

APPROVED
10.23.24



GEORGIA TRAUMA COMMISSION

Trauma System Performance (Data) Committee

Meeting Minutes

July 9, 2024

2:30 PM – 3:30 PM

Zoom Meeting

[Link to Meeting Documents](#)

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

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 Katie Hamilton, GTC, Finance Operations Officer Dr. Janani Thapa, UGA, Associate Professor

CALL TO ORDER

The meeting was called to order at 2:00 PM with ten committee members present. Dr. Dunne noted that the April 15, 2024, meeting minutes were distributed and asked if any corrections were needed. With no corrections or objections, Dr. Dunne noted that the April 15, 2024, minutes were approved as distributed.

TRAUMA REGISTRY DATA REPORT: UPDATE ON IMAGE TREND MIGRATION STATUS

Presented by Marie Probst

Marie Probst reported trauma downloads are being received into the ImageTrend and GQIP sites. An additional ESO form update required correction, which has since been addressed, allowing trauma centers to perform the necessary downloads without affecting data needed for TQIP or NTDB submissions. Marie highlighted discrepancies in record counts between GQIP and ImageTrend systems due to differing criteria algorithms, explaining that this will remain a consideration in future data analysis. Dr. Dunne inquired about the ability to run reports from the ImageTrend system; Marie confirmed report functionality but noted that V5 system reports had not been replicated yet.

The discussion shifted to the 2023 State Report timeline for completion. Danlin Luo explained that the transition to the new dataset has required additional analysis time and is projected to be completed by the end of August.

Marie introduced another topic for discussion, noting the need to align the Georgia Trauma Registry criteria with NTDB criteria. The alignment aims to standardize data collection and improve data quality by reducing the need



for year-to-year adjustments. While this change may increase the record volume for some centers, the overall impact is expected to be minimal. We confirmed the burn ICD10 codes do not meet the NTDS criteria code range. Gina Solomon kindly determined trauma patients in the registry with a combined trauma and burn diagnosis represent less than 1% of the annual registry volume. Therefore, removing the inclusion of burn diagnosis codes in cases with a combined trauma and burn diagnosis will have a minimal impact on the overall registry volume. Gina Solomon and Kelli Vaughn expressed agreement, emphasizing the benefits of reduced confusion for registrars and the importance of national alignment as the system grows.

TIME TO DEFINITIVE CARE | NAVICENT AND MEMORIAL PROJECT

Presented by Dr. Dunne and Tracy Johns

Dr. Dunne started the update by praising the State Office of EMS and Trauma for their significant assistance in collecting Patient Care Reports (PCRs). Dr. Dunne acknowledged that with their help, they have doubled the number of PCRs for both centers, doubling the sample size. The project teams are working together on report replication between the two centers. The tentative cutoff date for data collection will be in August or September, with the goal to finalize and analyze the data by the end of the year. Dr. Dunne highlighted the intention of submitting an abstract to the American Association for Surgery of Trauma (AAST) by the February deadline.

UGA TRAUMA UTILIZATION PATTERN, HEALTHCARE UTILIZATION, AND OUTCOMES RESEARCH

Presented by Dr. Janani Thapa

Dr. Janani Thapa presented a preliminary analysis using discharge data (**ATTACHMENT A**). The project's primary goal is to investigate delays from ditch to definitive care and understand the patterns and timeframes of patient transfers. The analysis includes in-hospital phases to optimize current resources for better patient outcomes; Dr. Thapa shared efforts to acquire data for pre-hospital analysis. As the presentation of preliminary findings ensued, questions were raised regarding the definition and differentiation between transfers and revisits, as well as the distinctions between single-visit and revisit populations.

Dr. Benjamin noted the number of patients transferred from one emergency to another appears low. The committee suggested focusing on specific transfer scenarios, such as those from non-trauma to trauma centers, to better understand patient pathways and outcomes. Gina Solomon added insights about direct admits and freestanding departments, which could affect data interpretation. Dr. Thapa will continue the analysis with data from the Georgia Hospital Association and incorporate the suggestions raised.

Dr. Dunne sought clarification that ER patients transferred to inpatient care are not considered discharged to home. Dr. Thapa clarified their dataset focuses on transfer patients who the data shows have received care from a different facility on the same day, potentially indicating readmission rather than a new event. Discussion ensued about understanding transfers between ERs and capturing relevant patient movements, highlighting the need for clarity on discharge versus transfer.

Dr. Dunne recommended a separate meeting between himself, Dr. Benjamin, and Dr. Thapa to further review the dataset before committee presentation. They acknowledged the complexity of trauma cases and the importance of refining their data analysis.



SUMMARY OF MEETING & ADJOURNMENT

- Trauma downloads are coming into the ImageTrend and GQIP sites. Discrepancies in record counts between ESO and ImageTrend systems were noted due to differing criteria algorithms, explaining that this will remain a consideration in future data analysis.
- The 2023 State Report is projected to be completed by the end of August.
- The committee discussed aligning the Georgia Trauma Registry criteria with NTDB criteria. The proposed change received positive feedback from committee members.
- The Navicent and Memorial Time to Definitive Care project is ongoing. The tentative cutoff date for data collection is August or September. The goal is to finalize and analyze the data by the end of the year. The project team aims to submit an abstract to the American Association for Surgery of Trauma (AAST) by the February deadline.
- Dr. Janani Thapa presented a preliminary analysis using discharge data (**ATTACHMENT A**). Concerns were raised about transfer vs. revisits in the dataset used. Dr. Dunne, Dr. Benjamin, and Dr. Thapa will meet to discuss the dataset further.

The meeting adjourned at 3:36 PM.

Minutes Respectfully Submitted by Gabriela Saye