



Minutes

Regular Meeting of Louisiana Emergency Response Network Board

Thursday, January 20, 2011 at 2:00 p.m.

held at:

Louisiana Hospital Association
9521 Brookline Avenue
Baton Rouge, LA 70809

1. *Welcome/Introductions*

The January 20, 2011, regular meeting of the Louisiana Emergency Response Network Board (LERN) was called to order by Coletta Cooper Barrett, RN, MHA, Chair, at 2:06 p.m. The meeting was held pursuant to public notice, each member received notice, and notice was properly posted.

2. *Roll Call*

Celia R. Cangelosi, Board Attorney, called the roll.

Members Present:

Coletta Cooper Barrett, RN, MHA, Chair
Patrick Breaux, MD
Honorable A. G. Crowe, Senator
Joel Eldridge, DO
Kenneth J. Gaines, MD, MBA, FAHA

John Hunt, MD
Danita Leblanc
Fred Martinez
Norman E. McSwain, Jr., MD
John Noble, Jr., MD
Kevin Sittig, MD
Honorable Mack A. "Bodi" White, Jr., Representative
Chris Wroten, OD

Members Absent:

Thomas C. Arnold, MD
Terri Brock
Honorable Sherri Smith Check, Senator
William "Beau" Clark, Jr., MD
Mark Cooper
Jimmy Guidry, MD
Gary Peters
Peter Sullivan, MBA
Carl "Jack" Varnado, Jr., RPL, ENP
Michele Zembo, MD

Thirteen members were present constituting a quorum when the roll was called.

Honorable Regina Ashford Barrow, Representative, arrived at 2:30 p.m. and left at 4:30 p.m.

Honorable A.G Crowe, Louisiana State Senator, left at 3:15 p.m.

John Noble, Jr., MD, left at 4:25 p.m.

Staff Present:

Robert Coscia, MD, FACS, Medical Director
Eileen Mederos, RN, Administrative Director
Christy Mayeux, Administrative Assistant
Ross Pottschmidt, Program Manager
Ted Colligan, RN, Tri Regional Coordinator
Yvette Legendre, RN, Tri Regional Coordinator

Deborah Spann, RN, Tri Regional Coordinator

3. *Approval of Agenda and Minutes*

A motion was made by Patrick Breaux, MD, and seconded by Kevin Sittig, MD, to amend the agenda to add "Report by Design the System Work Group Regarding Protocol Changes." The motion was approved after a unanimous vote in the affirmative.

A draft of Minutes of the October 21, 2010 Board meeting of the Louisiana Emergency Response Network Board, copy attached, was presented for approval. A motion was made by Honorable A.G. Crowe and seconded by Fred Martinez, to approve the October 21, 2010 meeting minutes. The motion was approved after a unanimous vote in the affirmative.

A draft of Amended Minutes of the August 21, 2010 Board meeting of the Louisiana Emergency Response Network Board, copy attached hereto, was presented for approval. A motion was made by Kevin Sittig, MD, and seconded by John Hunt, MD, to approve the amended August 21, 2010 meeting minutes. The motion was approved after a unanimous vote in the affirmative.

5. *New Business*

a. *Ratification of Commission Members*

A motion was made by Patrick Breaux, MD, and seconded by Joel Eldridge, DO, to accept the following resignations of regional commission members:

(1) James E. Hritz, Region 1 Commission, as the appointee representing Hospitals with More Than 100 Beds;

(2) Larry J. Landry, Region 4 Commission, as the appointee representing GOHSEP; and

(3) Will Williams, MD, Region 9 Commission, as the appointee representing Hospitals with More Than 100 Beds;

and to appoint the following to membership on regional commissions:

(1) Harry Foster, Director, Region 6 Commission, as the appointee representing GOHSEP;

(2) Dr. Lloyd Gueringer, Region 9 Commission, as the appointee representing Hospitals with More Than 100 Beds; and

(3) Benjamin Lott, Region 9 Commission, as the appointee representing Hospitals with Less Than 60 Beds.

The motion was approved after a unanimous vote in the affirmative.

b. Contracts - update and approval

i. RFP For Consulting Services - Approval

A motion was made by Fred Martinez and seconded by Patrick Breaux, MD, to accept the selection of SSA Consultants for "Consulting Services to Support Implementation of the Louisiana Emergency Response Network Board (LERN) Five Year Plan" contract through the RFP process, and authorize the Board staff through the Board Chair to conduct negotiations for the final contract. The motion was approved after a unanimous vote in the affirmative.

ii. ShareCor - update

Eileen Mederos, RN, Administrative Director, reported that data has been received from ShareCor pursuant to the contract. No formal action was taken by the Board.

iii. Shreveport Communications Center Lease - Update

Board Chair Coletta Cooper Barrett, RN, MHA, reported that the lease for the Shreveport Call Center has been completed. No formal action was taken by the Board.

c. Injury Prevention Update

Rudy Gomez reported on ongoing efforts to facilitate an Injury Prevention Program. No formal action was taken by the Board.

6. *Regional Commission Updates*

A representative of each regional commission reported to the Board on the membership, successes, challenges and future plans of each commission. Those providing reports were:

- Region 1 - Joseph Uddo, MD;
- Region 2 - Will Freeman, MD;
- Region 3 - Donna Tesi, MD;
- Region 4 - Mark Oliver, MD;
- Region 5 - Robert Daughdril, GOHSEP;
- Region 6 - Mark Major;
- Region 7 - Deborah Spann, RN;
- Region 8 - Daniel Haynes; and
- Region 9 - Frank Jordan.

The PowerPoint presentation made by each are attached. No formal action was taken by the Board.

7. *Administrative Reports*

a. *Budget Update - FY 2011*

Treasurer Fred Martinez presented the attached FY11 Fiscal Overview and FY12 Budget Overview. No formal action was taken by the Board.

b. *Medical Director*

Dr. Coscia reported on the activities of the Design the System Work Group, including recommended changes to LERN protocols.

A motion was made by Norman E. McSwain, Jr., MD, and seconded by Patrick Breaux, MD, to amend the Standard LERN Entry Trauma Criteria, last amended October 21, 2010, as per the attached. A roll call vote was taken: Barrett-aye; Breaux-aye; Crowe-aye; Eldridge-aye; Gaines-aye; Hunt-aye; Leblanc-aye; Martinez-aye; McSwain-nay; Noble-aye; Sittig-aye; White-aye; and Wroten-aye. The motion carried.

Dr. McSwain stated that he was against amending the protocol until the Board develops mechanisms for enforcement.

A motion was made by Kenneth J. Gaines, MD, MBA, FAHA, and seconded by Patrick Breaux, MD, to adopt the Standard LERN Entry Trauma Criteria Destination Protocol, last amended October 21, 2010, as per the attached. A roll call vote was taken: Barrett-aye; Breaux-aye; Crowe-aye; Eldridge-aye; Gaines-aye; Hunt-aye; Leblanc-aye; Martinez-aye; McSwain-nay; Noble-aye; Sittig-aye; White-aye; and Wroten-aye. The motion carried.

Dr. McSwain stated that he was against amending the protocol until the Board develops mechanisms for enforcement.

A motion was made by Patrick Breaux, MD, and seconded by Chris Wroten, OD, to adopt the LERN Hospital Interregional Transfer Guidelines and LERN Hospital Interregional Transfer Protocol as per attached, replacing the Interregional Transfer Protocol adopted June 18, 2009. The motion was approved after a unanimous vote in the affirmative.

Dr. Coscia presented an outline of the Table of Contents for the Statewide Trauma Plan for approval by the Board. A motion was made by Kevin Sittig, MD, and seconded by Representative Mack A. "Bodi" White, Jr., to approve the Table of Contents for Statewide Trauma Plan. After discussion, Norman E. McSwain, Jr., MD, made a substitute motion, seconded by Patrick Breaux, MD, to include the word "education" within the Table of Contents. The substitute motion was approved after a unanimous vote in the affirmative.

c. Staff Retreat

Christel Slaughter reported on the Staff Retreat. No formal action was taken by the Board.

d. Board Chair

At the request of Coletta Cooper Barrett, RN, MHA, Chair, a representative of Wright Feigley presented information on the development of new graphics and the website. No formal action was taken by the Board.

8. *Public Comments*

Dr. Gene Legard was introduced.

9. *Adjournment*

A motion to adjourn was made by Patrick Breaux, MD, and seconded by Kenneth J. Gaines, MD, MBA, FAHA, at 4:40 p.m. The motion was approved after a unanimous vote in the affirmative.

