

Minutes

Meeting of Louisiana Emergency Response Network Board

Thursday, November 20, 2014 at 1:00 p.m.

held at:

Louisiana Emergency Response Network 14141 Airline Hwy., Suite One, Suite B Baton Rouge, LA

1. Welcome/Introductions

The November 20, 2014 meeting of the Louisiana Emergency Response Network Board (LERN) was called to order on November 5, 2014 by Dr. John Hunt, Chair, at approximately 1:05 p.m. The meeting was held pursuant to public notice, each member received notice, and notice was properly posted.

2. Roll Call

Roll Call was taken by Deborah Spann, Tri-Regional Coordinator. The following members were present:

Members Present:

John Hunt, MD, Chair Patrick Breaux, MD William Freeman, MD Kenneth J. Gaines, MD Chris Gilbeaux Jimmy Guidry, MD Katherine Hebert Danita LeBlanc

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John Owings, MD Tracy Wold Christ Wroten, OD

There were 11 board members present when the roll was called constituting a quorum.

Coletta Cooper Barrett arrived at 1:22 p.m.

Craig C. Greene, MD, arrived at 1:45 p.m.

Deiadra J. Garrett, MD, arrived at 1:55 p.m.

Peter Sullivan arrived at 2:00 p.m.

Kristin K. Whitty, PhD, APRN, arrived at 2:01 p.m.

Members Absent:

Honorable Regina Ashford Barrow, State Representative
Honorable Sherri Smith Cheek-Buffington, State Senator
Billy Conerly
Joel Eldridge, DO
Michael Hulefeld
Tomas Jacome, MD
Norman E. McSwain, Jr., MD
Honorable Karen Gaudet St. Germain, State Representative
Carl "Jack" Varnado, Jr.
Honorable Mack A. "Bodi" White, Jr., State Senator

Staff Present:

Paige Hargrove, Executive Director Cassandra Woods, Financial Manager Vanessa McKee, Administrative Assistant Chris Hector, Administrative Director Deborah Spann, Tri Regional Coordinator Yvette Legendre, Tri Regional Coordinator

Contractors Present:

Robert Coscia, MD, FACS, LERN Medical Director

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Jason Allemand, Communications Center Supervisor Rudy Gomez, Management Consultant

Introduction of New Board Member

New Board Member Katherine Hebert, RHC representative, was introduced.

3. Approval of Agenda

A motion was made by Dr. Freeman and seconded by Tracy Wold, to approve the agenda as written. The motion was approved after a unanimous vote in the affirmative.

4. Approval of Minutes of 8/22-23/14 Board Retreat

A motion was made by Dr. Guidry and seconded by Danita LeBlanc to approve the minutes of the August 22-23, 2014 Board retreat as written. The motion was approved after a unanimous vote in the affirmative.

5. LERN Business

a. Executive Director Report

Paige Hargrove, LERN Executive Director, discussed Executive Director report, attached as Attachment 5a. No formal action was taken by the Board.

(1) LSU Health Shreveport

The University Health LSU Health Science Center of Shreveport was congratulated on its recent Level 1 Trauma Center Verification. Karen Carr, Vice President of UHLSU Health Science Center was introduced to the Board. No formal action was taken by the Board.

(2) Rules and Regulations

Board attorney Celia Cangelosi reported that the Stroke/STEMI/Centers, Recognition rules are on track to be finalized December 20, 2014; and the rules codifying all protocols previously adopted are on track to be finalized January 20, 2015. No formal action was taken by the Board.

(3) Blue Cross Meeting

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Executive Director Paige Hargrove reported on a meeting with Blue Cross officials. No formal action was taken by the Board.

(4) LERN App Development

Executive Director Paige Hargrove reported that after considering budget constraints, efforts to develop a LERN App for protocols are on hold at this time. No formal action was taken by the Board.

(5) Region 8 Trauma Center Meeting

Board member John Owings, MD, reported on meetings with Region 8 stakeholders regarding the possibilities of Level 3 trauma centers in that region. Dr. Owings to write a proposal for the cost to develop a Level 3 trauma center at LSU Health Conway. No formal action was taken by the Board.

b. Ratification/Resignation of Commission Members

A motion was made by Dr. Breaux and seconded by Tracy Wold to approve the following nominations and resignation to or from the regional commissions:

- Ratified appointment of Mark Boudreaux to Region 3 as nominated of NENA;
- Ratified appointment of Beth Norris to Region 3 as nominee of LHA;
- Ratified appointment of Michael Gary, RN to Region 3 as nominee of by Louisiana Chapter of the Emergency Nurses Association;
 - Ratified appointment of Van Snider, MD to Region 5 as nominee of LSMS;
- Ratified appointment of LTC Randel C. Cassels to Region 7 as nominee of Military Hospitals;
- Ratified appointment of Shane Terral to Region 7 as nominee of Med-Trans Air Medical Transport; and
- Accepted resignation of Brenda Arceneaux, Thibodaux RMC, of Region 9 as nominee of LHA.

