**DRAFT FOR APPROVAL**

**Georgia Committee for Trauma Excellence (GCTE)**

**August 21, 2025**

**1:00 PM – 3:00 PM**

[**Meeting Recording and Attachments Link**](https://trauma.georgia.gov/events/2025-08-21/gcte-meeting)

**Lynn Grant, Fairview Park Hospital**

**GCTE Chair**

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| **EXECUTIVE MEMBERS PRESENT** | **REPRESENTING** |
| Lynn Grant*, Chair*Kyndra Holm, *Vice chair*Julie Freeman, *Education*Kellie Rowker, *Pediatric*Rayma Stephens/Ashley Bullington, *Performance Improvement*Kelli Vaughn, *Registry* | Fairview Park HospitalWellstar MCG Children's Hospital of GeorgiaWellstar KennestoneChildren’s Healthcare of AtlantaNorthside Gwinnett Hospital/Crisp Regional HospitalNorthside Gwinnett Hospital |

| **ATTENDEES** |
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| **FIRST NAME** | **LAST NAME** | **ORGANIZATION** |
| CindyNicoleKatieMatthewMelissaCrystalJosephineJudithSusanDawnAliciaSusanneHillaryRanaKellieEchoChristiAshleyAprilKaseyLauraMarieBernardStaceeFrancescaBrooke J.GailCherylePatriciaHilarySarahJessicaMichaelLawrenceKatherynSamanthaTeriJenniferKrystalAmy AnniaCareyCourtneyErinLeighEmilyEmilyAngelaKelliStaceyRogerAlanAshleyBarbaraAlanaPamelaPamelaStephanieStephenKimLaurenJessicaMary BethKelliTammieJamesTommyWhitneyChristieWalterShawnaCarolLindaJennaJaniceJessicaMatthewLauraNadirahDanaTracyColleenRaymaLemuelBrandiEvaAnaDaneshaStephanieShannonBrettJonathanKarenBradKristenJerryAmyKarneshihaMarilynMaryTamaraShalondaNatashaJustinJasonMarkJamesLisaTerriCourtneyBethJanannDonnaTetraKelsieLoriLoriCindyShelbyCristinaMeganGraceJulieJamieTaitianaBrianAshleyPatriciaShaeKyndraNidhiLibbyRhondaKerryHeatherCameronRachelAshleyMelissa | HoggardSundholmHastyO’RourkeParrisWynnFabico-DulinLyttleMurphyTruettCochranEdwardsRennerRobertsRowkerstandleyGrinerBullingtonDukesHarrisonLunsfordProbstRestrepoSmithMinehartMarshThorntonWardAyoung-CheeJessupParkerAstrellaBentleyBlairBrownBuchananCraigFreemanHarperJeuneLamphierLowryMoorconesPackPageRussellSanabriaScottShipleySmithSoSteeleThomasValadezVan NessVanderbergVernaElmgrenBrownZavalaDavisGoodwinVaughnRussellBurnsedLangenfeldWilliamsonMathisWileyBaggettGerrinGreeneHowellLabbeMantoothVassyWolfBurgessDavisHarrisHorneStephensDentFitzgeraldCarignanDelgadoHesterStriblingThomasBuehnerHorsagerBarrettCothranGentryMcMillanStephensCurryDunlapJamesonPattersonWrightDavisKeetonRadfordBenakPolstonWeitzmanWhiteCanino EasonCargileDunnavantGenzaleJenkinsWantyAdamsAdamsHanksLemonSoto-OlveraDawsonMillsMosherVan NessWoodsBaysFairclothSmithTaylorHolmChawalaFolseJonesCarterLoftusGrimes-AyresHandOrrHungerford | AdventHealth RedmondAdventHealth RedmondAtrium Health FloydAtrium Health FloydAtrium Health FloydAtrium Health FloydAtrium Health NavicentAtrium Health NavicentAtrium Health NavicentAtrium Health Polk Medical CenterChildren’s Healthcare of AtlantaChildren’s Healthcare of AtlantaChildren’s Healthcare of AtlantaChildren’s Healthcare of AtlantaChildren’s Healthcare of AtlantaChildren’s Healthcare of AtlantaColquitt Regional Medical CenterCrisp Regional HospitalCrisp Regional HospitalDoctors Hospital of AugustaDoctors Hospital of AugustaDPH OEMSTDPH OEMSTDPH OEMSTEffingham Health SystemEmanuel Medical CenterEmanuel Medical CenterGeorgia Trauma FoundationGQIPGQIPGQIPGradyGradyGradyGradyGradyGradyGradyGradyGradyGradyGradyGradyGradyGradyGradyGradyGradyGradyGradyGradyGradyGradyGradyGradyGradyGradyGrady Burn ProgramHamilton Medical CenterHamilton Medical CenterJohn D. Archbold Memorial HospitalJohn D. Archbold Memorial HospitalJohn D. Archbold Memorial HospitalLiberty RegionalMemorial Health University Medical CenterMemorial Health University Medical CenterMemorial Health University Medical CenterMorgan Medical CenterNortheast Georgia Healthcare SystemNortheast Georgia Medical CenterNortheast Georgia Medical CenterNortheast Georgia Medical CenterNortheast Georgia Medical CenterNortheast Georgia Medical CenterNortheast Georgia Medical CenterNortheast Georgia Medical CenterNortheast Georgia Medical CenterNorthside Hospital GwinnettNorthside Hospital GwinnettNorthside Hospital GwinnettNorthside Hospital GwinnettNorthside Hospital GwinnettPhoebe Putney Memorial HospitalPhoebe Putney Memorial HospitalPiedmont Athens RegionalPiedmont Athens RegionalPiedmont Athens RegionalPiedmont Athens RegionalPiedmont Athens RegionalPiedmont AugustaPiedmont AugustaPiedmont CartersvillePiedmont CartersvillePiedmont CartersvillePiedmont CartersvillePiedmont CartersvillePiedmont Columbus RegionalPiedmont Columbus RegionalPiedmont Columbus RegionalPiedmont Columbus RegionalPiedmont Columbus RegionalPiedmont HealthcarePiedmont HenryPiedmont HenryPiedmont Walton HospitalPiedmont Walton HospitalPiedmont Walton HospitalPPMHSGMC HealthSGMC HealthSGMC HealthSGMC HealthWashington County Regional MedicalWellstarWellstar CobbWellstar CobbWellstar CobbWellstar CobbWellstar CobbWellstar KennestoneWellstar KennestoneWellstar KennestoneWellstar KennestoneWellstar KennestoneWellstar MCGWellstar MCGWellStar MCGWellstar MCGWellstar MCG CHOGWellstar North Fulton HospitalWellstar North Fulton HospitalWellstar North Fulton HospitalWellstar PauldingWellstar SpaldingWellstar West Georgia Medical CenterWellstar West Georgia Medical CenterWellstar West Georgia Medical CenterWinn Army Community Hospital |

