

Georgia Trauma Commission Meeting

November 18, 2021 09:00 AM to 12:00 Noon Georgia Public Safety Training Center Agenda

09:00 am to 09:10 am (10 minutes)

Welcome, call to order & establish quorum Approval of August 19, 2021 Meeting Minutes * Chairman's Report Dr. Dennis Ashley

09:10 am to 09:20 am (10 minutes) Executive Director's Report

Elizabeth Atkins

Subcommittee & Workgroup Reports I 09:20 am to 10:20 am (60 minutes)

Injury Prevention Subcommittee

Bylaws Workgroup* Budget Subcommittee Report* EMS Subcommittee Report

Dr. John Bleacher Dr. Dan Wu Dr. Michelle Wallace Dr. Regina Medeiros Courtney Terwilliger

----- BREAK 10:20 am to 10:30 am (10 minutes) ------

Subcommittee & Workgroup Reports II 10:30 am to 11:00 am (30 minutes)

GCTE Subcommittee Report Level III/Level IV/Rural Trauma Center Workgroup

Trauma Administrators Subcommittee Trauma System Metrics & Data Workgroup Report

Trauma System Partner Reports 11:00 am to 11:45 am (45 minutes)

Georgia Trauma Foundation Update Georgia Quality Improvement Program Update Office of EMS and Trauma Update Jesse Gibson Dr. Greg Patterson Dr. Alicia Register Dr. Michelle Wallace Dr. James Dunne

Dr. John Bleacher Gina Solomon David Newton Renee Morgan

11:45 am New Business-None

11:45 am to 11:50 pm (5 minutes) Adjourn Motion to Adjourn* Dr. Dennis Ashley

Dr. Dennis Ashley



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GEORGIA TRAUMA COMMISSION Thursday, August 19, 2021 09:00 AM to 12:00 PM Georgia Public Safety Training Center & Zoom Livestream Meeting Minutes

COMMISSION MEMBERS PRESENT	COMMISSION MEMBERS ABSENT
Dr. Dennis Ashley, Chairman	Dr. James Dunne, Vice-Chairman
Dr. Regina Medeiros, Secretary /Treasurer	
Mr. James E. Adkins Sr. (via Zoom videoconference)	
Dr. John Bleacher	
Mr. Victor Drawdy (via Zoom videoconference)	
Dr. James J. Smith (via Zoom videoconference)	
Mr. Courtney Terwilliger	
Dr. Michelle Wallace (via Zoom videoconference)	

	DEDDECENTING
STAFF MEMBERS &	REPRESENTING
OTHERS SIGNING IN	
Elizabeth V. Atkins	GTC, Executive Director
Gina Solomon	GTC, GQIP Director
Katie Hamilton	GTC, Finance Operations Officer
Renee Morgan	OEMS/T, Trauma Program Director,
David Newton	OEMS/T, Director Office of EMS
Kelly Joiner	OEMS/T Deputy Director
Marie Probst	OEMS/T Trauma Registry Consultant
Lori Mabry	Georgia Trauma Foundation
Cheryle Ward	Georgia Trauma Foundation
Jessica Story	Warren Averett
Fred Jones	Medical Association of Georgia
John Harvey	Medical Association of Georgia
Dr. Greg Patterson	John D. Archbold Memorial Hospital, Rural SC Chair
Jesse Gibson	NGHS, GCTE Chair

Call to Order: (00:36:05)

Dr. Ashley called the meeting to order at 09:20 AM with eight of nine members present; Jim Atkins, Michelle Wallace, James Smith, and Vic Drawdy are present via Zoom videoconference.

Chairman's Report (00:36:34)

Presented by Dr. Dennis Ashley

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Dr. Ashley welcomed everyone and offered words of encouragement in light of the ongoing challenges associated with COVID-19. The feedback from last week's GQIP meeting was excellent; the Day of

Trauma was a success. The day started early with the Administrator's Subcommittee kickoff meeting; thirty-two c-suite level executives were in attendance on the call. The GQIP workgroups are active, and their work continues despite the pandemic. The workgroups consist of the opioid workgroup, acute kidney injury workgroup, and traumatic brain injury workgroup. Dr. Ashley concluded his report by requesting the approval of the May 20, 2021 Commission meeting minutes.

MOTION GTCNC 2021-08-01:

I make the motion to approve the May 20, 2021 meeting minutes as submitted.

MOTION BY: Regina Medeiros SECOND BY: John Bleacher VOTING: All members are in favor of the motion. ACTION: The motion <u>PASSED</u> with no objections nor abstentions.

Executive Director Report (00:42:05)

Presented by Ms. Elizabeth Atkins

In light of the full agenda, Ms. Atkins limited her report to a brief update on the status of the executive assistant position. Panel interviews will occur Friday, August 21, 2021, at the Madison Office. The target date for the offer decision is September 1. Ms. Atkins yielded the floor to Ms. Jessica Story to explain the uncompensated care report and audit process.

Old Business

CY 2019 Uncompensated Care Report

Presented by Ms. Jessica Story

Ms. Story referenced the report beginning on page 14 in the packet. The uncompensated care claim submission and validation processes are based on agreed-upon procedures; in that respect, it is not an audit but a measure against those agreed-upon procedures. Ms. Story began by referencing the eligibility list and the reporting year, providing a brief explanation of the survey instrument and the communication process between Warren Averett and the Trauma Centers. Warren Averett then selects samples from the claims. If a center has less than 25 claims, five claims are selected for testing. Information on how those claims are selected is provided in the report. All testing this year was performed remotely using a variety of web-based technology. Page 18 lists all criteria evaluated during testing, including third-party payments, self-pay percent, and collection attempts. Trauma registry validation includes injury severity scores and national trauma data bank (NTDB) inclusion.

Exception rates at each center drive additional evaluation and include the number of exceptions, pervasiveness around specific criteria, and type of exception. A center with high exception rates may be asked to scrub data and resubmit; resubmissions may not contain any additional claims and should not include those claims that did not meet criteria. The summary findings are listed on pages 21, and 22 with a detailed summary on page 23. The comments in the graphics explain what the exception is. Page 31 represents an overview of the entire process, depicting all centers, for the original survey. Difference

1 is the number of claims WA found that did not meet uncompensated care criteria. That goes on to page 32.

On the bottom right, there is a total for the number of centers tested without resubmission. In all centers, WA found eleven claims that did not qualify for uncompensated care. One center had to resubmit its data. In conclusion of her report, Ms. Story reported that, in total, 33 claims were eliminated that did not qualify for uncompensated care. Dr. Ashley commented that this process has come a long way from the early days when we had a high number of unqualified claims. He added that this process is a strong message for the legislators that highlights accountability for our funds. The process is tight, but it doesn't mean it couldn't be better, but it is improving, and the hospital finance people understand the qualifying criteria better. Out of over 5,000 submitted claims, four hundred eighty claims were subject to testing; roughly 10% were tested. Most of the unqualified claims result from turnover in the centers and a lack of understanding of the criteria, which is primarily an educational process. In determining certain thresholds, some statistical audit tools are used. The NTDB criteria were evaluated last year but not included as a claim requirement; centers were educated that the criteria would be added for the following year. OCGA 31-11-100 defines a trauma patient as meeting national criteria.

Subcommittee and Workgroup Reports

Bylaws Workgroup (1:04:10)

Presented by Dr. Michelle Wallace

Dr. Wallace referenced the summation sent to all Commission members via email on August 4. Page 4, Article VII, removed language regarding dissolving subcommittees. The Commission Chair may appoint a non-Commission member to serve as a subcommittee chair. The language is consistent with Commission Officer terms; chairs may serve for a term of three (3) years and may be reappointed for a second term, not to exceed a total of six (6) years. Page 4, Article IX, amendment of bylaws review to occur every three years instead of annually.

Dr. Ashley opened discussion for the bylaws changes as they do not require a motion. Mr. Terwillger asks if the Commission Chair can appoint or dismiss an ad hoc committee or subcommittee. Dr. Ashley and Dr. Wallace confirm that the Commission Chair may appoint any subcommittee. A lengthy discussion continued around the practice and benefits of term limits and the potential impact on the EMS subcommittee. Key points included:

- The greatest impact of the term limit language is to the EMS subcommittee, which has a longstanding chairman;
- Term limits were consistent with how most organizations operate concerning those positions and consistent with Commission Officer term limits;
- Term limits support succession planning, which is presently lacking
- Allowing a one-off for a particular subcommittee as it opens the door for inconsistency in other decisions;
- A longstanding chair's ideas can ossify, and there may not be fresh ideas that can flow in

- The EMS subcommittee is thriving, it would be great to grow other leaders into that, but this is particularly important in other subcommittees that lack that strong leadership;
- Term limits are where the controversy lies, without which, there would be no opposition to the bylaws revisions as they are industry standard;
- The addition of a vice-chair is a very positive aspect; this has been successful with the rural group chaired by Dr. Patterson and Dr. Register as the vice-chair;
- The group is sensitive to the needs of the EMS subcommittee and suggested that if the bylaws revisions pass as proposed, nothing changes.

The term limits proposed would start as of today, as day one. So, in essence, unless otherwise removed at the Chair's discretion, Mr. Terwilliger would potentially have an additional six years to lead the EMS subcommittee. Mr. Terwilliger has served as Chair of the EMS subcommittee since 2013.

MOTION GTCNC 2021-08-02:

I make the motion to accept the bylaws subcommittee proposed revisions as written

MOTION BY: GTC Bylaws Subcommittee

AMENDMENT TO THE MOTION 2021-08-02:

I amend the motion to strike the last sentence of Article VI of the bylaws revisions; the term limits maximum of six (6) years. AMENDMENT TO MOTION BY: Mr. Courtney Terwilliger AMENDMENT TO MOTION SECOND BY: Mr. Vic Drawdy VOTING: Three in favor, five opposed In favor (strike the line): Drawdy, Adkins, Terwilliger Not in favor (not strike the line): Smith, Wallace, Medeiros, Bleacher, Ashley ACTION: The amendment to the original motion 2021-08-02 *FAILED*.

ORIGINAL MOTION GTCNC 2021-08-02:

VOTING: Seven in favor, one opposed In favor: Smith, Adkins, Wallce, Medeiros, Bleacher, Terwilliger, Ashley Opposed: Drawdy **ACTION:** The motion **PASSED** with no abstentions.

A concern was raised about requiring a two-thirds vote of all Commission members potentially being a barrier to conducting business when not all members can be present. Chairman Ashley tasked the bylaws subcommittee with amending that requirement to a 2/3 of Commission members present for consideration at the next Commission meeting in November.

Budget Subcommittee Report

Presented by Dr. Regina Medeiros

Georgia Trauma Commission Meeting: May 20, 2021

Dr. Medeiros referenced the preliminary AFY 2022 and FY 2023 budgets for submission to the Governor's Office of Planning and Budget on pages 41 and 42. These require a vote and are brought forward to the Commission on behalf of the budget subcommittee.

MOTION GTCNC 2020-08-03:

I make the motion to approve the AFY 2022 and FY 2023 proposed budgets as presented.

MOTION BY: Budget Subcommittee **VOTING**: All members are in favor of the motion. ACTION: The motion PASSED with no objections nor abstentions.

Dr. Medeiros referenced the report on page 40 and highlighted the work of the contracts and grants workgroup to establish a process for each recipient of Commission funds to submit requests in a consistent format for consideration each year. There were no questions for the budget subcommittee.

EMS Subcommittee (02:10:16)

Mr. Terwilliger referenced the EMS subcommittee report on page 43. The FY 2021 funding for education has been expended within the fiscal year, providing 104,690 hours of EMS continuing education. In partnership with DPH procurement, the RFP process for a learning management system is moving forward. AVLS replacement units were acquired as per the approved FY 2021 reallocation plan. Mr. Terwilliger encourages everyone to look at the Arbinger Foundation program. Mr. Terwilliger referenced the EMS education course listing on page 45; there were no questions for Mr. Terwilliger.

