

# **Florida Trauma System Advisory Council (FTSAC) Charter**

June 16, 2022 Update

**Background:**

Florida trauma system stakeholders are excellent resources who can provide vital recommendations to enhance Florida's statewide trauma system. The establishment of the Florida Trauma System Advisory Council (FTSAC) in 2018, provides a unifying forum for both the trauma community and the state to be heard and facilitates opportunities to realize goals and objectives as outlined in Chapter 395.402(2) , Florida Statutes.

**Mission:**

Per Chapter 395.402, Florida Statutes, the purpose of the Council is to promote an inclusive trauma system, to enhance cooperation among the trauma system stakeholders, and to promote the best trauma system possible for patients in Florida, including development and submission of recommendations to the Department on how to maximize existing trauma centers, emergency departments, and emergency medical services infrastructure and personnel to achieve the statutory goal of developing an inclusive trauma system.

<p><b>Council Members (appointed by Governor):</b></p> <p><b>Robert Reed, MD</b> - State Trauma Medical Director  <b>Malcolm Kemp</b> - Standing Member of the EMS Advisory Council  <b>David Summers</b>- Representative of a local regional trauma agency  <b>Glen Summers, MD</b> - Trauma Surgeon representing nonprofit or public trauma center  <b>Darwin Ang, MD</b> - Trauma Surgeon actively practicing in Level II investor own hospital  <b>Nicholas Namias, MD</b> - Representative of the ACS committee who has pediatric trauma care expertise  <b>Lisa DiNova</b> - FHA Representative  <b>Bradley Elias, MD</b> - Board Certified EM physician not affiliated with a trauma center  <b>Joseph Ibrahim, MD</b> - Trauma Surgeon actively practicing in Level I trauma center  <b>Mark McKenney, MD</b> - Trauma medical director actively working who represents an investor-owned hospital</p> <p><b>Positions open as of June 2022:</b></p> <p>Trauma program manager who is actively working in a nonprofit or public trauma center</p> <p>Representative of the Safety Net Hospital Alliance of Florida</p>	<p><b>Stakeholders:</b></p> <p>Florida citizens and visitors  Trauma Care Providers  Acute Care Hospitals  Emergency Medical Services providers  Rehabilitation/Long Term Acute Care Providers  American College of Surgeons/Committee on Trauma  Florida Committee on Trauma  Association of Florida Trauma Coordinators  Local/Regional Trauma Agencies  Law Enforcement Organizations  Health Care Coalitions  Rural Health Care providers  Injury Prevention Partners/Stakeholders  Florida Department of Health</p>
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## **Council Lead Roles/Responsibilities:**

1. Moderator shall:
  - a. preside over all meetings of the Council
  - b. conduct the meetings in accordance with Robert's Rules of Order
  - c. approve the draft agendas and supporting materials prepared by the Department for all meetings
  - d. ensure the Department's distributes to the full Council and all interested party's agendas and supporting materials at least thirty (30) days in advance of meetings
  - e. ensure all Council members are provided an equal opportunity to be heard
  - f. ensure a quorum is present at each meeting of the Council
  - g. work with the Department section staff to ensure activities of the Council are carried out and aligned with the purpose of the Council, or as otherwise authorized under Florida Statutes.
2. Co-Moderator : Serves in the absence of the Moderator
3. Council Members:
  - a. Actively participate in meetings
  - b. Collaborate on the development of recommendations pursuant to the Council's statutory purpose.
4. Department of Health:
  - a. providing Council meeting space,
  - b. noticing all meetings as required by Florida statute and administrative rule
  - c. securing meeting space for meeting dates and locations as determined by the council
  - d. preparation of all meeting agendas and supporting materials, under the supervision of the Moderator or Co-Moderator
  - e. distributing to all Council members and all interested parties all meeting agendas and supporting materials no less than thirty (30) days prior to the meeting date
  - f. serving as Council secretary to include taking meeting roll call, preparation of minutes of all meetings
  - g. distribution of meeting minutes to all council members and interested parties within the times defined by meeting type
  - h. maintaining complete file of all meeting materials, attendance, actions, and minutes
  - i. serving as Parliamentarian in support of the Council
  - j. Serving as FL Sunshine requirements expert preparation and formatting, inclusive of drafting and finalization' subject to Council approval of all Council publications to include studies, analysis, recommendations, and reports required by statute; and any other task necessary to administer Council business as outlined in statute or requested by the Council.

**Council Procedures:**

1. Meetings will be held at least quarterly and may be held face-to-face, via video teleconference or via conference call. Date and location of meetings to be determined in accordance with policies, procedures and availability.
2. "Commons Hour" meetings will be held once a week on rotating days of the week from 3:00P-4:00P EST to facilitate completion of assigned work activities, if so desired by Council.
3. All meetings of the council will be noticed and held in accordance with Florida's Sunshine Laws.
4. Agendas and supporting materials will be published consistent with requirements of bylaws to all Council members and interested parties.
5. All Council Meetings will be conducted in accordance with Robert's Rules of Order.
6. All Council meetings, including workgroup meetings, shall require the Department to prepare minutes and distribute minutes consistent with the requirements of the Bylaws.
7. All Council actions shall require a 3/4 majority vote.
8. All Council reports, studies, recommendations, and other documents shall include both a majority and minority opinion within a single report, in the event the Council does not have a minority opinion the document shall indicate "No minority opinion."