Respectfully Submitted,



Coletta Cooper Barrett, RN, MHA
Chair



Minutes

Regular Meeting of Louisiana Emergency Response Network Board

Thursday, October 21, 2010 at 2:00 p.m.

held at:

Louisiana Emergency Response Network Office
14141 Airline Hwy., Building 1, Suite B
Baton Rouge, LA 70817

I. Welcome/Introductions

The October 21, 2010, regular meeting of the Louisiana Emergency Response Network Board (LERN) was called to order by Coletta Cooper Barrett, RN, MHA, Chair, at 2:10 p.m. The meeting was held pursuant to public notice, each member received notice, and notice was properly posted.

II. Roll Call

Celia R. Cangelosi, Board Attorney, called the roll.

Members Present:

Coletta Cooper Barrett, RN, MHA, Chair
Honorable Regina Ashford Barrow, Representative
Honorable A. G. Crowe, Senator
Joel Eldridge, DO
Jimmy Guidry, MD

Attachment 3. to Minutes
of LERN Board Meeting
of 1/20/11

Fred Martinez
Gary Peters
Peter Sullivan, MBA
Honorable Mack A. "Bodi" White, Jr., Representative
Michele Zembo, MD

Members Absent:

Thomas C. Arnold, MD
Terri Brock
Honorable Sherri Smith Cheek, Senator
William "Beau" Clark, Jr., MD
Mark Cooper
Tricia Hensarling, LPC
Norman E. McSwain, Jr., MD
John Noble, Jr., M.D.
Carl "Jack" Varnado, Jr.

Ten members were present constituting a quorum when the roll was called.

Staff Present:

Eileen Mederos, RN, Administrative Director
Robert Coscia, MD, FACS, Medical Director
Christy Mayeux, Administrative Assistant
Ross Pottschmidt, Program Manager
Deborah Spann, RN, Tri Regional Coordinator
Ted Colligan, Tri Regional Coordinator

III. Approval of Agenda

Authority was given to Board Chair to reorder the agenda as needed.

A motion was made by Fred Martinez and seconded by Peter Sullivan, MBA, to add LERN Registry Inclusion Criteria to the agenda. The motion was approved after a unanimous vote in the affirmative.

IV. Approval of Minutes

Draft of the minutes of the August 20, 2010 and August 21, 2010, meetings of the Louisiana Emergency Response Network Board, copies attached hereto, were presented for approval. A motion was made by Joel Eldridge, DO, and seconded by Honorable Regina Ashford Barrow to accept the August 20, 2010 and August 21, 2010 meeting minutes. The motion was approved after a unanimous vote in the affirmative.

IV. Contracts

- *ShareCor*

A motion was made by Peter Sullivan, MBA, and seconded by Fred Martinez, to authorize LERN Chair, Coletta Barrett, RN, MHA, to enter into a contract with ShareCor for the use of 2 years of data sets at a cost of \$50,000. The motion was approved after a unanimous vote in the affirmative.

V. Ratification of Commission Members

A motion was made by Joel Eldridge, DO, and seconded by Michele Zembo, MD, to appoint the following to membership on regional commissions:

- (1) Mike Guillot, Region 1 Commission, as the appointee representing the local ambulance services;
- (2) Murtuza Ali, MD, Region 1 Commission, as the appointee representing the Cardiologist position;
- (3) Art Marquez, Region 2 Commission, as the appointee representing the Rural Ambulance Association;
- (4) Earl Eues, Region 3 Commission, as the appointee representing GOHSEP;
- (5) Teresita McNabb, RN, Region 3 Commission, as the appointee representing Hospitals with More than 100 Beds;
- (6) Terry Broussard, Region 4 Commission, as the appointee representing

Hospitals with More 100 Beds;

(7) Leo de Alvare, MD, Region 4 Commission, as the appointee representing Neurologists;

(8) Col. Elizabeth Battalora, RN, Region 6 Commission, as the appointee representing the military; and

(9) Massimo Morandi, MD, Region 7 Commission, as the appointee from the emergency or trauma profession.

The motion was approved after a unanimous vote in the affirmative.

VII. Fiscal Year 2012 Budget

Fred Martinez reported on the 2011-2012 budget. A motion was made by Fred Martinez and seconded by Rep. Body White, to approve the attached proposed budget for Fiscal Year 2011-2012. The motion was approved after a unanimous vote in the affirmative.

It was announced that DHH has requested LERN to decrease the 2011 budget by \$57,538 to address a deficit. A motion was made by Fred Martinez and seconded by Rep. Regina Barrow, to remove funds from the contingency disaster coverage for the AMR contract to address the budget deficit. The motion was approved after a unanimous vote in the affirmative.

IX. Standard LERN Entry and Destination Protocol - changes for approval

A motion was made by Michelle Zembo, MD, and seconded by Jimmy Guidry, MD, to amend both the Standard LERN Entry Criteria and Standard Destination Protocol, last amended June 18, 2009, under "Anatomic" to add ". . . excluding hip fractures from same level falls" after "hip fractures (hip tenderness, deformity, lateral deviation of foot). . .", so that the entry will read "hip fractures (hip tenderness, deformity, lateral deviation of foot), excluding hip fractures from same level falls". The motion was approved after a unanimous vote in the affirmative.

LERN Registry Inclusion Criteria

LERN Medical Director Robert Coscia, MD, FACS, explained LERN State Registry Trauma Inclusion Criteria. A motion was made by Michelle Zembo, MD, and seconded by Peter Sullivan, MBA, to approve the attached LERN State Registry Trauma Patient Inclusion Criteria. The motion was approved after a unanimous vote in the affirmative.

Injury Research and Injury Prevention Program

As a follow up to discussion at the Board Retreat, Coletta Cooper Barret, RN, MHA, Chair, initiated a discussion of Injury Research and Injury Prevention. A motion was made by Representative Mack A. "Bodi" White, Jr., and seconded by Senator A. G. Crowe, that LERN assume responsibility currently undertaken by DHH, to include budget, and job appointments, for Injury Research and Injury Prevention. The motion was approved after a unanimous vote in the affirmative.

XV. Adjournment

The meeting was adjourned for lack of a quorum at 3:15 p.m.

Respectfully Submitted,

Coletta Cooper Barrett, RN, MHA
Chair



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II. Roll Call

Celia R. Cangelosi, Board Attorney, called the roll.

Members Present:

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Honorable Regina Ashford Barrow, Representative
Honorable A. G. Crowe, Senator
Joel Eldridge, DO
Jimmy Guidry, MD

Attachment IV to Minutes
of LERN Board Meeting
of 10/21/10

Fred Martinez
Gary Peters
Peter Sullivan, MBA
Honorable Mack A. "Bodi" White, Jr., Representative
Michele Zembo, MD

Members Absent:

Thomas C. Arnold, MD
Terri Brock
Honorable Sherri Smith Cheek, Senator
William "Beau" Clark, Jr., MD
Mark Cooper
Tricia Hensarling, LPC
Ross D. Judice, MD
Norman E. McSwain, Jr., MD
John Noble, Jr., M.D.
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XV. Adjournment

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Respectfully Submitted,

Coletta Cooper Barrett, RN, MHA
Chair



LOUISIANA EMERGENCY RESPONSE NETWORK

LERN State Registry Trauma Patient Inclusion Criteria

Definition:

To ensure consistent data collection across the State into the LERN State Registry, a trauma patient is defined as a patient sustaining a traumatic injury and meeting the following criteria:

At least one of the following injury diagnostic codes defined in the *International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM)*:

800–959.9

Excluding the following isolated injuries:

905–909.9 (late effects of injury)

910–924.9 (superficial injuries, including blisters, contusions, abrasions, and insect bites)

930–939.9 (foreign bodies)

830, 832, & 910 - Drowning

953 - Hanging without injury

AND MUST INCLUDE ONE OF THE FOLLOWING IN ADDITION TO

(ICD-9-CM 800–959.9):

Hospital admission as defined by your trauma registry inclusion criteria; OR

Patient transfer via EMS transport (including air ambulance) from one hospital to another hospital; OR

Death resulting from the traumatic injury (independent of hospital admission or hospital transfer status)

DOA's

Attachment XIV to Minutes
of LERN Board Meeting
of 10/21/10



LOUISIANA EMERGENCY RESPONSE NETWORK

Amended Minutes

Regular Meeting of Louisiana Emergency Response Network Board

Saturday, August 21, 2010 at 8:30 a.m.

Held at:

Omni Royal Orleans Hotel
621 St. Louis Street
New Orleans, LA 70140

I. Welcome/Introductions

The Louisiana Emergency Response Network Board meeting was called to order by Coletta Cooper Barrett, RN, MHA, Chair, at 8:45 a.m. The meeting was held pursuant to public notice, each member received notice, and notice was properly posted.