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

c. Stroke Update

It was reported that rules and regulations regarding Stroke/STEMI/Centers,

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Recognition are on track to be finalized on December 20, 2014.

Paige Hargrove, LERN Executive Director, reported that since January, 2013, there have been 12 new spokes added to the "Hub and Spoke" model in the state. There are now 40 "spoke" hospitals thus expanding access to care for the citizens of Louisiana.

d. Trauma System Update

LERN Medical Director Robert Coscia, MD, reported to the Board on development of the Trauma System in Louisiana, noting that there are currently four accredited trauma centers in Louisiana, an increase of two from four years ago; and that currently there are three other hospitals that are working towards designation. They are: North Oaks Medical Center (Level 2), Lafayette General Medical Center (Level 2), and Lakeview Regional Medical Center (Level 3).

A motion was made by Dr. LeBlanc and seconded by Tracy Wold to recall the Trauma Triage Protocol adopted by the Board at the August 23, 2014 Board meeting. The motion was approved after a unanimous vote in the affirmative.

A motion was made by Coletta Barrett and seconded by Dr. Owings to adopt and promulgate the Destination Protocol: Trauma, to be effective January 1, 2015, attached as <u>Attachment 5d</u>, with the following modifications:

- a. In the first block in the right hand column, change "closet" to "closest".
- b. In the second block in the right hand column, end the last sentence after "resourced hospital." and delete the remainder of the sentence.
- c. In the third block on the right hand column, in the last sentence, change the word "will" to "may".

The motion was approved after a unanimous vote in the affirmative. A copy of the Destination Protocol: TRAUMA as adopted is attached hereto as <u>Attachment 5d</u>, as adopted.

(1) Trauma Program Attestation

Paige Hargrove, LERN Executive Director, updated the Board that North Oaks attested to a Level 2 Trauma Program and Lakeview attested to a Level 3 Trauma Program.

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e. Trauma System Update

Rudy Gomez of SSA Consultants reported on Traumatic Head and Spinal Cord Injury Trust Fund, see attached as <u>Attachment 5e</u>; and ideas for developing other sources of funding. No formal action was taken by the Board.

f. Budget/Finance

A report on Financials was presented by LERN Board member Peter Sullivan on the budget. See report attached as <u>Attachment 5f.</u> No formal action was taken by the board.

g. Proposed Meeting Schedule 2015

A motion was made by Dr. Breaux and seconded by Coletta Barrett to adopt January 15, 2015, April 16, 2015, August 20, 2015 and December 10, 2015 as proposed meeting dates for 2015. The motion was approved after a unanimous vote in the affirmative.

h. Dr. Hunt Report/Closing Remarks

No formal action was taken by the board.

6. Public Comments

None.

7. Adjournment

The meeting was adjourned at 2:25 p.m.

Respectfully Submitte	d,	
John Hunt, MD, Chair	•	



Minutes

Meeting of Louisiana Emergency Response Network Board

Friday, August 22, 2014 at 2:00 p.m.

held at:

Hyatt Hotel 800 Iberville Street, New Orleans, LA

1. Welcome/Introductions

The August 22-23, 2014 meeting of the Louisiana Emergency Response Network Board (LERN) was called to order on August 22, 2014 by Dr. John Hunt, Chair, at approximately 2:10 p.m. The meeting was held pursuant to public notice, each member received notice, and notice was properly posted.

Dr. John Hunt, Chair, welcomed everyone to the 2014 LERN Board retreat.

Roll Call

Roll Call was taken by Deborah Spann, Tri-Regional Coordinator. The following members were present:

Members Present:

John Hunt, MD, Chair Coletta Cooper Barrett Patrick Breaux, MD Joel Eldridge, DO William Freeman, MD Kenneth J. Gaines, MD Chris Gilbeaux

Attachment 4 to Minutes of LERN Board Meeting of 11/20/14

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Jimmy Guidry, MD
Tomas Jacome, MD
Danita LeBlanc
Norman E. McSwain, Jr., MD
John Owings, MD
Peter Sullivan
Honorable Mack A. "Bodi" White, Jr., State Senator
Kristin K. Whitty, PhD, APRN
Tracy Wold
Michele Zembo, MD

Members Absent:

Honorable Regina Ashford Barrow, State Representative Honorable Sherri Smith Cheek-Buffington, State Senator Craig C. Greene, MD Katherine Hebert Michael Hulefeld Honorable Karen Gaudet St. Germain, State Representative Carl "Jack" Varnado, Jr. Chris Wroten, OD

