

ANNUAL REPORT FISCAL YEAR 2026



MISSION: POSSIBLE

ELEVATING TRAUMA CARE IN GEORGIA



GEORGIA TRAUMA
COMMISSION

Coordinating trauma care, funding, education, and access across Georgia once seemed like an *impossible mission*. Today, sustained investment and collaboration have built a stronger, more accountable statewide trauma system.

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FROM MISSION CRITICAL TO
MISSION:
POSSIBLE



Trauma care takes a team. Throughout this report, look for brief introductions to the specialists working behind the scenes and on the front lines to make Georgia's trauma system possible.

***“A strong trauma system
is built before the moment
it is needed.”***



911 Dispatcher: Identifies the emergency, sends the appropriate responders and provides instructions until help arrives.



LETTER FROM OUR EXECUTIVE DIRECTOR

To Georgia residents, trauma system partners, and stakeholders:

A strong trauma system is built long before an injured patient needs it. It depends on trauma centers maintaining readiness around the clock, EMS professionals prepared to act in difficult conditions, and teams across the state working together to move patients quickly to the right level of care.

During fiscal year 2026, the Georgia Trauma Commission invested more than \$30 million in the people, infrastructure, equipment, education, and quality initiatives that sustain Georgia’s trauma system. These investments supported 36 trauma centers and two burn centers, provided lifesaving equipment to EMS agencies, expanded access to EMS and rural trauma education, and placed thousands of bleeding control kits in communities across the state.

This year also marked ten years of the Georgia Quality Improvement Program. GQIP demonstrates what is possible when trauma professionals share data, examine outcomes honestly, and work together to improve care. That same collaborative approach is evident in Georgia’s Regional Trauma Advisory Committees, which connect statewide priorities with the distinct needs of local communities.

None of this work is accomplished by the Commission alone. Georgia’s trauma system relies on EMS professionals, dispatchers, physicians, nurses, trauma program leaders, registry professionals, educators, rehabilitation specialists, hospital administrators, public safety agencies, community partners, and many others who contribute every day. We are also grateful to the members of the Georgia General Assembly, state agency partners, and taxpayers who entrust us with public resources and expect those resources to be managed responsibly.

Most importantly, this work is about the injured patients and families who rely on the trauma system during some of the most difficult moments of their lives. They may never see the preparation, coordination, and investment behind their care, but that work determines whether the system is ready when every second matters.

The Georgia Trauma Commission remains committed to expanding access, strengthening readiness, improving quality, and ensuring accountability for the resources invested in trauma care. We are proud of the progress reflected in this report and deeply grateful to the people who make that progress possible.



Elizabeth V. (Liz) Atkins, MSN, RN, TCRN
EXECUTIVE DIRECTOR

IN 2007, Senate Bill 60 established the Georgia Trauma Commission.

ONE MISSION. STATEWIDE IMPACT.

MISSION

The Georgia Trauma Commission is dedicated to improving the health of injured Georgians by ensuring access to quality trauma care, coordinating key trauma system components, and educating trauma care providers across the multidisciplinary continuum.

VISION

The Georgia trauma system will become a top-tier trauma system that provides the highest quality care and education through discovery and innovation.

VALUES

STEWARDSHIP: Manage resources responsibly and bring value to patients and taxpayers.

INCLUSIVITY: Ensure teamwork, collaboration, and inclusion of a diverse stakeholder group.

INTEGRITY: Demonstrated through accountability, ethical behavior, transparency, and reliability.

The Georgia Trauma Commission administers the statewide trauma care network and serves as the accountability mechanism for the entire trauma system, overseeing the flow of funds for system improvement.



Trauma Surgeon: Leads the trauma team, evaluates serious injuries and performs emergency surgery when needed.



Anesthesiologist: Manages anesthesia, breathing and vital functions during emergency surgery.



Orthopedic Trauma Surgeon: Treats serious injuries to bones, joints and limbs.

2026 FUNDING OVERVIEW

The Georgia Trauma Commission (GTC) annual budget is strategically allocated through established funding formulas designed to sustain and strengthen the critical infrastructure of Georgia’s trauma system. This year, the GTC’s full budget allocation was directed toward initiatives supporting trauma centers, Emergency Medical Services (EMS), system development, and essential operational needs.

These investments reflect the GTC’s continued commitment to improving access to high-quality trauma care and strengthening the systems that support patients across Georgia.

KEY ACCOMPLISHMENTS & INVESTMENTS INCLUDE:

Sustained investment in bleeding control kits to support Georgia’s Stop the Bleed program and enhance the ability of bystanders and first responders to provide lifesaving hemorrhage control before definitive medical care is available.

Continued investment in trauma center education, including the Society of Trauma Nurses’ Trauma Outcomes and Performance Improvement Course (TOPIC), which provides training that strengthens trauma system teams’ understanding of performance improvement, outcome evaluation, and strategies to enhance the quality and effectiveness of trauma care.