II. Roll Call

Christy Mayeux, Administrative Assistant, called the roll.

Members Present:

Coletta Cooper Barrett, RN, MHA, Chair
Norman E. McSwain, Jr., MD
Peter Sullivan, MBA
Carl "Jack" Varnado, Jr.
Christopher C. Baker, MD
Jimmy Guidry, MD
John Noble, Jr., MD
Joel Eldridge, DO
Honorable Mack A. "Bodi" White, Jr., Representative
Michele Zembo, MD

Members Absent:

Thomas C. Arnold, MD
Honorable Regina Ashford Barrow, Representative
Honorable Sherri Smith Cheek, Senator
William "Beau" Clark, J., MD
Mark Cooper
Honorable A. G. Crowe, Senator
Fred Martinez
Ross D. Judice, MD
Gary Peters
Mallory Williams, MD, MPH
Terri Brock

Ten members were present constituting a quorum.

III. Approval of Agenda

A motion was made by Norman E. McSwain, Jr., MD and seconded by Carl "Jack" Varnado, Jr., to adopt the agenda as written. The motion was approved after a unanimous vote in the affirmative.

IV. Board Retreat Continued from August 20, 2010

The Board Retreat continued from August 20, 2010.

A motion was made by John Noble, Jr., MD, and seconded by Carl "Jack" Varnado, Jr., MD: (1) to delegate appointing authority to Coletta Cooper Barrett, RN, MHA, Board Chair, and (2) to delegate to Coletta Cooper Barrett, RN, MHA, Board Chair, the same contracting authority previously delegated to the Board Executive Director, that is, to enter into contracts and/or make purchases on behalf of the Louisiana Emergency Response Network Board as necessary to facilitate LERN's continued operations, all within budget and within the requirements of all applicable state contracting and purchasing laws, and to sign any and all necessary contracts, purchasing documents or any other documents on behalf of the LERN Board as related thereto, for contracts and/or purchases to not exceed the amount of \$50,000.00, all subject to approval of the LERN Executive Committee. The motion was approved after a unanimous vote in the affirmative.

The following appointments were made to the LERN Executive Committee:

Board Chair
Board Vice Chair
Board Secretary, Treasurer
Jimmy Guidry, MD
LERN Medical Director, *ex officio*

It was announced that LERN Executive Committee will meet monthly. All Board members will be advised of the Executive Committee meetings and invited to participate.

V. Public Comments


There were no public comments.

VI. Adjournment

The meeting was adjourned at 11:57 a.m.

Respectfully Submitted,

Coletta Cooper Barrett, RN, MHA
Chair



Region One Commission Report to the LERN Board

December 17, 2009
by Regional Commission Chair –
Joseph F. Uddo, Jr., M.D., FACS

Commission Membership

- Dr. Joseph Uddo, Chair, Service District Hospitals
- Dr. Juliette Saussy, Vice-Chair, Louisiana State Medical Society
- Dr. Alan Marr, American College of Surgeons
- Ms. Cindy Davidson, HHSDRC
- Mr. Steve Gordon, Emergency Number Association
- Col. Jerry Sneed, GOHSEP
- Dr. Tatesha Davis, Office of Public Health Medical Director
- Dr. Roland Waguespack, American College of Emergency Physicians
- Mr. Frank Graff, Emergency Medical Response
- Mr. Mike Guillot, Local Ambulance Service
- Dr. Peter Debileux, Trauma Center Representative
- Ms. Gina Meyer, Louisiana Ambulance Alliance (rural)
- Dr. Ali Murtuza, American College of Cardiology




Commission Membership Vacant Positions

- Hospitals > 100 Beds
- Hospitals < 60 Beds



Region One Successes

- 11 hospitals with functioning Emergency rooms
- 12 EMS Providers – 2 of these Air med providers
- Region 1 has the benefit of the trauma center located in Orleans Parish
- The Trauma Center has Agreements with and services 10 surrounding parishes in it's catch mitt area




Region One Successes

- Region 1 Commission met regularly for five years with good attendance
- Very committed group, patient focused
- Region is active in Injury Prevention
- All Public Entities are fully interoperable on the 700 MHz radio band and Project 25 compliant.
- R.O.P.E
- Tri-regional Chair/Vice Chair Meetings



Regional One Challenges

- *Recovery*
- *Diverse interests*
- *Addressing urban and rural needs*
- *Neurosurgery and orthopedics*
- *Lack of openness with call schedules*
- *Stroke*



Future Plans

- ▣ *Integrate with the state system in a way that does not adversely affect Region One and benefits the state system*
- ▣ *Continue to keep a very talented group focused on our patient constituents*
- ▣ *Continual working toward interregional transfer protocols*



LERN

LERN
 REGIONAL EMERGENCY RESPONSE NETWORK

**Region 2 Commission Report
 LERN Board**

January 20, 2011
 Will Freeman, MD

Commission Membership 2010

- ACEP: Will Freeman, MD (Chair)
- ACS: Stewart Cayton, MD (Vice-Chair)
- HHS DRC: Allyn Whaley-Martin (Secretary)
- OHSEP: Anthony Summers
- OPH Regional Medical Director: Marilyn Reynaud, MD
- Local Ambulance Service: Chad Guillot
- LANREMIT: Corey Magill
- Hospitals < 60 Beds: Kathleen Ford, RN
- Hospitals > 100 Beds: Mary Dupuis, RN
- Service District Hospital: Billy Conery, RN
- LSMS: Jim Rhorer, MD
- 911 / LA NENA: Ralph A. Ladniek
- LAA: Al Marquez
- Burn Center: Ernest Mencer, MD

LERN
 REGIONAL EMERGENCY RESPONSE NETWORK

Regional Successes

- Region 2 start date: January 19, 2009
- Hospitals in Region: 11
- Ambulance Services in Region: 6
- LERN average patient volume / month: 198
- Quorum established in all meetings to date.
- Continued relationship building within regional network including commission agencies.

LERN
 REGIONAL EMERGENCY RESPONSE NETWORK

Regional Successes

- Telemedicine service collaboration between hospitals – ongoing (Stroke, Ambulance, Transfers)
- Ad-hoc Stroke Committee formed with development of protocols and implementation plan started
- Participated in Regional MCI Drill with stakeholders
- Participated in LERN State Radio Plan Summit

LERN
 REGIONAL EMERGENCY RESPONSE NETWORK

Regional Challenges

- Further development and implementation of inter-regional transfer protocols
- Assessed pediatric and OB trauma resources (Limited)
- Continue to work with state agencies and regional stakeholders on MCE/MCI protocols
- Inconsistent use of LERN by some EMS providers
- Need for on going reports from State Trauma Registry with contributions from Regional Stakeholders
- Develop a list of limited regional resources for stakeholders

LERN
 REGIONAL EMERGENCY RESPONSE NETWORK

Future Plans

- Establish ad hoc workgroup to address STEMI.
- Work with regional hospitals to capture data for inclusion into the statewide trauma database to identify trends and opportunities for improvement.
- Continue working with neighboring hospitals to define and implement inter-regional transfer protocols.
- Increase participation of regional EMS providers in LERN.
- Ongoing support and participation in community education about LERN within Region 2.

LERN
 REGIONAL EMERGENCY RESPONSE NETWORK

Future Plans

- *Continued education for all hospitals to ensure efficient patient assessment and transfer to definitive care facility.*
- *Participation in telemedicine services in the region*
- *Increase participation in future regional trauma conferences*
- *Work with LERN to develop rules or laws to allow for confidential meetings for the purpose of peer review and Q/PI development and issues*



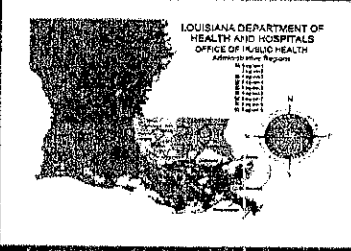
LERN

LERN
LOUISIANA EMERGENCY RESPONSE NETWORK

Region 3 Commission Report to the LERN Board

January 20, 2010
Dr. Donna Tesi

Region 3



LOUISIANA DEPARTMENT OF
HEALTH AND HOSPITALS
OFFICE OF PUBLIC HEALTH
Administrative Region

LERN

Region 3 Trauma Pattern

- Hospitals with Emergency Rooms: 11
- Ambulance Services: 3
- Current pattern some of trauma transports out of region
 - St. Charles – Region 1
 - Franklin - Region 4
 - Assumption – Region 2

LERN

Commission Membership

- GOHSEP – Earl Eves, Jr. REM
- DHH – OPH – Dr. Connie Gistand
- Local Ambulance Service – Brady Daigle
- Emergency Medical Response – Chad Davis
- Hospitals > 100 Beds – Teresita McNabb
- LSMS – Dr. Donna Tesi
- ACS – Dr. William Bisland
- HHS DRC – Kim Beetz
- La Ambulance Alliance – Ken Rousseau, BA, NREMT-P
- NENA-Dominique Bonwillian

LERN

Open Commission Positions

- Hospitals < 60 Beds
- Service District Hospitals
- ACEP

■ Chair/Vice Chair/Secretary elections will be held next meeting

LERN

Regional Successes

- Commission established end of 2010
- Majority of Commission Seats are filled.
- Commission has established contact and working relationship with Tri-Regional Coordinator
- Commission Adopted LERN standard entry criteria and destination protocol
- Protocol Implementation date March/April 2011

LERN

Regional Goals

Based on LERNS Rules and Regulations governing the Regional Commissions the commission plans to do the following:

Develop written plan for the region that details the resources and/or addresses areas of need in the region based on regulations

Implement this plan, including education of the providers in the region.

