Assurance teams about the [KHA Quality Conference](#), March 17-19, in Lexington. KHA has a number of programs and staff working on quality, and there may be benefits for the Trauma PI/QA personnel to become engaged with others working in this area.

○ **EMS for Children Programs** (*Morgan Scaggs was unavailable, but sent a report read by Mr. Bartlett*)

- **Pediatric Ready** – KY EMSC is accepting applications for pediatric readiness recognition. Please contact [morgan.scaggs@ky.gov](mailto:morgan.scaggs@ky.gov) prior to submission to insure you are using the most up to date forms before submitting by email. They will begin scheduling site visits in the early spring once they clear one more administrative hurdle. They were able to complete a few site visits this year which will bring *the total number of recognized EDs to 15*.
- **Pediatric Readiness for EMS** – The EMS recognition program will be accepting applications for recognition in 2025 between now and March 31<sup>st</sup>. Agencies must apply every year for recognition and demonstrate completion of program requirements for the previous year. Program documents are in their EMSC *Basecamp* portal. Contact Morgan if there are questions or need assistance. ([Morgan.Scaggs@ky.gov](mailto:Morgan.Scaggs@ky.gov)).

Mr. Bartlett reminded the group that the Trauma Regulations going through review at this time will eventually add the national Pediatric Readiness standards to Level-IV verification. ACS COT is already inspecting for Pediatric Readiness during their Level I, II and III visits.

- **Any development towards adoption of KANGABANDS?** (What are they? Why?) Kangabands are a wrist band that can be applied by EMS or the ED that indicates the child’s Broselow/Handtevy color category and weight. Morgan is currently only aware of one hospital currently using them. The advantage of using the Kangaband is to provide consistency of care, at the same selection criteria, throughout the continuum of care.  
[Learn more on [Kandbands](#).] [An [NIH comparison](#) of Broselow vs Hantevy.]
- **Planning for a future KPECC meeting in 2025?** We are planning a KPECC meeting for March of 2025. There should have a “save the date” out in the next 1-2 weeks. Registration will open around February 1<sup>st</sup>. It is good chance to get some pediatric related education and information, and network on pediatric care topics.
- **PMOCC development:** Dr. Fallat reported that she and several others from Kentucky traveled to San Antonio, Texas, to participate in a review of their regional coordination center which has an operational history going back into the late 1990’s. It takes an “all-hazards” approach covering multiple areas such as a variety of medical emergencies, trauma and burns. They have a dashboard to help with load balancing, maximizing bed utilization, arranging transfers, and they communicate with all parties involved. The San Antonio program does this as a cooperative venture with a governing board, all the facilities in the region are reportedly participating and sharing in the expenses to make it a full-time program.

FEMA has been placing emphasis on developing Medical Operation Coordination Centers (MOCC), including one for Region IV (Southeastern US) to facilitate the movement and transfer of patients. This is especially useful during a disaster, and there is interest in developing similar programs in Kentucky - not only around Pediatrics (PMOCC), but other types of cases. There is already a working model in the stroke system in the state, and Mr. Bartlett noted that the use of these type of coordination centers (particularly in the Lexington and Louisville regions) was very helpful during the pandemic to coordinate load balancing, and the movement of less ill patients to other healthcare facilities to make room for very sick incoming patients. Kentucky has a dashboard through ReadyOp, but it is not operational on a 24/7 basis. Funding for the program still needs to be worked out. While FEMA may be supporting the larger US regional centers, there is nothing currently available to support state-level or intra-state regional MOCCs.

Dr. Fallat told the group that they need to recruit a key representatives from each of the health systems in the state to become involved in the project, including major healthcare focus areas (like stroke, STEMI, burns, and EMS). They are not sure at this point if there will eventually be one MOCC for Kentucky, or several focused around the HPP regions. Those interested can reach out to her, Abby Bailey who is the PPN Program Manager at NCH ([Abby.Bailey@louisville.edu](mailto:Abby.Bailey@louisville.edu)), or Angela Kik, who came from the KY Public Health Preparedness Program to lead the PMOCC program development effort ([amkik001@louisville.edu](mailto:amkik001@louisville.edu)).