Staff Present:

Paige Hargrove, Executive Director
Cassandra Woods, Financial Manager
Vanessa McKee, Administrative Assistant
Chris Hector, Administrative Director
Deborah Spann, Tri Regional Coordinator
Ted Colligan, Tri Regional Coordinator
Yvette Legendre, Tri Regional Coordinator
Jason Allemand, Communications Center Supervisor

Contractors Present:

Robert Coscia, MD, FACS, LERN Medical Director Sheryl Martin-Schild, MD, PhD, FANA, Stroke Medical Director Murtuza Ali, MD, STEMI Medical Director Christel Slaughter, Management Consultant Rudy Gomez, Management Consultant

Billy Conerly arrived at 3:30 p.m.

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There were 17 board members present when the roll was called constituting a quorum.

2. Introductions, Mission Review, Agenda Review, and Retreat Logistics

Paige Hargrove, LERN Executive Director, introduced new Board members, Chris Guilbeaux, Deputy Director of Preparedness, Response & Interoperability, Governor's Office of Homeland Security and Emergency Preparedness, representing Louisiana Governor's Office of Homeland Security and Emergency Preparedness; and John T. Owings, MD, FACS, Professor of Surgery, Trauma Medical Director, Louisiana State University Health Sciences Center - Shreveport, representing Louisiana State University. Ms. Hargrove thanked John Dailey for his service to the Board. No formal action was taken by the Board.

3. STEMI Update

Murtaza Ali, MD, LERN STEMI Medical Director, updated the Board on progress of the state STEMI system initiative. See report attached hereto as <u>Attachment 3</u>. No formal action was taken by the Board.

4. Stroke Update

Sheryl Martin-Schild, MD, LERN Stroke Medical Director, presented an overview of progress and plans for outreach regarding Stroke care in Louisiana. See copy of report attached as <u>Attachment 4</u>. No formal action was taken by the Board.

5. Louisiana Hospital Association-Future Healthcare and Hospitals in Louisiana

Paul Salles, President and CEO of Louisiana Hospital Association, addressed the Board and answered questions regarding data collection from the hospitals. No formal action was taken by the Board.

6. LERN Data

Greg Frost, LERN attorney, presented a powerpoint presentation regarding the protection and use of data collected by LERN. See report attached as <u>Attachment 6</u>. No formal action was taken by the Board.

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7. Trauma Registry - 2013 Report

Chris Hector, LERN Administrative Director, presented a draft of the 2013 Trauma Registry report. See draft attached as <u>Attachment 7</u>. No formal action was taken by the Board.

8. Adjournment

Upon a motion of Kristin Whitty, and seconded by Tracy Wold, and approved by unanimous vote, the meeting adjourned at 5:50 p.m. to be reconvened Saturday, August 23, 2014, at 8:00 a.m.

Continuation of Meeting of Louisiana Emergency Response Network Board

Saturday, August 23, 2014 at 8:00 a.m.

held at:

Hyatt Hotel 800 Iberville New Orleans, LA

9. Call To Order

Dr. John Hunt reconvened the meeting at 8:07 a.m.

a. Roll Call

Deborah Spann, Tri-Regional Coordinator, called the roll.

Members Present:

John Hunt, MD, Chair Coletta Cooper Barrett Patrick Breaux, MD Billy Conerly Joel Eldridge, DO William Freeman, MD Kenneth J. Gaines, MD Chris Gilbeaux Page 5 of 8

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Jimmy Guidry, MD

Michael Hulefeld

Tomas Jacome, MD

Danita LeBlanc

Norman E. McSwain, Jr., MD

John Owings, MD

Peter Sullivan

Honorable Mack A. "Bodi" White, Jr., State Senator

Kristin K. Whitty, PhD, APRN

Tracy Wold

Michele Zembo, MD

Members Absent:

Honorable Regina Ashford Barrow, State Representative

Honorable Sherri Smith Cheek-Buffington, State Senator

Craig C. Greene, MD

Katherine Hebert

Honorable Karen Gaudet St. Germain, State Representative

Carl "Jack" Varnado, Jr.

Chris Wroten, OD

There were 19 Board members present when the roll was called, constituting a quorum.

10. Board Meeting/Board Business

a. Approve May Minutes

A motion was made by Dr. Breaux and seconded by Dr. McSwain to approve the minutes of the Board meeting of May 15, 2014, attached hereto as <u>Attachment 10a</u>. The motion was approved after a unanimous vote in the affirmative.

b. Ratification/Resignation of Commission Members

A motion was made by Dr. Owings and seconded by Dr. McSwain to approve the following nominations and/or resignations to the regional commissions:

- Mark Gaudet, RN Region 2, resignation of EMR/LANREMT;
- Chad Olinde Region 2, nominee for Rural Hospital Coalition;
- Dominique A. Bonvillian Region 3, resignation of NENA;

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- John B. Simar Region 4, nominee of Rural Hospital Coalition;
- Dawn McKeown Region 7, nominee of ENA; and
- James T. Esswein Region 8, resignation of Hospital ≥ 100 Beds.