Annually complete a needs assessment and conduct education and training in the region to meet needs identified



LERN

Regional Goals

- Develop and implement a regional PI program plan
- Develop and implement a regional injury prevention program
- At least quarterly, submit evidence of ongoing activity, including meeting notices and minutes, to LERN board.

LERN

LERN

**Region 4 Commission Report
LERN Board**

January 20, 2011
Mark Olivier, MD FACEP

**Commission Membership
2010 Positions**

- American Academy of Pediatrics – Scott Hamilton MD - chair
- ACEP - Mark Olivier MD – vice - chair
- Hospitals < 60 beds – Cathie Boudreaux RN – secretary
- Local Ambulance Service – Troy Guidry – vice chair
- OPH medical director – Tina Stefanski MD

LERN

**Commission Membership
Current Positions**

- Service District Hospital – Leslie Greco MD
- Louisiana Ambulance Alliance – Steve Quebedeaux
- American College of Surgeons – James Garcelon MD
- Emergency Medical Response – Shane Bellard

LERN

**Commission Membership
Current Positions**

- Hospitals > 100 beds – Terry Broussard RN
- HHS Designated Regional Coordinator – Anjanette Hebert
- Louisiana State Medical Society – Paul Azar Jr. MD
- Jude Moreau – National Emergency Numbers Association
- Leo deAlvare – Neurologist

LERN

**Commission Membership
Vacant Positions**

- Office of Homeland Security & Emergency Preparedness

LERN

Regional Success

- Commission established in 2007.
- Go live date: 6/30/08
- Hospitals in region: 18
- Ambulance services in region: 4
- LERN volume/month: 278 / Previous year 245
- LERN meeting following EMS council meeting encourages attendance.
 - Feedback on problems/challenges
 - Improves quorum at meeting

LERN

Regional Success

- Stroke subcommittee
 - Neurologist member of regional LERN commission
 - Currently working on protocol development
- Mass casualty incident
 - Participated in regional drill MCI
 - Actual MCI/Bus accident/debrief
- South Central Louisiana Trauma Conference/EMS council
- Burn unit presentation at meeting



Regional Challenges

- Early LERN notification
 - EMS
 - ED walk-ins
 - 911 notification?? – NENA education
- Specialist (esp neurosurgery) availability
- ICU availability
- Individual hospitals keeping call center updated on status of beds, services.
 - Education reminders



Regional Challenges

- Identifying all patients who meet LERN criteria – Hospital ED/EMS education
 - How do we monitor compliance?
- Time sensitive specialized services not addressed by LERN
 - Amputation injuries
 - Pediatric trauma
 - Mandible fractures/Oral-maxillary-facial
 - Hand injuries
 - Cardiothoracic surgery



Regional Challenges

- Inter-regional transfers
 - pre-hospital
 - ED to hospital transfers
 - Surgery to hospital transfers



The Future

- Continue stroke workgroup meeting addressing hemorrhagic and non-hemorrhagic stroke for implementation. Protocol completion within next few months.
- Inter-regional Transfer Protocol
- Quality assurance/Performance Improvement
 - Opportunity for improvement; education of providers, hospitals, community, etc.



The Future

- Consider STEMI workgroup when appropriate
- Integration with trauma centers
- Funding???





Region 5 Commission Report LERN Board

January 20, 2011
Robert Daughdril


Commission Membership 2010

- Robert Daughdril, Chair, Calcasieu Office of Homeland Security & Emergency Preparedness
- Joy Briggs, RN, Vice Chair, Secretary, Office of Public Health Hospital Coordinator
- B. J. Foch, MD, Office of Public Health, Regional Medical Director
- Alycia Rodgers, MD, Louisiana State Medical Society
- Fred Dent, Emergency Medical Response
- Richard McGuire, National Emergency Number Association
- Stephen Kershaw, Louisiana Ambulance Association
- Joseph J. O'Connell, MD, American College of Surgeons
- Lana Chavers, Local Ambulance Service
- Treissy Bergeron, RN, Hospital > 100 Beds
- Michelle Perry, RN, Hospital < 60 Beds
- Liz Friedman, HHS Designated Regional Coordinator
- Robert Anderson, MD, American College of Emergency Physicians
- Annette Bolcher, RN, Service, District Hospital




Regional Successes

- Go Live Date – September 29, 2008
- Hospitals in region: 11
- Ambulance services in region: 5
- Average patient volume per month = 130
- Moved to Quarterly meetings / Adjusted meeting location and time for members / Quorum established at all meetings for 2010
- Collaboration between LERN call center and hospitals to identify issues with patient routing



Regional Successes

- Participated in CEMPACK activation course with Poison Control Center
- Participated in Regional Hurricane / MCI drill involving Bus accident during an evacuation
- Stand-by time for EMS has reduced since LERN implementation
- Participated in PHTLS course by LAA with LERN sponsorship
- Participated in LERN Statewide Radio Planning Summit




Regional Challenges

- Identification of LERN patients presenting directly to hospitals
- Development of Performance Improvement indicators and forum to address these topics
- Updating of on-call status
- Limited Neurosurgical on-call coverage
- Limited Orthopedic on-call coverage
- Movement of Trauma patients to and from Texas



Future Plans

- Participate in protocol development for inter-regional transfers
- Continue to identify and resolve routing issues
- Increase LERN notification of patients presenting directly to hospitals through education
- Work with State Agencies and Stakeholders to develop Multiple Casualty Event (MCE) / Mass Casualty Incident (MCI) protocols
- Possible Creation of ad-hoc committees to focus on time sensitive illnesses such as stroke and STEMI
- Work to identify interested Regional hospitals in seeking support for ACS verification



LERN
 LUISIANA EMERGENCY RESPONSE NETWORK

Region 6 Commission 2011 Annual Report

Commission Chair -- Mark Majors

LERN
 LUISIANA EMERGENCY RESPONSE NETWORK

Commission Members

Emergency Medical Response -- Mark Majors
 LSMS -- Dr. Jeremy Timmer
 DHH -- OPH -- Dr. David Holcombe
 Local Ambulance Service -- Jeff Piquet
 Hospitals < 60 Beds -- Alan Chandler
 Hospitals > 100 Beds -- Donna LeRoux
 Service District Hospitals -- Brenda Smith
 ACEP -- Dr. Lory Parker
 ACS -- Dr. Phillip Lindsay
 HHS DRC -- Mary Tarver
 Louisiana Ambulance Alliance -- Octavia Jackson
 MENA -- Sonya Wiley
 Nurses -- Vickie Slagg
 Military -- Elizabeth Battalora
 GORSEP -- Harry Foster (nominated)

LERN
 LUISIANA EMERGENCY RESPONSE NETWORK

2010 Regional Successes

- ✓ Rural Trauma Team Development Courses provided throughout the region by Rapides Regional Medical Center included multiple pre-hospital providers and at least one representative from every rural hospital in Region 6.
- ✓ The EMS Commission meets on a regular basis to discuss challenges in the region.
- ✓ Rapides Regional Medical Center continues to move towards Level II Trauma Center verification
- ✓ New Commission Positions added -- Military & Nursing
- ✓ Updated agreements with all 11 hospitals in the area
- ✓ Both major hospitals in the area are committed to excellence in care for Stroke and Spinal patients and work with the commission on those agendas

LERN
 LUISIANA EMERGENCY RESPONSE NETWORK

Regional Challenges

- ✦ Multiple facilities receive trauma patients, but most do not have the education, experience, and training required to manage and move the trauma patient
- ✦ There are multiple EMS agencies with varying policies and procedures that exist within this region
- ✦ Large geographical area that extends from Mississippi to Texas
- ✦ Several areas with no hospital within the parish

