

APPROVED
07.17.23



GEORGIA TRAUMA COMMISSION

Trauma System Performance (Data) Committee Meeting Minutes

April 4, 2023

2:30 PM-3:30 PM

[Link to Meeting Documents and Attachments](#)

Zoom Meeting

COMMITTEE MEMBERS PRESENT	COMMITTEE MEMBERS ABSENT
Dr. James Dunne, Chair Kelly Joiner, OEMST Danlin Luo, OEMST Marie Probst, OEMST April Moss, OEMST Kelli Vaughn, GCTE Gina Soloman, GQIP Courtney Terwilliger, GTC Jim Adkins, GTC	Tracy Johns, GCTE Regina Medeiros, GTC

COMMISSION MEMBERS PRESENT	COMMISSION STAFF MEMBERS PRESENT
Dr. James Dunne, GTC Vice-Chair Courtney Terwilliger, GTC Member Jim Adkins, GTC Member	Elizabeth V. Atkins, GTC, Executive Director Gabriela Saye, GTC, Executive Assistant Gina Solomon, GTC, GQIP Director

CALL TO ORDER

The meeting was called to order at 2:35 PM with nine committee members present.

APPROVAL OF JANUARY 24, 2023, MEETING MINUTES

Dr. Dunne asked for a motion to approve the meeting minutes:

[MOTION TRAUMA SYSTEM PERFORMANCE COMMITTEE 2023-04-01:
Motion to approve January 24, 2023, meeting minutes as submitted](#)

MOTION BY: Jim Adkins

SECOND BY: Courtney Terwilliger

VOTING: All members are in favor of the motion.

ACTION: The motion **PASSED** with no objections nor abstentions

ARMBAND PROJECT UPDATE

Presented by Kelly Joiner

- The Armband project will start on April 11, 2023. We will meet with the hospital system after 90 days to review the process and identify any issues.
- The pilot will include one trauma center and one non-trauma center hospital, EMS, and Law Enforcement. The team is working to link all the data in Biospatial for visualization purposes.
- Kelly will find out more information regarding the sample size of the project.
- We may see the linkage by June 1st, the next time the trauma centers download their data.



TRAUMA REGISTRY DATA REPORT: UPDATE ON IMAGE TREND MIGRATION STATUS

Presented by Marie Probst

- 2021 data is complete and uploaded to Biospatial, except for Piedmont Cartersville.
- We are waiting for one level I facility to submit October through December 2022 data, then 2022 will be closed.
- The data will be batched quarterly. Trauma centers will send their data to the patient registry site, and then Marie will upload the data to Biospatial. The users have to install their schema file every year due to file changes.
- We might be delayed with the first quarter report. There will also be a delay with the TQIP report due to ACS changes.

Liz Atkins stated she will task herself, Kelly, and Marie to develop a definitions document that lists all the items we regularly reference, including what it does and how they interact.

DATA DICTIONARY UPDATE

Presented by Gina Solomon

We are working on the 2023 data dictionary with Marie and a subgroup of the registry. We need to have 2024 ready around July and adjust our timelines for the future. Gina recommended removing the data dictionary update from standing agenda items.

TIME TO DEFINITIVE CARE-NAVICENT AND MEMORIAL PROJECT

Presented by Dr. Dunne

We are working on a side project with Navicent and Memorial around time to definitive care. Navicent has its IRB approval, and the RedCap system is up. Once the IRB is approved on Memorial's end, we can begin uploading the data to RedCap to analyze. We hope to have some preliminary data for the August meeting.

2019 AND 2020 ANNUAL REPORT SUMMARY

Presented by Dr. Dunne

Marie Probst presented **ATTACHMENT A** to the committee, providing a high-level overview of the 2019 and 2020 Annual Reports data. The summary will be presented at the May Commission Meeting. Some discussion highlights:

- The core data elements will stay the same for each report. The analysis is what will evolve and become better.
- The data reviewed are trauma registry records.
- Slide 3, the EMS region is the patient treated at the destination hospital. The region is tied to the hospital region location. There might be duplicate patients if the patient was transferred.
- Slide 4, firearm injuries increased significantly in 2020 across all age groups. Age group 25-30 had higher firearm-related injuries. Struck by against might be by an object, but we must look at the case to identify it.



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- Slide 5 begins the time to definitive care analysis. The median time to definitive care in 2020 is still within the golden hour. Level III and IV times increased between 2019 and 2020.
- Slide 6, ISS \leq 15 patients, we had an additional 131 cases and a 17-minute increase in overall median time. ISS $>$ 15 patients, we had an additional 44 cases and a 27-minute overall median time increase.
- Slide 7 highlights 2020 death cases with the highest median time to definitive care. The blue dot represents the patients that live, and the red dot represents patients that died. ISS \leq 15, we can see that regions 1, 2, 6, 8, 9, and 10 had deaths with longer median times to definitive care. ISS $>$ 15, there were more deaths in regions 1, 2, 5, 8, and 10. We would have to QA the data to determine why they had longer times.
- Slide 8 highlights 2020 transferred patients. ISS \leq 15, region 3 and 5 median times at six hours have deceased patients. ISS $>$ 15, the patients in Region 2, 3, and 5, once they reach the destination hospital, their median time was at 4 or plus hours.
- Slide 9 is an overview of outcomes between 2019 and 2020
- Slide 10 reviews some suggestions for possible additions to future annual reports.

Due to the limited meeting time, the committee could not review Biospatial or discuss the dashboard. Liz will start working on the trauma system dashboard with 2019 through 2021 data and utilize the evidence-based metrics from Dr. Winkle's TQIP presentation as a reference.

SUMMARY OF ACTION ITEMS & ADJOURNMENT

- Kelly Joiner will find out more information regarding the sample size of the armband project.
- Liz Atkins will work with Kelly and Marie to develop a definitions document that lists all the items we regularly reference, including what it does and how they interact.
- Liz will start working on the trauma system dashboard with 2019 through 2021 data and utilize the evidence-based metrics from Dr. Winkle's TQIP presentation as a reference.
- Data dictionary update will be removed as a standing agenda item. The Biospatial overview agenda item will be moved up for the next meeting.

Next meeting to be scheduled in July, pending Dr. Dunne's call schedule.

The meeting adjourned at 3:32 PM.

Minutes Respectfully Submitted by Gabriela Saye