



GEORGIA TRAUMA COMMISSION

APPROVED
07.22.22

Level III/Level IV/Rural Committee

Meeting Minutes

Friday, May 13, 2022

2:30 pm to 3:30 pm

Zoom Meeting

[Link to Meeting Material](#)

COMMITTEE MEMBERS PRESENT	REPRESENTING
Greg Patterson	Committee Chair/ John D Archbold Memorial, TMD
Alicia Register	Committee Vice-Chair/ Crisp Regional, TMD
Victor Drawdy	Georgia Trauma Commission, Member
Courtney Terwilliger	Georgia Trauma Commission, Member
Monica Trotter	Advent Health Redmond, Trauma PI Coordinator
Ashley Bullington	Crisp Regional, RN, TPM
Alicia Register	Crisp Regional, TMD
Lindsey Lewis	Effingham Health Hospital, Trauma Coordinator
Amy Watson	Effingham Health System, TPM/ Trauma Administrator
Brooke Marsh	Emanuel medical center, TPM
Damien Scott	Emanuel Medical Center, CEO
Gail Thornton	Emanuel Medical Center, Trauma Registrar
Ronald Drake	Emanuel Medical Center, EMS Director
Lynn Grant	Fairview Park Hospital, Trauma Program Director
Nita Ham	Georgia State Office of Rural Health, Director, SORH Program
Kim Brown	Hamilton Medical Center, Trauma Manager
Brian Delashmitt	Hamilton Medical Center, EVP Chief Medical Officer
Judean Guinn	Hamilton Medical Center, CNO
Steve Paynter	Hamilton Medical Center, TMD
Kelli Vaughn	John D Archbold Memorial, Trauma Program Manager
Karrie Page	Memorial Health Meadows Hospital, Trauma Coordinator
Kendrix Evans	Memorial Meadows Hospital, Trauma Director
Michelle Benton	Morgan Medical Center, Trauma Program Manager
Christie Mathis	Morgan Medical Center, RN, Trauma Program Manager
Richard Jacob	Piedmont Walton Hospital, MD/TMD
Jan Tidwell	Piedmont Cartersville, CNO
John Pope	Piedmont Cartersville, TPM
Karen Hust	Piedmont Walton Hospital, TPM
Sharon Hogue	Polk Medical Center, TPM
Kerry Carter	Wellstar, TPM
Kristy Ruiz	Wellstar Cobb, TPM



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STAFF MEMBERS & OTHERS SIGNING IN	REPRESENTING
Elizabeth V. Atkins Gina Solomon Gabriela Saye Katie Hamilton Renee Morgan	GTC, Executive Director GTC, GQIP Director GTC, Executive Assistant GTC, Finance Operations Officer OEMS/T

Call to Order

The meeting was called to order at 2:32 pm with 31 committee members present.

Approval of March 2, 2022, Meeting Minutes

Kelli Vaughn asked for a motion to approve the March 2, 2022, meeting minutes.

MOTION LIII/IV Committee 2022-05-01:

Motion to approve the March 2, 2022 meeting minutes as submitted.

MOTION BY: Dr. Alicia Register

SECOND BY: Victor Drawdy

VOTING: All members are in favor of the motion.

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

Grants Update/GTC Updates

Presented by Liz Atkins

The grants update on the agenda was replaced with updates from the Georgia Trauma Commission. Liz Atkins provided a summary of the recent Commission events regarding Level III and IV centers:

- The Level III/IV Readiness Cost Survey abstract was accepted for podium presentation at the AAST, which will also go into the Journal of Trauma. We are currently working on a manuscript. You all will get credit as collaborators and project contributors due to all your hard work.
- The Pennsylvania Trauma System Foundation (PTSF), who will be doing your level IV consult visits, have sent me a PowerPoint they went through with you all. They had individual calls with each level IV to review what the PRQ looks like and the set up for all the logistical items. We did receive the bios of the surveyors, which I will send out to you all. I am pleased to see that they have two Emergency Department physicians to serve as Trauma Medical Directors in their level IVs. Most level IVs don't have a trauma surgeon roaming around, so we need to know what it looks like from an Emergency Medicine perspective.
- We planned to do an Optimal Course as part of the St. Simons Summer Meeting, specifically for Level IIIs and IVs. The gray book was released in March, and they eliminated all the Level IV criteria. The Committee on Trauma (COT) has stood up a rural committee with rural trauma center leaders, and they want to bring back the level IV criteria. At this point, it looks like they



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will probably publish it as a separate document. At this point, we don't want to deliver a course that is in limbo on the criteria.

- Rural Topic is still going strong, and we could do another due to turnover or just to take again as a refresher. We could use next year's funds and make it a virtual course so we could still do something in August or September. We would need a recommendation from the group to bring to the Commission. Committee members discussed their own experiences with Rural Topic and supported the recommendation.

MOTION LIII/IV Committee 2022-05-02:

Motion to bring forth a recommendation to the full Commission for support of a Rural Topic course for Level III and IV centers.

MOTION BY: Kelli Vaughn

SECOND BY: Dr. Alicia Register

VOTING: All members are in favor of the motion.

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

- A few weeks ago, the Trauma Administrator's group met and had a co-chair meeting in addition to a full committee meeting. The following Co-Chairs were designated for their Committee:
 - Katrina Keefer, LI Co-Chair, Augusta University
 - Frances Van Beek, LII Co-Chair, Wellstar Health System
 - Amy Watson, LIII Co-Chair, Effingham Medical Center
 - Damien Scott, LIV Co-Chair, Emanuel Medical Center

They had a full presentation on the trauma funding formulas. We want to make sure these formulas are on target and cover your costs.