GCTE Subcommittee

Ms. Gibson referenced her report on page 46. The GCTE is working on developing strategic priorities to align with other state partners. Two priorities include the time to definitive care and acute kidney injury projects. The goal is to finalize a plan by the November meeting of the GCTE. The GCTE will vote on registry data recommendations tomorrow to eliminate data points that are not utilized and enhance registry workflow. Ms. Gibson referenced the work of the injury prevention group, led by Kristal Smith, highlighting the recent virtual Stop the Bleed training blitz across Georgia. Over 1,000 folks from 80 counties with 312 schools participating in over 45 sessions. Ms. Gibson referenced the report available on that. TCRN review class Aug 5th and 6th. TNCC was held at Martin Army Hospital in August. Pediatric group looking at metrics and education on the pediatric radiology guideline. The group is also looking at education on the pediatric shock index. Ms. Smith offered comments on the successful collaboration and the next iteration of the virtual STB training blitz. Dr. Ashley asked how the group achieved broad participation. Ms. Smith underscored the partnership, with all partners sharing the reminders for registration. In addition to the 45 sessions, 30 instructor orientations were offered. Increasing the instructor pool to provide more education is vital, and a plan to deploy currently stored kits. We hope to have a plan in place for kit deployment for the November meeting.

Presented by Mr. Terwilliger

Presented by Ms. Jesse Gibson

Georgia Trauma Commission Meeting: May 20, 2021

Level III/ Level IV Rural Trauma Workgroup (2:31:07)

Dr. Patterson highlighted a few of the initiatives that have gained momentum at the meeting last week included in the report on page 48. One of the issues is trauma transfers to definitive care. A resource tool has been created that lists all Georgia trauma centers, including contact information, transfer center information, websites, and other information that would be handy to centers that need to refer to definitive care. At last week's meeting, the group discussed the readiness cost survey tool developed specifically for level III and IV centers. The goal is to complete the survey and prepare a preliminary analysis by January before the legislative session begins. TQIP-based projects on geriatric care and hip fracture care have been tabled for the moment. Dr. Patterson mentioned the budget requests for consultative visits for level III and level IV centers and underscored those visits' value for the centers. Having had a consult visit as a level II center, Dr. Patterson explained that having an external authority make recommendations to your hospital leadership about education or resource that you need to have makes a significant difference. The allocations for consult visits were approved, preliminarily, for the upcoming amended budget. Dr. Ashley commended the work by the rural subcommittee as it represents a significant effort to tackle some of the challenges of rural trauma care.

Trauma Administrators Subcommittee (02:41:36)

The kickoff meeting that occurred last Friday went well, with nearly every center represented. The discussion included the purpose and overviews of critical initiatives. Dr. Wallace is developing the subcommittee charter and purpose. Administrators' group meeting cadence will align with the Commission. A meeting of co-chairs is planned for October. Dr. Wallace discussed identifying the knowledge gaps to develop an executive leader orientation. The concern is for continuing engagement of the high-level senior executives on the calls, or possibly senior leaders will delegate. The next full subcommittee meeting is on November 18. Dr. Wallace wants to work with Chairman Ashley on precisely the Commission's desires around finance input from the administrator's group. Dr. Ashley sees this as an opportunity for all the executives to be as educated as Dr. Wallace is on trauma center finance related to patient care. Ms. Atkins suggested a TCAA finance workshop for the spring 2022 meeting as the TCAA has recently revised the trauma center finance course.

Trauma Data Subcommittee (02:48:56)

Ms. Solomon referenced the subcommittee's report on page 51. The group continues to drill down on the desired time to definitive care metric in two main categories: Scene to definitive care and trauma transfers to definitive care. The group discussed optimal EMS scene time and establishing a process to review cases that exceed a pre-determined threshold. For the transfer group, drill down on major injury (ISS > 16) is the focus. A PI tool was developed to identify and group barriers for those cases not transferred or transported promptly. The most recent iteration of the central site report will be evaluated next week at the twice-monthly collaboration between GQIP and DPH OEMST team.

Presented by Dr. Greg Patterson

Presented by Gina Solomon

Presented by Dr. Michelle Wallace

<u>Trauma System Partner Reports</u> <u>MAG Medical Reserve Corps</u> (02:57:58)

Dr. Harvey referenced the report, and PowerPoint included in the electronic packet, starting on page 52. He discussed the MAG MRC early mobilization in response to COVID to support hospitals, nursing homes, food banks, testing sites for approximately sixty days. Over 75 people were deployed throughout Georgia. This deployment was recognized up through all levels of state government, Department of Defense, DPH, and others. Several members received a special commendation associated with their performance in the COVID response. The estimated economic benefit to the state was \$1,022,000. Over fifty doctors were deployed to deliver vaccinations and counseling to discuss vaccination risks. The estimated financial benefit to the state for that effort was \$183,000. A training event was held for new MRC members in March in Warner Robbins. A verticle drill was conducted with over 250 people participants inclusive of MRC members, medical and nursing students, first responders, among many others. The calculated economic benefit was approximately \$70,000. Dr. Ashley asks if these responses, training, and exercise will enable a more effective mass casualty response. Dr. Harvey responded that the widespread team deployment in addition to the GEMA deployment has demonstrated the MAG MRC has an engaged membership that is willing to deploy. Dr. Medeiros asked if the MRCs qualified for any CARES act federal funding. Dr. Harvey responded that they did not receive any CARES act funding.

Georgia Trauma Foundation (03:11:10)

Ms. Mabry reiterated the great turnout last week, with over 100 people attending in person and over 80 attended virtually. This was our best-attended Day of Trauma to date. The casual reception the night before was well received. Many attendees voiced the need to unplug and connect with colleagues, even if just for a day. All presentations are available online. The spring meeting location was researched extensively. The Barnsley Resort is about 45 minutes northwest of Atlanta in Adairsville, GA. Corporate events are held Monday through Wednesday, necessitating moving the Commission meeting from a Thursday to a Wednesday. Wednesday, March 2, 2021, would be the potential date of the Commission meeting. The plan is to move away from a symposium-based meeting and evolve towards a systemfocused meeting. Vendors care less about the content but want to be where the stakeholders are going to be present.

The Commissioners voiced no opposition to altering the meeting date to accommodate the Barnesly contract. Ms. Lori will provide an update on that meeting format by the November meeting. Ms. Mabry turned her attention towards the strategic focus in the report, starting on page 114. The strategic focus has shifted to a two-tiered model inclusive of both the foundation tier and collaborative tier. Ms. Mabry walked through both of the tiers; details are included in the packet. She mentioned the launch of the new Foundation website. Dr. Ashley officially welcomed Cheryle Ward, Director of Philanthropy for Georgia Trauma Foundation.

GQIP Update (03:27:30)

Presented by Ms. Gina Solomon

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Georgia Trauma Commission Meeting: May 20, 2021

Presented by Dr. John Harvey

Presented by Ms. Lori Mabry

Ms. Solomon gave an overview of her report on page 125. She referenced the Arbormetrix project timeline that depicts the target kickoff date of December 2021. Dr. Medeiros commented on the excitement around the Arbormetrix project, specifically the opportunity to access more contemporary data. Dr. Ashley mentioned, comparatively, TQIP is course tuning, whereas Arbormetrix represents fine-tuning. Ms. Solomon clarified that Arbormetrix does not negate the need for TQIP. TQIP serves as the national benchmark; Arbormetrix is our internal, statewide, risk-adjusted benchmark. Arbormetrix offers the ability to bring benchmarking down to the level IV trauma center level. TQIP does not offer risk-adjusted benchmarking for level IVs.

Office of EMS & Trauma (03:36:48) Presented by Mr. David Newton and Ms. Renee Morgan Mr. Newton referenced his report on page 127. Ms. Morgan says COVID has impacted OEMSTs ability to do site visits, and they are not set up to do virtual visits at this time. She has a level IV site visit set up for September 13. Fort Gordon has an ACS site survey visit upcoming. There was some discussion around the ACS verification site visit timeframes and how the OEMST handles centers with many deficiencies in ACS consultative visits who remain state designated as a trauma centers. Ms. Morgan explained that she requires the centers to submit corrective action plans to the OEMST, and her office performs site visits.

Ms. Joiner referenced the letter on page 127 describing the TRAIN platform collaboration invitation. She described the review process for content and listed the types of programs and targeted audiences that can be provided or added to TRAIN for access. The program is easy to use with a laptop and PowerPoint; they can convert for content providers. Course completion goes to the license management system so they can track continuing education. The emergency preparedness program funds TRAIN. Upon the launch of TRAIN, over 20 courses were available; there are 31 courses available today. Content can be locked down if it's proprietary. The system can do pre and post-testing. Dr. Ashley sees value in recording presentations such as the uncompensated care claim submission & validation process and the sessions presented in partnership with GTC and DPH OEMST to educate centers on contractual processes.

Dr. Ashley thanked all subcommittee chairs, members, system partners, and all those involved in trauma care for their work to move all of this great work forward. He called for any other final comments or remarks before requesting a motion to adjourn.

MOTION GTCNC 2021-08-04: I make the motion to adjourn.

MOTION BY: Courtney Terwilliger SECOND BY: John Bleacher VOTING: All members are in favor of the motion. ACTION: The motion <u>PASSED</u> with no objections nor abstentions.

Georgia Trauma Commission Meeting: May 20, 2021

Meeting adjourned at 12:42 PM.

Minutes Respectfully Submitted by Elizabeth Atkins

Georgia Trauma Commission Meeting: May 20, 2021



THE STATE OF GEORGIA

EXECUTIVE ORDER

BY THE GOVERNOR:

ORDERED:

That the Honorable Dennis W. Ashley of Macon-Bibb County, Georgia, is reappointed to serve as a member of the Georgia Trauma Care Network Commission, for a term of office expiring October 1, 2025.

This 1st day of October, 2021

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GOVERNOR



THE STATE OF GEORGIA

EXECUTIVE ORDER

BY THE GOVERNOR:

ORDERED:

That the Honorable Regina Simione Medeiros of Richmond County, Georgia, is reappointed to serve as a member of the Georgia Trauma Care Network Commission, for a term of office expiring October 1, 2025.

This 1^{st} day of October, 2021

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GOVERNOR

September 27, 2021

Ms. Amy Bottoms Legislative Fiscal Officer 434 State Capitol Atlanta, Georgia 30334

Dear Amy:

Pursuant to O.C.G.A. 31-11-101, I am reappointing Mr. Courtney L. Terwilliger, Jr. to serve on the Georgia Trauma Care Network Commission

Mr. Terwilliger's new term will end on August 31, 2025, or until a successor is appointed and qualified. If you have any questions, please feel free to contact my office.

Sincerely,

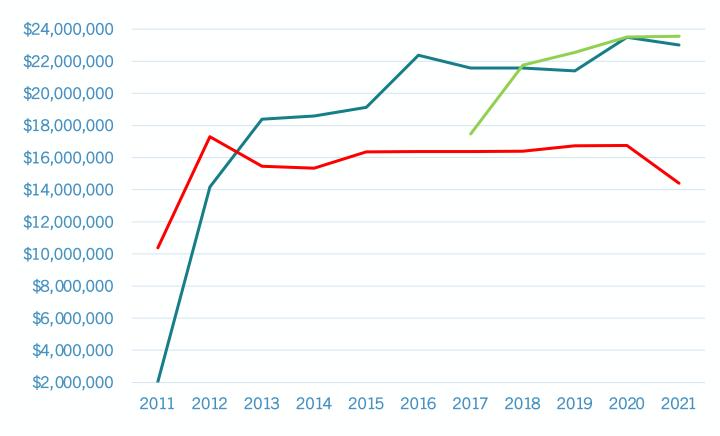
David Ralston, Speaker Georgia House of Representatives

Copy to: The Honorable Brian Kemp, Governor The Honorable Geoff Duncan, Lt. Governor of Georgia Mr. David Cook, Secretary of the Senate Mr. Bill Reilly, Clerk of the House

Mr. Rick Ruskell, Legislative Counsel Elizabeth Atkins, Executive Director Appointee SUPER SPEEDER REVENUE SUMMARY