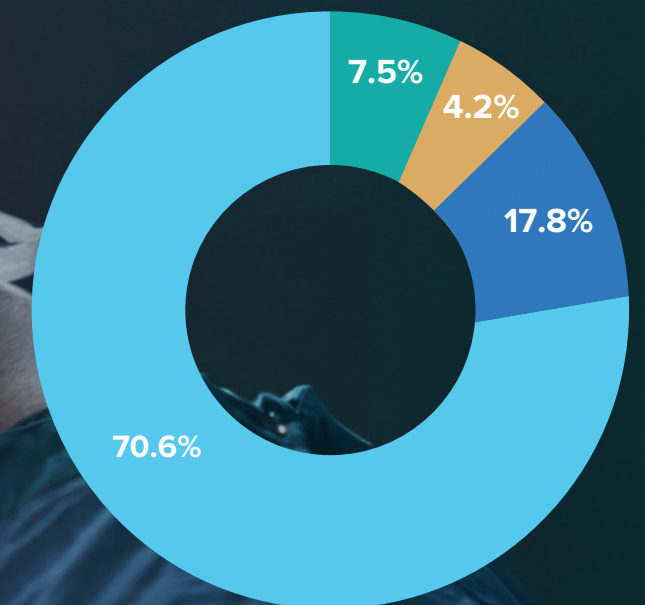
Expanded rural trauma education to help clinical teams prepare for high-risk injuries in settings with limited resources, including continued investment in the Wellstar Medical College of Georgia (MCG) Rural Interactive Trauma Simulation (RITS) program.

Reimbursement support for Level III trauma centers participating in the Trauma Quality Improvement Program (TQIP), helping them engage in national benchmarking, identify opportunities for improvement, and strengthen the quality of trauma care for patients.

Equipment grants for Georgia’s 911-zone providers to supply critical resources to enhance prehospital capabilities and support EMS providers in delivering timely, high-quality care in the field.

Expanded EMS education and professional development opportunities through EMT, EMR, and NAEMT grants, leadership development courses, and cadaver labs. These initiatives strengthen the knowledge, skills, and preparedness of Georgia’s EMS workforce and help ensure providers are equipped to respond effectively to trauma and other medical emergencies.

FUNDING THAT MAKES TRAUMA CARE: **POSSIBLE**



\$30.4M+

*budgeted and allocated through
the Georgia Trauma Commission*

Trauma Centers	\$21,471,935.00
EMS	\$5,401,037.16
System Development	\$2,277,335.64
Operations	\$1,264,943.90
OVERALL BUDGET	\$30,415,251.70

INVESTING IN A STRONGER TRAUMA SYSTEM

TRAUMA CENTER DISTRIBUTION

In FY 2026, \$21.6M+* was allocated across all levels of Georgia’s trauma, pediatric trauma, and burn centers. This funding plays a critical role in supporting trauma center operations, including readiness costs, registry management, and the provision of uncompensated care. Notable funding features include:

Performance-Based Pay Program (PBP):

A portion of readiness funding is tied to performance outcomes. Centers are evaluated using established metrics, and funding levels are adjusted accordingly to encourage excellence and continuous improvement.

Uncompensated Care Funding (UCC):

UCC funding was allocated to Level I, Level II, and burn centers to help offset the costs of treating uninsured or underinsured patients. Distribution is based on each center’s historical data and is audited annually by an independent third party to ensure accountability and transparency.

Trauma Registry Support:

To support the continued collection, management, and utilization of trauma data, funding is provided to offset a portion of the costs associated with trauma registry data platforms. This support helps trauma centers maintain reliable data systems that contribute to accurate reporting, performance improvement, quality assurance, and the ongoing evaluation of trauma care across the state.

Trauma Quality Improvement Program (TQIP) Membership Reimbursement:

To promote participation in national benchmarking efforts, the Georgia Trauma Commission reimbursed TQIP membership fees for Level III trauma centers.

The FY 2026 funding reflects Georgia’s ongoing commitment to a high-performing trauma system. By investing in readiness, incentivizing quality care, and strengthening data reliability, Georgia continues to enhance trauma care delivery and outcomes across the state.

ONE SYSTEM. ONE MISSION. EVERY PATIENT.

Trauma Center Allocation

\$21,371,935.00

Trauma Center Education

\$100,000.00

OVERALL BUDGET

\$21,471,935.00

**Includes \$308,192 of prior year Trust Funds.*



Trauma Nurse: Provides immediate bedside care, monitors the patient and coordinates the trauma response.



Respiratory Therapist: Treats breathing complications and inhalation injuries, which can be critical in burn patients.

