

Alabama Trauma System
QI Workgroup Meeting
January 21, 2010 10:00 a.m. - 12:00 a.m.
Office of EMS & Trauma Conference Room
Montgomery, Alabama
Call in Information: 1800-491-4634

In attendance: Choona Lang, Dr. Campbell, Denise Louthain, E. Allan Pace,
David Garmon, Jeremy White,

By Phone: Alex Franklin, Joe Acker, and Michael Minor

Not in attendance: Beth Anderson, Spencer Howard, Geni Smith, Tammie Yeldell,
Verla Thomas, Robin Moore, Dr. Crawford, Glenn Davis

Choona opened the meeting with a welcome.

Trauma System Update

DCH Regional Medical Center in the West Region was surveyed on January 14, 2010 and will be coming into the Alabama Trauma System as a Level III.

The five hospitals in the Southeast Region (3-Montgomery and 2-Dothan) still have not submitted their application for the trauma system.

The Legislature will not be approached for funding until next session.

The Statewide Trauma Advisory Council will plan another retreat to discuss the distribution of funds for the trauma system.

The West Region started training the pre hospital service providers on the trauma system.

EMTALA Issues

The Emergency Medical Treatment and Active Labor Act is a statute which governs when and how a patient may be (1) refused treatment or (2) transferred from one hospital to another when he is in an unstable medical condition.

A hospital that has specialized capabilities and capacity may not refuse to accept from a referring hospital an appropriate transfer of an individual who requires such specialized capabilities. Although a recipient hospital can make reasonable inquiries to determine if the transfer is appropriate, as a practical matter, the recipient is not well positioned to determine whether the transferring hospital had the appropriate capability or capacity to

stabilize that patient at the time of transfer. CMS would give significant deference to the good faith judgment and assessment of the transferring emergency or treating physician in that situation. If the recipient hospital determined or had reason to believe that the transfer was inappropriate upon receiving the patient, then it has an affirmative duty under its participation agreement with CMS to promptly report a possible inappropriate transfer to the Alabama state survey agency who would in conjunction with the CMS Atlanta Regional Office, conduct a thorough investigations of the transfer.

Dr. Campbell will revise the Patient Criteria for Hospitals to Enter Patients into the Trauma System DVD and it will be re-distributed to the regions, after meeting with Provider Standards staff and CMS to clarify the appropriate EMTALA reporting process.

LifeTrac Software/Feedback Reports Update

The LifeTrac issues:

1. The software no longer generates report based on the incident number. Reports are currently generated based on ATCC number.
2. The outcome study report will take the information from the hospital to query the database on over and under triage. Hospitals will be able to see the reports prepared.
3. QA/QI reports can be generated based on county of origin and/or hospital. This added feature will produce more accurate region trauma system case numbers.
4. Co morbidity factor will be move back to the front of the screen, on the hospital entry screen.

Trauma System feedback report compliance for Level three trauma centers is not good.

NATS Update

- As of November 2009, volume is the same.
- Under triage reports are low from Huntsville and none are currently being reported by the level III trauma centers
- It seems that, Proxies are not relaying information back to the Hospital CEO from the RTAC meetings as noted by the lack of compliance to report under triage.
- 65% feedback forms received from Level I & II hospital. Few patients transferred to level III.

EAST Update

- ATS volume is increasing each month(January volume is slow)
- Pre-hospital is sending ATCC# to Allan to be compared with the reports received.
- Allan is planning a meeting with Gadsden and RMC related to sending feedback reports back to BREMSS
- Allan also has a once a month meeting with CEOs and nurse manager of each Trauma Center in his region to discuss trauma system issues.

GULF Update

- Gulf Region is experiencing QI issues with transferring patients
- Educational issues are continuing to be addressed
- Communication issues between hospital, EMS services providers and ATCC are be addressed
- Schedule meeting February 3 to address communication issues.
- Thomas Hospital is not sending any feedback forms to ATCC.
- Mobile Infirmary seems resistant to receiving trauma system patients.
- RTAC meeting is scheduled for March.
- Trauma Training for Acadia EMS in Mississippi will take place in March.

SOUTHEAST Update

Montgomery and Dothan hospitals have not submitted application to participate in the Alabama Trauma System. There is a Meeting schedule February 19, 2010 to discuss this issue.

Next Meeting

February 18, 2010 10:00a.m.-12:00p.m.

Meeting adjourn 11:47a.m.