**Georgia Trauma Commission Rehab Committee**

**Meeting Minutes**

[Link to Meeting Documents and Attachments](https://trauma.georgia.gov/events/2023-08-03/gtc-rehabilitation-committee-meeting)

August 3, 2023

Microsoft Teams

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| **COMMITTEE MEMBERS PRESENT** | **REPRESENTING** |
| Vox, Ford, Chair | Shepherd Center |
| Clark, Kathy | August University |
| Field-Fote, Edelle | Shepherd Center |
| Gohman, Kevin | Northeast Georgia Medical Center |
| Kidwell, Susannah | Children’s Healthcare of Atlanta |
| Thompson, Abigail | Shepherd Center |
| Tipton, Gina | Atrium Health Navicent |

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| **OTHERS PRESENT** | **REPRESENTING** |
| Atkins, Elizabeth | Georgia Trauma Commission |
| Saye, Gabriela | Georgia Trauma Commission |
| Solomon, Gina | Georgia Trauma Commission |
| Hallum, Becca | Georgia Hospital Association |

**STANDING AGENDA ITEMS**

**CALL TO ORDER**

Dr. Ford Vox called the meeting to order at 2:08 PM on Tuesday, May 16, with seven members present.

**INTRODUCTION**

*Presented By Dr. Ford Vox*

The meeting commenced with introductions and a brief overview of the committee's mission to integrate rehab hospitals into Georgia’s Trauma System. The initial efforts are identifying the rehab hospitals in the state who want to participate in the committee. Dr. Ford Vox highlighted the addition of new members: Kevin Gohman with Northeast Georgia Medical Center and Gina Tiption with Atrium Health Navicent.

**DATA Subcommittee update**

*Presented by Dr. Ford Vox*

We are looking at some of the trauma registry data and its relevance to TBI populations. We have requested that the trauma registry include where patients are being discharged. A subcommittee was formed with Dr. Susannah Kidwell taking the lead, but everyone is welcome to participate.

The Georgia Trauma Commission Georgia Quality Improvement Program has a Research Fellow, Dr. Eli Mlaver, that may be able to assist with data analysis and identify gaps in service such as:

* Disparities in access in different regions
* Differences in referral patterns from different trauma hospitals and levels of rehab
* Disparities that are likely to exist depending on the patient's insurer status

A Department of Public Health Armband project will place armbands on motor vehicle crash patients and track their movement within the system, including into rehab. The project could help answer where trauma patients are going.

Dr. Susannah Kidwell advised to reach out to her if you are interested in joining the Data Subcommittee. Dr. Ford Vox recommended leveraging members’ own facilities to help support the committee initiatives.

The committee discussed the challenges of collecting data from rehab and trauma hospitals. They acknowledged that obtaining this information is difficult, especially for patients who go to different facilities or out of state. Still, they expressed a willingness to explore ways to collect and track this data for a more comprehensive understanding of patient outcomes and to explore relevant metrics.

**Georgia Trauma System Rehabilitation Access Survey**

*Presented By Dr. Ford Vox*

Dr. Ford Vox reviewed the survey draft (**ATTACHMENT A**) and discussed the plan to gather information from trauma hospitals, particularly from case managers, to obtain feedback on the transfer of patients from trauma to rehab. The survey will also gather insights on barriers to access, insurance differences, and resource needs, with the goal of making recommendations to the Commission.

Dr. Ford Vox discussed the importance of providing access to care and reducing the burden on state resources for patients. He also mentioned the possibility of analyzing state Medicaid programs with special waivers for trauma patients to access rehabilitation services.

Dr. Gina Tipton suggested adding a question about service barriers preventing transfers. Dr. Kevin Gohman added that there are also social barriers from the rehab path to community support for rehab patients, particularly those with long-term care injuries.

**gtc committee report review**

*Presented By Dr. Ford Vox*

Dr. Ford Vox reviewed the August committee report (**ATTACHMENT B**) submitted to the Georgia Trauma Commission. It is a summary of committee activities and initiatives. Each item references the American College of Surgeons' report recommendations for rehab.

**1. Rehab Data Analysis**

ACS recommendation is to perform a comprehensive resource needs assessment of rehabilitation services for trauma patients, especially for traumatic brain injuries, spinal cord injuries, and

pediatric patients.

**2. Improve Rehab Transition**

ACS recommendations are to 1) Optimize the transition process from the acute inpatient setting to

rehabilitation from a timing and funding source allocation perspective. 2) Develop inpatient rehabilitation transfer recommendations and guidelines for the statewide trauma system. 3) Work with payers and governmental agencies to improve access to rehabilitation services in a timely manner.

We are looking to develop an information sheet for trauma patients and their families in Georgia, which will include: the different levels of care, available resources, and questions they should have for providers and insurers. Dr. Ford added we could start inviting insurers to our meetings to discuss the challenges and possible solutions.

**3. Endorse/incorporate rehab quality standards**

ACS recommendation is to define minimum requirements and qualifications for inpatient rehabilitation

centers caring for injured patients.

JCO and CARF criteria already exist; Dr. Ford Vox suggested we could suggest everyone be certified at the national level. Gina Tipton added that certifications are an economic decision; centers may only want to pursue certification if something is offered in exchange. Kevin Gohman added that CARF does not have a specific trauma specialty component.

**4. Develop trauma rehab quality indicators**

ACS recommends including the rehabilitation phase of care in a system performance improvement process using appropriate indicators and benchmarks.

**4. Other Projects**

We will continue to list any new items to consider in this section. Some possible projects:

* We are gathering and analyzing data on Medicaid and Medicare applications by Georgia residents and trends over time related to disabilities whose cause is trauma.
* Providing strategic guidance on state resources of importance to trauma survivors, including vocational rehabilitation
* Creating a voluntary Level system for rehabilitation facilities that mirrors the level designation for trauma hospitals to promote the necessary rehabilitation resources in the state to support its trauma population.

**Rehab committee participation and engagement**

*Presented By Dr. Ford Vox*

We have engaged Shepherd Center, Wellstar, Warm Springs, Emory Northeast Georgia, and Atrium Health Navicent. I have contacted other facilities, but they do not appear interested in participating. Please let me know if we should contact any other major players. Dr. Kathy Clark advised that AU Health will be entering a partnership with Wellstar soon.

**Summary of Action Items & Adjournment**

* If you are interested in joining the Data Subcommittee, please get in touch with [Susannah.Kidwell@choa.org](mailto:Susannah.Kidwell@choa.org).
* Submit any survey (ATTACHMENT A) questions, suggestions, or edits to [Ford.Vox@shepherd.org](mailto:Ford.Vox@shepherd.org).
* Please contact [Ford.Vox@shepherd.org](mailto:Ford.Vox@shepherd.org). of any interested committee participants.
* The next committee meeting is forthcoming.

The meeting adjourned at 3:10 PM.

Minutes by Gabriela Saye