LERN
 LUISIANA EMERGENCY RESPONSE NETWORK

Future Plans

- Support hospitals within the region willing to pursue trauma center designation
- Support education and training for all other facilities that will be first receivers of trauma patients
- Support training and efforts of EMS agencies that will be essential in getting the right patient to the right place at the right time
- Collaborate with LERN to more clearly define the role of the Commissions

LERN
LOUISIANA EMERGENCY RESPONSE NETWORK

Region 7 Commission 2010 Annual Report

Presented by Dr. Max Morandi

LERN
LOUISIANA EMERGENCY RESPONSE NETWORK

Commission Members

GOHSEP – John Fulco (Vice Chair)
 DHH – OPH – Dr. Martha Whyte
 Trauma Center – Dr. Max Morandi
 Local Ambulance Service – Larry Ateridge
 LSMS – Dr. Spence Willis
 Hospitals < 60 Beds – Karen Mixon
 Hospitals > 100 Beds – Susan Cash
 ACEP – Dr. Darrel Graham
 ACS – Dr. Asser Youssef
 HHS/DRC – Knox Andrew
 Louisiana Ambulance Alliance – Gary Jones
 National Emergency Number Association – Martha Carter
 Emergency Medical Response – Keith Carter

LERN
LOUISIANA EMERGENCY RESPONSE NETWORK

Regional Successes

- ✓ All 9 rural hospitals have signed participation agreements
- ✓ A Trauma Center is located in this region and provides leadership to the Commission and surrounding regions
- ✓ Regional commission is fully seated
- ✓ LSU-S. rural hospitals and EMS indicate that patient outcomes have improved and that time to definitive care has been reduced when the protocols are followed
- ✓ LSU Leadership is working in collaboration with LERN to build the system

LERN
LOUISIANA EMERGENCY RESPONSE NETWORK

Regional Challenges

- ✦ Education needed for providers that will decrease the time taken at initial receiving facilities
- ✦ Current routing protocol for this region will only allow patients to be directed to LSUS
- ✦ Other definitive care facilities in the region have not yet become engaged as active partners with LERN
- ✦ Current protocol is different than that of the rest of the state
- ✦ Well defined routing of trauma patients exists with the Bossier City – Shreveport area, but doesn't communicate with LERN
- ✦ EMS agencies in the urban area have not yet become engaged with LERN
- ✦ EMS in the rural areas rarely utilize LERN

LERN
LOUISIANA EMERGENCY RESPONSE NETWORK

Future Plans

- ✦ Collaborate with LERN to address the routing of patients from the 9 rural hospitals to definitive care
- ✦ Work closely with the LERN Board to more clearly define the role of the Commissions
- ✦ Identify and utilize methods of providing education to providers in the region

LERN
LOUISIANA EMERGENCY RESPONSE NETWORK

Region 8 Commission 2010 Report

Presented by
Daniel Haynes, Vice-Chair

LERN
LOUISIANA EMERGENCY RESPONSE NETWORK

Commission Members

LSMS – LaDonna Ford (Chair)
 Local Ambulance Service – Daniel Haynes (Vice-Chair)
 DHH – OPH – Shelley Jones
 Emergency Medical Response – Janice Posey
 Hospitals > 100 Beds – Tim Epsweil
 Hospitals < 100 Beds David McSwain
 Service District Hospitals – Sheila Mason
 Nursing – Patrick King
 ACS – Stephanie Long
 HHS EPC – Mike Brant
 Louisiana Ambulance Alliance – Fights Allen
 National Emergency Number
 Association – Dabria Hopkins
 ACEP –
 GOHSEP –

LERN
LOUISIANA EMERGENCY RESPONSE NETWORK

Regional Successes

- ✓ All hospital agreements and most EMS agreements completed
- ✓ Commission members and providers engaged with system growth
- ✓ Larger EMS agencies and definitive care facilities are taking the lead to address issues and provide education in the region
- ✓ Communications between the region and the Trauma Center have improved
- ✓ Collaboration with both Rapides and LSUS to move patients to definitive care is improving

LERN
LOUISIANA EMERGENCY RESPONSE NETWORK

Regional Challenges

- ❖ Limited resources for definitive care
- ❖ Regional boundaries continue to hamper the rapid movement of patients to definitive care
- ❖ Long distances between rural areas and definitive care
- ❖ Varied levels of education and experience among the hospital and pre-hospital

LERN
LOUISIANA EMERGENCY RESPONSE NETWORK

Future Plans

- AMR will pilot a 1 call process with the Communication Center
- EMS agencies in the area will participate in project using 700 radios to communicate with LERN
- Engage as many providers as possible in the Rural Trauma Team Development Course
- Collaborate with LERN to further develop the role of the Commission

LERN
LOUISIANA EMERGENCY RESPONSE NETWORK

Region 9 Commission Annual Report

January 20, 2011

Commission Membership

- Dr. Jay Smith, Chair, Service District Hospital
- Dr. Chad Muntan, Co-Chair, ACEP
- Mr. David Marcus, Secretary, Rural Ambulance Alliance
- Mr. Keith Peek, HHSDRC
- Mr. Woody Glover, National Emergency Number Association
- Dr. Mike Isabel, LSMS
- Mr. Tommy Thibaud, GOHSEP
- Mr. Frank Jordan, Local Ambulance Service
- Ms. Rebecca Smith, Emergency Medical Response

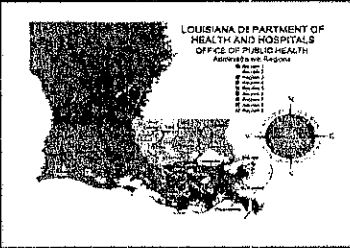
LERN

Commission Membership Vacant Positions

- OPH Regional Medical Director
- Hospitals < 60 Beds
- Hospitals > 100 Beds
- ACS

LERN

Region 9



LOUISIANA DEPARTMENT OF HEALTH AND HOSPITALS
OFFICE OF PUBLIC HEALTH
REGIONAL RESPONSE

LERN

Region 9

- Consists of 5 parishes: Livingston, St. Helena, Tangipahoa, St. Tammany and Washington.
- There are 11 Hospitals with Emergency Rooms
- There are 6 EMS Agencies that service the region

LERN

Regional Successes

- All hospitals licensed in Region 9 have enrolled and are participating.
- St. Tammany, Washington, and Tangipahoa Parishes have signed an agreement with The Spirit of Charity Trauma Center- Traumas meeting Trauma Center protocol are transported directly to Trauma center at Trauma Center Med Control Discretion

LERN

Regional Successes

- ▣ Collaboration with Region 1 Commission via Chair/Vice Chair meetings
- ▣ Several Region 9 Hospitals are participating in Beta-testing EMStat

LERN

Regional Challenges

- ▣ Lack of neurosurgical services or services for complex pelvic fractures in Region 9. Primarily being addressed with interregional cooperation with Region's 1 and 2
- ▣ Specialty on-call coverage – shortages of some specialties necessitate paid coverage for ED
- ▣ Two EMS agencies have not signed agreements with LERN at this time

LERN

Regional Challenges

- ▣ There is currently no LERN system in place for inter-regional transfers of patients that do not meet trauma center criteria but that require a higher level of care which can result in delays, although this is currently being developed.
- ▣ Communication – Region 9 continues to work toward reliable radio coverage throughout the region- all Priority 1 facilities will be equipped with the 700 MHz radios and should be fully operational by the first quarter of 2011

LERN

Future Plans

- ▣ *Continued collaboration with Region 1*
- ▣ *Use of LERN interregional transfer protocols*
- ▣ *Meeting between LERN and Hospitals in Region 9 to establish interest in designation of ACS Level 2 or 3 Trauma Center*
- ▣ *Continue to attempt to coordinate Neurosurgical coverage for Region 9 to provide 365 day coverage*

LERN

FY11 Fiscal Overview

as of 12/31/2010

Object Category	Budget Amount	Encumbered	Expended	Balance
Personal Services which includes Salaries, Wages and Related Benefits	\$735,997.00	\$0.00	\$304,415.04	\$431,581.96
Travel to include in-state and out of state	\$79,840.00	\$27,982.26	\$27,447.51	\$24,410.23
Operating Services to include advertising, printing, maintenance, rent, postage, utilities, telephone services other than OTM	\$339,484.00	\$174,127.53	\$117,044.21	\$48,312.26
Supplies to include general and computer	\$40,682.00	\$0.00	\$6,313.95	\$34,368.05
Professional Services to include Legal and Medical	\$1,964,233.00	\$1,329,917.15	\$555,413.85	\$78,902.00
Other Charges to include Miscellaneous charges, Public Education	\$12,000.00	\$0.00	\$5,070.47	\$6,929.53
Acquisitions and Major Repairs	\$14,000.00	\$0.00	\$0.00	\$14,000.00
Interagency Transfer to include telephone service	\$46,514.00	\$0.00	\$23,377.35	\$23,136.65
TOTALS	\$3,232,750.00	\$1,532,026.94	\$1,039,082.38	\$661,640.68

