



MINUTES

EMERGENCY MEDICAL SERVICES & TRAUMA SYSTEM (EMSTS)

DIVISION OF COMMUNITY HEALTH

SOUTHERN NEVADA INJURY PREVENTION PARTNERSHIP (SNIPP)

October 15, 2018 - 10:00 A.M.

MEMBERS PRESENT

Jessica Johnson, SNHD, Chair
Cassandra Trummel, UMC
Stacy Johnson, MountainView Hospital (via phone)
Matthew Manning, CPSC
Colette Moore, UMC Health Living

August Corrales, UMC, Vice Chair
Kathryn Barker, SNHD, Epidemiology
Steve Johnson, MedicWest Ambulance
Novlette Mack, PACT (Alt.)

MEMBERS ABSENT

Rachell Eisert, St. Rose Siena
Kristie McWorter, Sun City
Tara Phebus, MA, NICRP-UNLV

Andrew Eisen, MD, The Valley Health System
Myacynth Pineda, St. Rose Siena

SNHD STAFF PRESENT

Chad Kingsley, MD, Regional Trauma Coordinator
Brandon Delise, Epidemiologist

Judy Tabat, Recording Secretary

PUBLIC ATTENDANCE

Jennifer Lopez, R&R Partners
Susan Custronova, Student Observer

Kristian Chavira, UMC Healthy Living

CALL TO ORDER – NOTICE OF POSTING

The Southern Nevada Injury Prevention Partnership convened in the Red Rock Trail Conference Room at the Southern Nevada Health District (SNHD), located at 280 S. Decatur Boulevard, on October 15, 2018. Chairman Jessica Johnson called the meeting to order at 10:05 a.m. and noted the Affidavit of Posting was posted in accordance with the Nevada Open Meeting Law.

- I. **PUBLIC COMMENT:** A period devoted to comments by the general public about those items appearing on the Agenda. Comments will be limited to five (5) minutes per speaker. Please step up to the speaker's podium, clearly state your name and address, and spell your last name for the record. If any member of the Committee wishes to extend the length of a presentation, this may be done by the Chairman or majority vote.

Chairman Johnson asked if anyone wished to address the Committee pertaining to items listed on the Agenda. Seeing no one, she closed the Public Comment portion of the meeting.

- II. **CONSENT AGENDA:** Items for action to be considered by the Southern Nevada Injury Prevention Partnership which may be enacted by one motion. Any item may be discussed separately per Committee Member request before action. Any exceptions to the Consent Agenda must be stated prior to approval.

Approve Minutes/Southern Nevada Injury Prevention Partnership: 7/16/2018

Chairman Johnson asked for a motion to approve the Consent Agenda. Motion made by Member Trummel, seconded by Member Corrales and carried unanimously.

III. **REPORT/DISCUSSION/POSSIBLE ACTION**

A. **Update from the Regional Trauma Advisory Board**

Mr. Kingsley reported that his office has received applications from 2 hospitals for initial authorization as a center for the treatment of trauma and have heard interest from 2 other hospitals. He added that the trauma system over the next 2 or 3 years will be adapting and growing in that sense. They are currently in the process of updating trauma regulations to include the trauma needs assessment tool (TNAT). They have held 2 of the 3 public meetings this week and then it will go to the RTAB for a final review. He stated that he will be putting out an annual report on a yearly basis to have a better snapshot of our trauma system. The RTAB does meet one more time on November 28th and that will close out for the year.

B. **Review Discuss SNIPP Bylaws**

1. **Review of Outline for SNIPP Committee Term**
2. **Review of Injury Surveillance Methodology**

Chairman Johnson reported that they held a workgroup on September 17, 2018 about the SNIPP Bylaws and turned the discussion over to August Corrales.

Mr. Corrales stated that the first thing they wanted to do was to identify the role of the SNIPP Committee members. He referred to Life Cycle of SNIPP Committee Member handout in the committee's packets which defines tenure, objectives and a subject outline for each quarter the committee meets during the 2-year tenure.

Ms. Barker felt this was a great organizational tool that gives purpose for somebody interested in becoming a member.

A motion was made by Member Corrales to adapt the "Life Cycle of SNIPP Committee Member" as a guideline for SNIPP Committee Membership. The motion was seconded by Member Trummel and carried unanimously.

