

APPROVED
04.11.25



GEORGIA TRAUMA COMMISSION

Trauma System Performance (Data) Committee

Meeting Minutes

January 9, 2025

3:00 PM – 4:00 PM

Zoom Meeting

[Link to Meeting Documents](#)

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

COMMISSION MEMBERS PRESENT	STAFF MEMBERS & OTHERS PRESENT
Dr. James Dunne, GTC Vice-Chair Dr. Regina Medeiros, GTC Secretary/Treasurer	Elizabeth V. Atkins, GTC, Executive Director Gabriela Saye, GTC, Business Operations Manager Gina Solomon, GTC, GQIP Director Dr. Janani Thapa, UGA, Associate Professor Dr. Eileen Bulger, University of Washington, Professor and Chief of the Division of Trauma, Burns, and Critical Care Dr. Michelle Price, Coalition for National Trauma Research, Executive Director Brett Buehner, Piedmont Augusta, TPM

CALL TO ORDER

The meeting was called to order at 3:00 PM with nine committee members present.

ACCESS TO TRAUMA CARE- AN ANALYSIS OF THE GEORGIA TRAUMA SYSTEM

Presented by Dr. Eileen Bulger

Dr. Dunne introduced Dr. Bulger, a renowned leader in trauma research from Seattle. Elizabeth Atkins emphasized that Dr. Bulger would present the findings of a comprehensive accessibility study, with significant contributions from Nick Medrano and Dr. Michelle Price from the Coalition for National Trauma Research (CNTR). The study aimed to evaluate EMS coverage across Georgia, focusing on gaps in trauma center accessibility, particularly within the critical “golden hour” after an injury.

Dr. Bulger reviewed the study’s four milestones and mapping (**ATTACHMENT A**), including the Georgia trauma system network mapping build, population access to care, accessibility maps, and identification of optimal trauma center upgrades.

Key discussions included:



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- The maps visualize access to trauma centers by level and transport type (ground vs. air). The maps highlight rural areas lacking coverage, particularly in southern Georgia.
- The study accounted for EMS and trauma resources outside Georgia, ensuring an accurate regional analysis. However, Dr. Bulger noted the need for further stakeholder input to refine the model and explore additional applications.
- The Committee discussed leveraging the data for strategic planning, including trauma center upgrades or establishing new EMS bases. For example, upgrading one hospital to a Level II could benefit 27,000 additional patients, while adding Level III and IV facilities could address coverage gaps in rural areas. Participants discussed the feasibility of updates, noting challenges such as insufficient patient volumes and the availability of specialized staff in rural areas. Rural areas also face longer response times due to fewer EMS agencies.
- The Georgia hospital discharge data was highlighted as a resource for estimating injury volumes, though its limitations were acknowledged.
- The benefits of air transport, despite longer activation times, were discussed. Air resources bring advanced care to rural scenes, offsetting delays and improving outcomes.
- Potential comparisons with neighboring states were suggested for benchmarking and insights. Nick Medrano had conducted a prior study examining trauma systems in four states. Dr. Bulger and Elizabeth Atkins highlighted Alabama as a potential comparison to Georgia's current system.

The presentation closed with a discussion of the value of GIS-based tools for modeling trauma system scenarios. The tool allows simulations, such as relocating air medical bases or altering hospital levels, to assess potential impacts before implementing changes. Elizabeth Atkins stressed the importance of keeping the GIS tool current, citing the recent loss of a Level IV trauma center. Michelle Price proposed a retainer with the Georgia Trauma Commission for ongoing updates. Elizabeth Atkins and Michelle Price will discuss retainer costs offline. Elizabeth Atkins proposed Dr. Dunne bring the retainer request forward to the full Commission for approval.

UGA TRAUMA UTILIZATION PATTERN, HEALTHCARE UTILIZATION, AND OUTCOMES RESEARCH

Presented by Dr. Janani Thapa

Dr. Thapa provided an update on the study:

- Collaboration with Elizabeth Atkins and Dr. Elizabeth Benjamin is ongoing, with weekly meetings to refine and analyze results.
- Efforts are underway to present the findings in a digestible format for the Committee, with plans to further review before presentation.

The importance of leveraging UGA's study to gain insight into the frequency and rationale behind patient transfers to other trauma centers was highlighted. A historical reference to Dr. Ashley's study on trauma center access and mortality was mentioned, emphasizing the need for updated research on system-wide data.

TRAUMA REGISTRY DATA REPORT: UPDATE ON IMAGE TREND MIGRATION STATUS

Presented by Marie Probst

ImageTrend provided the 2025 Georgia schema file to ESO on December 17th. The Georgia schema file includes 18 additional fields to be downloaded to OEMST. We are waiting for ESO to finalize the file and send it back to OEMST and GQIP for approval. Once approved, ESO will prepare the 2025 Georgia schema file to send to the ESO users for installation.



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Meeting Minutes Addendum (Additional Context): Per ESO, the last phase of the annual update, including distribution to ESO users, could take 90-180 days

Marie expressed confidence in the process due to prior experience but acknowledged potential unknowns with the expanded schema.

There was a discussion about whether the data migration updates should remain a standing agenda item in quarterly meetings. The Committee retained it as a recurring topic to ensure consistent communication and promptly address potential issues.

APPROVAL OF MINUTES

Presented by Dr. James Dunne

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

MOTION TRAUMA SYSTEM PERFORMANCE COMMITTEE 2025-01-01:
Motion to approve October 23, 2024, meeting minutes as submitted

MOTION BY: Tracy Johns

SECOND BY: Dr. James Dunne

VOTING: All members are in favor of the motion.

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

TIME TO DEFINITIVE CARE | NAVICENT AND MEMORIAL PROJECT

Presented by Dr. Dunne

Dr. Dunne discussed the progress of the two-center trauma study. Data analysis is ongoing, and an abstract will be submitted to AAST by mid-February. The team has discussed extending the study using the statewide trauma registry, potentially increasing the sample size by four or five times.

Tracy Johns highlighted ongoing issues with missing or inaccurate EMS trip sheets but noted that new registry improvements would ease the process.

Dr. Dunne proposed a workgroup, including Gina, Lina, and Tracy, to focus on data collection and feasibility for statewide expansion.

CLOSING REMARKS

Presented by Dr. Dunne

Dr. Dunne advised that the trauma system dashboard would be operational soon under Elizabeth Atkins' guidance. He thanked attendees for their contributions and affirmed the importance of collaboration in addressing trauma system challenges.

SUMMARY OF MEETING & ADJOURNMENT

- Dr. Bulger reviewed the Access to Trauma Care: An Analysis of the Georgia Trauma System study (**ATTACHMENT A**). The geospatial analysis provides valuable insights into trauma system coverage gaps and potential improvements. Elizabeth Atkins stressed the importance of keeping the GIS tool current, citing the recent loss of a Level IV trauma center. Michelle Price proposed a retainer with the Georgia Trauma



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Commission for ongoing updates. Elizabeth Atkins and Michelle Price will discuss retainer costs offline. Elizabeth Atkins proposed Dr. Dunne bring the retainer request forward to the full Commission for approval.

- The ongoing UGA study examining transfer patterns and trauma center utilization is nearing completion.
- The Navicent and Memorial time-to-definitive-care study is progressing, with plans to expand statewide after an initial two-center analysis. Dr. Dunne proposed a workgroup, including Gina, Lina, and Tracy, to focus on data collection and feasibility for statewide expansion.
- The annual EMS data schema update is underway, with 18 new data elements added for 2025.

The meeting adjourned at 3:55 PM.

Minutes Respectfully Submitted by Gabriela Saye