TRAUMA CENTER ALLOCATIONS

FY 2026 Base Budget Allocations					
Contracted Trauma Centers	Readiness	Performance Based Pay Dollars (Based on 2025 Scorecard Results)	Total Readiness Payments	UCC (CY 2023)	Total from Trauma Fund
Level I					
Atrium Health Navicent Macon	154,085.00	624,619.00	778,704.00	258,932.00	1,037,636.00
Wellstar MCG Health	154,085.00	624,619.00	778,704.00	422,240.00	1,200,944.00
Children's Healthcare of Atlanta Arthur M. Blank	154,085.00	624,619.00	778,704.00	88,444.00	867,148.00
Grady Memorial Hospital	154,085.00	624,619.00	778,704.00	3,492,138.00	4,270,842.00
Memorial Health University Medical Center	154,085.00	624,619.00	778,704.00	752,338.00	1,531,042.00
Northeast Georgia Medical Center	154,085.00	624,619.00	778,704.00	397,812.00	1,176,516.00
Wellstar Kennestone Regional Medical Center	154,085.00	623,622.00	777,707.00	421,244.00	1,198,951.00
Level II					
Atrium Health Floyd	75,297.00	308,472.00	383,769.00	130,172.00	513,941.00
Wellstar MCG Health Children's Hospital	75,297.00	308,472.00	383,769.00	-	383,769.00
Children's Healthcare of Atlanta Scottish Rite	75,297.00	301,188.00	376,485.00	81,439.00	457,924.00
Doctors Hospital of Augusta	75,297.00	308,472.00	383,769.00	-	383,769.00
Northside Gwinnett	75,297.00	308,472.00	383,769.00	514,955.00	898,724.00
Piedmont Athens Regional	75,297.00	258,027.00	333,324.00	286,348.00	619,672.00
Piedmont Columbus Regional	73,000.00	-	73,000.00	-	73,000.00
Wellstar North Fulton Hospital	75,297.00	279,608.00	354,905.00	177,826.00	532,731.00
Level III					
AdventHealth Redmond Hospital	52,440.00	75,654.00	128,094.00	-	128,094.00
Crisp Regional Health Services	52,440.00	81,009.00	133,449.00	-	133,449.00
Fairview Park Hospital	52,440.00	81,009.00	133,449.00	-	133,449.00
Hamilton Medical Center	52,440.00	68,139.00	120,579.00	-	120,579.00
J.D. Archbold Memorial Hospital	52,440.00	81,009.00	133,449.00	-	133,449.00
Piedmont Cartersville Medical Center	52,440.00	62,128.00	114,568.00	-	114,568.00
Piedmont Henry Hospital	52,440.00	81,009.00	133,449.00	-	133,449.00
Piedmont Walton Hospital	52,440.00	81,009.00	133,449.00	-	133,449.00
SGMC Health	52,440.00	68,139.00	120,579.00	-	120,579.00
Wellstar Cobb Hospital	52,440.00	81,009.00	133,449.00	-	133,449.00
Level IV					
Atrium Polk Medical Center	33,056.00	8,457.00	41,513.00	-	41,513.00
Effingham Hospital	33,056.00	8,457.00	41,513.00	-	41,513.00
Emanuel Medical Center	33,056.00	8,457.00	41,513.00	-	41,513.00
Liberty Regional Medical Center	33,056.00	7,754.00	40,810.00	-	40,810.00
Morgan Medical Center	33,056.00	6,938.00	39,994.00	-	39,994.00
Wellstar Paulding Medical Center	33,056.00	8,457.00	41,513.00	-	41,513.00
Wellstar Spalding Medical Center	33,056.00	6,938.00	39,994.00	-	39,994.00
Wellstar West Georgia Medical Center	33,056.00	8,457.00	41,513.00	-	41,513.00
Burn Center					
Grady Burn Center	197,004.00	197,004.00	394,008.00	115,876.00	509,884.00
Joseph M. Still Burn Center	197,004.00	200,244.00	397,248.00	146,453.00	543,701.00
Total	2,861,530.00	7,665,324.00	10,526,854.00	7,286,217.00	17,813,071.00

*Includes \$308,192 of prior year Trust Funds.

		Amended FY 2026 Budget Allocations			Total FY 2026
Registry Support	Total Base Funds	Additional Readiness*	TQIP Participation Support	Total Amended Funds	Total Base + Amended
75,451.00	1,113,087.00	191,066.00	-	191,066.00	1,304,153.00
75,451.00	1,276,395.00	191,066.00	-	191,066.00	1,467,461.00
75,451.00	942,599.00	191,066.00	-	191,066.00	1,133,665.00
75,451.00	4,346,293.00	191,066.00	-	191,066.00	4,537,359.00
75,451.00	1,606,493.00	191,066.00	-	191,066.00	1,797,559.00
75,451.00	1,251,967.00	191,066.00	-	191,066.00	1,443,033.00
75,451.00	1,274,402.00	191,066.00	-	191,066.00	1,465,468.00
45,331.00	559,272.00	93,369.00	-	93,369.00	652,641.00
45,331.00	429,100.00	93,369.00	-	93,369.00	522,469.00
45,331.00	503,255.00	93,369.00	-	93,369.00	596,624.00
45,331.00	429,100.00	93,369.00	-	93,369.00	522,469.00
45,331.00	944,055.00	93,369.00	-	93,369.00	1,037,424.00
45,331.00	665,003.00	93,369.00	-	93,369.00	758,372.00
45,331.00	118,331.00	-	-	-	118,331.00
45,331.00	578,062.00	93,369.00	-	93,369.00	671,431.00
19,398.00	147,492.00	32,513.00	9,684.00	42,197.00	189,689.00
9,760.00	143,209.00	32,513.00	9,684.00	42,197.00	185,406.00
6,075.00	139,524.00	32,513.00	9,684.00	42,197.00	181,721.00
19,398.00	139,977.00	32,513.00	9,684.00	42,197.00	182,174.00
19,398.00	152,847.00	32,513.00	9,684.00	42,197.00	195,044.00
17,601.00	132,169.00	32,513.00	9,684.00	42,197.00	174,366.00
10,882.00	144,331.00	32,513.00	9,684.00	42,197.00	186,528.00
9,760.00	143,209.00	32,513.00	9,684.00	42,197.00	185,406.00
19,398.00	139,977.00	32,513.00	9,684.00	42,197.00	182,175.00
23,840.00	157,289.00	32,513.00	9,684.00	42,197.00	199,486.00
9,476.00	50,989.00	9,098.00	-	9,098.00	60,088.00
13,224.00	54,737.00	9,098.00	-	9,098.00	63,836.00
13,224.00	54,737.00	9,098.00	-	9,098.00	63,836.00
9,395.00	50,205.00	9,098.00	-	9,098.00	59,303.00
9,760.00	49,754.00	9,098.00	-	9,098.00	58,852.00
19,398.00	60,911.00	9,098.00	-	9,098.00	70,010.00
13,224.00	53,218.00	9,098.00	-	9,098.00	62,317.00
19,398.00	60,911.00	9,098.00	-	9,098.00	70,010.00
37,675.00	547,559.00	76,243.00	-	76,243.00	623,802.00
37,675.00	581,376.00	76,243.00	-	76,243.00	657,619.00
1,228,764.00	19,041,835.00	2,541,445.00	96,840.00	2,638,285.00	21,680,127.00