Attachment 7.a. to Minutes
of LERN Board Meeting
of 1/20/11

FY12 Budget Overview

as of 1/9/2011

Object Category	FY12 Budget	Existing FY11	% Change	\$ Inc/Dec
Personal Services which includes Salaries, Wages and Related Benefits	\$833,006.00	\$735,997.00	13.18%	\$97,009.00
Travel to include in-state and out of state	\$79,840.00	\$79,840.00	0.00%	\$0.00
Operating Services to include advetising, printing, maintenance, rent, postage, utilities,telephone services other than OTM	\$308,004.00	\$339,484.00	-9.27%	-\$31,480.00
Supplies to include general and computer	\$40,682.00	\$40,682.00	0.00%	\$0.00
Professional Services to include Legal and Medical	\$1,583,512.00	\$1,964,233.00	-19.38%	-\$380,721.00
Other Charges to include Miscellaneous charges, Public Education	\$12,000.00	\$12,000.00	0.00%	\$0.00
Acquisitions and Major Repairs	\$0.00	\$14,000.00	-100.00%	-\$14,000.00
Interagency Transfer to include telephone service	\$55,648.00	\$46,514.00	19.64%	\$9,134.00
TOTALS	\$2,912,692.00	\$3,232,750.00	-9.90%	-\$320,058.00

Call LERN Communications Center (XXX) XXX XXXX for:

- Unmanageable Airway
- Tension Pneumothorax
- Traumatic cardiac arrest
- Burn Patient without patent airway
- Burn patient >40% BSA without IV

Physiologic

- GCS <14
- SBP <90 (adults and > 9 y/o)
 <70 + 2 [age (yrs)] (age 1 to 8)
 <70 (age 1 to 12 months)
 <60 (term neonate)
- RR <10 or >29 (adults & ≥9 y/o)
 <15 or >30 (age 1 to 8)
 <25 or >50 (<12 m/o)

Anatomic

- Open or depressed skull fractures
- Open head injury with or without CSF leak
- Deterioration of the GCS
- Lateralizing signs or paralysis (i.e., one-sided weakness, motor, or sensory deficit)
- All penetrating injuries to head, neck, torso, & extremities proximal to elbow & knee
- Flail Chest
- 2 or more proximal long-bone fractures
- Crush, degloved or mangled extremity
- Amputation proximal to wrist & ankle
- Pelvic Fractures
- Hip Fractures (hip tenderness, deformity, lateral deviation of foot) excluding isolated hip fractures from same level falls
- Major joint dislocations (hip, knee, ankle, elbow)
- Open Fractures

Mechanism

- Falls >20 ft. adults
 >10 ft. (child) or 2 to 3 times height
- Auto vs. pedestrian/bicyclist thrown, run over or significant (>20 MPH) impact
- Motorcycle crash >20 MPH
- High-risk auto crash
 - Intrusion >12 in, occupant site:
 >18 in. any site
 - Ejection, partial or complete from automobile
 - Death in same passenger compartment

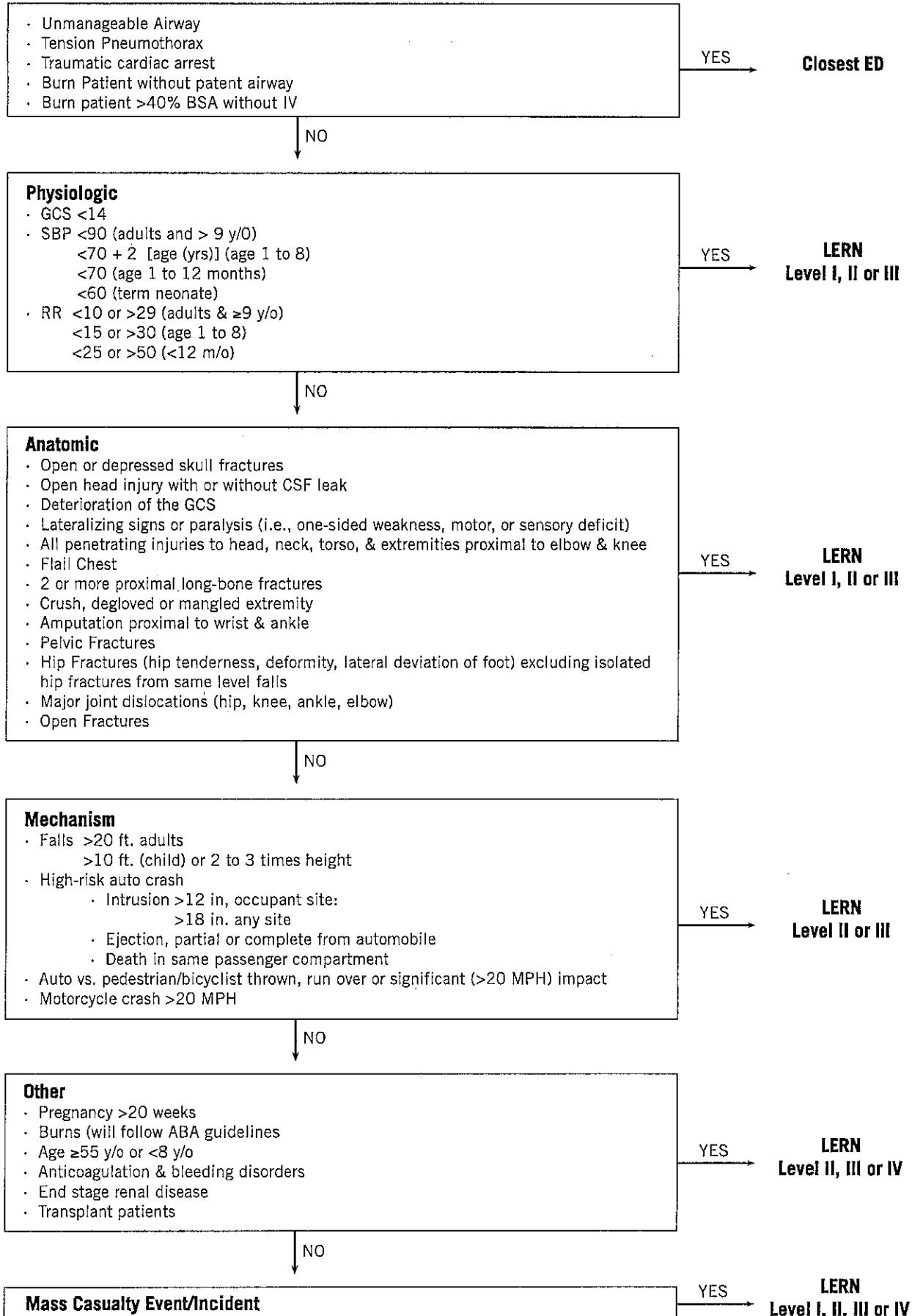
Other

- Pregnancy >20 weeks
- Burns (will follow ABA guidelines)
- Age ≥55 y/o or <8 y/o
- Anticoagulation & bleeding disorders
- End stage renal disease
- Transplant patients

Mass Casualty Event/Incident

Attachment 7.b. to Minutes
 of LERN Board Meeting
 of 1/20/11
 (1 of 2)

STANDARD LERN ENTRY TRAUMA CRITERIA DESTINATION PROTOCOL



LERN Hospital Interregional Transfer Guidelines

- All patients whose conditions exceed the regionally available resources provided by local area hospitals may be transferred from one region to another following LERN Interregional Transfer Protocol.
- The LERN Hospital Interregional Transfer Protocol only applies to hospitals that are participating in the LERN network.
- Regions or individual parishes that have MOU's (which include medical control & destination guidelines), between an ACS verified Level 1 trauma center and a local parish medical society (ies) will be incorporated into the LCC standard operating procedure for the effected region(s).

LERN Hospital Interregional Transfer Protocol

1. Patients transferred via the LERN Hospital Interregional Transfer Protocol must:
 - a. Meet LERN Standard Entry Criteria that requires resources &/or capabilities not available in that region.
 - b. Be assessed and stabilized to the best of their ability at a local area hospital prior to transport to the closest appropriate hospital.
 - c. The treating physician /nurse must contact LERN to request a transfer. The LERN Communications Center (LCC) will determine the closest and most appropriate facility available following the LERN Standard Destination Protocol.

