Minutes of the Statewide Trauma and Health Systems (STHS)
Quality Assurance/Quality Improvement (QA/QI) Workgroup Meeting
November 22, 2016, 10 a.m., Room 1184
Call in Information 1-800-491-4585

In attendance:	Allan Pace, Augustine Amenyah, Choona Lang, DHEd, David Garmon, Denise Louthain, Dion Schultz, Glenn Davis, Joe Acker, John Blue II, Valeta Jones, Lynn Morrison, Travis Parker, Stephen Wilson, William Crawford, M.D., Verla Thomas
By Phone:	Adam Lanson
Absent:	Sarah Nafziger, M.D., Michael Minor, Mark Jackson, Jeremy White, Holly Waller

Dr. Crawford welcomed participants. Introductions were done to officially welcome new members, Lynn Morrison, trauma service manager at Druid City Hospital Regional Medical Center (DCH) and Adam Lanson, trauma coordinator at Children's Hospital who replaced Geni Smith.

QA/QI Process

Trauma System Update
Dr. Crawford reported some outcomes from the Trauma Surgeons Meeting held last month. These meetings would be an essential component of the on-going evaluation of the trauma system. Dr. Crawford stated that the trauma surgeons plan to meet quarterly to discuss the trauma system and to provide guidance related to system operations, data collection, and data review. Alabama Department of Public Health (ADPH) Office of Emergency Medical Services (OEMS) continues to discuss and consider ways to enhance the trauma system. Based on feedback from emergency medical services personnel (EMSP), there is a need for additional education related to system acronyms such as TBO and TSO.

Trauma Registry Compliance
Mrs. Thomas provided the 2016 trauma registry compliance report to each regional director based on data entered into a collector, which was compared with the number of Alabama Trauma Communications Center (ATCC) entries in the lifetrac pre-hospital database. She stated that many circumstances played a part in the data that was collected. She explained that some larger hospitals that submit data to the National Trauma Data Bank (NTDB), submit to the State quarterly. The Alabama Trauma Registry (ATR) does not consist of real time data and is three months in arrears; smaller, Level III, hospitals may not attain many trauma cases which decrease their numbers; some hospitals are not in compliance due to staffing changes. Mrs. Thomas stated she would send each Regional EMS Agency a copy of the data registry report electronically, if needed. To capture cleaner data, Mr. Acker requested that the privately

owned vehicles (POV) and transfers be removed from the patients who did not come by emergency medical services.   ATCC numbers and patient care reports compliance rate is currently 70 percent. Alabama Department of Public Health had not been able to pursue the linkage with pre-hospital data system, at this point. Dr. Lang noted that the Workgroup needs to get back on track to focus on data compliance in 2017. She stated that it is extremely hard to effectively evaluate the system if good data is not captured. The Workgroup should be, and should continue, to remind hospital personnel of the importance of being in compliance, sending the hospital feedback reports to the communication center, entering the patients into the trauma registry, and making certain that the ATCC numbers are in place.

Trauma /Stroke Data Report

Mr. Amenyah presented the ATS Report, as distributed.

Regional Discussion

Region One
Mr. Schultz reported that their regional staff had been busy with national registry training requirements. The Stroke System Activation Training would be held on December 9, 2016. Highlands Hospital is looking forward to applying with the State to become a stroke center.

Region Two
Mr. Pace reported that the region had six out of thirteen facilities who would participate in the stroke system. The Regional Advisory Committee (RAC) had taken steps to approve the applications and the majority of the votes were counted. Mr. Pace stated that the Stroke System Activation Training for Region Two would be held on December 14, 2016.

Region Three
Mr. Acker reported that the Region QA's are closed through the end of October, 2016 except for the outer region ground ambulance and air providers. The RAC approved the revised Stroke Plan for the BREMSS region. Mr. Acker explained that spine boards continued to be dramatically over used. He stated that he would send a memorandum to the providers to incorporate education for emergency department nurses and physicians on the appropriate use of spine boards. He would also draft a one-page report on spine boards for review by stroke system staff for distribution statewide, to educate the trauma coordinators on the use of spine boards.

Region Four
Mr. Davis reported that their regional staff traveled to Meridian, Mississippi to discuss the trauma/stroke/STEMI systems and Region Four is looking forward to adding Meridian to the state health systems. Druid City Hospital (DCH) has a Stroke Committee that is convening to discuss joining the stroke system. Dr. Crawford is planning to meet with the neurologists from DCH on December 9, 2016.

Region Five

Ms. Louthain reported that her region is doing well. She stated that Midtown Medical Center's computers had been installed for the stroke system. Dr. Fred Pich continues to encourage Bay Medical Center in Florida to join the trauma/stroke health systems.

Region Six

Mr. Garmon reported that he had set his Stroke System Activation Training for December 19, 2016. He shared concerns about the process of a divert system for the hospitals in his region. Mr. Acker stated that, in using the divert system, Mr. Garmon should educate the hospital personnel on which patients meet the diversion criteria, and the local hospital council should be supportive of the decision to use the divert system. Mr. Acker stated that a divert report should be generated monthly. Mr. Garmon stated that the region has a new helicopter which is Med Star.

Next Meeting

The next meeting will be held on January 24, 2017, at 10 a.m., in Montgomery at The RSA Tower, Suite 1100.

Adjournment

The meeting was adjourned at approximately 12:30 p.m.