FUNDING THE FRONTLINE

KEY SUPPORTED INITIATIVES INCLUDE:

\$1.7M+ to Support EMS Education

- The Georgia Trauma Commission invested \$1.7+ million to enhance EMS education and training across the state. These funds support a wide range of programs, not only essential courses such as EMT and EMR training, but also leadership training, cadaver labs, and simulation programs.

\$1.97M+ in Trauma Equipment Grants for 911-Zone EMS Providers

- These grants enable 911-zone EMS providers throughout the state to procure essential life-saving equipment to deliver optimal prehospital trauma care.

Continued Support for the Automatic Vehicle Locating System (AVLS) Program

- This initiative provides Wi-Fi to cellular gateways to primary 911 Zone Providers' ambulances in Georgia. These gateways facilitate real-time tracking and communication, ensuring seamless coordination between various EMS agencies and hospitals. Program costs include equipment maintenance, program management, and airtime support.

Support Regional Education Initiatives

- Findings from the statewide EMS educational needs assessment guided RTAC Coordinators in developing and submitting funding proposals to address identified educational priorities. The EMS Committee reviewed and approved these proposals to support targeted educational initiatives and address the needs identified through the assessment.

These targeted investments represent our ongoing commitment to strengthening Georgia's EMS system from frontline response to education and technology.

EMERGENCY MEDICAL SERVICES DISTRIBUTION

\$5.4M was allocated to Emergency Medical Services (EMS) stakeholders across Georgia. Guided by the goal of improving prehospital trauma care, the Georgia Trauma Commission EMS Committee evaluates the allocations of these funds to ensure they make the most significant impact.

Trauma-Related Equipment Grants	\$1,974,535.44
EMS Education	\$1,702,369.00
AVLS Program Support	\$1,550,776.03
RTAC Education Funding	\$173,356.69
OVERALL BUDGET	\$5,401,037.16



Emergency Medical Responder (EMR): Provides basic first aid and CPR before higher-level help arrives.



Emergency Medical Technician (EMT): Assesses injuries, provides immediate care and safely transports patients.

EQUIPPED TO RESPOND

EMS TRAUMA-RELATED EQUIPMENT GRANTS

This year, \$1.97M+ was awarded to Georgia 911-zone EMS providers to help purchase life-saving equipment. A total of 168 agencies applied and received support to buy critical tools such as extrication devices, fluid warmers, needle decompression kits, and automated CPR devices, ensuring they’re equipped to deliver high-quality trauma care when every second counts.

WHAT IS A 911 ZONE?

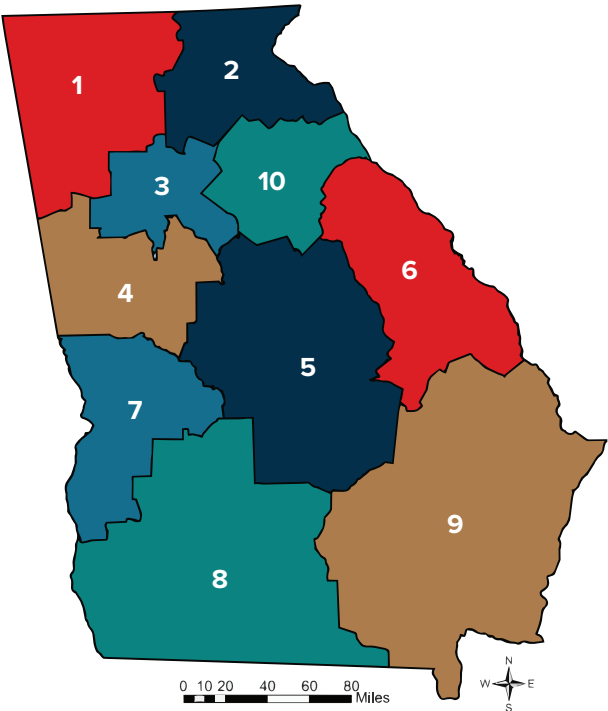
In Georgia, a 911 zone is the designated geographic area where a specific EMS provider is authorized and responsible for responding to emergency 911 calls. This system ensures every community has reliable, around-the-clock ambulance coverage.