| **TOPIC** | **DISCUSSION** |
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| Call to Order/Approval MinsIntro of New Members | Lynn Grant, Committee Chair, called the meeting of the Georgia Committee for Trauma Excellence (GCTE), a committee of the Georgia Trauma Commission (GTC), to order at 1:00 pm. Lynn opened the meeting with a moment of silence in honor of Dr. Regina Medeiros, acknowledging her exceptional leadership and compassion. Committee members were encouraged to support one another and to keep Dr. Medeiros’ family in their thoughts and prayerAfter quorum was established, Lynn requested a motion to approve the May 8th meeting minutes. **MOTION GCTE 2025-08-01:****Motion to approve May 8, 2025, meeting minutes.****MOTION:** Kyndra Holm**SECOND:** Kelli Vaughn**DISCUSSION:** None **ACTION:** The motion***PASSED*** with no objections nor abstentionsAfter minutes approval, Lynn asked if new committee members were present and welcomed them to the committee.  |
| LifeLink Update & Donation Data | Kim Kottemann introduced herself as the Lifelink Director of Professional Programs and Transplant Center Relations and Chuck Massy, Hospital Development Team Leader. Kim expressed condolences on the recent loss of Regina, a significant advocate for the committee and its mission. Kim reviewed donation data, trends over the fiscal year, and calendar year to date (**ATTACHMENT A**). She also reviewed multi-year trends and hospital-specific data. Tissue donations were highlighted and emphasized as it is often overlooked compared to organ donations. Kim closed her report by sharing an upcoming virtual donor resource training taking place on October 30th. It provides a comprehensive overview of the donation process (referrals, evaluation, and organ placement).  |
| Georgia Trauma Commission (GTC) Update | Liz Atkins recognized the loss felt by Regina’s passing and expressed gratitude for the team’s support during this difficult time. Commission updates included:* GTC-funded ICD-10 training course: Books for the course are delayed due to pending purchase order. Gabby is exploring a plan B for book distribution to registrants that indicated their need.