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

c. Budget

Peter Sullivan, Board Treasurer, presented FY14 Fiscal Overview to the Board, attached here as <u>Attachment 10c</u>. No formal action was taken by the Board.

d. New Website

Paige Hargrove, Executive Director, discussed improvements and changes to LERN's website. No formal action was taken by the Board.

11. Trauma Update and Discussion of CDC Field Triage Guideline

Dr. Robert Coscia, LERN Medical Director, updated the Board regarding trauma system development, and presented the map attachment as <u>Attachment 11-1</u> of current and possible trauma center locations. Discussion was held regarding state performance improvement initiatives. No formal action was taken by the Board.

Paige Hargrove, Executive Director, presented the CDC 2011 Guidelines For Field Triage of Injured Patients, attached hereto as <u>Attachment 11-2</u>, which were compared with current LERN Destination Protocol. A draft of a new proposed LERN Destination Protocol: Trauma, attached as <u>Attachment 11-3</u>, was presented for discussion and review.

A motion was made by Dr. McSwain and seconded by Dr. Owings to adopt the proposed draft with the following changes:

- 1. Remove large red letters from right side of page;
- 2. From the box labeled "Assess, Anatomy of Injury", remove the 9th, 10th and 11th bulleted entries, and insert those in the box labeled "Assess Patient or System Considerations" after the 5th bulleted entry.
- 3. In the last bulleted entry in the box labeled "Assess mechanism of injury and evidence of high energy impact", after the words "motor cycle", insert "/ATV".
- 4. In the box labeled "Assess special patient or system considerations," in the

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fourth bulleted entry: (a) change "Bums" to "Burns", and delete "without other trauma mechanisms: triage to burn facility."

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

Paige Hargrove, Executive Director, presented "LERN Proposed Guideline for Routing Patients," attached as <u>Attachment 11-4</u>. A motion was made by Peter Sullivan and seconded by Dr. Breaux to adopt as a policy/procedure of LERN with the following addition: In order to maintain consideration as the higher level of care resource hospital, the hospital must apply to ACS for trauma center verification within 12 months of LERN approval for consideration at that level. The motion was approved after a unanimous vote in the affirmative.

The board also requested that the Executive Director develop a policy/procedure for implementation of this new process.

12. Protocols, La. R.S. 9:2798.5

A motion was made by Dr. Breaux and seconded by Mr. Sullivan to codify in rules and regulations all La. R.S. 9:2798.5 protocols previously adopted and promulgated. The motion was approved after a unanimous vote in the affirmative.

13. Status Update on Strategic Priorities

The Board was given an overview by Paige Hargrove, Executive Director, on LERN goals and activities. See report attached as <u>Attachment 13</u>. No formal action was taken by the Board.

14. LERN Strategy: Goals and Priorities

Christel Slaughter presented and discussed "Critical Elements of An Integrated Trauma System", attached as <u>Attachment 14</u>. A listing was compiled of Board member suggested initiatives. No formal action was taken by the Board.

15. Public Comments

None.

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May 15, 2014	,		

16. Adjournment

A motion was made by Dr. Guidry and seconded by Senator White to adjourn the meeting at 11:01 a.m. The motion was approved after a unanimous vote in the affirmative.

Respectfully Submitted,		
John Hunt, MD, Chair		



a. Executive Director Report

November 20, 2014

Submitted: P. Hargrove 05/15/2014

Attachment 5a to Minutes of LERN Board Meeting of 11/20/14

Executive Director Report November 20, 2014

Strategic Priorities 2012 - 2015

- Strengthen the Sustainability of LERN's Mission, Including State Office Operations and the Development of an Ideal Statewide Network of Designated Trauma Centers
 - Lessen or eliminate LERN's reliance on state general fund dollars
 - Maximize LERN funding from recurring, dedicated source(s)

Status:

- FY 2014-2015 appropriated budget \$1,748,519
- On 11/7/2014 the Governor released and executive order expenditure freeze. I have submitted expenditure exemption requests for travel, operating services, supplies, and professional services. The request for the SSA Consultant contract is still in review.
- Mid-year cuts expected.
- DOA requests each agency to submit \$2million cuts to contracts and \$1 million to "other" operations. Executive Director discussed LERN budget with DHH and was instructed submit any possible cuts.
- To date LERN budget cut is \$10,500.
- Traumatic Head and Spinal Cord Injury Trust Fund

2. Promote LERN as the "information coordinator" for unfolding events in Louisiana on a 24/7 basis:

- Participate in regional activities to integrate LERN into region-specific protocols for event management and support
- Serve as the primary coordinating entity for messaging and notifications regarding events and incidents as they occur
- Maximize regional assets by coordinating patient flow/transport.