WHY THESE GRANTS MATTER

Funds were awarded to 911-zone EMS providers to purchase specialized tools that save lives in critical moments:

- Advanced airway management equipment – Quickly and effectively manage compromised airways.
- Fluid warmers – Prevent dangerous hypothermia after trauma.
- Needle decompression kits – Relieve collapsed lungs from chest injuries.
- Automated CPR devices – Deliver steady, lifesaving compressions.

REGION	ALLOCATION
1	\$217,498.03
2	\$143,827.30
3	\$448,534.99
4	\$149,237.57
5	\$205,825.92
6	\$127,857.02
7	\$109,337.63
8	\$194,593.65
9	\$278,525.48
10	\$99,297.85
TOTAL	\$1,974,535.44



WHEN SECONDS COUNT READINESS SAVES LIVES



Paramedic: Provides advanced emergency treatment, including airway support, medications and bleeding control.

THE MISSION **STARTS** **BEFORE THE CALL**

Long before a patient needs trauma care, the system is preparing. Through education, hands-on training, trauma center verification and continuous improvement, Georgia builds the expertise and readiness patients rely on when the unexpected happens.



RESPOND

When the unexpected happens, preparation becomes action.
Training and real-world experience help responders assess the scene, make critical decisions and begin lifesaving care when patients and families are relying on them most.



STABILIZE

In uncertain moments, training guides what happens next.
Skilled teams draw on education, protocols and experience to stabilize patients and connect them to the right level of care as quickly and safely as possible.



TREAT

When injuries are complex, verified expertise matters.
Trauma centers and specialized teams bring rigorous standards, advanced training and coordinated expertise to the decisions that can change the course of a life.



RECOVER

Expert care continues beyond the immediate crisis.
Rehabilitation and recovery specialists use specialized training to help patients regain strength, function and independence and return to the people and lives they love.

PUTTING LIFESAVING TOOLS IN MORE HANDS



During FY2026, the Georgia Trauma Commission continued expanding Stop the Bleed across Georgia through a coordinated statewide approach focused on equipment access, education, and sustainable community partnerships. A total of 3,557 bleeding control kits were distributed statewide, including 2,837 funded by the Georgia Trauma Commission and 720 provided through the Georgia Trauma Foundation partnership, with RTACs supporting distribution across the state.

The Commission also partnered with the Georgia Trauma Foundation to strengthen bleeding control readiness in 30 Georgia high schools selected based on demonstrated engagement with the Stop the Bleed program. Each school was awarded 24 additional bleeding control kits, increasing campus availability from 12 to 36 kits. Participating schools are also expanding Stop the Bleed education for faculty, staff, and students, helping ensure that increased access to lifesaving equipment is paired with the knowledge and skills to use it.



MEASURE:

Kits funded by the Georgia Trauma Commission

2,837

Kits provided through the Georgia Trauma Foundation

720

Total bleeding control kits distributed

3,557



Trauma Nurse Educator: Trains clinical teams and helps ensure staff are prepared to care for seriously injured patients.



RTAC Coordinator: Plans, coordinates, and oversees regional trauma system operations, improvement activities, and communication between stakeholders.

SUPPORTING ADVANCED TRAINING: **CLOSER TO HOME.**

During FY 2026, the Georgia Trauma Commission expanded its EMS education investments into a coordinated statewide program. The program supports the full continuum of workforce development, from helping communities establish initial EMS education programs to providing experienced clinicians with advanced, hands-on trauma training.

A statewide needs assessment of more than 1,000 EMS professionals guided course selection, program locations, and future investments.

Respondents strongly preferred hands-on and scenario-based education over passive or fully online formats. Time and cost were the most frequently reported barriers, and 71% identified in-house training as the most effective delivery model.

EDUCATION GUIDED BY STATEWIDE NEED

The Commission used the assessment findings to develop practical instruction centered on realistic clinical scenarios and high-risk events that EMS professionals may encounter infrequently but must be prepared to manage.

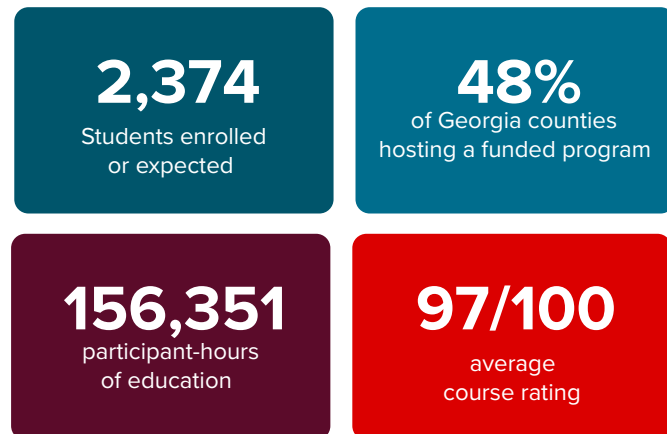
Providers identified trauma resuscitation, needle decompression, mass casualty management, blood administration, pediatric trauma, advanced airway management, and traumatic cardiac arrest as high-priority topics.