ACS Consult Process

Presented by Liz Atkins

We have become aware that the Office of EMS and Trauma (OEMST) is working on a NITSA EMS system evaluation for October. The NITSA is the evaluation we needed to be completed to do a full trauma system consult. If you remember, we wanted to do a rural-focused system consult since we had so much momentum around rural, and we didn't know how long it would take to schedule NITSA. During a full trauma system consult, the tendency is to focus on urban because the EMS calls are primarily in those areas.

We have been on calls with the ACS, Renee Morgan, Courtney Terwilliger, and Dr. Patterson regarding a rural-focused visit, a first for the ACS. Recently, they came back to us with consult dates, January 9th-13th, which are subject to change, but wanted to see if that works for everybody.

We were targeting fall, but we will be having the PTSF level IV consults in October, the NITSA EMS system consult is in October, and we will also be straddling trauma meetings from fall to December. Therefore,



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January 9th-13th would be better than targeting fall. We will need a motion from the Committee to support those dates. The ACS will be in your rural areas, and you would have to do some prep work in November and December for it to happen. The goal is to identify current weaknesses in the state and give us recommendations to correct them.

Renee Morgan mentioned that we still do not have the guidelines for the rural-focused visit. A lot of work goes into it, especially from the OEMST side. I don't know if the January dates are feasible because we already have so much on our plate. Kelli Vaughn asked if the information from the October NITSA evaluation would overlap with the PRQ needed for the rural-focused consult. Renee Morgan answered that they do not know the turnaround for the NITSA report. The NITSA evaluation is not just trauma, but it is heavily EMS-focused. Dr. Patterson recommended keeping the January dates since ACS may move the dates themselves.

MOTION LIII/IV Committee 2022-05-03:

Motion to bring forth a recommendation to the full Commission for support of Rural-Focused Trauma System ACS Consult dates, January 9 through January 13, 2023.

MOTION BY: Dr. Alicia Register

SECOND BY: Courtney Terwilliger

VOTING: All members are in favor of the motion.

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

Web-based Registry & Contracted Abstraction Services

Presented by Liz Atkins

It has come to our attention that not everybody has the outcomes module. It's tough to do good PI and document when you don't have a repository to keep it in. The module was a Commission initiative years ago, and want to ensure you all have it. Not everyone was included in the initial funding at that time, so some facilities may have missed out. We have a quote for the web hosting costs, including the outcomes module and report writer. The only thing that it doesn't include is the PRQ Report Writer package. We will need a motion from this group to bring it forward to the Commission to ensure that we get funding. Gina Solomon will contact ESO regarding a quote for the package.

MOTION LIII/IV Committee 2022-05-02:

Motion to bring forth a recommendation to the full Commission for ESO Web hosting PRQ Report Writer package funding.

MOTION BY: Ashley Bullington

SECOND BY: Dr. Alicia Register

VOTING: All members are in favor of the motion.

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



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MARCH PAWS Update

Presented by Courtney Terwilliger

We want to develop a training program and draft a protocol that hospitals and EMS could use for the initial care of the trauma patient. Particularly critically injured trauma patients in the rural environment. The military developed MARCH PAWS, and there are peer-reviewed journals and science behind it. Currently, we have a draft PowerPoint and have completed an organizational meeting at Lake Blackshear. In the next few weeks, we will have a small group to review and modify the content and ensure it meets the need of the civilian population. We are planning for three pilot projects, which we will fund at Archbold, Emmanuel, and Crisp.

Dr. Register and Dr. Patterson were interested in developing a hybrid curriculum because of the time constraints for physicians with their work schedules. I met with Jimmy Colquitt at Mercer and discussed the free Moodle education platform. While we are doing the pilot programs, we can develop this hybrid course to ease access to the content. After the pilot phase, we will review student performance and recommendations and modify the course if needed to meet the target audience needs.

We will also develop a protocol for rural centers that they can modify based on their capabilities. The concept of MARCH PAWS is to ensure physicians and medics are trained on the same protocol and standards.

Courtney mentioned the EMS Committee has a called meeting on May 24 to discuss the difficulty of some areas getting EMS transportation for critically ill trauma patients. If you have any specific cases that come to mind, please reach out to me. If we don't know exactly what the problem is, we can't fix it. Dr. Patterson added that the TQIP/GQIP executive council has talked about that problem and is looking into several solutions, such as telemedicine for trauma. We are also discussing the possibility of a rural, regional transport system that could be state-funded. Regional transport vehicles could be stationed around the state to help meet other units in the middle of transport to get those patients to larger trauma centers.

Meeting adjourned at 3:30 pm.

Summary of Meeting

- Level III/IV Readiness Cost Survey accepted for AAST podium presentation
- PTSF level IV consult visits are still on track. They have completed individual calls with each center to review PRQ and logistics. Liz to send out surveyer bios. They are waiting to receive the PRQ link to send out.
- Optimal course canceled for August 10 due to changes in Gray Book.
- Committee support for Rural Topic course to replace Optimal Course. Committee to bring forth a recommendation to Commission.



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- Committee support of January 9th-13th dates for the Rural-Focused ACS Trauma System Consult. Committee to bring forth a recommendation to Commission.
- Committee support of ESO Web hosting PRQ Report Writer package. Committee to bring forth a recommendation to Commission.
- MARCH PAWS draft PowerPoint completed. Once the content is reviewed and modified, three pilot courses will take place at Archbold, Emmanuel, and Crisp.

Minutes Respectfully Submitted by Gabriela Saye