- **Verification** (Kim Denzik)
  - ACS COT site visits in November at UK Chandler/KY Children's & Norton Children's
  - Upcoming verifications:
    - Pikeville Medical Center (ACS COT in early 2025)
    - Owensboro Regional Health (ACS COT in late Spring 2025)
    - UofL Hospital (ACS COT in Summer 2025)
  - We also have several facilities in development, and this could result in the need to verify some potential new Level-IV centers in 2025. If individuals would like to help out with future Level-IV verification site visits please reach out to Kim Denzik at [kim.denzik@uoflhealth.org](mailto:kim.denzik@uoflhealth.org).
- **Old Business:**
  - Revisions to **Trauma Regulations** - Status Update (R Bartlett)
    - **Pending trauma regulation changes** were pulled from the December 9<sup>th</sup> Legislative Research Commission's Administrative Regulations Review Committee agenda to allow for the Trauma Advisory Committee to review and discuss the requested changes that were received from the ARH system regarding Level-IV staffing. They could be rescheduled for their January meeting. This is one of two committee reviews the regulations will be going through.
  - Discussion and development of **Recommendations for Commissioner Stack** on this subject. (Dr. Cales)
    - Dr. Ryan Stanton, who is the KMA nominee, the Past President of the KY Chapter of the American College of Emergency Physicians (ACEP) and a member of ACEP Board of Directors, made reference to the ACEP Policy Statement from June, 2023 on "Guidelines Regarding the Role of Physician Assistants and Nurse Practitioners in the Emergency Department". [This was previously emailed to the committee members on November 26<sup>th</sup>.] Dr. Stanton said that these guidelines were intended for extremely rural situations, such as those found in places like Alaska and perhaps Montana, and Wyoming. It was not intended for use in most other US states.

He also said that the KY Chapter of ACEP has been contemplating a request to change the statutes to require **any** facility in Kentucky that operates an Emergency Department (ED) to have a physician to physically present. He noted that the "gold standard" is Board Certified Emergency Physician, but the standard should be to have a physician in the ED. This has already passed in Indiana and Virginia.
    - Related to the American College of Surgeons Committee on Trauma (ACS COT) statements on the within their 2014 "*Resources for the Optimal Care of the Injured Patient*" [previously mailed to the committee on December 11<sup>th</sup>] use of practitioners, Dr. Mary Fallat told the group that the Committee of Trauma (COT) has been gathering information and developing thirty (30) proposed standards that will be a model for Level-IV trauma centers. COT does not intend to get involved with Level-IV verifications. It will initially go out for review by the Committee on Trauma's Rural Advisory Council, and the National Association of State EMS Officials' National Trauma Program Managers Council. This will occur over two weeks in January. Then after any adjustments the proposed standards will go out for public comment for four weeks. The hope is to have these standards finished, and adopted by early summer. Dr. Michael Person, who is a member of the Committee on Trauma for the American College of Surgeons, has been working with Dr. Fallat in tandem as she works on the Pediatric readiness programs. Her recommendation at this point is to wait until this project is complete, and we can see the COT's recommendations. She does not believe that once the reviews begin the proposed standards will be embargoed, so we should be able to share them when available.
    - Mr. Bartlett indicated that he had also received a call from an existing rural Level-IV trauma center that was having some struggles staffing a physician at all times. It has a relatively low-volume of trauma activations, and is reportedly experiencing some periods of time where a physician may not necessarily be in the ED at all times- but is recallable. There was a lot of discussion about the situation, and its potential implications. There was no decision or recommendation made. In

response to a question, Mr. Bartlett confirmed that with pre-hospital EMS notification, Level-IVs do get payments from insurance for trauma activations.

▪ **Decisions needed:**

- Potential recommendations for changes to 902 KAR 28:030, Section 1 related to **Level-IV staffing**. Julia Costich moved, and Dr. Bernard seconded, a motion to pause changes to the trauma regulations related to physician coverage at this time until we get further guidance on the subject from the ACS Committee of Trauma. The motion was unanimously approved on a voice vote.
- Potential recommendations for changes to 902 KAR 28:030, Section 1(b) **related RTTDC for TMD**. Mr. Bartlett noted that while the change came during a period of time when we were having a hard time providing predictable RTTDC program in the state. There was discussion that it was difficult to “require” something we could not supply on a regular basis, but the recent staffing reviews that have been done, and emphasis on the role of the Trauma Program Medical Director as the key responsible person for the success of a Level-IV trauma center, it seems to have changed views on this subject. Mr. Bartlett moved that we leave the current language in Section 1(b) in place as it currently exists, making participating in an RTTDC program a requirement for the Trauma Program Medical Director. The motion was then seconded, and it passed on a voice vote unanimously.
- It is possible that the regulations may be back on the agenda for the January or February meeting of LRC’s Admin. Reg. Review Committee

- Preliminary report from the **Pre-Hospital Blood** review working group. Chair Chris Lokits, EMT-P and KBEMS representative, reported that their group has had some discussion about the recent survey that was done to get information on what is going on in the field at this time. It would appear that the situations are likely to vary from area to area depending on their available resources. He anticipates that they will continue to have on-going discussions about this subject.
- Feedback/follow-up from **NHTSA KY EMS Reassessment**, Nov. 19, 2024. Dr. Bernard and Mr. Bartlett were present at the evaluation and made a presentation to the group on the trauma system. Chris Lokits, KBEMS representative, said that as of the KyTAC meeting their report was still being drafted. As he understands it, there are 36 recommendations being developed. *[UPDATE: The final report was released on December 23<sup>rd</sup>, and will be distributed to KyTAC members separately.]*
  - Mr. Bartlett noted that one of the subjects raised during the review was the **KyTAC Strategic Plan**. This was last worked on in May 2013, and it may be appropriate for the group to consider revisiting the subject as part of a future meeting. The previous information was shared with the committee as an attachment.
- There was no other Old Business.

