

Pediatric Workgroup Meeting

June 20, 2008

In attendance: Alex Franklin, Dr. Steven Baldwin, Geni Smith, Richard Fell,
Choona Lang, Verla Thomas, Dr. John Campbell

Not in attendance: Dr. Ann Klasner, Dr. Marsha Raulerson, Dr. Oliver Muensterer
Becky DeVillier, Dr. Rosa Vidal

Dr Campbell opened the meeting with an introduction.

Dr. Campbell gave summary and example of other state trauma system and facts that Alabama is not lagging behind in our efforts to implement a statewide trauma system. Many other states are dealing with greater issue than Alabama because they don't regulate the preshospital EMS providers. At this point it appears that Alabama will set the standards. Dr. Campbell presented the question and the plans below for the Pediatric workgroup to consider. Can we identify/develop standards for pediatric trauma facilities in the State of Alabama? The group agreed that we can and should include these efforts as a task to complete.

Currently in the State of Alabama the pediatric care age varies. Children Hospital in Birmingham utilizes 15 under and Huntsville Children utilizes 14 & under as their age for pediatric care.

All trauma patients in Huntsville are seen at their main hospital before transferred to their children hospital

List of Pediatric Workgroup Work Plans:

1. A sub committee needs to be established to identify minimal equipment a facility should have to take of a pediatric patient.
 - ❖ Verla Thomas has the results of an equipment survey done for BLS/ALS ground transport providers that she will bring for the group to review at the next meeting.
2. Identify current pediatric training at active pediatric care hospitals in the Alabama for surgical specialty and ED doctors
3. Identify current training needs and consider developing a training program
4. Set standards for a pediatric trauma center
5. Focus on equipment for:
 - a. Trauma Center
 - b. Ground transport
 - c. Air transport

6. Pediatric State conference plan

Verla Thomas stated we are planning our first EMSC conference in October which will be an opportunity to include trauma education

Alabama Pediatric Care Strength

1. Huntsville Children Hospital
2. Children Hospital/Birmingham
3. USA/Mobile

Alabama Pediatric Care Challenges

1. Capacity
2. Statewide Standards
3. Training

*******We need to contact the members of this workgroup that were not in attendance to inquire about the pediatric equipment available in their areas.***

Other Discussed points:

Pediatric transfer agreements were discussed and the group decided to revisit this issue at a later date because it's a mute point at this in time.

There are currently some issues with pediatric patients transferring from out of state hospital to Alabama hospitals with insurance companies that require the Alabama physician to apply for licensure in the patient's home state before insurance can be billed resulting in low reimbursement. This increases the amount of money Alabama residence pay in uncompensated care.

Dr. Baldwin would like the workgroup members to consider including critical care issues into the goal for the workgroup.

Next Meeting:

1. Dr. Baldwin
 - ❖ Children hospital revised activation criteria
 - ❖ Airway material
 - ❖ Airway equipment/supply list, (indexing the capabilities)
2. Verla
 - ❖ discuss equipment survey already sent t ALS?BLS ground providers concerning pediatric equipment
3. Alex
 - ❖ Regional information (HEMSI) for Pediatric in North
4. Date for next meeting July 11, 2008
5. Create sub committee for the workplan listed above