

**Minutes of the Statewide Trauma and Health Systems  
Advisory Council (STHSAC) Meeting**

March 28, 2019, 10 a.m.

Alabama Department of Public Health  
The RSA Tower, Suite 1586  
Montgomery, Alabama

**Members Present:** William Crawford, M.D.

**Members by Phone:** Sidney Brevard, M.D., Teresa Grimes, Rony Najjar, M.D., Ricky Howell,  
Sam Dean

**Members Absent:** Scott Harris, M.D., Jeffery Kerby, M.D., Vernon Johnson,  
Alzo Preyear, M.D., Bryan Kindred

**Staff Present:** Stephen Wilson, Gary Varner, Augustine Amenyah, Lori McInerney,  
Alice Floyd, Stephanie Payne, Chris Hutto, Karen Bishop

**Guests Present:** Dion Schultz, Nate Horsley

**Guests by Phone:** John E. Blue, II, David Garmon, Mollie Triplett, Kayla Whitaker,  
Denise Louthain, Travis Parker, Glenn Davis, Jon Simmons, M.D.,  
Michael Minor

**Welcome**

Dr. Crawford welcomed the participants and called the meeting to order. Dr. Crawford chaired the meeting in Dr. Harris' absence.

**Adoption of December 10, 2018, Meeting Minutes**

A motion was made to approve the Minutes of the December 10, 2018, meeting. The motion was seconded, and the vote was unanimous to approve.

**Unfinished Business/American College of Surgeons (ACS) Report**

Dr. Crawford reported that a team from ACS conducted an Alabama Trauma System Consultation in the fall of 2018. The final report was submitted to the Office of Emergency Medical Services (OEMS) a few weeks ago and sent to the entities who supported the cost of the assessment. The report included a list of recommendations for the Alabama Trauma System. The site visit team that conducted the visit said that some states implement all of their recommendations while some do not. He continued that the OEMS was in the process of

identifying the recommendations that the department, with the stakeholders, could realistically accomplish given the funding limitations. Without funding, some of the recommendations cannot be accomplished. The recommendations will be reviewed with the trauma surgeons immediately following this meeting.

Dr. Brevard commented that he understood that the Governor was going to fund only the Alabama Trauma Communications Center. He asked for the Alabama Department of Public Health's (ADPH) plan for moving forward given the limited amount of anticipated funding. He stated that in-patient care needed to be included in everything because the trauma system does not stop at the emergency department. He asked if a legislative study would be conducted. Dr. Crawford replied that the Governor's Office was provided a copy of the ACS Report and it was his understanding that the report was being reviewed. He added that Dr. Harris, Dr. Kerby, Will Ferniany, and Stephen Wilson spoke last week about meeting with Representative April Weaver about a legislative study on trauma.

At Dr. Harris' request, Dr. Crawford reviewed recommendations from a funding committee that was created years ago. The committee developed a broad-based formula to start the discussion; however, the committee dissolved when the administration changed and funding was not provided. Dr. Harris committed to having a discussion with the Governor's Office and Representative April Weaver.

Stephen Wilson commented that OEMS would work with its legal counsel to draft a resolution to form a study commission and send it to Representative Weaver for possible introduction to the Legislature.

Dr. Brevard reiterated the need to include in-patient care throughout the process and asked who should be contacted to support the request for funding. Dr. Crawford suggested reaching out to the local chapter of the American College of Surgeons, the Alabama Hospital Association, emergency physicians, legislative contacts, and both the Senate and House of Representatives. He added that ADPH could not push this effort alone.

### **Trauma System Update**

Dr. Crawford reported that Southeast Health (formerly Southeast Alabama Medical Center) and Baptist Medical Center South, both Level II trauma centers in the Southeast Region, had their follow up site visits and were voted to continue in the system by their Regional Advisory Council (RAC).

Bryan W. Whitfield (BWW) Hospital in the West Region had an initial site visit as a Level III trauma center. They were under a management agreement with the University of Alabama at Birmingham (UAB), who put quite a bit of resources into the hospital. BWW had a lone surgeon who was very committed, was on call almost constantly, and was onsite all but a few days a month. BWW is in the process of updating the emergency department and seeking

emergency department trained physicians. BWW was voted favorably by their RAC to join the system.

### **Stroke System Update**

- Site visits were conducted at Lakeland Community Hospital in Haleyville and Riverview Regional Medical Center in Gadsden. Lakeland Community Hospital was surveyed as a Level III stroke hospital and their RAC voted favorably to continue the application process. Riverview Regional Medical Center was surveyed as a Level II stroke hospital but has not yet been voted on by their RAC to continue the application process.
- South Baldwin Regional Medical Center in Foley submitted a request to upgrade from a Level III stroke center to a Level II stroke center. Their RAC voted and The Joint Commission Primary Stroke Center Certification obtained by the hospital would be accepted by process.
- St. Vincent's St. Clair in Pell City is scheduled for a Level III stroke center site visit in April.

### **Stroke Triage Guidelines Update**

Dr. Crawford reported that the Stroke Triage Guidelines Subcommittee of the Stroke Committee (a group of neurologists from across the state) continued to work on the guidelines to identify large vessel occlusions (LVO) using the Emergency Medical Stroke Assessment Tool. They were refining guidance for both prehospital and hospital components to route LVO patients to hospitals who can perform mechanical thrombectomy. More information will be provided at the next meeting.

### **Electronic Vote Results**

Since the December STHSAC meeting, several hospital site visits and RAC reports were voted on electronically. Dr. Crawford thanked the STHSAC members for their time in completing and returning the votes.

### **New Business/Regional Advisory Councils**

During initial implementation of the trauma system, many stakeholders were added to the RACs to increase input and participation. Now that the system has matured, the larger number has made it difficult to obtain a quorum and conduct business.

By statute, RAC composition is limited to ten voting members. To mirror STHSAC composition, a RAC can have as many members as they wish; however, only ten members can vote. OEMS sent a letter to the EMS Regions with additional information on RAC structure.

## North Region Revised Regional Trauma Plan

There were some differences in entry criteria in the North Region's Regional Trauma Plan; however, they have streamlined to have the same entry criteria as the state plan. A motion was made to accept the revised North Region Regional Trauma Plan. The motion was seconded and carried with no opposition.

## Proxy Resolution

At the December meeting, someone participated as a proxy for a committee member. It has since been determined that a proxy for an STHSAC member is allowable and a draft proxy was provided to committee members for review. A motion was made to accept the Proxy Resolution. The motion was seconded and carried with no opposition.

## Trauma Registry and Health Systems Report

Mr. Varner presented the Trauma Registry and Health Systems Report for July 1, 2018, to December 31, 2018, as distributed.

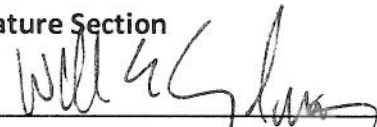
## Next Meeting


The next meeting is scheduled for June 14, 2019, at 10 a.m.

## Adjournment

With no further business to discuss, the meeting was adjourned at approximately 10:26 a.m.

## Signature Section

  
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William Crawford, M.D., for  
Scott Harris, M.D., Chairman  
Statewide Trauma and Health Systems Advisory Council

  
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Alice Floyd, B.S.N, R.N., Acute Health Systems Manager