

APPROVED
04.15.24



GEORGIA TRAUMA COMMISSION

Trauma System Performance (Data) Committee

Meeting Minutes

January 26, 2024

1:00 PM – 2:00 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 Gina Soloman, GQIP Tracy Johns, GCTE Kelli Vaughn, GCTE Courtney Terwilliger, GTC Dr. Regina Medeiros, GTC	April Moss, OEMST Jim Adkins, GTC

COMMISSION MEMBERS PRESENT	STAFF MEMBERS & OTHERS PRESENT
Dr. James Dunne, GTC Vice-Chair Dr. Regina Medeiros, GTC Secretary/Treasurer Courtney Terwilliger, GTC Member	Elizabeth V. Atkins, GTC, Executive Director Gabriela Saye, GTC, Business Operations Manager Gina Solomon, GTC, GQIP Director Dr. Janani Thapa, UGA College of Public Health, Associate Professor

CALL TO ORDER

The meeting was called to order at 1:00 PM with nine committee members present.

APPROVAL OF OCTOBER 19, 2023 MEETING MINUTES

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

**[MOTION TRAUMA SYSTEM PERFORMANCE COMMITTEE 2024-01-01:
Motion to approve October 19, 2023 meeting minutes as submitted](#)**

MOTION BY: Courtney Terwilliger

SECOND BY: James Dunne

VOTING: All members are in favor of the motion.

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

EILEEN BULGER PROJECT UPDATE

Presented by Liz Atkins and Courtney Terwilliger

The project faces challenges in mapping ambulance station locations and understanding the disparities in EMS resource definitions across different regions. Courtney Terwilliger added that the definition of ambulance stations has caused some confusion and issues with the data accuracy. The GTC EMS Committee representatives have been tasked to review their region's data. Courtney raised the idea of standardizing definitions for better accuracy.



ARMBAND PROJECT UPDATE

Presented by Kelly Joiner

Kellie Joiner provided the recent data to date for the Armband Project:

- 225 armbands have been applied:
 - 5 had incorrect applications
 - 220 were trauma patients
 - 2 were interfacility transfers

Northeast Georgia Medical Center has encountered issues with its data importing into Imagetrend. The center will meet with ESO technical support on January 30th to address the data mapping issues.

Dr. Dunne inquired about potential alternative reporting methods, and Marie Probst emphasized the importance of using the armband numbers for accurate linkages.

The committee discussed the types of reports to be generated once all the data is available. The need to understand if patients initially went to the right hospital and the importance of linkage for determining initial times were highlighted.

Courtney Terwilliger asked if the two interfacility transfers were the same patients noted during the October meeting. Kelly Joiner confirmed they were the same patients.

Dr. Dunne expressed gratitude for the update and asked to defer Armband Project updates until the project is completed and a final report is available.

TRAUMA REGISTRY DATA REPORT: UPDATE ON IMAGE TREND MIGRATION STATUS

Presented by Marie Probst

We have received data from 29 centers, with 3 using direct data entry and 26 using ESO import. The SDL file has worked from most centers; four centers have encountered issues.

Marie Probst confirmed that centers receive an SDL file annually for data download. The previous year was particularly challenging and delayed due to ACS changes.

Our trauma epidemiologist, Dr. Luo, has prepared the 2019 – 2021 reports, which are available for review and can be accessed on the DPH website: <https://dph.georgia.gov/trauma>. The 2022 report is pending approval from DPH Communications, and the 2023 report will be prepared once the data is available in March.

TIME TO DEFINITIVE CARE-NAVICENT AND MEMORIAL PROJECT

Presented by Dr. Dunne and Tracy Johns

Tracy Johns shared there was a stall on the project due to data use agreements and legal reviews, with the latest version sent to HCA. After reviewing some of Navicent's data, Tracy found that many patients were missing EMS data and is working with Kelly Joiner to find the PCRs.

Tracy presented some of Navicent's preliminary data on time-to-care metrics and discussed plans to delve into the data for further analysis. The discussion transitioned to the ArborMetrix tool, which is promising for additional data analysis. Dr. Dunne acknowledged the efforts and progress, indicating a need to set a cutoff point for the study to analyze the available data.



UGA TRAUMA UTILIZATION PATTERN, HEALTHCARE UTILIZATION, AND OUTCOMES RESEARCH

Presented by Dr. Janani Thapa

Dr. Janani Thapa provided an update on the Trauma Utilization Pattern Project (**ATTACHMENT A**). The project involves utilizing inpatient data to study patient transfers and the number of stops a patient makes before reaching definitive care. There is a lack of hospital details, such as hospital type and trauma center status, in the current dataset, and efforts are underway to collaborate directly with the Georgia Hospital Association for more comprehensive information.

Dr. Thapa reviewed the process of reviewing trauma patients based on ICD-10 codes from the state inpatient and emergency department datasets. There is a need for additional datasets, including EMS data and trauma registry data, to enhance analysis and identify transfer times. Liz Atkins mentioned the Georgia Trauma Commission is reviewing legal considerations associated with data sharing.

Dr. Thapa explained this is the first cut of the analysis, and the numbers are not final as they continue to refine the steps. Committee members expressed optimism about obtaining valuable insights from the study.

SUMMARY OF ACTION ITEMS & ADJOURNMENT

- The Eileen Bulger Project faces challenges in mapping ambulance station locations and understanding the disparities in EMS resource definitions across different regions. The GTC EMS Committee representatives have been tasked to review and validate their regional data.
- The Armband Project is ongoing:
 - 225 armbands have been applied
 - 5 had incorrect applications
 - 220 were trauma patients
 - 2 were interfacility transfers
 - Dr. Dunne expressed gratitude for the update and asked to defer Armband Project updates until the project is completed and a final report is available.
- Trauma center data has been received from 29 centers, with 3 using direct data entry and 26 using ESO import. The SDL file has worked for most centers; 4 centers have encountered issues.
- Navicent and Memorial Time to Definitive Care Project has been stalled due to data use agreements and legal reviews.
- Dr. Janani Thapa provided an initial overview of the Trauma Utilization Pattern Project (**ATTACHMENT A**). Efforts are underway to collaborate with the Georgia Hospital Association to obtain more hospital details. There is a need for additional datasets, including EMS data and trauma registry data, to enhance analysis and identify transfer times.

The meeting adjourned at 11:00 AM.

Minutes Respectfully Submitted by Gabriela Saye