**Addendum**: Gabby has reached out to TPM’s to coordinate the shipment of books to their staff. * Level I and II Readiness Costs Survey: The deadline for submission is September 30th. Liz emphasized the need for timely submission due to legislative session preparation. Warren Averett will process and analyze the data. We are working on a final survey version to avoid further changes prior to the September due date. The latest update includes the removal of blood product cost requirement. Liz emphasized stakeholders should docus on conservative costs estimates in meeting the ACS standards, not extra services.
* Gabby shared a brief overview of the readiness costs survey including next webinar, resource hub, review of recent survey updates, timeline, and how to submit the survey (**ATTACHMENT B**).

Liz also shared GTC contract updates: * Level II contracts should be released by the end of the week.
* Assistance is needed for Burn contracts related to registry and national benchmarking, please reach out to me if you are interested providing feedback.
* Level III and IV contracts are still under review with target release by the end of the month.
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| Georgia Quality Improvement Program Update | Gina Solomon provided the following updates:* Risk adjustment dashboard went live on June 26. Jan to March 2025 data is now available in platform. VTE measures are in the build phase and estimated to be completed in September.
* Scorecards have been introduced and distributed to GQIP members. There are plans to collect feedback via Mentimeter and enhance future scorecards. The goal is to include all PBP metrics and distribute scorecards quarterly to help members track their standing and encourage engagement with the site. Dr. Ayoung-Chee will present some data during the GQIP Summer Meeting.

Gina acknowledged Regina’s passion for working with the ArborMetrix data, emphasizing continuing the project in her honor. Gina also mentioned a memory book has been created for members to write down notes for her daughters. The book will be available during the meetings today and tomorrow for contributions.  |
| Regional Trauma Advisory Committee (RTAC) Updates | Crystal provided the following updates:* We received 1,300+ applications during the June bleeding control kit application period. Application periods are set for 1 month to apply and two months for kit distribtuions. Kits are distributed to qualifying organizations that have completed training. All kits will include a QR code to capture deployment, items used, location, and frequency of use.
* An EMS educational needs assessment is planned for October-November. Last year we received 1,200+ responses. The survey will include assessment for EMS providers, EMS leadership and training officers, and hospital administration and ED staff.
* Regional highlights include:
* Region 1: Pediatric trauma skills lab training (identified need from assessment). A PI project with 300+ case submissions to enhance collaboration between hospitals and EMS
* Region 2: Expanding EMS pop-up skills stations with goal to bring training to medics on shift
* Region 3: Conducted MCI tabletop exercise with Region 5
* Region 4: New RTAC Coordinator, Rachel Hand. They are planning a trauma symposium and tabletop exercises for the fall.
* Region 5: Stop the Bleed Training Blitz had over 1,000 participants. Ongoing injury prevention initiatives.
* Region 6: Collaborating with August University EMS Physicians on field blood program. Increasing momentum in PI and education committees.
* Region 7: RTAC Coordinator, Brian Dorriety retired, and welcome new RTAC Coordinator, Paula Carter.
* Region 8: New RTAC Coordinator, Ben Whiddon. First in person meeting held in years with strong attendance.
* Region 9: RTAC Coordinator is Coy Tippins. Planning trauma conference, airway rodeo” simulation-based training.
* Region 10: Expanding prehospital blood program, hosted Sports Medicine Conference with UGA. Continuing injury prevention activities.