Chairman Johnson referred to the SNIPP Bylaws and stated that the current version of the bylaws is dated January 2015. She added that in the last meeting it was discussed making some amendments to the bylaws to move forward as a group. She referred to Item 2 under Article I Purpose. To remain nimble with the topics that change in their community around not only trauma but all injuries it was discussed that (i.e. motor vehicle related injuries) be removed to move to full spectrum with injury prevention efforts. She added that in that same Article, Item 3, it was discussed to remove evidenced based and replace it with data driven since certain communities, especially vulnerable communities, there may not be an evidence base that exists. In Article III Members, Section 1 SNIPP Membership; their discussion centered around shall versus may. Depending on what the local community looks like they want to make sure that they are not out of compliance of the bylaws if they don't have every single one of the members listed represented. She added that in that same Article, Section 5 Vacancies; they felt that since quorum is so important and one of the challenges for this group, they should change three regularly scheduled meetings to two regularly scheduled meeting and instead of calendar year it should be changed to term year.

Ms. Moore questioned how they define a term year.

It was explained that SNIPP members shall serve two (2) year terms, from July 1 through June 30 of

the second year. If vacant seats are filled that person's term year will end on the original term date.

A motion was made by Member Corrales to accept the following changes be made to the SNIPP Bylaws:

- Article I, Purpose
 - Item 2: remove (i.e. motor vehicle related injuries)
 - Item 3: change evidence based to data driven
- Article III, Members
 - Section 1. SNIPP membership; change "shall" to "may"
 - Section 5. Vacancies; change three regularly scheduled to two regularly scheduled
 - Section 5. Vacancies; change calendar year to term year

The motion was seconded by Member Trummel and carried unanimously.

Chairman Johnson stated that there was a request to schedule the SNIPP meeting for 90 minutes instead of 1 hour. Mr. Kingsley stated that staff advised him to keep the meeting to a 1 hour which should be controlled with the agenda as consideration for staff's time. He advised that they can schedule the room for 90 minutes, so they can use the last 30 minutes to break into ad hoc groups.

Chairman Johnson requested that since meetings are pre-set to have those calendar invites be sent out in January, so the placeholders are in outlook. Mr. Kingsley answered in the affirmative.

C. Review/Discuss Trauma Data from Trauma Report

Mr. Kingsley stated that Mr. Barker included this information in Item D of the agenda.

D. Review/Discuss Morbidity/Mortality Injury Prevention Data

Ms. Barker noted that agenda items B2 & D are related and can be discussed concurrently. Ms. Barker referred to her handout on Injury Surveillance Methodology. She explained that this provides an overview of the core methodology that injury epidemiologists use to conduct injury surveillance. When looking at injury surveillance, it is important to keep in mind the difference between mechanism and intent. Different intents of injury include unintentional, which is your accidental injuries; intentional, which would be suicidal; homicide/assault, which is your violence related injury; undetermined, which means the diagnosis made by the physician or by cause of death was unsure of the intent; and finally legal intervention, which could of occurred elsewhere while serving in a war or a law enforcement involved injury. She added that when they have the intent and the mechanism, it is important then to drill down by special populations because they know that injuries may impact different populations depending on their age, race/ethnicity, zip code, sex/gender.

Ms. Barker felt that an effective way to move forward would be to have one group focus on the homicide/assault injuries that would span all the mechanisms listed and then that group would decide which mechanism or special population to work on. The next group could focus on the intentional injuries and any of the mechanisms involved in there. She added that since firearms is the leading cause of intentional injuries, they would just be able to choose their special populations. Unintentional injuries make up a sizeable proportion of injury and she felt that they can have a few topic areas around specific unintentional mechanisms.

Ms. Barker referred to her 2nd handout on Top injury-related deaths among Clark County residents by intent and mechanism (2014-2016) adding that this report gives information on what is going on in the community. She stated that she pulled the top mechanisms under (3) of the intents broken down over all of Clark County residents by year, 2014, 2015 and 2016 with the last column showing a 3-year total. She noted that unintentional/accidental poisoning (includes alcohol, drugs, opioids) is the number (1) cause of injury related deaths with motor vehicle accidents (MVA) at number (2), and falls coming in at number (3). The next section is the intentional/suicide which shows that firearms are the number

(1) cause of intentional injury deaths with suffocations, poisoning and falls following. Then next section in homicides which shows that firearms are by far the number (1) mechanism in homicide with cut/pierce as the number (2). She explained that this is a broad overview to give you some background on what is happening in the community. She felt that it is representative of what is going on nationally. Chairman Johnson questioned if this report aligns with what the trauma experts see in this committee. Ms. Trummel stated that falls are the number (1) mechanism of injury with MVA at number (2) and penetrating injury as number (3) so it directly aligns with what they see at the trauma center every year.

