

# Minutes of the Alabama Trauma System

## QA/QI Workgroup Meeting

April 26, 2011, 10:00 a.m.

Office of EMS & Trauma Conference Room

Call in Information 1-800-491-4634

In attendance: Mark Jackson, Choona Lang, Verla Thomas, Robin Moore,  
Tammie Yeldell, Joe Acker

By Phone: Allan Pace, Glenn Davis, Denise Louthain, Michael Minor

Absent: William Crawford, M.D., Beth Anderson, Alex Franklin, Geni Smith,  
Andrew Lee

Choona Lang opened the meeting with a welcome.

### **Trauma System Update**

- The focus groups which are the first phase of the PR plan are currently being conducted with a targeted completion date of April 30, 2011.
- A Stroke System meeting is scheduled for today. An update will be given at the next QA/QI meeting.
- The Trauma Center Designation Committee revision workgroup has finalized the proposed trauma center designation revision which will be submitted to the Statewide Trauma Advisory Council at the June 28, 2011, meeting. In addition, the workgroup will submit revised institutional definitions to the STAC for review.
- The satellite trauma conference feedback was very positive.
- The Trauma Center Visitation form will be considered for adoption as a statewide trauma QA/QI tool. The form will be revised and utilized as a working tool for trauma centers and community hospitals.
- The Trauma System Reports process is on-going. The STAC trauma surgeons are reviewing the trauma registry data point document and the LifeTrac data point document. The surgeons were asked to submit questions to the Office of EMS and Trauma (OEMST) staff so that the staff can design reports and make the necessary modifications to answer the questions generated. After this process is complete, a QA/QI software demonstration will be presented to the trauma surgeons.
- The Trauma QA/QI Data Protection letter will be modified to include a signature block to show that each regional agency understands the confidentiality concerns related to trauma system data. Each regional agency will sign the letter and attach a statement explaining its confidentiality procedures.
- The regional directors/managers will modify the patient report submission process to ensure the original receiving trauma center receives the patient reports from the

regions for all transferred patients. The tapes of all of the transfers are submitted to the regions. Therefore, when a patient is transferred in each region the regional agency will add a step to send the patient reports back to the originating trauma center.

## **QA/QI Issues**

- A patient fell off of a forklift and sustained head injuries. He was in and out of consciousness when the EMTs arrived. The EMTs called the Alabama Trauma Communication Center and was directed to transport the patient to the closest level I trauma center. The EMT then proceeded to ask the patient where he wanted to be transported and the patient replied RMC. The EMT told the ATCC communicator that she was going to transport the patient to RMC because he was stable and requested to be taken there. The ATCC communicator contacted RMC with a patient report to include additional non-patient care related remarks. The patient's condition deteriorated several hours later and he was transported to the level I trauma center. The first issue is that the patient should have been transported to the level I trauma center as directed by the communicator at ATCC. The second issue is that the communicator should not have added additional comments to the patient report that were not patient care related. The direct service provider has procedures in place to handle misrouting of patients and assured the OEMST that this would not happen again. The second issue was handled by the Director of the ATCC.
- A motor vehicle crash involving a rollover of six to eight times in the west region. The medic made a mistake of calling the trauma center first. Then she called the ATCC and was told UAB was on divert. There was conflicting information regarding the patient's condition and the need for a trauma alert. The conversation between the EMT and the ATCC communicators escalated. The EMT admitted that she should not have called the trauma center directly and understands she should not repeat this error. The second issue related to the inappropriate remark from the ATCC communicator was handled by the Director of ATCC.
- The OEMTS Compliance Officer will complete the QA/QI feedback form and send it to the respective region as follow up to all QI issues submitted to the state office.
- The STAC will be asked to address the issue of falls from a standing position to see if this is a qualifying trauma system entry criteria.

## **Trauma Training**

The regional directors and managers will send available dates for the monthly trauma training to the Trauma Administrator by May 10, 2011. The Trauma Administrator will draft a separate calendar to consider for monthly regional trauma training.

## **Region 2**

An RTAC teleconference meeting is scheduled for next month. Dr. Neil Christian, RTAC QA/QI chairman, has requested trending data to see where we are in the east region is relating to trauma care. There have been a few 1A QA/QI issues related to late contact of the ATCC. These have been handled

## **Region 3**

No region update.

## **Region 4**

Team Health ED Staffing Company will start covering the ED at Druid City Hospital on May 3, 2011. Glenn Davis will remind the appropriate staff to ensure that they check the ATLS credentials for all of the Team Health staff who will cover DCH.

## **Region 5**

No Update

## **Region 6**

- USA had increased red time because of the lack of bed availability. The increased seems to be related to spring break and inclement weather. Dr. Gonzalez is now responsible for burns. USA is expecting to hire and additional surgeon by October 2011.
- At this point, USA keeps all children that are five and older who are admitted through the trauma system.
- David Garmon will check with the appropriate staff at USA to identify the appropriate procedure to identify if USA has open burn beds when they are on divert or red.

## **Next Meeting**

The next meeting was scheduled for May 17, 2011, at 10:00 a.m., in Montgomery at the RSA Tower, 201 Monroe Street, Suite 750, Office of EMS and Trauma.

## **Adjournment**

The meeting was adjourned at 10:54 a.m.