Status:

- Instructors for Acadian Ambulance Boot Camp, December 2014
- Developed MCI Cards for EMS.
- Participated in 12 drills so far in 2014.
- Region 2: Active Shooter Drills at Central Middle, Catholic High, LSU; Plane Crash at Baton Rouge Airport; Terrorist Drill at River Bend Nuclear Plant
- Region 3: Active Shooter at RK Smith Middle
- Region 5: Hurricane Drill
- Region 6: MCI Drill at Cabrini Hospital, MCI Drill with Cabrini and England Air Park/Plane crash.
- Region 8: Plane Crash Drill in Monroe, Ruston Fire Hazmat Drill
- Region 9: Active Shooter at Springfield Middle

- Statewide Hurricane Drill
- 3. Build a consensus among key stakeholders for the development of an ideal statewide network of designated trauma centers in Louisiana.
 - Develop priority prospects for new Level II or Level III Trauma Center designations in regions 3, 4, 5, 8, and 9. Secure at least two new commitments from hospitals to pursue ACS Level II or Level III trauma center verification.
 - Initiate implementation of a Region 6 pilot regional trauma system development anchored by a Level II Trauma Center.

Status

Dr. Coscia will provide status update.

Congratulations to LSU Health Shreveport – Verified by the ACS as Level 1 Trauma Center

Trauma Education

Trauma Nursing Core Curriculum (TNCC)

11 classes taught CYTD and 164 nurses certified in Trauma Nursing Core Curriculum.
 Continue to teach as needed.

Emergency Nursing Pediatric Course (ENPC)

Moving focus to Emergency Nursing Pediatric Course. Conducted a provider class in
October at the LERN office. Identified 6 instructors and two of these have been checked off.
We have conducted 4 provider classes and will begin scheduling classes for 2015.
 We are working in collaboration with EMSC, who will purchase course books via their grant.
This will lower the cost of the class.

Rural Trauma Team Development Course (RTTDC)

- 5 classes = 171 students
- Next class is scheduled for January 26, 2014 at Lallie Kemp Hospital. The class will include staff members from St. Helena Hospital, Hood Memorial Hospital and Lallie Kemp Hospital, and North Oaks Medical Center. It will be facilitated by Randy Williams and Dr. Peter Meade from the Tulane Trauma Education Institute.

Pre-Hospital Trauma Life Support (PHTLS)

- 3 classes taught in North Louisiana (79 paramedics)

Trauma Care After Resuscitation (TCAR)

- LERN sponsored 2 courses:
 - 1 class in Alexandria = attended by 35 nurses from Rapides Regional and Lafayette General
 - 1class in New Orleans = attended by 43 nurses from North Oaks, Our Lady of the Lake, ILH, and Lakeview.

Mass Casualty/All Disaster Response Training

24 classes = total of 477 students



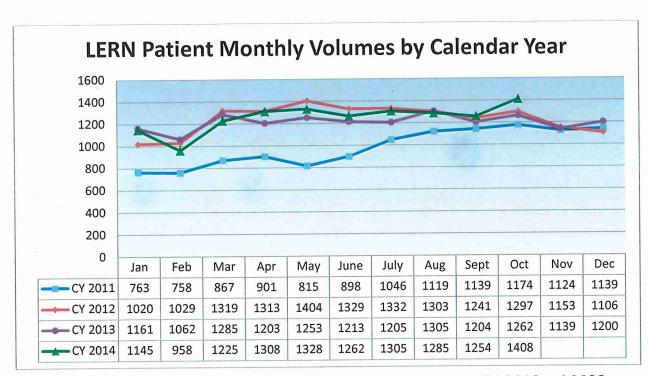
Community Education

- Presented at 20 community events (Rotary, LEPC, Chambers of Commerce, Lions Clubs, Churches, Council on Aging)

LERN Communication Center (LCC)

- ESF-8 call volume to date = 157.
- Total calls CY through Oct 2014 (Trauma + Stroke + STEMI) = 12,994
- LCC began providing direction for stroke and STEMI and since January 1st Oct 31, 2014 we have had 465 stroke calls and 51 STEMI calls.