REVENUE TO BUDGET COMPARISON: SUPER SPEEDER

----SUPER SPEEDER REVENUE (Prior Year Revenue) ----ALLOCATION TO GEORGIA TRAUMA COMMISSION -----AMENDED FUNDS





SUPER SPEEDER REVENUES FY 2021 VS. FY 2022





SUPER SPEEDER CUMULATIVE REVENUE FY 2021 VS. FY 2022

Month	FY 2021 Cumulative Total	FY 2022 Cumulative Total	Cumulative Variance	Percentage +/-
Jul	\$ 1,882,436.00	\$ 1,580,677.00	\$ (301,759.00)	-16%
Aug	\$ 3,302,244.00	\$ 3,400,448.00	\$ 98,204.00	3%
Sept	\$ 4,472,201.00	\$ 5,111,959.00	\$ 639,758.00	14%
Oct	\$ 6,165,461.00	\$ 6,895,251.00	\$ 729,790.00	12%
Nov	\$ 7,616,157.00			
Dec	\$ 8,853,010.00			
Jan	\$ 10,773,002.00			
Feb	\$ 12,390,822.00			
Mar	\$ 15,301,275.00			
Apr	\$ 17,578,083.00			
Мау	\$ 19,384,342.00			
Jun	\$ 21,444,840.00			



Subject: Critical Trauma Care Access Call Today

Date: Friday, August 27, 2021 at 9:24:50 AM Eastern Daylight Time

- From: Liz Atkins
- To: pcoule@augusta.edu, Walker, Patrice C, Jan Tidwell, stacey.deweese@choa.org, adukes@crispregional.org, Christopher.Ruiz3@hcahealthcare.com, Maggie Hendler, Scott, Damien, stacey.howard@hcahealthcare.com, sbennett@Floyd.org, Michelle Wallace, smckenzie@hhcs.org, Griffin, Amy, Wells Heyward, Ramon.Meguiar@hcahealthcare.com, Harden Jeffrey, Patrick Cook, Angela Gary, Dee Burkett, bill.tustin@piedmont.org, marty.wynn@piedmont.org, Kinard, Tifani, Julie.Barnes2@HCAHealthcare.com, Van Beek, Frances, Vik.Reddy@wellstar.org, lindsey.petrini@wellstar.org, Julie.J.Freeman.mil@mail.mil, Ashley, Dennis W, james.dunne@hcahealthcare.com, Medeiros, Regina, kkeefer@augusta.edu, Finley, Delvecchio S, Mosley Chris, Hyland, Donna, Steven Gautney, Welch Doug, fran.witt@effinghamhospital.org, don.avery@hcahealthcare.com, KStuenkel@Floyd.org, jhaupert@gmh.edu, jmyers@hhcs.org, dmcraven@archbold.org, shayne.george@hcahealthcare.com, Matthew.Hasbrouck@hcahealthcare.com, Ralph Castillo, Carol H Burrell, deborah.mitcham@northside.com, Michael.Burnett@piedmont.org, Scott Hill, Larry W. Ebert, Stuenkel, Kurt, Quinlivan John, Kerry.watson@wellstar.org, John.kueven@wellstar.org, Mary.chatman2@wellstar.org, Croom, Jon-Paul
- CC: Liz Atkins

Thank you to everyone for your time yesterday afternoon and sharing feedback on how we can keep access to trauma care a priority during the surge. We had over 90% participation from our centers, a reflection that all of you share the same concern. The main items for follow-up include:

- Delineating trauma transfer diversion
- Feasibility of a push notification system for trauma transfer diversion, both regionally and for other trauma centers' situational awareness
- Accuracy of each trauma center's level in the GCC system (all center's must ensure their trauma center level and information are accurate)

Michelle and I are working in the background on these enhancements. Information will be shared as this evolves. Please share this update as appropriate. Thanks again for your time, Liz

Elizabeth V. (Liz) Atkins, MSN, RN, TCRN Executive Director Georgia Trauma Commission Liz.atkins@gtcnc.org 706-841-2800 (office) 762-887-0096 (mobile)

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Date: Wednesday, August 25, 2021 at 4:52 PM

To: "pcoule@augusta.edu" <pcoule@augusta.edu>, "Walker, Patrice C" <Patrice.Walker@atriumhealth.org>, Jan Tidwell <jan.tidwell@hcahealthcare.com>, "stacey.deweese@choa.org" <stacey.deweese@choa.org>, "adukes@crispregional.org" <adukes@crispregional.org>, "Christopher.Ruiz3@hcahealthcare.com" <Christopher.Ruiz3@hcahealthcare.com>, Maggie Hendler <maggie.hendler@effinghamhospital.org>, "Scott, Damien" <dscott@emanuelmedical.org>, "stacey.howard@hcahealthcare.com" <stacey.howard@hcahealthcare.com>, "sbennett@Floyd.org" <sbennett@Floyd.org>, Michelle Wallace <mwallace1@gmh.edu>, "smckenzie@hhcs.org" <smckenzie@hhcs.org>, "Griffin, Amy" <AGriffin@archbold.org>, Wells Heyward <Heyward.Wells@hcahealthcare.com>, "Ramon.Meguiar@hcahealthcare.com" < Ramon.Meguiar@hcahealthcare.com>, Harden Jeffrey <Jeffrey.Harden@hcahealthcare.com>, Patrick Cook <PatrickC@mmh.org>, Angela Gary <Angela.Gary@nghs.com>, Dee Burkett <Dee.Burkett1@piedmont.org>, "bill.tustin@piedmont.org" <bill.tustin@piedmont.org>, "marty.wynn@piedmont.org" <marty.wynn@piedmont.org>, "Kinard, Tifani" <TKinard@Floyd.org>, "Julie.Barnes2@HCAHealthcare.com" <Julie.Barnes2@HCAHealthcare.com>, "Van Beek, Frances" <Frances.VanBeek@wellstar.org>, "Vik.Reddy@wellstar.org" <Vik.Reddy@wellstar.org>, "lindsey.petrini@wellstar.org" dsey.petrini@wellstar.org>, "Julie.J.Freeman.mil@mail.mil" <Julie.J.Freeman.mil@mail.mil>, "Ashley, Dennis W" < Dennis.Ashley@atriumhealth.org>, "james.dunne@hcahealthcare.com" <james.dunne@hcahealthcare.com>, "Medeiros, Regina" <rmedeiro@augusta.edu> Cc: "kkeefer@augusta.edu" <kkeefer@augusta.edu>, "Finley, Delvecchio S" <Delvecchio.Finley@atriumhealth.org>, Mosley Chris <Chris.Mosley@HCAHealthcare.com>, "Hyland, Donna" <Donna.Hyland@choa.org>, Steven Gautney <sgautney@crispregional.org>, Welch Doug <Doug.Welch@hcahealthcare.com>, "fran.witt@effinghamhospital.org" <fran.witt@effinghamhospital.org>, "don.avery@hcahealthcare.com" <don.avery@hcahealthcare.com>, "KStuenkel@Floyd.org" <KStuenkel@Floyd.org>, "jhaupert@gmh.edu" <jhaupert@gmh.edu>, "jmyers@hhcs.org" <jmyers@hhcs.org>, "dmcraven@archbold.org" <dmcraven@archbold.org>, "shayne.george@hcahealthcare.com" <shayne.george@hcahealthcare.com>, "Matthew.Hasbrouck@hcahealthcare.com" <Matthew.Hasbrouck@hcahealthcare.com>, Ralph Castillo <ralphc@mmh.org>, Carol H Burrell <carolhburrell@nghs.com>, "deborah.mitcham@northside.com" <deborah.mitcham@northside.com>, "Michael.Burnett@piedmont.org" <Michael.Burnett@piedmont.org>, Scott Hill <Scott.Hill@piedmont.org>, "Larry W. Ebert" <Larry.Ebert@piedmont.org>, "Stuenkel, Kurt" <KStuenkel@Floyd.org>, Quinlivan John <John.Quinlivan@HCAhealthcare.com>, "Kerry.watson@wellstar.org" <Kerry.watson@wellstar.org>, "John.kueven@wellstar.org" < John.kueven@wellstar.org>, "Mary.chatman2@wellstar.org" <Mary.chatman2@wellstar.org>, "Croom, Jon-Paul" <JonPaul.Croom@wellstar.org>, Liz Atkins <liz@gtcnc.org>

Subject: Critical Trauma Care Access during COVID Surge

On Behalf of Dr. Dennis W. Ashley, MD, FACS Chairman, Georgia Trauma Commission:

Good Afternoon,

After our successful trauma center administrator's subcommittee meeting a week ago Friday, we did not foresee the need to leverage the power of this group so urgently. The recent COVID surge has limited the availability of tertiary trauma care for injured patients in Georgia. This is complicated by the lack of a comprehensive communication platform to share real-time resource availability and a triage mechanism to identify those with critical, time sensitive injuries. I suggest we convene a call of this group to discuss a

coordinated plan on how we can safely manage trauma transfer requests to mitigate harm associated with lack of availability.

We are aware of time constraints as you manage your own center's capacity issues. Ideally, we would like to have a call before the weekend. **Please reply with your ability to make a Thursday later afternoon or Friday AM call work.** Thank you for collaborating to maintain access to trauma resources during this challenging time.

Thank you, Liz

Elizabeth V. (Liz) Atkins, MSN, RN, TCRN Executive Director Georgia Trauma Commission Liz.atkins@gtcnc.org 706-841-2800 (office) 762-887-0096 (mobile)

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Level III and Level IV Trauma Center Readiness Costs Survey Process

Project Timeline – Key Dates

Task	Date		
Readiness Cost Survey Tool Review – Virtual Meeting	September 30, 2021		
Submit Questions for Open Forum/Q&A Virtual Session	October 15, 2021		
Open Forum/Q&A Virtual Session	October 21, 2021		
Centers Submit Completed CY 2019 Readiness Cost Survey Tool	October 29, 2021		
Warren Averett Review Data & Send Samples to Trauma Centers	November 12, 2021		
Trauma Center Responses with Supporting Documentation to WA	November 19, 2021		
Virtual Testing Completed	December 17, 2021		
Warren Averett Releases Final Cost Analysis Report	January 21, 2021		



CANDICE L. BROCE

MEMORANDUM

BRIAN P. KEMP

TO: Georgia State Agencies

FROM: Candice L. Broce, DFCS Division Director

RE: Clark's Christmas Kids Instructions

DATE: Nov. 3, 2021

Each year, the Georgia Department of Human Services (DHS) Division of Family & Children Services (DFCS) operates a program called "Clark's Christmas Kids" to help make the holiday season brighter for children and older youth in Georgia's foster care system. This year so far, requests have been received for more than 7,000 children in 100+ counties, and Governor Brian Kemp has graciously volunteered the resources of all state agencies to help meet the needs of these children.

All state agencies been assigned children in foster care, along with their wish lists and corresponding labels to be attached to each gift. If you run out of labels, please be sure to write the child's information on the gift. Please bring all gifts unwrapped and do not include gift cards.

Gift drop-off must be completed by <u>Wednesday, Dec. 1, 2021</u>, and can be done at either of the locations listed below.

Warehouse:

Prologis Olympic Industrial Center 2990 Olympic Industrial Suite 104 Smyrna, Georgia 30080

Office of the Governor: Front Office 206 Washington Street SW Suite 203 Atlanta, Georgia 30334

For questions about drop-offs at the Office of the Governor, please contact Laura Greenway at 404-291-6031 or <u>laura.greenway@georgia.gov</u>. For any other questions, contact our Clark's Christmas Kids Projects Director, Santrissa C. Johnson, at 404-803-5213 or santrissa.johnson@dhs.ga.gov.

Thank you in advance for your support of this important initiative.



2022 Meeting Dates To Be Approved

Wednesday, March 2nd, 2022 (Barnsley)

Thursday, May 19th, 2022

Thursday, August 11th, 2022 (St. Simon's)

Thursday, November 17th, 2022

GEORGIA TRAUMA CARE NETWORK COMMISSION

BYLAWS

ARTICLE I. NAME OF ORGANIZATION

The organization referred to in this document is the Georgia Trauma Care Network Commission, hereinafter referred to as "the Commission."

ARTICLE II. AUTHORITY

The Georgia General Assembly statutorily created the Georgia Trauma Care Network Commission during the 2007 - 2008 legislative session, and its authority and duties are codified at O.C.G.A. § 31-11-100 et seq.

ARTICLE III. DUTIES OF THE TRAUMA CARE NETWORK COMMISSION

The Georgia Trauma Care Network Commission shall have the duties and responsibilities set forth in O.C.G.A. § 31-11-100 et seq.

ARTICLE IV. MEMBERSHIP

Membership on the Georgia Trauma Care Network Commission will be determined as prescribed in O.C.G.A. § 31-11-100 et seq. establishing and empowering the Commission.