• **New Business:**

- The PMOCC project was on the New Business agenda. Dr. Fallat referenced the earlier discussion (above), an overview of their December 4<sup>th</sup> site visit to the San Antonio’s RMOC (Regional Medical Operations Center); planning for future development of an ASPR Region IV Regional Disaster Response System (RDHRH) and a potential Kentucky MOCC program. Dr. Cales expressed the view that “this is the future,” and it would have been extremely helpful at times during previous events and disasters within the state.
- There was no other New Business.

• **Next Meetings:**

- Steering Committee meeting (virtual): January 21, 3 PM ET
- Next Full KyTAC Meeting (virtual): February 18, 3 PM ET

• **Adjournment**



Dick Bartlett  
KyTAC Secretary  
KY State Trauma Program Director  
Ky Hospital Association/KHREF

KyTAC Appointed Members in attendance on December 17, 2024:

Title	First Name	Last Name	Suffix	Organization	Representative for
Mr.	Richard	Bartlett (3)	MEd	KY Hospital Association	KY Hospital Association
Dr.	Andrew	Bernard	MD	UK Healthcare	UK Level-I Trauma Center
Dr.	Richard	Cales (1)	MD	Emergency Physician	At-Large
Dr.	Julia	Costich (2)	JD, PhD	KIPRC	Injury Prevention Programs
Mr.	Chase	Deaton		KY Trans Cab. Incident Mgmt.	KY Transportation Cab.
Dr.	Mary	Fallat	MD	Norton Children's/KY EMS-C	KY Bd of Medical Licensure.
Ms.	Fayetta	Gauze	RN	Tug Valley ARH Hospital	Level-IV Trauma Centers
Dr.	Brian	Harbrecht	MD	UofL Dept. of Surgery	UofL Level-I Trauma Center
Dr.	Jacob	Higgins	RN	University of Kentucky	KY Board of Nursing
Ms.	Patty	Howard	RN	UK HealthCare	Emergency Nurses Assoc.
Mr.	Chris	Lokits	EMT-P	Louisville Metro EMS	KY Board of EMS
Ms.	Morgan	Scaggs	EMT-P	KY EMS for Children Program	Pediatric Trauma
Dr.	Karan	Shah	MD	Baptist Health	ACEP, KY Chapter
Ms.	Sandy	Tackett	RN	Pikeville Medical Center	Level-II Trauma Center
Dr.	Steven	Vallance	MD	Frankfort Reg. Medical Center	Level-III Trauma Center

KyTAC Appointed Members absent on December 17, 2024:

Title	First Name	Last Name	Suffix	Organization	Representative for
Dr.	William	Barnes	MD	Livingston Hospital	KY Medical Association
Dr.	Tony	Decker	MD	Owensboro Health Reg. Hospital	ACS, KY Chapter COT
Dr.	David	Foley	MD	Norton Children's Hospital	Level-I Pediatric Trauma Ctr
Ms.	Amber	Hamlin	RN	Nurse	At-Large
Ms.	Ellen	Williams	RN	KY Children's/UK Healthcare	Level-I Pediatric Trauma Ctr

Others at the meeting:

Shelly Alvey, Deaconess Union Co. Hospital  
 April Anderson, Harrison Memorial Hospital  
 Debbie Baker, CHI St. Joseph London  
 Samantha Baker, UofL Trauma Program  
 Kim Denzik, UofL Hospital  
 Kari Hackney, ARH Our Lady of the Way Hospital  
 Ben Hughes, UK Trauma Surgical Service  
 Teri Johnson, Owensboro Health Twin Lakes  
 Steve Hosch, KDPH HPP  
 Ben Hughes, UK Healthcare, Trauma Program  
 Misty Lewis, Hazard ARH  
 Kim Maxey, Ephraim McDowell Reg. Med. Center  
 Renee McClure, Rockcastle Hospital  
 Mike Mixson, Owensboro Health Reg. Hospital  
 Dale Morton, Pikeville Medical Center, KENA  
 Angie Reed, Pikeville Medical Center  
 Candice Reynolds, RN, University of KY Trauma Program  
 Dr. Ryan Stanton, KMA/ACEP Board of Directors  
 Deborah Walters, Barbourville ARH