## Georgia Trauma Program

## **OEMST** and GQIP Collaboration

Georgia Committee for Trauma Excellence and Georgia Trauma Commission Meetings

David Newton, Director of Health Protection, OEMST Director/

Michael Johnson, Deputy Director for Systems of Care /

Renee Morgan, Trauma Program Director/ Marie Probst, State Trauma Registrar /

Danlin Luo, PhD., Trauma Epidemiologist / Gina Solomon, GTCNC Director of GQIP

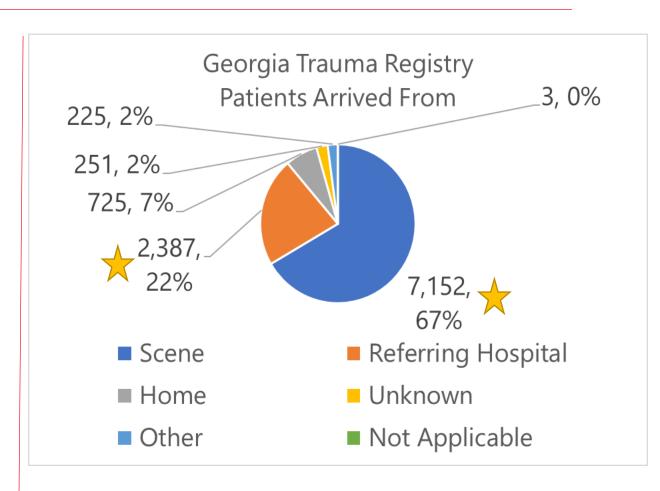
February 28, 2022 and March 2, 2022

# Time to Definitive Care Study

## Trauma Patients Arrived From Data

### Georgia Trauma Registry, Apr-Jun 2021

- o 67% of cases Arrived From 'Scene'.
  - 76%, 5,451: 7,152 cases contain all variables needed to calculate the time to definitive care using the Scene to Hospital arrival dates and times
- 22% of cases Arrived From 'Referring Hospital'.
  - 16%, 374: 2,387 cases contain all variables needed to calculate the time to definitive care using the Scene to Referring Hospital to Final Hospital arrival dates and times



## Scene to Hospital Arrival – Non-transfer

#### Georgia Trauma Registry, Apr-Jun 2021

**Median Time:** 0:55 (H:M) for all level centers

**Data Completion Rate:**  $5,451/7,152 = \frac{76.2\%}{1}$ 

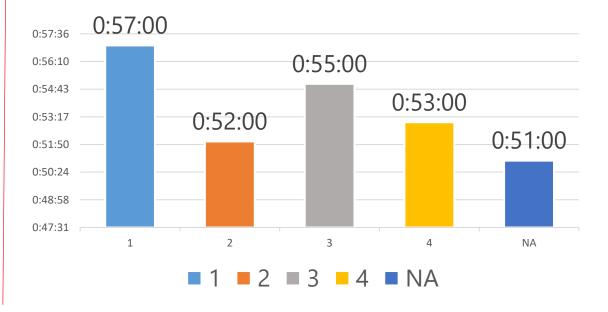
### Missing registry data in one or more fields:

- EMS Provider Role = Transport from Scene to Facility
- EMS Report Dates and Times
- Hospital ED Arrival Date and Time

#### **Data Collection Solutions:**

- Use the Hospital HUB to find missing EMS report
- Hospitals report missing EMS PCRs to RTAC
- Hospital QA and PI cases to evaluate timely transport to the appropriate facility.

Georgia Trauma Registry
EMS Dispatch Time to Hospital Arrival
for Non-Transfers
Median Time by Designation Level
(H:MM:SS) April - June 2021



## Scene to Referring Hospital to Final Hospital Arrival

### **Georgia Trauma Registry Apr – Jun 2021**

**Median Time:** 5:51(H:M) for all level centers

**Data Completion Rate:** 374/2,387 = 16%

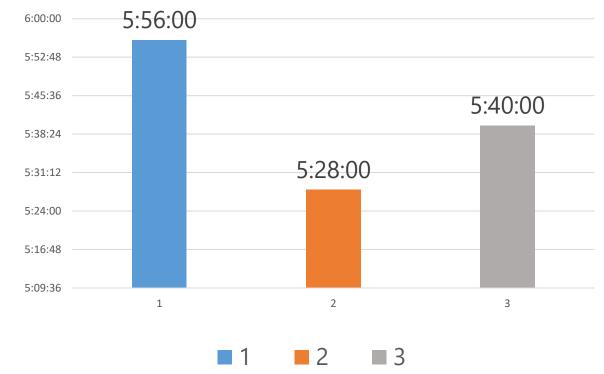
### Missing registry data in one or more fields:

- EMS Provider Role = Transport from Scene to Facility
- Initial EMS Report Dates and Times
- Referring Hospital (RH) ID, RH Arrival and Discharge Dates and Times
- Final Hospital ED Arrival Date and Time

#### **Data Collection Solutions:**

- OEMST require Referring Hospital data elements
- Referring hospitals and receiving hospitals share HUB access, medical records, and EMS reports
- Both facilities QA and PI transfer Out and In cases
- Use the Hospital HUB to find missing EMS report
- Hospitals report missing EMS PCRs to RTAC

Georgia Trauma Registry
EMS Dispatch to
Final Destination Hospital Arrival
Median Time by Designation Level (H:MM:SS)
April - June 2021



## Questions

#### **David Newton**

Director of Health Protection and Director of OEMST

david.newton@dph.ga.gov

#### **Michael Johnson**

Deputy Director for Systems of Care, OEMST <a href="michael.johnson@dph.ga.gov">michael.johnson@dph.ga.gov</a>

### **Renee Morgan**

Director, Georgia Trauma Program, OEMST (404)569-3119

renee.morgan@dph.ga.gov

#### **Marie Probst**

State Trauma Registrar, OEMST (404)291-3130 marie.probst@dph.ga.gov

#### Danlin Luo, Ph.D.

Trauma Epidemiologist, DPH Epidemiology (404)463-4060 <a href="mailto:danlin.luo@dph.ga.gov">danlin.luo@dph.ga.gov</a>

#### **Gina Solomon**

Georgia Trauma Commission Director of Georgia Quality Improvement Program (762)887-1849

gina@gtcnc.org