Responsibilities of Membership:

- 1. The Commission shall meet upon the call of the Chairperson or upon the request of three members.
- 2. Members will prepare by having reviewed the draft agenda, previous meeting minutes, and materials for discussion at the meeting. Members are encouraged to be involved in Commission subcommittee activities.
- 3. Vacancies: Any vacancy on the Commission shall be filled for the unexpired term by appointment by the original appointing authority.
- Removal: The Commission may recommend removing a member, to the original appointing authority, for good cause by a two-thirds majority vote of Commission members present at a meeting where quorum is determined. Good cause includes:
 - i. Inappropriate conduct unbecoming of a member,
 - ii. Neglect of responsibilities assumed by a member or assigned by the

Chairperson; and,

iii. Failure to attend three consecutive meetings in a given year, or failure to consistently attend and participate in meetings of the Commission.

ARTICLE V. OFFICERS

Officers: There are three officer positions on the Commission. These are the Chairperson, appointed by the Governor, Vice-Chairperson and Secretary/Treasurer. The Vice-Chairperson and Secretary/Treasurer are elected by the Commission. In the temporary absence of the Chairperson, the Vice-Chairperson shall assume the duties of the Chairperson and conduct the Commission meeting.

The Chairperson shall be the chief executive officer of the Commission; and shall conduct its correspondence. Press releases and public announcements concerning the Commission's work shall be issued only by or with the approval of the Chairperson.

Officers' duties and roles include:

- a. Chairperson:
 - i. Determine that a quorum is present.
 - ii. Open the meeting at the specified time by calling the members to order.
 - iii. Announce the business of the Commission and the order in which it will be considered.
 - iv. Acknowledge members who are entitled to speak.
 - v. State all motions and for voting.
 - vi. Announce the results of all votes.
 - vii. Make sure that the discussion proceeds in an orderly fashion.
 - viii. Enforce decorum.
 - ix. Make the business of the meeting run as smoothly as possible.
 - x. Decide all questions of order.
 - xi. Inform the participants about a point of order or specific parliamentary practice when requested.
 - xii. Authenticate the proceedings with his or her signature.
 - xiii. Declare the meeting adjourned when all business has been concluded.
 - xiv. Establish subcommittees and appoint members as needed
- b. Vice-Chairperson: The Vice-Chairperson shall serve as Chairperson in the temporary absence of the Chairperson. The Vice-Chairperson will assist the Chairperson with his or her duties, responsibilities and assist in orienting new members of the Commission.
- c. Secretary/Treasurer: The Secretary/ Treasurer shall be responsible for recording votes, ensuring written minutes are developed for each Commission meeting, and serve as the point of contact for budget reporting. The Secretary/ Treasurer shall have custody of the book of minutes and shall attest such documents as the Commission or Chairperson may direct or as the law may require. The

Secretary/Treasurer will ensure fund expenditure reports are obtained for the Commission from all appropriate State agencies. The Secretary/Treasurer shall ensure proper notice of all meetings and fund expenditure reports are provided to the Commission and shall perform such duties incident the office of Secretary/Treasurer and as the Commission may direct.

- d. Elections to Vice-Chairperson and Secretary/Treasurer: Elections are made based on nominations from the members of the Commission at the designated annual meeting. Voting may be by secret ballot. A majority two-thirds vote by the members present at the annual meeting where there a quorum determined is required to elect a member to an officer position.
- e. Term of Office: The Vice-Chairperson and Secretary/Treasurer positions are effective following the election of the officers. The Vice-Chairperson and Secretary/Treasurer shall serve for a term of two (2) years beginning at the annual meeting of the Commission. The Vice-Chairperson and Secretary/Treasurer can hold a limit of 2 consecutive terms.
- f. The Vice-Chairperson or Secretary/Treasurer may be removed from office by a two-thirds majority-vote of Commission members present at a meeting where a quorum is determined for failure to comply with duties as defined.

ARTICLE VI. MEETINGS

The Commission shall meet upon the call of the Chairperson or upon the request of three members. The Commission shall hold at least quarterly regular meetings of the entire Commission. Each November meeting shall be designated as the annual meeting of the Commission. The time and place of the meetings will be at the discretion of the Commission. The Commission will provide notices of meetings per the Open Meetings Act of the State of Georgia.

With the approval of the Chairperson, any Commission member who cannot attend a meeting of the Commission may participate in such meeting by speaker telephone communication when technology is available. The member shall give the Chairperson advance notice that the member desires to participate in a meeting by speaker telephone. The speaker telephone shall be positioned so that all persons in the room where the meeting is held and the Commission member or members communicating by speaker telephone can hear and speak to each other. The Commission member or members participating in a meeting of the Commission by speaker telephone communication shall be counted present at the meeting for quorum determination and voting purposes.

Commission members must attend qualifying meetings in person to be eligible for expense allowance as determined by Georgia law. Qualifying meetings are regular meetings of the entire Commission and Commission subcommittee meetings.

Unless otherwise stipulated in these Bylaws, the business of the Commission will be determined by a simple majority two-thirds vote during a meeting where a quorum is determined.

ARTICLE VII. SUBCOMMITTEES

The Chairperson may appoint subcommittees to provide guidance and recommendations to aid the Commission in making informed decisions. All subcommittees shall have a Chairperson and a Vice-Chairperson appointed by the Commission Chairperson. The Commission Secretary/Treasurer will chair the Budget subcommittee. All other subcommittees may be chaired by a Commission member or a Subcommittee member. The Subcommittee Chairpersons shall serve for a term of three (3) years. The Subcommittee Chairperson may be reappointed to serve a second term, not to exceed a maximum of six (6) years.

ARTICLE VIII. QUORUM

- 1. A quorum shall consist of a simple majority of appointed Commission members present at a properly called Commission meeting.
- 2. Formal business shall take place if a quorum is present in accordance with the Georgia Open Meetings Act and generally accepted rules of parliamentary procedures.

ARTICLE IX. AMENDMENT OF BYLAWS

Proposed amendments of the bylaws shall be sent to the entire Commission membership at least fourteen (14) days prior to the meeting. A two-thirds majority vote of the Commission members present at the meeting where bylaws are reviewed where a quorum is determined is required to amend these bylaws.

The bylaws will be reviewed every three (3) years by members appointed by the Chairperson.

ARTICLE X. LEGAL COUNSEL

The Attorney General of the State of Georgia shall be legal counsel for the Commission. The Attorney General, or such persons as may be designated, shall represent the Commission in all legal matters.

ARTICLE XI. REIMBURSEMENT

Members of the Commission shall serve without compensation but shall receive the same expense allowance per day as that received by a member of the General Assembly for each day such member of the Commission is in attendance at a meeting of such Commission, plus either reimbursement for actual transportation costs while traveling by public carrier or the same mileage allowance for the

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use of a personal car in connection with such attendance as members of the General Assembly receive. Such expense and travel allowance shall be paid in lieu of any per diem, allowance, or other remuneration now received by any such member for such attendance.

ARTICLE XII. ORIENTATION OF NEW MEMBERS

- 1. It is the responsibility of the Commission to provide orientation to new members. With the assistance of the Secretary/Treasurer, the Vice-Chairperson will provide information and orient new members on their roles and responsibilities.
- 2. The Commission Secretary/Treasurer shall make Commission Bylaws, budgets, and expenditure reports, history of the Commission, other pertinent documents, and information available to a new Commission member to review and provide technical assistance as needed.

Amended, approved, and adopted by the Georgia Trauma Care Network Commission on DD MONTH YYYY.

D. Ahfor

Dennis W. Ashley, M.D., Chairman

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Subcommittee and Workgroup Report to the Georgia Trauma Network Care Commission

Name of Subcommittee or Workgroup:	Budget Subcomm	ittee Report	
Project/Activity ¹	Comments		
 AFY 2021 TC grant applications 	The budget subcommittee reviewed grant applications from non-funded participating centers. These grants are in support of trauma center readiness. All applications were approved and will be brought forth for full commission for a vote.		
Status: P		Support GTC Strategic Priorities? (Y/N): Y	
2. Rural Subcommittee request	The rural subcommittee has requested funding support to provide memebership for all level 3 and level 4 trauma centers to become members of the TCAA. The total cost is estimated to be approximately \$20,000 This is a one time seed grant to get centers involved and engaged with the services and resources TCAA offers. Full commission vote is required.		
Status: P		Support GTC Strategic Priorities? (Y/N): Y	
 AFY 22 Spend plan &FY 23 proposed budget 	The budget subcommittee will be working to finalize details in support of the budget review meettings with legislators set to begin when the session starts		
Status: P		Support GTC Strategic Priorities? (Y/N): Y	
 Contract/grant deliverables workgroup 	grants/contracts with the co document will outline the de anticipated. This process wi	d draft documents that will assist those who have ommission to prepare a budget request for the next FY. This ollar amounts reqested and the line items expenses ill aid the budget subcommittee in making funding allocation Il commission and will allow for expense to budget tracking.	
Status: P		Support GTC Strategic Priorities? (Y/N): Y	
5. Develop commission guidelines for expense/reimbursements based on SAO guideines per OIG recommendation	Re-engagement with Warre guidelines	n Averett has taken place. Work will begin on development of	
Status: P	·	Support GTC Strategic Priorities? (Y/N): Y	
Questions, Issues, and Recommendations Requiring		on proposed documents and plan for contract and grant dget request based on zero based budgeting.	

Commission Discussion:

¹ Wherever possible the topic/task should be related to GTCNC Strategic Plan or activities of the GTCNC as defined by O.C.G.A. § 31-11-100, § 31-11-101, § 31-11-102 and § 31-11-103.



Motions for Consideration at the Commission Meeting:	 Approve FY 2021 Trauma Center Grant Applications Approve one time reimbursement to all level 3 and level 4 trauma centers for membership in TCAA Support of motion to allow budget subcommittee to reallocate funds within the approved budget structure as needed 	
Committee Members:	Dennis Ashley, Courtney Terwilliger, James Dunn, Katie Hamilton & Elizabeth Atkins	
Chair/Commission Liaison:	Regina Medeiros	
Date of Next Committee Meeting:	TBD	



Provide a notarized affidavit on applying organization's letterhead that affirms the following:

"I am the Trauma Program Coordinator/Manager/Director of <u>Piedmont Cartersville</u> (trauma center name). I, <u>John Pope</u> (print name), do affirm the following listed equipment and or services will be purchased and placed in service. I, <u>John Pope</u> (print name), agree to the following eight items listed below (type out all purchased items and or services in the table below, add additional rows if necessary)."

Item(s) or Service(s) Purchased	Number of Units Purchased	Cost of Each Unit	Total Cost
Level One Infuser	2	16000.00	32000.00
Pupilometer	3	5000.00	15000.00
Bair Hugger	4	2000.00	8000.00
Mid Level ATLS	5	900.00	4500.00
Prevention Billboard	12 months	500.00	6000.00
Manikin Supplies for ATLS			4000.00
	Total C	Cost of All Items Purchased	69,500.00

- 1. Agree to utilize these grant dollars for trauma-related equipment and or services within the trauma center named in the application for the grant.
- 2. Agree that if there is equipment purchased with grant dollars and is to be sold, the Georgia Trauma Commission will approve the disposal before the disposal is effected.
 - a. Agree that this equipment will not be used as collateral for a loan beyond the amount of local contribution.
 - b. Agree that this equipment will remain titled to the original grantee unless permission is obtained from the Georgia Trauma Commission to reallocate this equipment to another trauma center.
- 3. Agree that these grant dollars will not be used to supplant, decrease or reallocate the existing budgeted dollars to the trauma program or trauma service.
- 4. Applying organization agrees to provide representation in the following Georgia Trauma Commission-sponsored trauma system activities for CY 2021-2022: Trauma Program Manager or equivalent role in the Georgia Committee for Trauma Excellence; Trauma Medical Director or equivalent role in the Trauma Medical Director Conference Calls; Trauma Program Manager and Trauma Medical Director or equivalent roles to attend the Spring 2022 Trauma Symposium and Spring Meeting; Senior Executive responsible for the Trauma Program in the Trauma Administrator's Group; and trauma program representation at the center's respective Regional Trauma Advisory Committee meetings.
- Applying organization agrees it is compliant with the Department of Public Health State Office of EMS & Trauma trauma registry data submission requirements. The State Office of EMS & Trauma will determine compliance.

