01/16/2008 QI Workgroup Meeting Notes
11:50a.m.-2:10p.m.
Location: BREMSS

❖ Dr. Campbell opened with words of welcome to the group
❖ Choona reviewed notes from the previous meeting. There were no additions or corrections to the notes.
❖ Open discussion began related to the under-triage data element issue. The group discussions identified the state will be able to link the E-PCR data which is a component of the EMSIS software to the new trauma registry software per the unique identifier. Also mentioned was the desirability of linking the EMSIS database, the Trauma Registry database, and the TCC/BREMSS database. Mike Daughtry will do additional research to identify the ability to capture all 4 Trauma System Protocol Criteria:

1. Physiological
2. Anatomical
3. Mechanism of the patient injury
4. EMT Discretion (There is no way we can pick this up from the e-PCR)

If we are able to determine adherence to the Trauma System Protocol Criteria in the list above, we can identify the under-triaged patients. Under-triaged patients meet the Trauma System Protocol Criteria but are not entered into the Trauma System. This is one of the critical process measures used to monitor performance of the Statewide Trauma System.

❖ OEMS & T Staff met with QI Consultants from the University of Alabama Tuscaloosa, Dr. Mitch Shelton Research Analysis, Joe Higginbotham IT Specialist, and D. John Higginbotham, Asst. Dean of Research and Health Policy. A proposed agreement is currently being considered but has not been finalized at this point. The QI Workgroup will be updated as information is received.
❖ Joe Acker explained BREMSS current process for measuring under-triage in their area as listed below:

1. Non-trauma hospital calling
2. Inter-facility transfer reports form UAB and Children's hospitals
3. Radio traffic monitoring

❖ Break for Lunch 12:10p.m. - 12:40p.m.

❖ We resumed the meeting with additional review of BREMSS current QI process. Joe Acker and his staff gave a QI presentation which demonstrated the possible reports available per their software and provided us with a copy of their PowerPoint presentation. The IT representative indicated that the reports could print in various formats. Below is an example of some of the available reports per BREMSS' system:

1. Unavailable hospital
2. Patient Count
3. Patient per entry criteria
4. System message
5. Patient by provider
6. Recent communication log

Currently, there is no summary of all possible reports available but the IT representatives agreed to work on creating a summary of all of the possible reports that may be available and have it ready in 1 to 2 weeks.

(Joe Acker presented a QI power point presentation at this point in the meeting.)

❖ Joe also stated that currently EMT discretion accounts for 44% of the patients in the Trauma System.
❖ In addition to the electronic reports, Joe is currently performing manual chart audits of hospital outcomes of 100% of all Level I Trauma System Patients bi-yearly (January-June).
❖ Joe reminded us of the discussion from our previous meeting related to adding a Trauma Registrar person to our QI workgroup.
❖ As of December 2007 BREMSS can track all patients' data within 6 to 8 hours of reaching the hospital to identify transfers, discharges, admits and patient expired information.
❖ There were an increased in the amount of red time for BREMSS Trauma Center resources in November and December 2007.
❖ Joe re-emphasizes the importance of developing a user friendly data collection process. This should include the sharing of data between each regional trauma system, the TCC, and the Trauma Registry.
Alex Franklin presented some potential QI issues to consider. He also stated he plans to add additional information to his list. Yet, he wanted the group to start thinking of the issues listed. **(Refer to QA Criteria: Alabama Trauma System)**
❖ Spencer and Alex offered to work on developing a QI Flow chart based on the North Region as a guide for the Statewide Trauma System process QI.
❖ We will review Alex's list of potential QI issues and plan to discuss them in more detail at our next meeting. In addition, Spencer and Alex will present the draft QI flow chart for discussion.

- ❖ The next meeting will be change from February 8, 2008 because of scheduling conflict. Everyone will receive and e-mail notification of our new meeting date/time/location and a reminder.
- ❖ Adjourned at 2:15p.m.