EXPANDING THE EMS WORKFORCE

The Initial Education Grant Program helps communities establish locally delivered EMR, EMT, and AEMT courses. The Commission approved 55 applications representing an anticipated 887 students, including micro-grant requests from smaller and rural programs.

By supporting locally delivered courses, the program helps agencies recruit and educate future EMS professionals within the communities where they are most likely to serve.

STATEWIDE PROGRAM SNAPSHOT



**FY 2026 funded programs, including courses completed or scheduled during the implementation cycle.*



Bulloch County EMS EMT Education in Action.

PARTICIPANT PERSPECTIVE

“Thank you for putting this course on in this area. This is a smaller area, and we don’t normally get these types of classes here.”
Region 9 Paramedic

“This was incredible. I learned a lot and gained confidence moving forward in my EMS career.”
Region 3 AEMT

REALISTIC TRAINING. **MEASURABLE RESULTS.**

APPLIED ANATOMY AND RESUSCITATION

The EMS Applied Anatomy and Resuscitation Lab brings advanced, cadaver-based trauma education to EMS professionals across Georgia. Working in small groups with experienced faculty, participants connect anatomy with clinical practice and perform procedures that are difficult to replicate with traditional mannequins, including advanced airway management, chest decompression, hemorrhage control, and trauma resuscitation.

The program has earned an average course rating of 97.2 out of 100. All respondents described the lab as a meaningful hands-on learning experience, 99.2% found the content relevant to their professional role, and participants reported increased confidence in every clinical area measured.

USING DATA TO IMPROVE EDUCATION

Standardized testing in initial EMS education helps identify statewide strengths and areas where students may benefit from additional instruction. An analysis of more than 219,000 responses to trauma-related questions provided new insight into how students perform across key clinical topics. GTC also uses standardized post-course surveys and knowledge assessments across its continuing education programs. These evaluations measure course quality, clinical relevance, knowledge, and changes in participant confidence while capturing feedback about unmet training needs. The results help GTC refine existing programs and guide future course offerings.



Cadaver lab instructor training hosted by the University of Georgia.

SUPPORTING EMS EDUCATORS

Through a partnership with OEMS&T Regional Training Coordinators and MedEdPrep, GTC funded education for the initial training of 75 EMS instructors and is supporting Instructor Symposiums in all 10 regions. The symposiums bring continuing education closer to instructors, strengthen regional collaboration, and provide an opportunity to share statewide data and emerging educational needs.

GTC also launched an Applied Anatomy and Cadaver Instructor Course for 21 experienced educators representing eight EMS regions, developing a statewide faculty network to support future labs.

APPLIED ANATOMY AND RESUSCITATION LAB RESULTS



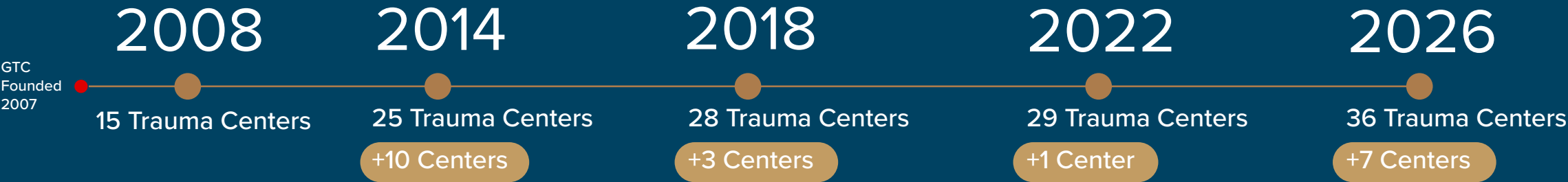
**Includes completed, funded, and scheduled programs during the reporting and implementation cycle.*



EMS applied anatomy and resuscitation lab-pilot course at Lanier Technical College.

CLOSING THE DISTANCE TO TRAUMA CARE

From 2008 to 2026, the number of trauma centers increased from 15 to 36, a 140% increase.