Attachment B



Provide a notarized affidavit on applying organization's letterhead that affirms the following:

"I am the Trauma Program Coordinator/Manager/Director of Fairview Park Hospital (trauma center name). I, Lynn Grant (print name), do affirm the following listed equipment and or services will be purchased and placed in service. I, Lynn Grant (print name), agree to the following eight items listed below (type out all purchased items and or services in the table below, add additional rows if necessary)."

Item(s) or Service(s) Purchased	Number of Units Purchased	Cost of Each Unit	Total Cost
Trauma stretchers	3	7641.53	22924.59
Glidescope	1	17371.96	17371.96
Blanket warming cabinet	1	8177.11	8177.11
Cell Saver	1	22295.61	22295.61
	Total C	Cost of All Items Purchased	70769.27

- 1. Agree to utilize these grant dollars for trauma-related equipment and or services within the trauma center named in the application for the grant.
- 2. Agree that if there is equipment purchased with grant dollars and is to be sold, the Georgia Trauma Commission will approve the disposal before the disposal is effected.
 - a. Agree that this equipment will not be used as collateral for a loan beyond the amount of local contribution.
 - b. Agree that this equipment will remain titled to the original grantee unless permission is obtained from the Georgia Trauma Commission to reallocate this equipment to another trauma center.
- 3. Agree that these grant dollars will not be used to supplant, decrease or reallocate the existing budgeted dollars to the trauma program or trauma service.
- 4. Applying organization agrees to provide representation in the following Georgia Trauma Commission-sponsored trauma system activities for CY 2021-2022: Trauma Program Manager or equivalent role in the Georgia Committee for Trauma Excellence; Trauma Medical Director or equivalent role in the Trauma Medical Director Conference Calls; Trauma Program Manager and Trauma Medical Director or equivalent roles to attend the Spring 2022 Trauma Symposium and Spring Meeting; Senior Executive responsible for the Trauma Program in the Trauma Administrator's Group; and trauma program representation at the center's respective Regional Trauma Advisory Committee meetings.
- Applying organization agrees it is compliant with the Department of Public Health State Office of EMS & Trauma trauma registry data submission requirements. The State Office of EMS & Trauma will determine compliance.



Provide a notarized affidavit on applying organization's letterhead that affirms the following:

"I am the Trauma Program Coordinator/Manager/Director of <u>AU Medical Canter Pediatric Trauma Program</u> (trauma center name). I, <u>Kyndra Holm</u> (print name), do affirm the following listed equipment and or services will be purchased and placed in service. I, <u>Kyndra Holm</u> (print name), agree to the following eight items listed below (type out all purchased items and or services in the table below, add additional rows if necessary)."

Item(s) or Service(s) Purchased	Number of Units Purchased	Cost of Each Unit	Total Cost
ATLS Educator development	1	\$3000.00	\$3000.00
ATCN Instructor development	1	\$3000.00	\$3000.00
Trauma Nurse Specialist Course development	1	\$2065.86	\$2065.86
Phillips Sparq US system - NS cases	1	\$47656.14	\$47,665.14
Sonosite PX US system	2	\$45990.00	\$91,980.00
Sonosite S II US system	1	\$46830.00	\$46,830.00
Monitor wall mounts for pediatric trauma floor	1	\$12655.00	\$12,655.00
Sunflower stand alone warmer	2	\$5852.00	\$11,704.00
Pediatric CMAC components	1	\$18961.00	\$18,961.00
Adjustable Tilt mirror	1	\$325.00	\$325.00
Walleroo Car seat with Spica kit	1	\$696.00	\$696.00
		See Appendix B p 2 for additional items	
	Total C	Cost of All Items Purchased	\$242,695.00

- 1. Agree to utilize these grant dollars for trauma-related equipment and or services within the trauma center named in the application for the grant.
- 2. Agree that if there is equipment purchased with grant dollars and is to be sold, the Georgia Trauma Commission will approve the disposal before the disposal is effected.
 - a. Agree that this equipment will not be used as collateral for a loan beyond the amount of local contribution.
 - b. Agree that this equipment will remain titled to the original grantee unless permission is obtained from the Georgia Trauma Commission to reallocate this equipment to another trauma center.
- 3. Agree that these grant dollars will not be used to supplant, decrease or reallocate the existing budgeted dollars to the trauma program or trauma service.
- 4. Applying organization agrees to provide representation in the following Georgia Trauma Commission-sponsored trauma system activities for CY 2021-2022: Trauma Program Manager or equivalent role in the Georgia Committee for Trauma Excellence; Trauma Medical Director or equivalent role in the Trauma Medical Director Conference Calls; Trauma Program Manager and Trauma Medical Director or equivalent roles to attend the Spring 2022 Trauma Symposium and Spring Meeting; Senior Executive responsible for the Trauma Program in the Trauma Administrator's Group; and trauma program representation at the center's respective Regional Trauma Advisory Committee meetings.
- 5. Applying organization agrees it is compliant with the Department of Public Health State Office of EMS & Trauma trauma registry data submission requirements. The State Office of EMS & Trauma will determine compliance.



Children's Hospital of Georgia Additional Requested Items - p 2 of 2

Item(s) or Service(s)	Number of Units		
Purchased	Purchased	Cost of Each Unit	Total Cost
EZ-on Modified vest #503-S	2	\$ 145.00	\$ 290.00
EZ-on Modified vest #503-M	2	\$ 145.00	\$ 290.00
EZ-on Extremity Belt #100EB - 40 in (XS/S)	2	\$ 16.00	\$ 32.00
EZ-on Extremity Belt #100EB - 50 in (Med)	1	\$ 19.00	\$ 19.00
Excy XCS bed bike	1	\$ 829.00	\$ 829.00
EVA Support Walker with directional casters, pneumatic hospital size	1	\$ 1,888.00	\$ 1,888.00
EVA Support Walker O2 tank		+ _,	
holder	1	\$ 390.00	\$ 390.00
Target Laptop Desk by PDG	3	\$ 25.00	\$ 75.00
Total cost of all items purchased			\$242, 695.00

Trauma and Acute Care Surgery

Mailing Address: 15th Street, BB 4516 Augusta, Georgia 30912 Office Address: 2500 Walton Way, Benet Augusta, Georgia 30909 T 706-721-3153 F 706-721-6952

augustā.edu

Attachment B



Provide a notarized affidavit on applying organization's letterhead that affirms the following:

"I am the Trauma Program Coordinator/Manager/Director of <u>Wellstar Cobb Hospital</u> (trauma center name). I, <u>Darlene Sweet</u> (print name), do affirm the following listed equipment and or services will be purchased and placed in service. I, <u>Darlene Sweet</u> (print name), agree to the following eight items listed below (type out all purchased items and or services in the table below, add additional rows if necessary)."

Item(s) or Service(s) Purchased	Number of Units Purchased	Cost of Each Unit	Total Cost
TCAR Course	50	385.00	19,250
STN Conference	10	1500.00	15,000
Stop the Bleed Kits and supplies	4	1000.00	4000.00
Drunk Driving Goggles (Drunk Buster)	5	150.00	750.00
Rapid Infuser	1	30,000	30,500
	Total C	ost of All Items Purchased	69500.00

- 1. Agree to utilize these grant dollars for trauma-related equipment and or services within the trauma center named in the application for the grant.
- 2. Agree that if there is equipment purchased with grant dollars and is to be sold, the Georgia Trauma Commission will approve the disposal before the disposal is effected.
 - a. Agree that this equipment will not be used as collateral for a loan beyond the amount of local contribution.
 - b. Agree that this equipment will remain titled to the original grantee unless permission is obtained from the Georgia Trauma Commission to reallocate this equipment to another trauma center.
- 3. Agree that these grant dollars will not be used to supplant, decrease or reallocate the existing budgeted dollars to the trauma program or trauma service.
- 4. Applying organization agrees to provide representation in the following Georgia Trauma Commission-sponsored trauma system activities for CY 2021-2022: Trauma Program Manager or equivalent role in the Georgia Committee for Trauma Excellence; Trauma Medical Director or equivalent role in the Trauma Medical Director Conference Calls; Trauma Program Manager and Trauma Medical Director or equivalent roles to attend the Spring 2022 Trauma Symposium and Spring Meeting; Senior Executive responsible for the Trauma Program in the Trauma Administrator's Group; and trauma program representation at the center's respective Regional Trauma Advisory Committee meetings.
- Applying organization agrees it is compliant with the Department of Public Health State Office of EMS & Trauma trauma registry data submission requirements. The State Office of EMS & Trauma will determine compliance.



Provide a notarized affidavit on applying organization's letterhead that affirms the following:

"I am the Trauma Program Coordinator/Manager/Director of <u>Doctor's Hospital of Augusta</u> (trauma center name). I, <u>Christopher Ruiz</u> (print name), do affirm the following listed equipment and or services will be purchased and placed in service. I, <u>Christopher Ruiz</u> (print name), agree to the following eight items listed below (type out all purchased items and or services in the table below, add additional rows if necessary)."

Item(s) or Service(s)	Number of Units Purchased	Cost of Each Unit	Total Cost
Glidescope	1	\$15,035.72	\$15,035.72
Trauma man system	1	\$69,162.69	\$69,162.69
ICU Ultrasound Machine	1	\$57,893.00	\$57,893.00
ICU HemoSphere Monitors	2	\$38,880.00	\$77,760.00
Vein Finder	2	\$5,335.20	\$10,670.4Q
EMS outreach and handouts			12,173.19
	Total (Cost of All Items Purchased	\$242,695

- 1. Agree to utilize these grant dollars for trauma-related equipment and or services within the trauma center named in the application for the grant.
- 2. Agree that if there is equipment purchased with grant dollars and is to be sold, the Georgia Trauma Commission will approve the disposal before the disposal is effected.
 - a. Agree that this equipment will not be used as collateral for a loan beyond the amount of local contribution.
 - b. Agree that this equipment will remain titled to the original grantee unless permission is obtained from the Georgia Trauma Commission to reallocate this equipment to another trauma center.
- 3. Agree that these grant dollars will not be used to supplant, decrease or reallocate the existing budgeted dollars to the trauma program or trauma service.
- 4. Applying organization agrees to provide representation in the following Georgia Trauma Commission-sponsored trauma system activities for CY 2021-2022: Trauma Program Manager or equivalent role in the Georgia Committee for Trauma Excellence; Trauma Medical Director or equivalent role in the Trauma Medical Director Conference Calls; Trauma Program Manager and Trauma Medical Director or equivalent roles to attend the Spring 2022 Trauma Symposium and Spring Meeting; Senior Executive responsible for the Trauma Program in the Trauma Administrator's Group; and trauma program representation at the center's respective Regional Trauma Advisory Committee meetings.
- Applying organization agrees it is compliant with the Department of Public Health State Office of EMS & Trauma trauma registry data submission requirements. The State Office of EMS & Trauma will determine compliance.



For Only*

Level I: \$5,000

Level II: \$4,000

Level III or IV: \$2,000

*When you submit your membership application and fees by November 1st to receive 2 months of membership for free.



Join by Nov 1st, your first year of membership will cover the remaining months of 2021 plus all of 2022. JOIN TODAY!

Your membership more than pays for itself with these great benefits!



Resource Library Best practices, webinars, studies, finance and more. Click <u>here</u> to view samples.



On-demand Assistance Personalized consultative calls and instant access to expert staff.

Conference & Course Discounts Unlock special member-only pricing on event registrations. Network with peers.



Online Education Free education-only profiles available to all your hospital's clinical staff.





