

# Minutes of the Alabama Trauma System (ATS)

## QA/QI Workgroup Meeting

April 29, 2013, 8:30 a.m., Room 1182

Call in Information 1-800-491-4634

In attendance: Choona Lang, Verla Thomas, Sarah Nafziger, M.D., Leslie Morgan, Glenn Davis, Mark Jackson, Joe Acker

By Phone: Allan Pace, Michael Minor, Spencer Howard, Dion Schultz, William Crawford, M.D., Andrew Lee, Robert Russell, M.D.

Absent: Geni Smith, Richard Gonzalez, M.D., MisChele White, Denise Louthain, David Garmon, Jeremy White

Choona Lang welcomed participants.

### **Regional Advisory Council (RAC) Membership and Appointment Revisions**

Dr. Nafziger updated the workgroup on the progress of audits of the Alabama Hospital Association and the Medical Association of the State of Alabama appointments for each region. She asked that the Regional Directors work to be sure this information is verified and provided to the Office of Emergency Medical Services (OEMS) so that new or re-appointments can be requested from the respective associations. RAC appointments of physicians and hospital representatives will also be audited at this time.

### **Regional Plan Updates**

Dr. Nafziger informed the group that after consultation with Alabama Department of Public Health (ADPH) Legal Counsel, the decision was made to keep the regional plans rather than convert entirely to a general ATS Manual that would include all regional information. It is time for a yearly review of these documents to update information and correct formatting errors. Ms. Morgan will edit the regional plans and forward them to each region for revisions. Once each plan has been sent for regional review, a deadline for presentation to the Regional Advisory Councils will be decided. Voting by email to approve regional plan changes has been approved.

### **Quarterly Reports**

Ms. Lang presented a chart for each region to use to follow up on outstanding hospital visitation issues that are presented to Katherine Hert in the quarterly reports. Ms. Lang encouraged each region to follow up with Michael Minor and Joe Acker to be sure all outstanding issues are resolved.

### **Out of Region Routing**

Dr. Crawford explained to the workgroup the problems that are arising from region to region transfers when trauma centers are on red or divert status. Huntsville Hospital neurosurgical staff

believe that they have received an inordinate number of inappropriate out of region trauma calls. OEMS staff is waiting to receive data to support this belief. Mr. Acker related to the workgroup that he has seen no data to support their claim. His data indicated that patient choice was the primary reason for transfer from other regions to Huntsville Hospital and that there are more transfers from Region One to Region Three. Also, Huntsville Hospital runs an in-house patient transfer center that is not related to the Alabama Trauma Communications Center (ATCC). Many community hospitals in Region One are utilizing the transfer center rather than the ATCC to facilitate patient transfers and this may be the cause of incomplete data. Efforts are currently being made to identify solutions. Dr. Crawford discussed the effect that regional boundaries and varying transfer times is having on this issue and how those times may be considered for adjustment in the future. Mr. Acker volunteered to coordinate a meeting with Dr. Rony Najjar, Dr. Loring Rue, and Dr. Crawford to discuss this issue. Community hospitals in Region One will also require more education on ATS patient entry for all trauma patients.

### **Alabama Trauma Registry (ATR) Compliance Project**

Ms. Thomas reported that she is working with the software vendor and linkage is still being established. ATCC number compliance continues to need improvement and is being addressed. A Facebook page will be set up to encourage better communication between OEMS and Trauma Registry Managers.

### **QA/QI Update**

Mr. Jackson related several QI issues to the workgroup. One motor vehicle crash (MVC) resulted in an emergency medical services personnel (EMSP) not calling in to the ATCC until the patient was within ten minutes of the hospital. The EMSP was found to be recently hired and this issue was resolved with education.

Another MVC involved an air medical service conducting a trauma patient transfer to a non-ATS hospital. The patient was never entered into the ATS. The service accepted fault, assuming they did not have to enter a trauma patient being transferred to a non-ATS hospital. This issue was resolved with education.

An air medical transport from a MVC delivered a child to a non-ATS hospital after making the determination that distance and injury did not require transport of the patient to Children's Hospital. Air medical transport did not call the ATCC for guidance. This issue was resolved with education.

A trauma patient from a MVC requested to be taken to a community hospital and was refused treatment because the doctor on staff felt the patient was mentally altered and the injuries sustained required a higher level of care. The hospital did not call the ATCC or enter the patient into the ATS. Education has been requested for the involved parties and the case has been turned over to ADPH Provider Standards for investigation of a possible EMTALA issue.

## **Regional Discussion**

### ***Region One***

Mr. Howard reported that he and his staff are making hospital visits. He reported that hospitals in his region are in need of education, due to nursing staff turnover, and he is addressing this problem. He is also looking into producing posters for hospital entry criteria. The next RAC Meeting for Region One is June 18, 2013.

### ***Region Two***

Mr. Pace reported that the next RAC Meeting for Region Two is May 2, 2013. The RAC will address membership changes at this meeting. Mr. Pace also reported that he is conducting site visits and educational trainings as well.

### ***Region Three***

Mr. Acker reported that his region has submitted a summary of QI Issues from February to March for the quarterly report for the Medical Direction Accountability Committee.

### ***Region Four***

Mr. Davis reported that his region is resolving several QI issues and that Vaughan Regional Medical Center is seeking designation as a Level III Trauma Center. A date for this inspection has not yet been scheduled.

### ***Region Five***

Ms. Lang reported for Ms. Louthain that a stroke satellite training conference is scheduled for April 29, 2013, at 10 am, and would take place in the ADPH Video Communications studio.

### ***Region Six***

There was no report provided.

### **Next Meeting**

The next meeting date is to be determined.

### **Adjournment**

The meeting was adjourned at 9:34 a.m.