E. Selection of 2018-2020 SNIPP Priority Areas

Mr. Corrales asked if anybody has any preferences in choosing a priority area.

Ms. Barker stated that normally there are a few more members present and suggested eliciting some workgroup membership through email.

Chairman Johnson stated that as a workgroup member, the goal will be to select one actionable item and then meet once between the SNIPP meeting and the next quarterly meeting. She added that the purpose of that is to do a fact-finding mission to discover who is already working on those actionable items in the community and what their initiatives are and how they might align with them. That information will then be summarized and presented at the next SNIPP meeting.

Mr. Corrales suggested having another workgroup meeting with the intent of coming back with the resources in the 5 priority areas that they might have a special interest in and then that will help them prioritize what type of action can take place as a committee.

Mr. Kingsley offered to do a PowerPoint presentation to consolidate these 5 subjects for the next SNIPP meeting.

Mr. Corrales suggested meeting on December 11 at 10:00am. The committee agreed.

F. Selection of Sub-Working Groups

Tabled

G. Discuss Next Meeting and Agenda Items

Chairman Johnson stated that they will move forward with the December 11th workgroup to have a more in-depth discussion on these 5 items. She added that staff will send out a meeting placeholder for the next SNIPP meeting in February.

IV. INFORMATIONAL ITEMS

Mr. Corrales stated that the LVMPD Traffic Bureau is holding a night out traffic and safety event at Desert Breeze Park from 5:00 p.m. to 8:00 p.m.

Mr. Johnson stated that his agency has started their 4th quarter mandatory training which includes getting about 700 of their healthcare providers up to speed on the fact the opioid kits are now out in the community. He will also be meeting with Valley Hospital's Stroke Committee, so they are also aware. He advised the committee that Dr. Christian Young made a provision that they can begin to start disseminating those kits if they run on someone who is an overdose. Their medical directors need to feel comfortable with the fact that they are now dispensing medications since they are not a pharmacy but if there is a law that allows them to do that, they will follow through with it.

Ms. Trummel reported on the following events:

- The Clark County Health Fair will be at the Government Center from 9:00am to 4:00pm on October 23rd and 24th.
- Vulnerable Road users is doing a trunk-or-treat at the Cambridge Recreation center on October 25th from 5 to 7pm

- The Nevada Safety Summit is being held on October 17th and a ½ day on October 18th and will be held at the Southpoint Casino.

Ms. Mack reported that the next Pill Take Back Day is October 27, 2018 from 10:00 AM to 2:00 pm. The locations are at Smith's at Charleston and Rancho; Smith's at Durango and Warm Springs; and Sun City Summerlin Community Center.

Ms. Moore reported that they have started teaching the "Stepping on Series, Fall Prevention" program at the Healthy Living Institute at UMC. She explained that it is a series of 7 classes geared towards the senior population helping them learn about building strength and balance and how to adapt to environment to prevent falls in the home. She added that she also attends the Falls Coalition meetings at Touro University which will be a useful resource for this meeting.

Chairman Johnson stated that Linda Kalekas regrettably is unable to continue serving on the SNIPP committee due to competing obligations. She thanked Ms. Kalekas for her expertise adding that she has done incredible work for this committee and will be missed.

- V. **PUBLIC COMMENT:** A period devoted to comments by the general public, if any, and discussions of those comments, about matters relevant to the Committee's jurisdiction will be held. No action may be taken upon a matter raised under this item of this Agenda until the matter itself has been specifically included on an agenda as an item upon which action may be taken pursuant to NRS 241.020. Comments will be limited to five (5) minutes per speaker. Please step up to the speaker's podium, clearly state your name and address, and spell you last name for the record. If any member of the Committee wishes to extend the length of a presentation, this may be done by the Chairman or by majority vote.

Ms. Johnson asked if anyone wished to address the Committee. Seeing no one, she closed the Public Comment port of the meeting.

VI. **ADJOURNMENT**

As there was no further business on the agenda, Chairman Johnson adjourned the meeting at 11:01 a.m.