April 19 - May 4



Name of Subcommittee or Workgroup:	EMS Subcommittee		
Project/Activity ¹	Comments		
1. Budget	We are on-tract with our budget process.		
Status: On-going		Support GTC Strategic Priorities? (Y/N): Y	
2. Automatic Vehicle Location System	We are looking at methods to better predict expenditures on the "air time" part of this process. We have had services change vendors due to better coverage in their area. In some cases this is slightly less cost per month and some slightly more. We will be developing an accountability system to ensure we work within our budget.		
Status: On-going		Support GTC Strategic Priorities? (Y/N): Y	
3. Learning Management System	This process has slowed considerability due to discussions with the Office of Procurement in DPH. We have had discussions with the SOEMS/T on perhaps "buying" content to be put on their platform. More study of this is required.		
Status: In Development	Support GTC Strategic Priorities? (Y/N): Y		
4. EMS Training	The classes have been scheduled and are on-going. We continue to get positive feedback from these classes. The EMS Leadership Course graduated its tenth class on November 11, 2021.		
Status: On-going		Support GTC Strategic Priorities? (Y/N): Y	
5. Online EMS training	The Procurement office suggested we take this out of the RFP. This type of training does not require an RFP process. We will do that and continue to investigate this possibility.		
Status: Under Consideration	•	Support GTC Strategic Priorities? (Y/N): Y	
6. Arbinger Training	We are planning a course in the Tifton area.		
Status: New Course		Support GTC Strategic Priorities? (Y/N): Y	
7. Fiscal Accountability	We were able to complete our projects during the FY. This is a remarkable feat, given the handicap that COVID has placed on our training projects. We will work to ensure that our expenditures are made in the FY they were allocated in.		
Status: On-going	•	Support GTC Strategic Priorities? (Y/N): Y	

Questions, Issues, and Recommendations Requiring Commission Discussion:	None
Motions for Consideration at the Commission Meeting:	None

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Committee Members:	Courtney Terwilliger, Vic Drawdy, Regina Medeiros, Marty Robinson, Chad Black, Pete Quinones, Sam Polk, Lee Oliver, Blake Thompson, Duane Montgomery, David Edwards, Huey Atkins	
Chair/Commission Liaison:	Courtney Terwilliger	
Date of Next Committee Meeting:	January 20, 2021	

Comments		
The GCTE leadership group is working to align committee goals with the initiatives of the entire Georgia Trauma System. One goal will surround the system wide work of time to definitive care. Goals should be finalized during the November GCTE meeting. These are two to four-year goals.		
	Support GTC Strategic Priorities? (Y/N): Y	
Each GCTE Subcommittee is working to establish a succession plan with either a co-chair, vice-chair, or clear plan for who will move into the chair position, if/when vacated. This work is essential to maintain a good cadence moving forward with goal completions.		
	Support GTC Strategic Priorities? (Y/N): Y	
 They now have four specific Falls Prevention Task Last Task For Updated reso information o Participated is Coalition - Bit Kick-ed off in September. 6-Thursday virt Participating fun by serving Planning add Traffic Injury Preventi Last Task For 	& Outreach Subcommittee continues to do meaningful work. task forces addressing key areas. Highlights are below: Force (Leads: Kristal Smith, Jackie Payne) rce Meeting: October 19th; Next Meeting December 14th urces for Falls Prevention Month to include social media guide and m Georgia's Area Agency on Aging in Falls Free Fridays organized by IPRCE/DPH Falls Prevention ingocize Demonstration augural Trauma System/ Area Agency on Aging Bingocize course in senior centers in 5 counties are participating in our Tuesday, ual offering in addition to a small group of at-home participants. Trauma Centers and Area Agencies on Aging are joining in on the g as guest "challengers" and subbing as facilitators when needed. Witional Bingocize offerings to begin in the Winter and Spring. Fon Task Force (Leads: Renee McCabe, Debbie Mekonnen) rce Meeting: October 19th; Next Meeting December 14th bers facilitated events for Child Passenger Safety Week in September.	
	entire Georgia Trauma Syste definitive care. Goals should two to four-year goals. Each GCTE Subcommittee is vice-chair, or clear plan for v work is essential to maintain The GCTE Injury Prevention They now have four specific • Falls Prevention Task • Last Task For • Updated reso information of • Participated a Coalition - Ba • Kick-ed off in September. 6 Thursday virt Participating fun by serving • Planning add • Traffic Injury Prevention	

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	 Held inaugural "Prevent Trauma" virtual event for Teen Driver Safety Week on October 21st 	
	• Prevent Trauma: The Road Ahead featured a Georgia Trauma Survivor and panelist from Teens and the Driver's Seat, Sheperd Center, and Columbia County Sherriff's Office.	
	• The event was well-received. (4.8 of 5 Stars). Recordings from the event will be posted on the <u>preventtraumageorgia.org</u> resource page.	
	• Intentional Injury Prevention Task Force (Leads: Emily Burnside; Michelle Walker)	
	• Last Task Force Meeting: September 28th; Next Meeting November 16th	
	• This task force is experiencing a reboot of sorts with prior task force leadership taking on new roles.	
	• New leadership (Emily & Michelle) was introduced to the group during our most recent full subcommittee meeting.	
	• State-wide planning for Georgia Stay SAFE will resume in January,	
	 Contemplating one or two Prevent Trauma virtual events focused on Violence Prevention. 	
	• Special Events Task Force (Leads: Kristal Smith, Danielle Johnson)	
	• Last Task Force Meeting: September 28th; Next Meeting November 16th	
	• Newly formed task force designed to provide increased agility to emerging needs	
	• Will seek opportunities to partner with other GCTE Subcommittees and Task Forces in the development of community-facing resources	
	• Will be responsible for supporting the trauma system community-facing efforts (i.e.: Day at the Capitol, Trauma Awareness Month)	
	• Also responsible for prevention and outreach efforts that are not mechanism- specific (i.e.: Stop the Bleed)	
Status: In progress	Support GTC Strategic Priorities? (Y/N): Y	
4. Registry	Registry changes were submitted to V5 for 2022 updates. Group is awaiting training on Image Trend and downloading instructions for V5 users to upload to Image Trend.	
Status: In progress	Support GTC Strategic Priorities? (Y/N): Y	
5. Pediatric	Pediatric Radiology Project: Awaiting state to look at data before a second round of data collection begins. Education blasts through GHA have gone out to encourage compliance.	
	Power Share: Group is encouraging trauma centers to set up monthly calls with Powershare to let them know of issues pushing images.	

	SIPA Project: CHOA will trial a SIPA project to determine if this is a valuable statewide project.	
Status:		Support GTC Strategic Priorities? (Y/N): Y

Questions, Issues, and Recommendations Requiring Commission Discussion:	None
Motions for Consideration at the Commission Meeting:	None
Committee Members:	GCTE Board: GCTE Board: Chair, Jesse Gibson, Vice-Chair, Tracy Johns, Past Chair, Karen Hill and GTC member, Dr. Regina Medeiros GCTE Subcommittee Chairs: Registry, Kelli Vaughn, PI, John Pope, Pediatrics, Kellie Rowker, Education, Jessica Mantooth, Injury Prevention, Kristal Smith
Chair/Commission Liaison:	Jesse Gibson/Regina Madeiros
Date of Next Committee Meeting:	November 19, 2021



Name of Subcommittee or Workgroup:	Level III/ Level IV Rural Trauma Center Workgroup Report
Project/Activity ¹	Comments
 Cost of care - defining readiness costs for LIII/LIV (including trauma center start up costs to drive grant process) 	Financial survey developed, distributed, and collected from Level 3 and Level 4 centers. Currently in validation/analysis process by Warren Averett
Status: In progress	Support GTC Strategic Priorities? (Y/N): Y
 ACS Consult Process – a. Level IV – Alternative, external consult process 	Pennsylvania Trauma Foundation is setting up dates with centers for process review, confirmation of dates by PTSF will be issued by 12/31/2021. PTF is set up for October 10-14, 2022 are site visit dates
Status: In progress	Support GTC Strategic Priorities? (Y/N): Y
3. Grants (capital equipment & rural education)	Ongoing work for course development for trauma providers in the pre- hospital and hospital setting
Status: In progress	Support GTC Strategic Priorities? (Y/N): Y
4. Access to specialty care e.g. reimplantation, ECMO	Re-engage with TMD and Administrative group on this process
Status: Open	Support GTC Strategic Priorities? (Y/N): Y
5. IRB for Rural centers	Tabled
Status: Open	Support GTC Strategic Priorities? (Y/N): Y
6. Web-based Registry & contracted abstraction services	Nothing to report
Status: Open	Support GTC Strategic Priorities? (Y/N): Y
 PI project specific to LIII/LIV: (1) Hip fx care (2) Geriatric care 	Tabled
Status: Open	Support GTC Strategic Priorities? (Y/N): Y
 8. Transfer Issues (1) EMS availability (2) Accepting facility (3) Contact number for transfer centers (4) Helicopter vs. Ground 	Resource tool complete
Status: Complete	Support GTC Strategic Priorities? (Y/N): Y

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Questions, Issues, and Recommendations Requiring Commission Discussion:			
Motions for Consideration at the Commission Meeting:	TCAA one year membership for Level 3 and Level 4 centers to provide resources for finance, operations, and networking		
	TMD	TPM	Facility
	Kelly Mayfield	Riley Benter	Advent Health Redmond Hospital
	Catherine Martin	Sharon Hogue	Atrium Health Polk Medical Center
	Alicia Register	Cassandra Bellamy	Crisp Regional Health Services
	David Kiefer	Amy Davis Watson	Effingham Hospital
	Dr. Akinyokunbo	Brooke Marsh	Emanuel Medical Center
	John Polhill	Lynn Grant	Fairview Park Hospital
	Steven Paynter	Kim Brown	Hamilton Medical Center
Committee Members:	Gregory Patterson	Kelly Vaughn	J.D. Archbold Memorial Hospital
	Kurt Hofmann	Karrie Page	Memorial Health Meadows Hospital
	Dennis Spencer	Michelle Benton	Morgan Medical Center
	John Simmons	John Pope	Piedmont Cartersville
	Richard Jacob	Karen Hust	Piedmont Walton
	Barry Renz	Darlene Sweet	Wellstar Cobb Hospital
	Arthur "Ranger" Curran	Kerry Carter	Wellstar Paulding Medical Center
	Bjorn Bernhardsen	Michelle Evans	Winn Army Community Hospital - Ft Stewart - Savannah
Chair/Commission Liaison:	Greg Patterson, MD, Chairman, Alicia Register MD, Vice Chair, & Courtney Terwilliger, Commission Liaison		
Date of Next Committee Meeting:	March 2, 2021 at Barnsley		



Name of Subcommittee or Workgroup:	Trauma Admininstrators Subcommittee Report		
Project/Activity ¹	Comments		
1. Develop Charter and Purpose for the group	Clearly define the goals, objectives and expected outcomes as they align to the needs of the GTC		
Status: In Process		Support GTC Strategic Priorities? (Y/N): Y	
2. Meeting cadence	2022 scheduling– 2 in person, 2 virtual Finance workshop in March 2022		
Status: In Process		Support GTC Strategic Priorities? (Y/N): Y	
3. Co- chair development	Co-chairs L2,3,4 decisions		
Status: TBD		Support GTC Strategic Priorities? (Y/N): Y	

Questions, Issues, and Recommendations Requiring Commission Discussion:	GTC focus and priorities
Motions for Consideration at the Commission Meeting:	None at this time
Committee Members:	Senior Leaders- each trauma center
Chair/Commission Liaison:	Michelle Wallace
Date of Next Committee Meeting:	TBD

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Name of Subcommittee or Workgroup:	Data Workgroup	
Project/Activity ¹	Comments	
 ED LOS for high yield patients 	Challenges with record reviews as ESO to Image Trend migration is in process.	
Status: In Process		Support GTC Strategic Priorities? (Y/N): Y
2. FY 2022 Data Pull Parameters	 Time to Definitive Care – Registry Data Pull Review Small sample size, still significant concerns for amount of missing data which is impacting the sample size 	
Status: Ongoing		Support GTC Strategic Priorities? (Y/N): Y
3. EMS Scene Time	Bring to GCTE PI SC for review of threshold metric and recommendation	
Status:		Support GTC Strategic Priorities? (Y/N):
4. Region 10 armband pilot project	• Armband includes number that stays with the patient throughout the system. Delayed due to supply chain issues related COVID-19. Education must be done with hospitals to ensure buy-in.	
Status:	•	Support GTC Strategic Priorities? (Y/N):

Questions, Issues, and Recommendations Requiring Commission Discussion:	None
Motions for Consideration at the Commission Meeting:	None
Committee Members:	Marie Probst, Renne Morgan, Tracy Johns, Kelli Vaughn, Courtney Terwilliger, Danlin Luo, David Newton
Chair/Commission Liaison:	Dr. James Dunn
Date of Next Committee Meeting:	January, 2022