Region	STEMI	Stroke/CVA
Region 1	2	11
Region 2	10	75
Region 3	8	43
Region 4	11	82
Region 5	12	158
Region 6	0	26
Region 7	2	8
Region 8	1	10
Region 9	5	52
Total	51	465



CY 2011 = 11743

CY 2012 = 14836

CY 2013 = 14492



- 4. Develop a statewide system of STEMI care to improve outcomes for Louisiana citizens regardless of where they live in the state. System to include components recommended by LERN's STEMI Design the System workgroup:
- PCI Hospitals
- Non-PCI Hospitals
- EMS

Status

- 99% of attestations returned
- 41 STEMI Receiving Centers
- 70 STEMI Referral Centers
- Physician Champion outreach continues
- 12 Lead EKG Education Course
 - March 28, 2014 at St. Francis Medical Center (52 students)
 - April 11, 2014 at Northern Louisiana Medical Center (43 students)
 - May 30, 2014 at St. Francis Medical Center (76 students)
 - June 20, 2014 at Glenwood Regional Medical Center (25 students)
 - July 18, 2014 Northern Louisiana Medical Center (37 students)
 - September 12, 2014 Franklin Medical Center (46 students)
 - December 5, 2014 at Christus St. Francis Cabrini
 - December 18, 2014 at Louisiana Tech
 - March 9, 2014 at East Jefferson Medical Center
- 5. Develop a statewide system of stroke care to improve outcomes for Louisiana citizens regardless of where they live in the state. System to include final recommendations from the Stroke Design the System Workgroup relative to:
- Public recognition of stroke symptoms and community education
- Emergency/timely evaluation of all strokes
- EMS transfer protocols to facilitate timely treatment of all strokes and administration of tPA where appropriate

Status

- 99% of attestations returned
- Level 1 = 2
- Level 2 = 10
- Level 3 = 54
- Level 4 = 45
- Since 2013 there has been 12 new spokes added to the "Hub and Spoke" model in the state. There are 40 "spoke" hospitals.
- Stroke Toolkits/Stroke Reference Cards for Level 3 centers developed.
- Dr. Martin-Schild will present at the American Stroke Association Boot Camp on behalf of LERN (December 12th, Monroe, LA)



- 6. Establish statewide registries, consistent with national standards for Trauma, Stroke, and STEMI. General purpose of these registries include:
- Facilitation of statewide and regional injury prevention efforts
- Facilitation of LERN performance improvement (Trauma System, Stroke System, and STEMI System state level and regional)

Current Status - Trauma Registry

- Currently 4 hospitals submitting data to the registry. I expect North Oaks and Lakeview Regional Medical Center to submit data for 2014.
- Lafayette General is in the process of choosing a registry to purchase.

Current Status - EMS Registry

- The EMS Registry has a total of 209,702 records to date. The E-RHIT Network distributed laptops to 6 additional EMS agencies as part of year three of the grant. They have received another \$900,000 grant to use over the next three years to continue efforts through the E-RHIT Network. There are currently 17 agencies which have received laptops as part of the E-RHIT grant. LERN is working with all participants to receive data using ImageTrend or their current ePCR vendor.
- Acadian Ambulance is now submitting EMS Data to the state.

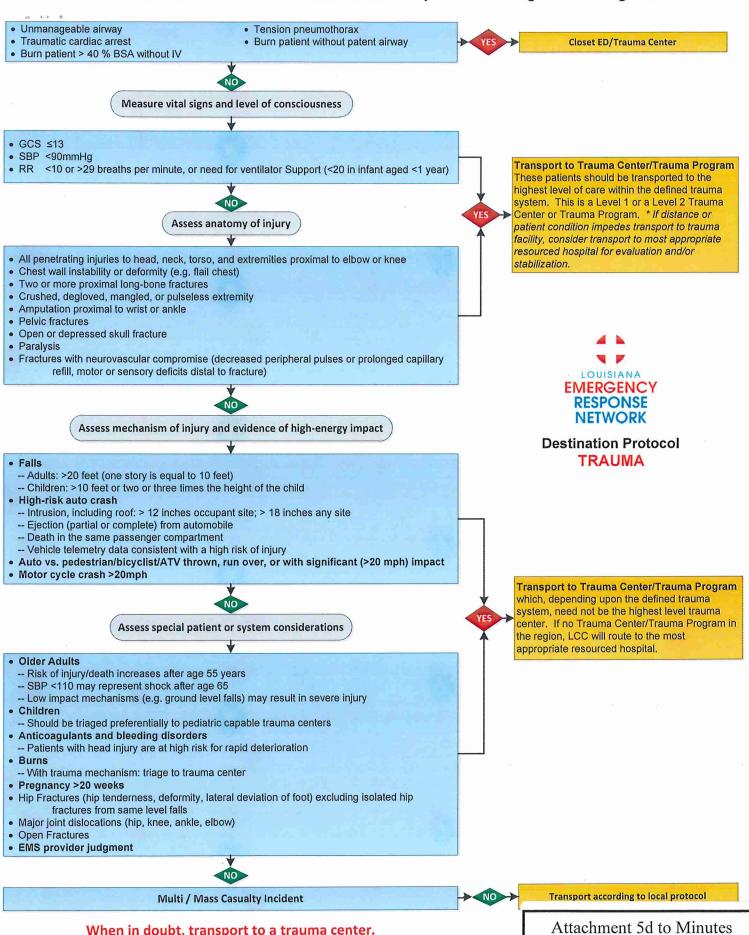
Status of STEMI and Stroke Registry

- Promoting ACTION/GWTG for the STEMI registry. LERN established data elements for LERN Level 3 hospitals. 7 hospitals have submitted data to LERN.