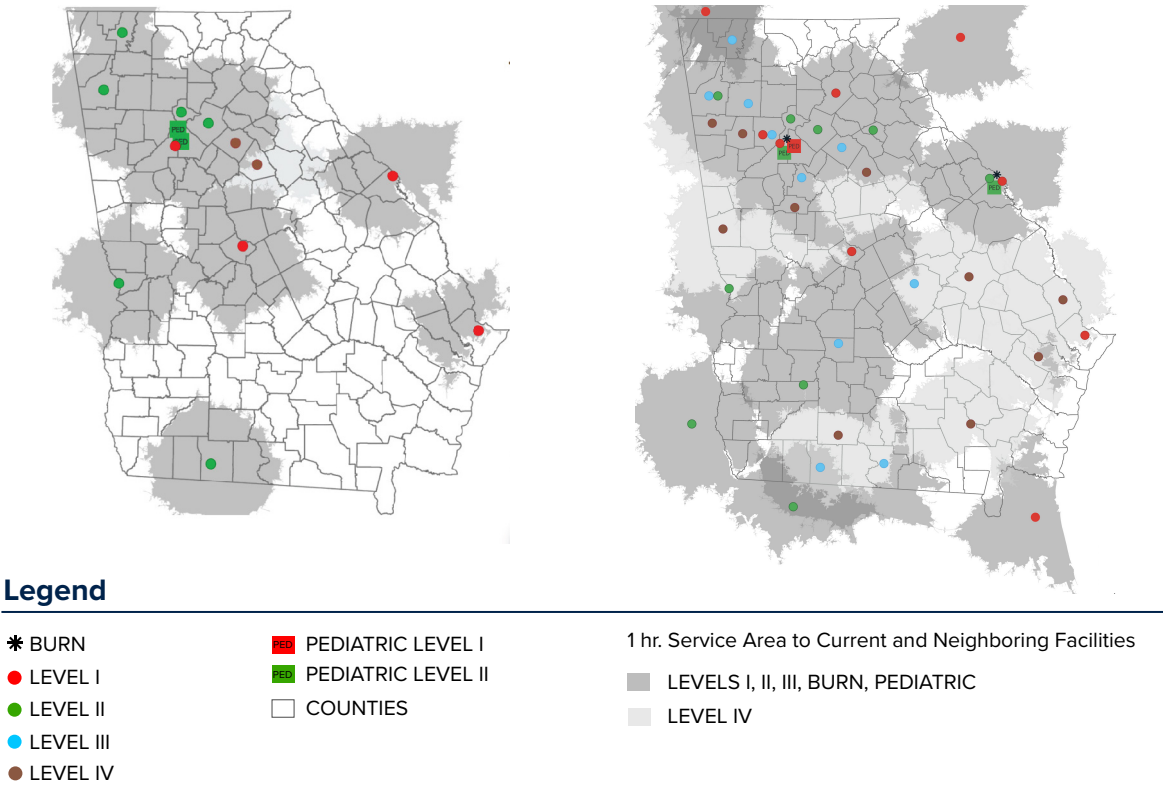
2026 NUMBERS BY LEVEL

7	Level I
9	Level II
10	Level III
10	Level IV
2	Burn Centers

Trauma-Served Areas: Accessible within a one-hour drive (Inclusive of Border State Centers)

2007 TRAUMA CARE ACCESS

2026 TRAUMA CARE ACCESS



Please note that symbols representing locations close together have been dispersed for visibility away from their location.
Data Sources: Georgia Trauma Commission (2022, 2023, 2024, 2025, 2026)
Map: Georgia Geospatial Information Office, August 2026



PREPARING PROVIDERS. STRENGTHENING **RURAL CARE.**



Strengthening Trauma Readiness Across Rural Georgia | Rural Interactive Trauma Simulation (RITS) Program

The Georgia Trauma Commission was pleased to provide funding support for the Medical College of Georgia Surgical Education & Simulation Research Fellowship, led by Erika Simmerman Mabes, DO, FACS.

The **Rural Interactive Trauma Simulation (RITS) Program** is a statewide initiative to improve trauma readiness in rural and resource-limited settings. During 2025 – 2026, RITS expanded its reach, demonstrated significant improvements in provider confidence, and strengthened the foundation for sustainable statewide growth.

Program Impact

- **200+** rural healthcare professionals trained
- **100%** practiced in rural emergency departments or EMS systems
- **11.5** years of average clinical experience
- Participant mix: 48% Nurses | 30% EMS | 9% Respiratory Therapy | 8% APPs | 5% Physicians

Educational Outcomes

Pre- and post-course assessments showed statistically significant improvements in confidence across all evaluated trauma procedures, including airway management, needle decompression, chest tube placement, IO access, pelvic binder and tourniquet application, FAST examination, and massive transfusion activation.



Participant Satisfaction

- **84%** strongly agreed they were satisfied with the course
- **86%** strongly agreed that the course should be offered again
- **88%** strongly agreed that instructors were knowledgeable and enthusiastic
- Participants consistently identified hands-on training, rural relevance, team-based learning, and multidisciplinary collaboration as program strengths.

Statewide Reach

RITS training expanded across Georgia, including Douglasville, Jasper, Ellijay, Blue Ridge, Monroe, Griffin, Jackson, Hinesville, Fort Stewart, Cordele, Swainsboro, Albany, Covington, and Snellville. This growing footprint provides the foundation for regional training hubs and a formal train-the-trainer model.

Looking Ahead

With 200+ rural providers trained, measurable gains in trauma confidence, high participant satisfaction, and an expanding statewide footprint, RITS is positioned to become a sustainable model for rural trauma education in Georgia and beyond. Continued Georgia Trauma Commission support will enable further expansion, evaluation, and strengthening of trauma readiness across rural Georgia.

Greatest gains: High-acuity, low-frequency procedures that rural providers must be prepared to perform during critical trauma resuscitations.