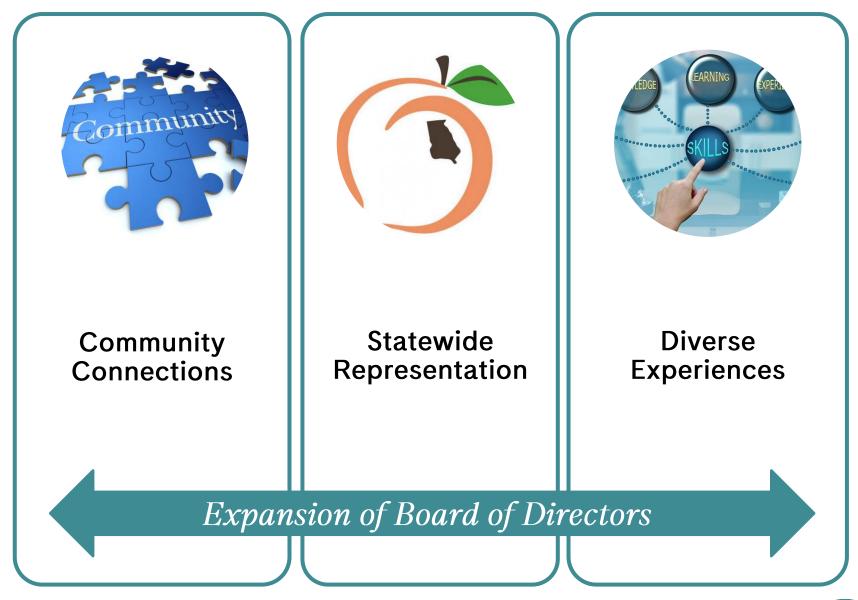
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Creating Philanthropic Solutions



Creating Philanthropic Solutions



Creating Philanthropic Solutions





Name of Subcommittee or Workgroup:	GQIP	
Project/Activity ¹	Comments	
1. AKI, TBI & Opioid Workgroups	AKI: Predictive algorithm updated. ISS predication subproject in development. Poster presentation on AKI work accepted at TQIP conference. Opioid: Initial draft of multimodal guideline completed and shared with workgroup for feedback. TBI: Investigating the feasibility of additional data asks from centers. Attempting to pull together a list of state TBI inpatient rehab resources	
Status: In Progress	Support GTC Strategic Priorities? (Y/N): Y	
 Benchmarking Platform & Data Central Site 	Security assessment with state IT still in progress. Draft contracts to AG to begin review and modification. Build process approximately 21 weeks after contract implementation.	
Status: In Progress	·	Support GTC Strategic Priorities? (Y/N): Y
3. Peer Protection & Data Use Policies	Meetings in progress with the special counsel and AG office.	
Status: In Progress	Support GTC Strategic Priorities? (Y/N): Y	
4. NSQIP Collaborative	Monthly meetings began in September. Winter meeting scheduled for January 14. Completed first sharing of individual center deciles from July SAR report.	
Status: In Progress	·	Support GTC Strategic Priorities? (Y/N): Y

Questions, Issues, and Recommendations Requiring Commission Discussion:	None
Motions for Consideration at the Commission Meeting:	None
Committee Members:	Dr. C. Dente, Dr. J. Sharma, Gina Solomon, Trauma Center Program Staff
Chair/Commission Liaison:	Gina Solomon
Date of Next Committee Meeting:	November 15, 2021, at 12:15 PM (During TQIP Conference)

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londay, 02/28/	21	
Time	Agenda	Room
12:00-2:00	GTCE Meeting	Savannah
2:00-3:00	Break	
3:00-5:00	Bullseye Activity	Farm
5:00-6:00	Break	
6:00-8:00	Meet and Greet	Beer Garden
uesday, 03/01/	/21	
Time	Agenda	Room
7:30-8:00	Breakfast and Exhibit Hall Open	Veranda
8:00-10:30	Administrator's Group Finance Workshop	Savannah
10:30-11:00	Break and Exhibit Hall Open	Hall
11:00-12:30	Opening Session	
	Georgia Trauma System: Where are We Now and What's	Savannah
	on the Horizon?	
12:30-1:30	Lunch and Exhibit Hall Open	Veranda
1:30-2:30	GQIP Meeting	Savannah Room
2:30-3:30	AKI Workgroup	Savannah
	TBI Workgroup	Savannah
	Opioid Workgroup	Savannah
	Administrator's Subcommittee	Dalton I
	Rural Subcommittee	Dalton II
3:30-5:00	Network and Exhibit Hall Open	Hall
5:00-7:00	Dinner Reception	Savannah
Vednesday, 03/	/02/21	
Time	Agenda	Room
8:00-9:00	Breakfast	Veranda
9:00-12:00	Commission Meeting	Savannah
12:00	Conclusion of Winter Meeting	
12:00-1:00	Private Lunch	Dalton I

Georgia Office of EMS and Trauma Report to Trauma Commission – November 18, 2021

	Trauma Program
Significant Events (Previous or Upcoming):	 WellStar Paulding was designated as a new Level IV Trauma Center (Region 1) Piedmont Cartersville (Region 1) was Verified by the ACS as a Level III Trauma Center. They are our first ACS Verified Level III. Emanuel Medical Center (Region 6) was Re-designated as a Level IV trauma Center. Participated in virtual ACS consult visit for Eisenhower Army Hospital (Ft. Gordon, Augusta).
Successes for the Entity/Program/Region:	 Two facilities in Region 4 have reached their registry requirement and are now completing their application. No date set for site visit till application is accepted. Continue to prepare for web-based trauma registry that will be of no cost to users. Two facilities that were selected as pilots are doing well.
Challenges for the Entity/Program/Region:	 Scheduling of site visits continue to be a challenge. ED Physicians, trauma surgeons and trauma coordinators are needed for site reviewers. Need to be from a designated/verified Trauma Center. If interested contact Renee Morgan <u>renee.morgan@dph.ga.gov</u> Bed and staffing issues continue due to COVID.
Name of Person Submitting Report:	Renee Morgan, Trauma Program Director



Quarter: 2

Date: 11/15/2021

EMS Region	
RTAC Chair	John Pope
RTAC Coordinator	Scott Lewis

Date last BIS Assessment completed: January 2017 Date last Trauma Plan completed: November 2015

Projects:

Start Date	Status (Date if Completed)	Description and Report
Ongoing since 2017	Continuous with no end date	Hospital's capabilities document (BIS 207.2) Is up-to-date
January 13 th , 2022	Scheduled	BIS Re-Assessment is scheduled
Ongoing till finished	Limited movement	Stop the Bleed The Cherokee county school Buses is around 50% complete.
July 6 ^{th,} 2021	Continuous	Pediatric Injury data project
Ongoing since 2017	Continuous	Adult Trauma Registry Data
October 21 st , 2021	Ongoing till finished	Deep dive into the Stop the bleed numbers to fill in data that is missing from the spreadsheet.
October 21 st , 2021	Complete	Report for Dr. Ashley on the current state of the Stop the Bleed Programs.

Regional Summary:

Region 1 has now had its second in-person meeting and several projects are continuing.

- The BIS Assessment was rescheduled due to conflicts in scheduling.
- New Region 1 Director has been named
- Last meeting was cancelled due to issues with Covid and schedules.
- Next meeting is January 27th, 2022



Name of Subcommittee or Workgroup:	Region 2 RTAC	
Project/Activity ¹	Comments	
 Pre-hosptial Blood Pilot Project 	The pre-hospital blood pilot project is going well with approximately 61 initiations of product. One of the four participating services (Jackson County) has received a second cooler and setup and now carries one unit of whole blood with one liquid plasma in one cooler and two liquid plasmas in the other cooler. The pilot project group continues to work with GEMSMDAC and the Drugs and Devices subcommittee to determine next steps. We are awaiting direction from that team at this point.	
Status: In progress		Support GTC Strategic Priorities? (Y/N): Y
2. Annual Trauma Symposium	The 6 th annual Northeast Georgia Trauma Symposium was held on October 29, 2021. The event was hybrid, with 300 in-person attendees and over 200 virtual attendees. The event was a huge success targeting all audiences across the trauma continuum including pre-hospital, nursing and physicians.	
Status: Complete		Support GTC Strategic Priorities? (Y/N): Y
 Pre-hospital Ultrasound Project 	The pre-hospital ultrasound project is in its infancy. The RTAC purchased 13 Butterfly IQ handheld ultrasound devices. Agencies in the region are actively completing the application process to be selected for the project. Once selections are made, training will begin. The program is being implemented to assist with decision making regarding needle decompression and also to assist with location of insertion, if indicated.	
Status: In Progress		Support GTC Strategic Priorities? (Y/N): Y
4.		
Status:		Support GTC Strategic Priorities? (Y/N):

Questions, Issues, and Recommendations Requiring Commission Discussion:	None
Motions for Consideration at the Commission Meeting:	None

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Committee Members:	Chair: Chad Black, Vice-Chair: Jesse Gibson, Treasurer/Secretary: Lisa Farmer
Chair/Commission Liaison:	Chair: Chad Black, Commission Liaison: Liz Atkins
Date of Next Committee Meeting:	January 22, 2022

1

Date: 11/15/2021

EMS Region	3
RTAC Chair	Elizabeth R. Benjamin MD PhD
RTAC Coordinator	Mark Peters

Date last BIS Assessment completed: 01/2016 Date last Trauma Plan completed: 08/2016

Projects:

Start Date	Status (Date if Completed)	Description and Report
07/01/2017	In progress	Stop the Bleed Training
09/30/2020	02/08/2021	Executive Board Elections

Regional Summary:

The Region 3 RTAC Executive Board

- Chair Elizabeth R. Benjamin MD PhD
 Trauma Medical Director, Grady Memorial Hospital
- Vice Chair Alexis Smith MD Trauma Medical Director, Children's Healthcare of Atlanta-Scottish Rite
- Secretary Erin Moorcones RN
- Trauma Educator, Grady Memorial Hospital

The RTAC is working with a new executive board to establish the needs of the Region i.e., educational opportunities, process improvement, and/or regional guidelines.

We are exploring the creation of a page on the Trauma Commission's new website for the RTAC to post the activities of the region. Also looking at creating a Bimonthly newsletter to send information on the activities in Region 3.

The RTAC is creating education on "EMS Timeout" for distribution in the Region. EMS Timeout is a process that allows for 30 seconds of silence during EMS patient transfer in the ED to ensure accurate delivery of information..

Delivered Stop the Bleed kits to Fulton County Schools



Quarterly: July, August, September 2021

Date: 10-19-2021

EMS Region	4
RTAC Chair	James (Sam) Polk
RTAC Coordinator	Stephanie Jordan

Date last BIS Assessment completed: Complete, awaiting review and approval Date last Trauma Plan completed: 1/2018, preliminary revision in progress.

Projects:

State Date	Status (Date if Completed)	Description and Report
06/2020	In progress	PI: Response to trauma and outcomes

Stop The Bleed:

Persons Trained	Schools Completed	Hospitals Completed	Counties Completed	Counties with Buses
				Completed
4896	154	Piedmont Henry	Butts	Butts
(updated 10/18/21)	(updated 10/19/21,	Piedmont Fayette	Carroll	Carroll
	Northgate High School)	Piedmont Newnan	Carrollton City	Carrollton City
		Tanner Carrollton	Coweta	Coweta
		Tanner Villa Rica	Fayette	Fayette
		Upson Regional Medical Center	Heard	Heard
		Warm Springs Medical Center	Henry	Henry
		Wellstar Spalding	Lamar	Lamar
		Wellstar Sylvan Grove	Meriwether	Meriwether
		Wellstar West Georgia	Pike	Pike
			Spalding	Spalding
			Troup	Troup
			Upson	Upson

- 1. Assisted Northgate High School (Coweta County) with student Health Connections classes. Trained 177 High School students on Stop the Bleed.
- 2. Additional High Schools in Coweta County are also working STB into their Health Connections planning.
- 3. All other Region 4 County High Schools will incorporate STB into their curriculum, before the end of the 2021-2022 school year.
- 4. BIS Assessment awaiting review by Region 4 RTAC Committee and Region 4 EMS Council.
- 5. Process Improvement Project. Determining trauma patient transport time/delay/transfer to trauma centers. It is difficult to get data from 911 providers. In progress.