Committee members commended Crystal’s leadership and contribution in the RTACs. |
| Office of EMS & Trauma (OEMST) Update | Marie Probst provided the following updates:* Reminder to complete the TQIP and GQIP downloads 01/01 – 06/30/2025 before 9/2.
* ESO 2025 State OEMST update released, need to install before running the download for OEMST.
* ImageTrend Patient Registry import link will open 9/3
* Import the OEMST download 01/01 – 06/30/2025 in ImageTrend Patient Registry.
* EMS and Hospital ID lists have been distributed and posted to Basecamp.
* Level 4 centers with December 2025 site visit dates will need to download to OEMST by 10/15 so we can select charts from the review period September 2024 – September 2025.
* 2026 schema changes have been submitted to ImageTrend and ESO.
* OTCPE performance reports: the purpose of the OTCPE is to help the centers stay on track with designation requirements and GQIP PBP measures. In summary, the FY2026 Q1 and FY2025 reports were received timely. The statewide data deliverables, CY2024 Record closure rate and Trauma Surgeon Arrival rates, were met.
* OBCPE Burn Center data has been compiled for FY2024 and FY2025
* Dr. Danlin Luo is working on the CY2024 Georgia Trauma Registry Annual Report with release expected soon.

Gina Solomon added updates to the data dictionary:* The 2026 data dictionary will be shared once finalized. There were some minor changes including new definitions and additions. ESO adaption main change is organ donation fields no longer required with validation rules removed. The Lifelink partnership will capture organ donation data.

Stacee Smith provided the following updates:* Wellstar North Fulton was successfully redesignated and ACS re-verified.
* Dr. Danlin Luo is preparing the CY2024 Annual Report, expected publication soon.
* Please contact us if you are interested in 2025 consultations for verification/designation support. 2026 scheduling is also available.
* We are aware of difficulties with ESO, centers are encouraged to continue their efforts.
* The Systems of Care Advisory Council has been established by the Office of EMS. First meeting was held in July with upcoming quarterly meetings planned. The goal is to accomplish statewide collaboration to improve patient outcomes.
* A a public-facing map of blood product availability for pre-hospital teams to aid clinical decision-making and collaboration is under development. It will be published on the OEMST website once available.
* OTCPE Report updates effective September 15:
* Add ACS/State designation expiration date
* Diversion total hours (year to date)
* SBIRT reporting simplified: only requires % compliance and quarterly tracking graph
* Commission outcomes PBP added: VTE and Hip Fracture compliance
* Q1 & Q3:
* TQIP data usage text box for describing how TQIP data informs PI improvements
* Indicate if a disaster drill occurred in quarter
* Attendance tracking in preparedness meetings for Level I TMD, trauma surgeon, and orthopedic surgeon
* Level I-IV, describe pediatric readiness initiatives.
* Q2 & Q4:
* List injury prevention activities and programs, no report upload required
* Stacee encouraged centers to provide feedback if updates are unclear.

Committee members raised a question regarding past pediatric readiness calls. Stacee will follow up with April and Sam for clarification. |
| Georgia Trauma Foundation Update | Cheryle Ward provided the following updates:* We are looking forward to providing 10 grants to invest in trauma care. Please start thinking about projects where you may need additional funding is needed. We will notify you when the application period is open.
* The Foundation is partnering with the Trauma Commission to support the Stop the Bleed program, focused on kit distribution to school campuses. The initial campaign targets high school campuses with an estimated cost of $500,000. The Foundation will provide $100,000 upfront rather than waiting for the full $500,000, marking the first Foundation fundraising effort for the Stop the Bleed.
* Continuing Education Instructors Database (CEID) is an online resource for finding faculty for advanced continuing education courses such was TNCC and ENPC. Instructors and directors are encouraged to join the database for future course facilitation.
* The Rural Continuing Education Program provides free continuing education courses for critical access and rural hospitals. Current offerings include TNCC, ENPC, and RTTDC. Next year ATLS will be added. Facilities interested in hosting ATLS should expect outreach soon.
* The Foundation is seeking trauma survivor stories to highlight for social media, website, community events, fundraising, and the annual gala. Stories help showcase trauma center work and survivor experiences. Please submit survivor stories to the Foundation.
* We are recruiting board members from across the state with diverse skill sets and recruiting for the following Foundation Committees:
* Advocacy
* Fundraising Development and Program
* Gala Planning
* Please send any recommendations or volunteer interest to the Foundation.
* The Foundation has posted a job opening its website for a Community Engagement and Development Specialist to lead statewide outreach and awareness efforts.
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| Subcommittee Reports | **Education:** Julie Freeman provided the following updates:* Open invitation to join the Education Subcommittee, you can sign up by using the QR code (**ATTACHMENT C**).
* We are focusing on increasing the number of trauma certified nurses across the state.
* The STN orientation modules are now available statewide. The customizable modules are beneficial for onboarding trauma center staff. You can access the module request link by contacting Julie Freeman or Gabriela Saye.