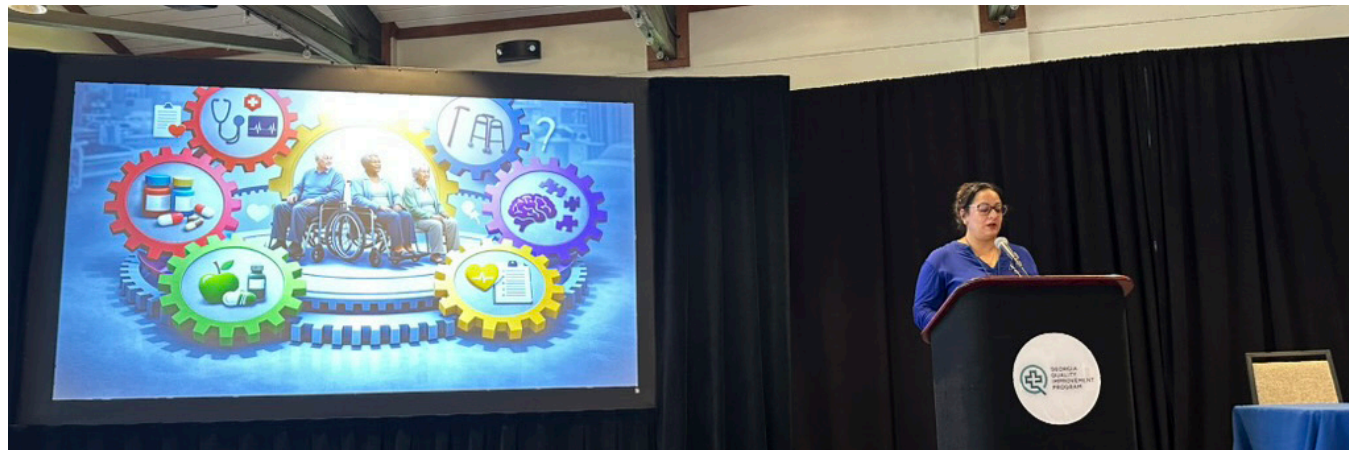


Advanced Practice Provider (APP): Provides advanced clinical care, evaluates and treats patients, and works alongside physicians and the trauma team to support diagnosis, treatment, and recovery.



Emergency Medicine Physician: Assesses and stabilizes injured patients when they arrive at the trauma center.

TEN YEARS OF RAISING THE STANDARD



Since 2016, the Georgia Quality Improvement Program (GQIP) has united trauma professionals across the state with a shared commitment to improving the care of injured patients. Built on the belief that better outcomes are achieved through collaboration, GQIP has created a statewide community where trauma centers learn from one another, share best practices, and use data to drive meaningful improvement.

Over the past decade, GQIP has grown into a trusted forum for education, research, performance improvement, and innovation. Through collaborative meetings, quality initiatives, benchmarking, and partnerships with national experts, physicians, nurses, trauma program

leaders, registrars, EMS professionals, hospital administrators, and researchers have worked together to strengthen Georgia's trauma system and improve care for patients across the state.

As we celebrate this milestone, we recognize that GQIP's greatest achievement is not measured solely by the initiatives completed or the data collected, but by the collaborative community built over the past ten years. Together, we remain committed to advancing trauma care and improving outcomes for injured patients across Georgia.



Trauma Performance Improvement (PI) Coordinator: Reviews trauma care and outcomes to identify opportunities for improvement and help ensure high-quality patient care.

CELEBRATING



Years of Improving
Trauma Care, Together



GEORGIA
QUALITY
IMPROVEMENT
PROGRAM

*The true strength of GQIP is the people and perspectives across every level of Georgia's trauma system, united by one mission: **improving trauma care for all who rely on it.***



Trauma Program Manager: Oversees a trauma center's program, coordinating care, quality improvement, data, education, and readiness to meet trauma standards.



Trauma Registry Professional: Collects and maintains trauma data used to track outcomes and improve care.

The impossible becomes possible when readiness meets expertise.



Air Medical Pilot: Safely transports trauma patients and medical teams by helicopter, helping patients reach the right care quickly.

FISCAL YEAR 2026 COMMISSION MEMBERS



Dennis Ashley, MD, FACS
Chair

Will C. Sealy Endowed Chair
Professor of Surgery
Mercer University SOM
Director of Trauma
Atrium Health Navicent



James "J" Smith, MD, FACEP
Vice Chair

Emergency Department Medical Director
Northside Gwinnett
Envision Physician Services



Pete Quinones
Secretary/Treasurer

Principal & CEO
MetroAtlanta Ambulance Service



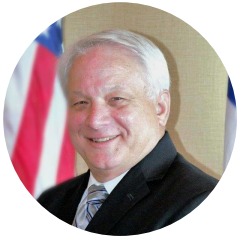
James R. Dunne, MD, FACS
Chief of Trauma &
Surgical Critical Care

Memorial Health University
Medical Center



John C. Bleacher, MD, FACS
Pediatric Surgeon

Retired



Courtney Terwilliger
Public Safety Coordinator

Emanuel County



S. Rob Todd, MD, FACS, FCCM
Executive Vice President &
Chief Medical Officer

Grady Health System



Terry T. Cobb
EMS Director

Laurens County Emergency
Medical Service



Alicia Register, MD, FACS
Trauma Medical Director

Crisp Regional Hospital

When access is urgent and every second matters, Georgia's trauma system delivers. What was once out of reach is now within range, for every injured patient, every day.



GEORGIA TRAUMA
COMMISSION

The Georgia Trauma Commission administers the statewide trauma care network and serves as the accountability mechanism for the entire trauma system, overseeing the flow of funds for system improvement.

Learn more at trauma.ga.gov