Upcoming Activities -

- 1. Update Region 4 Trauma Plan, after BIS approval.
- 2. Preliminary Regional Trauma Plan revision, in anticipation of BIS approval.
- 3. Reintroduce in-person Committee Meetings. Dependent on COVID
- 4. Define training needs for 911 Zone Providers, to improve trauma care in Region 4. Coordinate training (through GEMSA, etc). Ongoing.
- 5. Continued assistance to Wellstar West Georgia, Wellstar Spalding, and Piedmont Henry, for their Designated Trauma Center status (new DTC) Ongoing

Date: 11/04/21

Quarter: FY 22, Q1

EMS Region	5
RTAC Chair	Todd Dixon
RTAC Coordinator	Kristal Smith

Date last BIS Assessment completed: 2011 Date last Trauma Plan completed: 2016

Projects:			
Start Date	Status (Date if Completed)	Description and Report	
Dec 2016	Ongoing	Stop the Bleed programming continues for all audiences. Ie: Schools, Churches, Law Enforcement, Universities, Community Groups, etc. Save-A-Life Sunday is slated for Sunday, November 7th.	
Jan 2019	Ongoing	RTAC PI committee is working with Regional EMS for Children and Education Committee to plan a hybrid in-person/virtual Jan. 2022 Pediatric Trauma Symposium.	
June 2020	Ongoing		
August 2020	Ongoing	R5TRAUMA Virtual Classroom continues to host regional and state-wide injury prevention and outreach programs. Offerings to date include: Stop the Bleed, Safe@Home, Bingocize, and The Road Ahead.	

Regional Summary:

Region 5 RTAC continues to work to support local, regional, and state trauma prevention, outreach, education, and performance improvement initiatives. The RTAC Executive committee is working to update the regional trauma plan.

Coming Meetings/Important Dates:

R5 Trauma Education Committee and R5 RTAC Instructor Workshop – 11/5 R5 RTAC Injury Prevention Subcommittee and R5 EMS for Children Mtg – 11/5 Stop the Bleed: Save-A-Life Sunday – 11/7 R5 Pediatric Trauma Symposium Planning Mtg – 11/19 R5 Ride Safe Central Georgia Campaign (ATV & Bike Safety) – 11/22 through 12/25 R5 RTAC Performance Improvement Subcommittee – 12/4 R5 Pediatric Trauma Symposium – 1/21 through 1/28 GTCNC/GEMSA Trauma Skills Lab – 2/25



Quarter: 1st

Date: 10/21/2021

EMS Region	Region 6
RTAC Chair	Nicky Drake
RTAC Coordinator	Farrah Parker

Date last BIS Assessment completed: Completed will need to be reviewed by RTAC committee during Feburary $4^{\rm th}$ Meeting.

Date last Trauma Plan completed:

Projects:

Start Date	Status (Date if Completed)	Description and Report	
09/01	Class scheduled for 12/13/2021	Stop the bleed training at Fort Gordon. Working with Artemio Bayna to coordinate training for his organization. Class will be 10-15 people with additional classes in the future.	
08/01	In Progress	Working with RTAC Chairman Nicky Drake and John Graham on RTAC membership. During August meeting it was decided that we would like to open membership to additional people and notify those listed as committee members who have not been active in the last 4 meetings. Nicky Drake to notify members in writing. Membership will be discussed in the January meeting.	
08/01	In Progress	Schedule remaining TECC classes for Region 6. Classes to be held in Burke, Columbia and Richmond Counties. Jamarius Tate to help with coordinating class for Columbia County. Would like classes completed by March 1, 2022. McDuffie County open to having class held at Armory in Thomson, Ga.	
08/01	Completed	Tourniquets to be distributed to 10 hospitals in Region 6. Work with Scott in Region 1 to discuss number of tourniquets needed and provide information for shipping.	
08/01	In Progress	Work Group for 2022 Symposium established. Volunteers from both Trauma Hospitals in region to help with coordination.	
07/01	Completed	Participation in Region 5 STB Blitz	
07/01	In Progress	Region 6 to reach out to local grocery store chain to do some community Stop the Bleed training. With 3 national headlines of mass shooting in local groceries stores would like to do some education for employees. In	



		the event of a shooting emplyoees will be able to provide stop the bleed measures until first responders can enter the building.
05/01	In Progress	Request for Regional equipment for training. RTAC Committee would like to purchase and make moulage kits for the regions. Each agency (17) will receive a kit for first responder and community training. Quote in progress for supplies. Once quote has been approved. Committee will work with AU to provide moulage training classes for individuals interest. Will provide educational credits as well. Lisa Smith and Micahel Willis will work together for class instruction. **Update** List of needed supplies received and cost of complete kits for order. Will vote during February meeting in 2022.

Current Needs:

Region 6 currently has no immediate needs.

Regional Summary:

Region 6 RTAC and Chairman is working with EMS Council to open RTAC membership. Chairman Nicky Drake would like to open membership to those who want to participate and attend meetings regularly. This will all us to continue our educational efforts aross our 13 counties. We will continue to participate with Region 6 subcommittees with ongoing projects. The committee continues to work with local EMS agencies and hospitals to improve trauma care in the region.



Quarter: 1st Quarter FY2022

Date: October 20, 2021

EMS Region	7
RTAC Chair	Duane Montgomery
RTAC Coordinator	Brian Dorriety

Date last BIS Assessment completed: March 2020

Date last Trauma Plan completed: October 18, 2021

Projects:

Start Date	Status (Date if Completed)	Description and Report
9-19-19	October 1, 2021	Region 7 is 100% completed with STB training. Will continue to train new staff members. We had a few that participated in the Stop the Bleed Blitz.
06-01-21	In Progress	Working with Cure Violence through Safe Kids of Columbus on Violence prevention in Region 7. GSW's are up.
01-01-21	In Progress	Trauma Data Collection is completed through September 2021.
05-01-21	09-01-21	Fall Prevention pamphlets and posters for hospital and EMS Agencies

Current Needs:

Trauma Equipment Funds are being requested by Region 7 EMS Directors. Still need 50 Stop the Bleed Kits and 25 Trainer Kits.

Regional Summary:

- 01. Last RTAC meeting on July 20, 2021. Our next meeting is October 27, 2021 via Zoom.
- 02. TNCC Course was completed August 6-7. We had 12 graduates from the course.
- 03. RTAC Plan was revised on October 18, 2021 with several phone numbers and new directors and managers changes on page 12, 26, 27, 31 and 32.
- 04. Delivered Poly Folding Scoop Stretchers, Traction Splints, Tourniquets, and Pelvic Binders to all EMS agencies in Region 7 last month.
- 05. Delivered 16 car seats to Piedmont Pediatric Trauma Center last month.
- 06. Through our Injury Prevention Team, we were able to place "Fall Prevention" pamphlets out to all EMS Agencies, and larger poster size in the hospitals.



Quarter:	2	Date: 11/1/2021
Region: 8 Ch	nair: 8- David Edwards RTAC Co	oordinator: Stephanie Gendron
Date last BIS	Assessment completed: Januar	y 2018
Date last Trau	uma Plan completed: January 2	018
		Projects:
Start Date	Status (Date if Completed)	Description and Report
5/2018	Transportation STB-	Region 8 began entering school systems again
	Complete 7/29/19 8-Halted	slowly due to delays with COVID. We plan to
		host a STB virtual Blitz as drivers return in
		January.
7/2021	EMS workforce study	Workforce study
2/2020	EMS Data Sharing	Sharing LOS, Overtriage, Mortality, Time on
		scene, PCR completion % with EMS Council;
1/2020	Farm Medic Class	Classes filling fast
6/2021	Car Seat Education	September 2021 Child Passenger Safety Week
	Cur	rent Needs:

- Additional STB Training materials

Regional Summary:

Region 8 has made progress with Stop the Bleed in the school systems and transportation agencies. The plan to resume training with the beginning of the school year in August of 2021 unfortunately was slowed down due to the COVID surge. The region plans to conduct a virtual blitz so that we can establish a baseline of training for the staff members who have not yet had any exposure to the program, so that we can get the kits in place and then follow up with in-person training when the schools are allowing more visitors.

The Farm Medic classes conducted in conjunction with GEMSA have been immensely successful and have filled up fast. Tift County hosted a Tactical Emergency Casualty Care (TECC) class on November 13th-14th.

The biggest need in the region is for additional Stop the Bleed training materials- as many of the training sets, including limbs, went unaccounted for when there was not an official RTAC coordinator. With the high levels of turnover, many the training sets are still missing.

Region 8 has also identified a need for a similar educational opprortunity that Region 2 holds for their region. The region is very rural and many of the EMS agencies that are staffing the 911 services are unable to send staff overnight for training. This is an opportunity where a regional training grant may be utilized in the future.



Quarter:	2	2 Date: 11/1/2021		
Region: 9 Chair: 9-Dr. Gage; RTAC Coordinator: Stephanie Gendron				
Date last BIS Assessment completed: January 2019				
Date last Trauma Plan completed: In progress- awaiting final approval of EMS council bylaws				
Projects:				
Start Date	Status (Date if Completed)	Description and Report		
7/2017	Complete- 8/13/2018; Re- training school systems	Increasing number of school systems requesting refresher training		
9/2021	Pedestrian vs. MVC Injury	Working with National DOT on revamped data		

Analysis

Workforce study

plan

EMS council DART subcommittee needs completion

1/2020	Farm Medic Class 8 & 9 Continuing classes regionally				
7/2021	Construction Zone Research	Collecting crash, EMS and registry data			
8/2021	ATV Injury Prevention	Region 9 Injury Prevention project with Memorial Health			
10/2021	EMS Data Application	Creating EMS Training to move EMS data to community health and injury prevention programs			
09/2021	Teen Driving	Lutzie 43 Foundation injury prevention			
	Current Needs:				

- DART Completion and Distribution plan from EMS council Over one year and the program is still not in effect.
- Additional STB Training materials

Prevention Research-

EMS workforce study

DART Program

12/2018

7/2021

Regional Summary:

Region 9 is still holding the DART equipment at Jekyll Island Fire Rescue. The subcommittee must identify remaining fiscal needs and establish a plan to complete the project and implement the program as the first round of funding received was well over four years ago.

Region 9 has been working with DOT on multiple injury prevention programs including the pedestrian project and a new construction zone injury and fatality project. The committee is now pulling EMS, trauma center, Emergency Department, Fire Department and Police data to identify a more holistic view of the issues.

Region 9 is collecting information regarding the workforce of the EMS community including educational background, attrition and multi-agency employment status. The Survey has been created and the committee is working with Wiregrass to collect data in phases.

The Injury Prevention subcommittee is working with the Lutzie 43 Foundation to create a formal teen driving injury prevention program. The organization has secured funding through the Georgia office of highway safety and must identify markers to measure outcomes to assist with project longevity.

The mass casualty drill for Region J will take place in January 2022.

Quarter: <u>2</u>

Date: <u>October 19, 2021</u>

EMS Region	Region 10
RTAC Chair	Dr. Kurt Horst
RTAC Coordinator	Crystal Shelnutt

Date last BIS Assessment completed: 10/31/2016 Date last Trauma Plan completed: 12/18/2018

Projects:

Start Date	Status (Date if	Description and Report
	Completed)	
1/2/2018	Completed	Stop the Bleed
		 All schools have completed the training.
7/2018	In Progress	BUS Driver STB
		 City of Jefferson school bus drivers are outstanding for
		completing STB training.
10/2021	Scheduled	Elbert Memorial Requested Additional Training for Staff in STB
		• Training is scheduled for November 9 th for 20-30 EMH staff
2021	Scheduled	Region 10 Skills Lab
		• A date has been scheduled with GEMSA for Piedmont Athens
		Regional to host a skills lab in June of 2022.
2021	In Progress	Pilot Project
		 Region 10 has been approved to join the Region 2 Pilot
		Project. All materials have been purchased and received. The
		coolers and thermostats are with the PAR blood bank for
		temperature validation.

Summary:

Region 10 has seen improvement in participation as everyone readjusts from the pandemic. Our last meeting was very well attended and we had many express interest in hosting classes, participating in the pilot project, etc. PAR has been excellent in their role in the Blood Products Pilot Project! Heather Morgan has been a great advocate as has the new director of the blood bank. We are anxious to begin this initial phase of the project and anticipate we will have more requests to expand the project in 2022.