**Pediatric**: Kellie Rowker provided the following updates:* Shock Index Pediatric Adjusted (SIPA) education continues with recent SIPA Talk at Northside Gwinnett. Education requests are available for any center statewide (approx. 30-minute sessions)
* Pediatric transfer poster draft completed and reviewed by Augusta, CHOA, and Dr. Alexis Smith. Awaiting GTC approval before final release. Education is available to accompany rollout. (**ATTACHMENT D**)
* Pediatric transfer toolkit under development, which is a more comprehensive module on pediatric injuries and transfers.
* Children’s Healthcare of Atlanta continues to support the MATIC 2 Study, focusing on whole blood transfusion. Noted inconsistency across EMS agencies in pediatric blood transfusion practices. Recommendation to add pediatric-specific information to statewide EMS blood database.
* EMS safe transport project educational PowerPoint has been finalized. Ongoing data collection from reports of unsafe pediatric transport by EMS agencies. The data is housed in Children’s Healthcare of Atlanta Redcap tool. Please contact kellie.rowker@choa.org if you need the QR code. There has been a challenge engaging EMS crews for education; suggested strategy is to present at RTAC meetings for broader reach.
* Radiology toolkit under review, last updated in 2019. Literature review completed, and updates are underway with plan to reissue toolkit in 2025.

**Performance Improvement:** Rayma Stephens provided updates:* Current work includes developing a comprehensive PI playbook to standardize process improvement practices. Committee members are encouraged to share best practices, lessons learned, and verification visit insights that might help other centers. Plans to continue collecting resources and examples from members.
* Committee members interested in joining the subcommittee can email rayma.stephens@northside.com

**Registry**: Kelli Vaughn provided the following updates:* The ICD-10 education course registration is complete for the Beginner/Intermediate and Refresher course. The course and the book materials (for those that indicated need), is funded by the Commission. Thanks to Gabby for coordinating logistics and communications. Current challenge is the Commission Purchase Order (PO) is still pending State approval. Book distribution contingency plan is to ship books directly to centers to distribute internally. Gabby will update registrants once updates are available.

**Addendum**: The course POs were approved, and payment sent to the course vendor. Gabby has sent an email update to course registrants on 09/03/25.* We have reviewed 5 registry vendors and narrowed down to 3 finalists: ImageTrend, ESO, and V7. Subgroups are conducting deeper evaluations on each system. A summary of findings is expected by the end of the month.