Respectfully submitted,

Paix Hargrore

Call LERN Communication Center at 1-866-320-8293 for patients meeting the following criteria:



Attachment 5d to Minutes of LERN Board Meeting of 11/20/14

Call LERN Communication Center at 1-866-320-8293 for patients meeting the following criteria:

Call LERN Communication Center at 1-866-320-8293 for patients meeting	ng the follo	owing criteria:
Unmanageable airway		
Tension pneumothorax	Yes→	Closest ED/Trauma Center
Traumatic cardiac arrest		
Burn patient without patent airway		
Burn patient > 40 % BSA without IV		
↓ No		
Measure vital signs and level of consciousness		
• GCS ≤13		
• SBP <90mmHg		Transport to Trauma Center/ Trauma Program
• RR <10 or >29 breaths per minute, or need for ventilator	Yes→	These patients should be transported to the highest level of
Support (<20 in infant aged <1 year)		care within the defined trauma system. This is a Level 1 or a
		Level 2 Trauma Center or Trauma Program. * If distance or
		patient condition impedes transport to trauma facility,
		consider transport to most appropriate resourced hospital.
↓ No	ļ.,	
Assess anatomy of injury All penetrating injuries to head neck torso, and extremities proximal		
 All penetrating injuries to head, neck, torso, and extremities proximal to elbow or knee 		
Chest wall instability or deformity (e.g. flail chest)	1	Transport to Trauma Center/ Trauma Program
The angle of the state of the s	Yes→	These patients should be transported to the highest level of
Two or more proximal long-bone fractures		care within the defined trauma system. This is a Level 1 or a
Crushed, degloved, mangled, or pulseless extremity		Level 2 Trauma Center or Trauma Program. * If distance or
Amputation proximal to wrist or ankle		patient condition impedes transport to trauma facility,
Pelvic fractures		consider transport to most appropriate resourced hospital.
Open or depressed skull fracture		сонывает импърси но том ирргоргине resourcea nospital.
Paralysis		
· · · · · · · · · · · · · · · · · · ·		
Fractures with neurovascular compromise (decreased peripheral		
pulses or prolonged capillary refill, motor or sensory deficits distal to		
fracture)		
↓ No		
Assess mechanism of injury and evidence of high-energy impact		
• Falls		
-Adults: >20 feet (one story is equal to 10 feet)		Transport to Trauma Center/Trauma Program which,
-Children: >10 feet or two or three times the height of the child	Yes→	depending upon the defined trauma system, need not be the
High-risk auto crash		highest level trauma center/program. If no Trauma
- Intrusion, including roof: > 12 inches occupant site;		Center/Trauma Program in the region, LCC may route to the
> 18 inches any site		most appropriate resourced hospital.
- Ejection (partial or complete) from automobile		
- Death in the same passenger compartment		
Vehicle telemetry data consistent with a high risk of injury		
Auto vs. pedestrian/bicyclist/ATV thrown, run over, or with		
significant (>20 mph) impact		
Motorcycle crash >20mph		
l No		100 mm (mm mm
Assess special patient or system considerations	 	
Older Adults		
-Risk of injury/death increases after age 55 years		Transport to Trauma Center/Trauma Program which,
-SBP <110 may represent shock after age 65		
-Low impact mechanisms (e.g. ground level falls) may result in	Yes→	depending upon the defined trauma system, need not be the
severe injury	- 55 '	highest level trauma center/program. If no Trauma
Children		Center/Trauma Program in the region, LCC may route to the
- Should be triaged preferentially to pediatric capable trauma		most appropriate resourced hospital.
centers		
Anticoagulants and bleeding disorders		
-Patients with head injury are at high risk for rapid deterioration		
• Burns		
-With trauma mechanism: triage to trauma center		
• Pregnancy >20 weeks		
Hin Frontiera (hin tandamasa dafamata tan 1997)		
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		
EMS provider judgment		
↓ No		
Multi / Mass Casualty Incident	No→	Transport according to protocol
		For more and to brotoco.



e. Traumatic Head and Spinal Cord Injury Trust Fund

November 20, 2014

Attachment 5e to Minutes of LERN Board Meeting of 11/20/14

Louisiana TBI Trust Fund Legislation

Establishment & Administration, and Revenue Source: La. R.S. 46:2631,33, and La. R.S. 46:2635

RS 46:2633 Traumatic Head and Spinal Cord Injury Trust Fund

A. There is hereby established a special fund in the state treasury to be known as the Traumatic Head and Spinal Cord Injury Trust Fund which shall consist of monies collected from an additional fee imposed on all motor vehicle violations for driving under the influence, reckless operation, and speeding in this state. In addition, the legislature may make annual appropriations to the trust fund for the purpose set forth in this Chapter to the extent that state general funds are available.