DRAFT

Table of Contents

- I. Authority and Leadership**
 - a. Legislation
 - i. Original LERN Legislation: 2004
 - ii. Amendments to LERN Legislation: 2006 – 2010
 - b. Vision and Mission
 - i. Trauma and Time-Sensitive Illness; Comprehensive Statewide System, Interfaced with GOHSEP
 - c. Lead Agency
 - i. Board Membership/Representation
 - 1. Role
 - ii. Regional Commissions
 - 1. Regions Identified
 - 2. Commission Membership/Representation
 - 3. Role
 - 4. Regional Plans
 - iii. Organization/Staff
 - 1. Executive Team – Summary of Individual Roles
 - 2. Chart of Organization
 - d. System Development
 - i. ACS Trauma System Model
 - ii. Statewide System Plan
 - iii. Strategic Priorities
 - 1. Develop Sustainable Funding to Support LERN Operations and Statewide System of Designated Trauma Centers
 - 2. Build Rural Capacity
 - 3. Create Communications Strategy and Plan
 - 4. Develop Trauma Registry and PI System
 - 5. Incorporate Injury Prevention Program
- II. Financial**
 - a. LERN Operations – Current Funding

Attachment 7.b to Minutes
of LERN Board Meeting
of 1/20/11
(2 of 2)

- b. Trauma Fund – General Purpose

III. Injury Prevention and Outreach

- a. ACS Trauma System Model
- b. Transfer of Injury Prevention Function to LERN
 - i. Current Scope of Activity/CDC Grants
- c. Trauma in Louisiana (UB92 data)

IV. Pre-hospital Trauma Care

- a. EMS Organization Participation in Trauma System
 - i. Voluntary System
 - ii. EMS Agreement
- b. Standard LERN Entry Trauma Criteria: Pre-Hospital Triage Protocol
- c. LERN Communications Centers
 - i. General Purpose and Scope of Operation
 - ii. Standard Operating Procedures

V. Definitive Care Facilities

- a. Hospital Participation in Trauma System
 - i. Voluntary System
 - ii. Hospital Agreement
- b. State-Designated Trauma Centers
 - i. Trauma Regions
 - ii. Allocation of Trauma Centers
 - iii. ACS Requirements
- c. Standard LERN Entry Trauma Criteria: Hospital Triage Protocol

VI. Statewide Trauma Registry

- a. General Purpose
- b. Information Technology System
 - i. Web-Based Application
- c. EMS Data
- d. Hospital Data

- e. Registry Inclusion Criteria
- f. Data Dictionary for EMS and Hospital
 - i. How to Guide for Data Collection and Submission to Registry
- g. Confidentiality Protection
 - i. Legislation
 - ii. User Agreement
- h. Reports: State and Regional
- i. Research

VII. Performance Improvement

- a. Statewide System
 - i. General Purpose of System
 - ii. Elements of System
- b. Regional System
 - i. General Purpose of System
 - ii. Elements of System

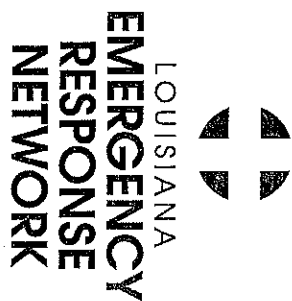
VIII. Disaster and Mass Casualty Management

- a. ESF-8 Notification Protocol
- b. Mass Casualty EMS Triage Guidelines and Scene Management
- c. Regional Mass Casualty Incident Plans

Appendices

- [Relevant, cited Louisiana Statutes]
- Sample LERN documents

GRAPHIC STANDARDS GUIDE
January 2011



Attachment 7.d. to Minutes
of LERN Board Meeting
1/20/11

GRAPHIC STANDARDS GUIDE

Introduction

Vision: Louisiana will have a comprehensive and integrated trauma network that decreases trauma-related deaths and incidents of morbidity and mortality due to trauma in Louisiana by maximizing the integrated delivery of optimal resources for patients who ultimately need acute trauma care. The network will also address the daily demands of trauma care and form the basis for disaster preparedness. To build and oversee a comprehensive trauma system for the State of Louisiana.

Mission: The mission of the Louisiana Emergency Response Network is to safeguard the public health, safety, and welfare of the people of the State of Louisiana against unnecessary trauma and time-sensitive related deaths or morbidity due to trauma.

The brand evolution of Louisiana Emergency Response Network presents the organization as professional and efficient. The identity system gives a modern and simplified feel to get correct information out to the right people quickly.

This booklet presents the specifications and guidelines for the usage of the Louisiana Emergency Response Network corporate identity. Please follow these instructions when designing any form of print or electronic medium. These basic graphic principles will help to maintain the integrity of the brand by using it consistently across all applications.

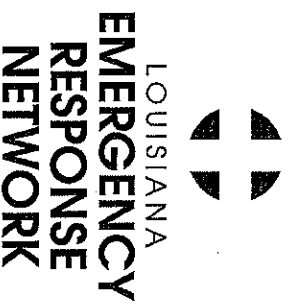
Logo

The Louisiana Emergency Response Network logo has been specially designed and should only be reproduced from master artwork from the disk provided.

There are two versions of the LERN logo.

Stacked Version

The stacked version is the standard version and should be used at all times unless space restrictions prohibit its use.



Horizontal Version

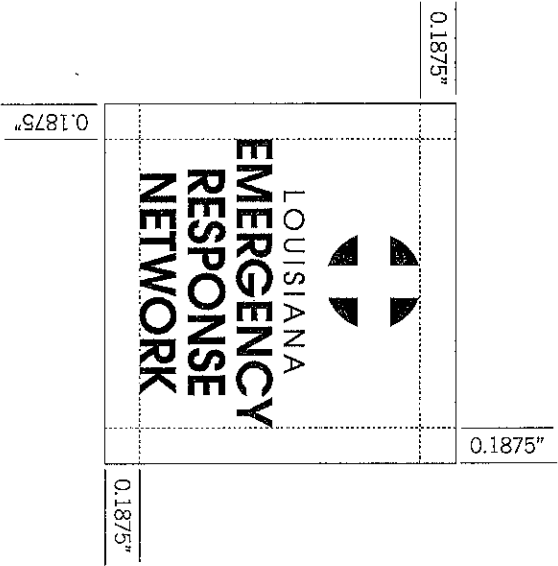
In the instance where space is restricted, the horizontal version of the logo should be used.



Logo

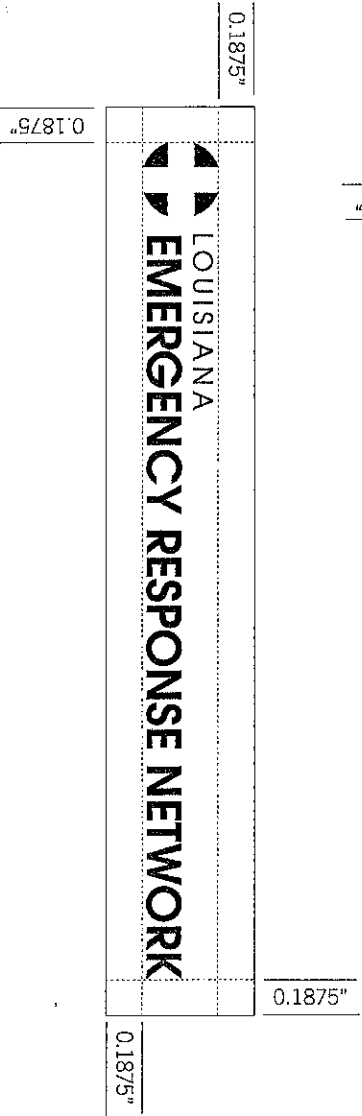
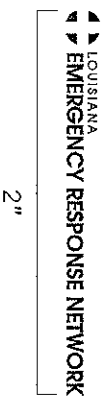
Clear Area

To protect the legibility of the logo, a clear area should be left around it. No other text or image should be placed within this area.



Size Specifications

To protect the legibility of the logo, the logo should not be printed smaller than 3/4" in width for the stacked version and 2" in width for the horizontal version.