Kelli brought forth an issue of ongoing challenges for registries and reporting due to staff turnover and vendor updates. She asked if there was an option to allocate annual Commission funding for registry-specific education and support for new staff during transitions. Liz suggested exploring broader trauma-related education opportunities such as: Advanced Trauma Program Manager course, orientation course for Med-Surg Nurses, and future Trauma Medical Director course. She encouraged Committee chairs to discuss and potentially draft a proposal for an education budget to support ongoing training and needs from across centers. **Injury Prevention and Outreach**: Lynn Grant provided an update on activities on behalf of Kristal Smith:* Stop the Bleed school-based training sessions held July 28-August 13; over 1,300 participants engaged throughout the year
* Matter of Balance coach training was held virtually on July 3rd.
* Upcoming September initiatives: Fall Prevention Month, Suicide Awareness Month, Child Passenger Safety Campaigns, with several mini prevention events organized to align with these awareness dates.
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| 2.12 Injury Prevention Program | Lynn Grant reviewed ACS Standard 2.12 (**ATTACHMENT E**), applies to Levels I, II, III, and pediatric Levels I and II. Lynn reviewed definitions and required, additional information, and measures of compliance. Justin Keeton was introduced as the new co-chair of the Injury Prevention Subcommittee and asked to share experience with injury prevention at his facility. He noted key area of focus:* Fall prevention-majority of registry patients are fall-related
* Public awareness campaigns-partnering communication teams for newspaper articles and online content reviewing distracted driving, hands-only CPR, violence prevention, and child passenger safety.
* Matter of Balance training is starting Sept 4th, rotating through local senior centers.
* Stop the Bleed initiative held every other month in the hospital’s education building, including evening sessions with community and church participants.
* Hospital participation in two large annual community events, providing education on gun safety, car seats, motorcycle safety, etc.

Justin emphasized leveraging hospital PR teams to broaden community reach. Committee members discussed challenges of measuring the impact of injury prevention initiatives.Committee members shared their efforts track outcomes: * Inpatient prevention initiative staring in September, focusing on fall patients. Includes rounding by injury prevention staff, education with a 5-minute exercise routing, distribution of fall prevention booklets, monitoring re-admissions due to fall.
* Tracking participation in community class to evaluate post-class fall occurrences
* Using excel sheets for objectives and course tracking

Committee members emphasized the difficulty in quantifying the impact of preventative programs and need for standardized template or reporting formats across centers to measure outcomes effectively. Committee members were encouraged to continue sharing best practices and templates for consistent data collection and evaluation.  |
| 4.22 Ophthalmology Services  | Lynn Grant reviewed ACS standard 4.22 (**ATTACHMENT F**), which also applies to Levels I and II and pediatric Levels I and II. Requires centers to have continuous availability of ophthalmology or have a contingency plan to ensure ophthalmic trauma care. Jamie Van Ness presented insights based on their center’s experience during the ACS verification process and shared lessons learned from their site visit. The center had 10 days of ophthalmology coverage per month, which was insufficient to meet the 2022 standard. They explored tele-ophthalmology, local physician employment, and contracting on-call physicians, achieving 20 days of coverage per month. Documentation and transfer protocols were reviewed during the verification, but were not fully satisfactory, resulting in provisional verification. After persistent efforts, the center now has 24/7, 365-day coverage. It was noted updated July 2025 standard now allows for contingency plans and require documentation such as transfer out reports for eye injuries, 3 months of call schedules, and description of the model of coverage. Brandi Fitzgerald also shared their challenges with rural staffing mitigated via a virtual ophthalmology solution, supported by local ophthalmology techs with specialized equipment, aiding emergent vs. non-emergent cases. Implementation anticipated around October-November. It was confirmed the standard applied to Level I and II centers; Level III and IV centers ophthalmology coverage are not affected. Committee members were encouraged to continue sharing documentation and performance improvement activities related to achieving the Ophthalmology standard.  |
| Shared Celebrations | The meeting concluded with shared celebrations:* Wellstar North Fulton completed ACS-reverification in June. Reviewers placed heavy emphasis on performance improvement. Findings were tied to chart review and recommendation to spend more time ensuring selected charts are thorough and accurate.
* South Georgia achieved ATLS site designation. First ATLS class scheduled for September 26-27
* CHOA Scottish Rite was reinstated as ATCN site, enabling them to offer additional courses statewide.
* A community outreach is confirmed to provide gun lock boxes and firearm safety education in partnership with Fulton County Board of Health. Event to take place at Adamsville Regional Health Center on Saturday, 9 AM- 3 PM.
* Northside Gwinnett completed ACS verification in June, preliminary report shows zero deficiencies. A few recommendations were made to focus on time-specific metrics in PI.
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| Adjournment | Before adjournment, Lynn expressed gratitude and recognition of the efforts across the trauma programs. The next meeting is scheduled for November 6, 2025, via Zoom. ***Lynn Grant adjourned the meeting at 3:10 pm*** |

*Minutes Crafted by Gabriela Saye*