- B.(1)(a) Beginning January 1, 1994, in addition to all fines, fees, costs, and punishment prescribed by law, there shall be imposed an additional fee of twenty-five dollars on driving under the influence offenses, five dollars on reckless driving operation offenses, and five dollars on speeding offenses. (b) Beginning July 1, 2000, the additional fees imposed pursuant to Subparagraph (a) of this Paragraph shall be as follows:
- (i) A fee of five dollars on reckless driving offenses.
- (ii) A fee of five dollars on speeding offenses.
- (iii) A fee of twenty-five dollars on first convictions of operating a vehicle while intoxicated offenses.
- (iv) A fee of fifty dollars on second convictions of operating a vehicle while intoxicated offenses.
- (v) A fee of one hundred dollars on third convictions of operating a vehicle while intoxicated offenses.
- (vi) A fee of two hundred fifty dollars on fourth or subsequent convictions of operating a vehicle while intoxicated offenses

Traumatic Head and Spinal Cord Injury Trust Fund Statistics from August 2013 to June 2014

Julie 2014		Speeding	Poskloss On	Not Itemized	Total Monthly Income
Date	DUI	Speeding	Reckless Op.		mcome
13-Aug	1017.18	11501.32	62	\$40,824.37	\$125,754.28
13-Sep	333.68	6764.76	249	\$24,486.09	\$78,599.69
13-Oct	280.18	6609.96	197	\$20,199.79	\$75,971.52
13-Nov	725.37	13880	153.09	\$32,564.33	\$112,934.80
13-Dec	257.77	4644.41	260.9	\$10,405.12	\$46,065.25
14-Jan	323.55	5733.53	338	\$14,318.47	\$58,295.09
14-Feb	490.91	15189.43	235.34	\$32,299.91	\$123,909.97
14-Mar	1370.64	24153.36	272.6	\$19,691.61	\$159,568.58
14-Apr	628.6	23517.86	405.83	\$14,040.49	\$153,759.87
14-May	508.17	16609.11	186.26	\$19,795.77	\$120,494.55
14-Jun	625.5	18662.19	153.77	\$28,033.88	\$139,345.79
Totals	6561.55	147265.93	2513.79	\$215,835.46	\$1,194,699.39
Averages Per					
Month	596.5045455	13387.81182	228.5263636	\$23,332.71	\$108,609.04





f. Financials

November 20, 2014

Attachment 5f to Minutes of LERN Board Meeting of 11/20/14

FY15 Fiscal Overview as of 11/07/14

Object Category	Budget	Encumpered	Expended	Current Balance	Additional Projections	Expected Balance
		9	\$204 000 03	\$557 978 97	\$561 ANS 22	(\$3.426.25)
Personal Services includes Salaries, Wages and Related Benefits	\$862,879.00	00.00	4,000.00	7		
Travel includes in-state and out of state	\$56,000.00	00'0\$	\$13,251.77	\$42,748.23	\$42,748.23	\$0.00
						1000
Operating Services	\$200,411.00	\$49,733.08	\$39,965.80	\$110,712.12	\$103,090.05	\$7,622.07
includes advertising, printing, maintenance, rent, postage,						
than OTM						Nicolar Micolar Micola
	-			projection	projection includes Motorola, Aarco and imisc.	IICO arid Misc.
Supplies includes general and computer	\$24,750.00	\$0.00	\$7,345.56	\$17,404.44	\$12,038.95	\$5,365.49
	*					
Professional Services includes Legal and Medical	\$501,125.00	\$344,247.05	\$96,061.95	\$60,816.00	\$0.00	\$60,816.00
)						000
Other Charges includes Miscellaneous charges, Public Education	\$49,000.00	\$0.00	\$0.00	\$49,000.00	\$49,000.00	\$0.00
						0000
Acquisitions and Major Repairs	\$0.00	\$0.00	\$0.00	\$0.00	00.04	0000
						100 000 747
Interagency Transfer includes telephone service	\$54,643.00	\$0.00	\$28,065.68	\$26,577.32	\$27,609.32	(\$1,032.00)
TOTALS	\$1,748,808.00	\$393,980.13	\$489,590.79	\$865,237.08	\$795,891.76	\$69,345.32