Logo

Logo Don'ts

Used correctly, the LERN logo conveys the professionalism and efficiency of the organization. With that in mind, here are some examples of ways **NOT** to use the logo:

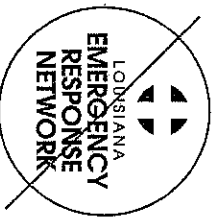
Skew or stretch the logo



Rotate or flip the logo



Enclose the logo in a different shape or use decorative borders



Replace the type on the logo with any alternate type style



Change the spatial arrangement of the icon and the logotype



Change the proportional relationship of the icon and the logotype



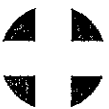
Add type or graphics on the logo or within the clear area



Logo

Tagline

The tagline, “Right Place. Right Time. Right Care.,” can be used to explain the overall mission of the Louisiana Emergency Response Network. If the tagline is used as a part of the logo, it should be used only as in the two compositions pictured below. Select the appropriate version based on the space available and overall design of the specific application. The tagline should never appear above or to the left of the logo.



LOUISIANA
EMERGENCY
RESPONSE
NETWORK

Right Place. Right Time. Right Care.

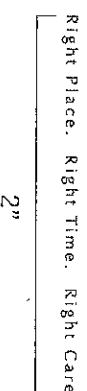


In some instances, the tagline may be separated from the logo, however, the logo must still appear elsewhere on the piece. The tagline should only be reproduced from master artwork from the disk provided and should never be re-typset.

Right Place. Right Time. Right Care.

Typeface: Optima, Roman, Tracking: 200, Color: Cool Gray 11

Taglines may be adjusted in size if required by available space or size of piece to insure legibility. The tagline should not appear smaller than 2” in width. If space is limited, the tagline should not be used as part of the logo in order to insure legibility.

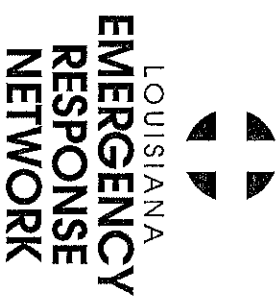


Logo

Regional Commissions Logo Versions

LERN includes 9 regional commissions. A system has been created which incorporates the regional commission name with the LERN logo for use by those commission offices on business papers, signage, etc. If the commission name is used as a part of the logo, it should be used only as in the two compositions pictured to the right. Select the appropriate version based on the space available and overall design of the specific application. The "Regional Commission Number" font is Trade Gothic, Bold Condensed No. 20, Tracking 200, All Caps. The regional area should be placed after the commission number separated by a vertical bar and typeset with the following guidelines: Trade Gothic, Condensed No. 18, Tracking 200, All Caps, Size should be $\frac{5}{7}$ size of "Regional Commission"

Type Size. The color of the commission name is Pantone® Cool Gray 11. See the secondary color guide for CMYK and RGB values. Templates of these layouts are available in Adobe Illustrator file format.



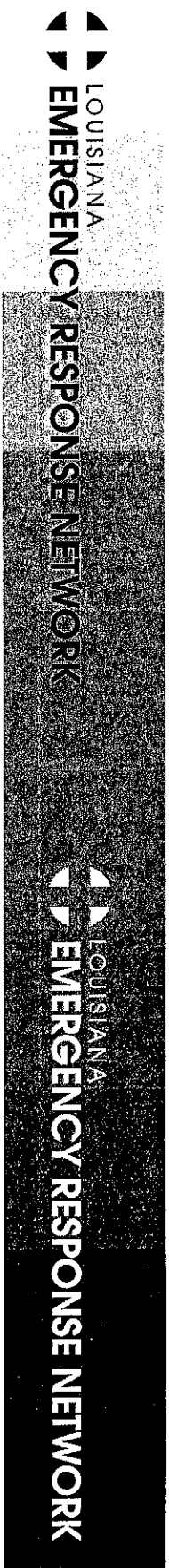
REGIONAL COMMISSION 7 | SHREVEPORT



REGIONAL COMMISSION 7 | SHREVEPORT

Colors

The logo should only appear in colors specified in this guide; specified Pantone® blue and red, process blue and red, solid black, solid process blue, solid process red or reversed out white. Graphic devices, such as outlines, drop shadows, etc., should not be used. The logo is designed to work on a white background or with a secondary palette. In the case of black and white printing or a nonspecified background color, logo should appear in solid black or reversed out white as below.



Colors

2-color Version

Whenever possible, the two approved Pantone® spot colors should be used to ensure proper color accuracy.



Pantone® 293

This color is recommended for large solid or background areas.



Pantone® 1795

This color is recommended to be used as an accent color.

Black Version

This version is to be used when only one color can be used in printed material or in black and white publications.



Pantone® Process Black



Grayscale Version

This version is to be used when 2-color or 4-color mediums are not available.



BLACK
90%

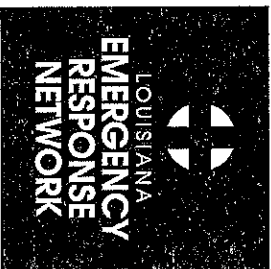


BLACK
60%



White Version


This version is to be used when logo is placed on a background that is dark enough to provide sufficient contrast for clarity and legibility.




Colors

4-color (CMYK) Version

This version is to be used for any 4-color print mediums, brochures, posters, ads, etc. CMYK printing can not guarantee color consistency.


	C	M	Y	K
	100	76	8	1

	C	M	Y	K
	11	99	96	2

HTML Colors

HTML colors are defined using a hexadecimal notation for the combination of RGB color values. These colors should be used in HTML coding for the web.


	#0046AD

	#D3222A

RGB Version

Used in digital media, such as televisions, computers, etc.











	R	G	B
	0	70	173

	R	G	B
	211	34	42

Colors

Secondary Color Palette

A secondary color palette has been created to fulfill the need for more colors in collateral materials beyond the use of the LERN red and blue. The Pantone®, CMYK and RGB breakdowns are listed below. Additional colors may be added to the secondary color palette.

	Pantone® 292	C	M	Y	K	R	G	B
		49	11	0	0	121	189	232
	Pantone® 1655	C	M	Y	K	R	G	B
		0	63	91	0	244	125	48
	Pantone® 565	C	M	Y	K	R	G	B
		23	0	13	0	194	229	224
	Pantone® 2707	C	M	Y	K	R	G	B
		17	6	0	0	207	224	243
	Pantone® Cool Gray 3	C	M	Y	K	R	G	B
		0	0	0	17	216	217	218
	Pantone® 2748	C	M	Y	K	R	G	B
		100	88	0	14	25	57	138
	Pantone® 285	C	M	Y	K	R	G	B
		89	43	0	0	0	125	195
	Pantone® 290	C	M	Y	K	R	G	B
		25	2	0	0	185	224	247
	Pantone® 320	C	M	Y	K	R	G	B
		100	0	31	7	0	160	175
	Pantone® 487	C	M	Y	K	R	G	B
		0	35	28	0	249	180	166

Typography

Logo Typeface

The LERN logo's font is AV Garde. This is for informational purposes only, as the logotype should never be re-typeset. You should only use the provided logo files.

AV Garde

ABCDEFGHIJKLMN**OP**QRSTUVWXYZ
abcdefghijklmnopqrstu**vwxyz**
1234567890

Tagline Typeface

The LERN tagline's font is Optima. This is for informational purposes only, as the tagline should never be re-typeset. You should only use the provided tagline files.

Optima

ABCDEFGHIJKLMN**OP**QRSTUVWXYZ
abcdefghijklmnopqrstu**vwxyz**
1234567890

Commission Text

There are times when it may be appropriate for a commission to add its name to the standard LERN logo. See the "Regional Commissions Logo Versions" section of this guide for details on the use of organizational text. The font to be used in these instances is Trade Gothic, Bold Condensed No. 20 and Condensed No. 18.

Trade Gothic Bold Condensed No. 20

ABCDEFGHIJKLMN**OP**QRSTUVWXYZ
abcdefghijklmnopqrstu**vwxyz**
1234567890

Trade Gothic Condensed No. 18

ABCDEFGHIJKLMN**OP**QRSTUVWXYZ
abcdefghijklmnopqrstu**vwxyz**
1234567890

Typography

Collateral Text

Serif letter styles for body and heads in multiple weights and italics for use in collateral and marketing pieces.

Caslon

Minion Pro

Palatino

Garamond

Sabon

Serif font for office use on a desktop PC

Times New Roman ABCDEabcde12345

Calisto MT ABCDEabcde12345

Sans serif letter styles for body and heads in multiple weights and italics for use in collateral and marketing pieces.

Trade Gothic

Univers

Frutiger

Futura

Akzidenz Grotesk

Humanist 531

Sans serif fonts for office use on a desktop PC

Arial ABCDEabcde12345

Helvetica ABCDEabcde12345

Calibri ABCDEabcde12345

Gill Sans MT ABCDEabcde12345