**Constraints:**

1. Time Related:
  - a. Deliverables must be completed within the timeframes specified.
2. Resource-Related:
  - a. Council members may have competing priorities.
  - b. Resources may become unavailable because of regular job responsibilities.
3. Funding Related:
  - a. Council members do not receive reimbursement for per diem or travel expenses from the Department. However, Council members may be reimbursed for travel expenses and compensated for Council meeting activities by the member's employer.

**Assumptions:**

1. Delivery Related:
  - a. Deliverables will be completed within the specified timeframes unless communicated otherwise in the event of major disaster or mass casualty incidents or events.
2. Resource-Related:
  - a. Council members will actively participate in meetings and complete action items and/or assignments.
  - b. The Department section staff will actively participate in administration and support of the Council to include completion of assignments and action items.
  - c. The Department section staff shall serve as the expert for Sunshine law requirements and preparation of all materials required to be presented to the Governor, House Speaker, and Senate President.

**Priorities:**

Priority/Assignment	Action Steps	Deliverable(s) / Actions	Due Date/Status
<p>Develop set of recommendations and methodologies necessary for the DOH to perform the statewide trauma system assessment as outlined in Section 395.4025, Florida Statutes.</p>	<ol style="list-style-type: none"> <li>1. Identify statutorily required inputs.</li> <li>2. Develop proposed calculation methodologies and definitions.</li> <li>3. Solicit stakeholder feedback.</li> <li>4. Develop additional performance measures for the assessment of the state trauma system.</li> <li>5. Look/ evaluate the Florida Collaborative TQIP reports for additional data for the report</li> <li>6. Solicit a report from the FCOT to include in the report recommendations</li> </ol>	<ol style="list-style-type: none"> <li>1. Report outlining the FTSAC's recommendations to the DOH regarding the statutorily required components of the assessment.</li> <li>2. Report outlining the FTSAC's recommendations for measuring the performance of the state trauma system beyond the statutory requirements.</li> </ol>	<p>Every three years Recommendations Due Sept 2022 Assessment due in Aug 2023</p>
<p>Evaluate and modernize Pamphlet 150-9 , Florida Trauma Standards <b>AND</b> Conduct a study of the use of ACS verification process vs. Florida's verification process for all types of trauma centers.</p>	<ol style="list-style-type: none"> <li>1. Develop a crosswalk between the <i>Florida Trauma Center Standards (DH Pamphlet 150-9)</i> and <i>Resources for the Optimal Care of the Injured Patient, 2022</i></li> <li>2. Develop a proposed set of updates to the Florida Trauma Center Standards that would modernize the current Florida standards but not impose an increase of operating costs to any trauma center greater than \$200,000 in the first year or \$1 million in the first 5-years</li> <li>3. Identify topics/challenges in</li> </ol>	<ol style="list-style-type: none"> <li>1. A recommended set of updates to the Florida Trauma Center Standards.</li> <li>2. A process for making regular changes and updates to the standards.</li> <li>3. Create a report including the standards listed in</li> </ol>	<ol style="list-style-type: none"> <li>1. In progress</li> <li>2. Engage stakeholders to participate in sub-committee and to contact their legislative representatives to take DOH recommendations as a legislative priority</li> <li>3. TBD</li> </ol>

Priority/Assignment	Action Steps	Deliverable(s) / Actions	Due Date/Status
	<p>Florida 's trauma system not addressed in the <i>Resources for the Optimal Care of the Injured Patient</i> that may serve as the basis for supplemental Florida-specific standards beyond those standards currently identified by the ACS.</p> <p>4. Identify the estimated cost increase (range) for each ACS standard, above what the Florida Trauma Center Standards currently require</p> <p>5. Develop a literature review that relating to the quality of each system of verification.</p> <p>6. Develop a set of performance measures for comparing patient outcomes between Florida trauma centers and ACS verified trauma centers nationally.</p> <p>7. Identify potential models, processes and requirements for trauma center verification and designation.</p> <p>8. Assess the impacts of potential changes to the trauma center requirements on all</p>	<p>the Florida Standards that are not addressed By the ACS Resources manual</p> <p>4. Cost appraisal</p> <p>5. Literature review</p> <p>6. Performance measure review</p> <p>7. A report outlining the FTSAC' s recommendations regarding future changes to the state's trauma center designation model, processes, and resource requirements</p> <p>8. Report with stakeholder feedback on proposed changes</p>	<p>4. TBD</p> <p>5. TBD</p> <p>6. TBD</p> <p>7. TBD</p> <p>8. TBD</p>

Priority/Assignment	Action Steps	Deliverable(s) / Actions	Due Date/Status
	existing trauma centers in the state. 9. Solicit stakeholder input and feedback throughout all action steps. 10. Solicit experiences from other states who use the ACS for the verification of trauma centers	9. Utilize sub-committees made of stakeholders  10. Create report to include feedback from trauma community stakeholders in other states	9. TBD  10. TBD

Potential future priority

Recommendation regarding linking the EMSTARS database to the Florida Trauma Databank	1. Identify fields that are common between the two system  2. Revise trauma data dictionary/ create import/export EMS Data	1. Create commons hours meetings for open discussions  2. Create a draft of the Florida Trauma Data Dictionary  3. Create a review of linkages between the systems  4.	

Completed Priorities/Assignments

Priority/Assignment	Action Steps	Deliverable(s)	Completed Date
Provide recommendations to DOH relating to the implementation of statutory changes to HB 1165.	1. Review DOH generated materials and provide technical expertise to develop suggested changes. 2. Assist the DOH with assessing barriers to the implantation of administrative rules and DOH	1. Verbal advisory opinions adopted by the FTSAC.	1. 2018

	3. policies. Solicit stakeholder feedback and provide feedback on potential impacts to Florida trauma centers.		