Georgia Committee for Trauma Excellence (GCTE) February 28, 2022

12:00-2:00 Trauma.ga.gov meeting link

Jesse Gibson, MBA, BSN RN, TCRN GCTE Chair

EXECUTIVE MEMBERS PRESENT	REPRESENTING
Karen Hill, Chair, former	CHOA Egleston
Jesse Gibson, Chair, current	Northeast Georgia Medical Center
Tracy Johns, Vice-Chair	Atrium Health Navicent
Jessica Mantooth, Education	Northeast Georgia Medical Center
Kristal Smith, Injury Prevention	Atrium Health Navicent
John Pope, Performance Improvement	Cartersville Medical
Kellie Rowker, Pediatrics	СНОА
Liz Atkins, GTC Executive Director	Georgia Trauma Commission
Regina Medeiros, GTC Secretary/Treasurer	Georgia Trauma Commission

Attendees			
First name	Last name	Company/Affiliation	Attending
Riley	Benter	AdventHealth Redmond	In person
Sheila	Bennett	Atrium Health Floyd	In person
Katie	Hasty	Atrium Health Floyd	Virtually

Melissa	Parris	Atrium Health Floyd	In person
Robyn	Axlund	Atrium Health Navicent	Virtually
Kristal	Smith	Atrium Health Navicent	Virtually
Faith	Rand	Atrium Health Navicent	Virtually
Judith	Lyttle	Atrium Health Navicent	Virtually
Josephine	Fabico-Dulin	Atrium Heath Navicent	Virtually
Susan	Murphy	Atrium Heath Navicent	Virtually
Sharon	Hogue	Atrium Polk Medical Center	In person
Ashley	Faircloth	Augusta University	Virtually
Kyndra	Holm	Augusta University Health - Children's Hospital of GA	In person
Adrian	Ruiz	Augusta University Inc.	Virtually
Brian	Bays	Augusta University Medical Center	Virtually
Brian	Bays	Augusta University Medical Center	Virtually
Patricia	Smith	Augusta University Medical Center	Virtually
Robyn	Hatley	Children Hospital of Ga. at Augusta university	In person
Alicia	Cochran	Children's Healthcare of Atlanta	Virtually
Karen	Hill	Children's Healthcare of Atlanta	Virtually
Rana	Roberts	Children's Healthcare of Atlanta	In person
Alexis	Smith	Children's Healthcare of Atlanta	In person
Maia	Routly	Children's Healthcare of Atlanta	Virtually
Kellie	Rowker	Children's Healthcare of Atlanta	In person
Carla	Ward	Children's Healthcare of Atlanta	Virtually
Moe	Schmid	Children's Healthcare of Atlanta	In person
Ashley	Bullington	Crisp Regional Hospital	In person
Christopher	Ruiz	Doctors Hospital of Augusta	In person
Tinyhra	Harris	Doctors Hospital of Augusta	Virtually
Corydon	Siffring	Doctors Hospital of Augusta	In person
Danlin	Luo	DPH	Virtually

David	Kiefer	Effingham Health System	In person
Lindsey	Lewis	Effingham Health System	In person
AMY	WATSON	Effingham Health System	In person
Ronald	Drake	Emanuel Medical Center	Virtually
Brooke	Marsh	Emanuel Medical Center	Virtually
Gail	Thornton	Emanuel Medical Center	In person
Olalekan	Akinyokunbo	Emanuel Medical Center	Virtually
Ben	Doyle	Fairview Park Hospital	Virtually
Lynn	Grant	Fairview Park Hospital	Virtually
Katie	Hamilton	Georgia Trauma Commission	In person
Gabriela	Saye	Georgia Trauma Commission	In person
Cheryle	Ward	Georgia Trauma Foundation	In person
Jennifer	Freeman	GHS	Virtually
Allison	Colvard	Grady	Virtually
Robin	Garza	Grady	Virtually
Erin	Moorcones	Grady	Virtually
Sarah	Parker	Grady	In person
Barbara	Thomas	Grady	Virtually
Stacey	Shipley	Grady	Virtually
Angela	Brown	Grady Health System	Virtually
KENYA	Cosby	Grady Health System-Burn Center	Virtually
Ashley	Cribbs	Grady Memorial Hospital	Virtually
Joy	Eleby	Grady Memorial Hospital	Virtually
Elizabeth	Mays	Grady Memorial Hospital	Virtually
Roxanne	Rothenberg	Grady Memorial Hospital	Virtually
Pamela	Van Ness	Grady Memorial Hospital	Virtually
Elizabeth	Williams-Woods	Grady Memorial Hospital	Virtually
Ashley	Steele	Grady Memorial Hospital	Virtually

Kim	Brown	Hamilton Medical Center	In person
Judean	Guinn	Hamilton Medical Center	In person
Mary Beth	Goodwin	John D. Archbold	In person
Farrah	Parker	Joseph M. Still Burn Center	In person
Kim	Kottemann	LifeLink of Georgia	Virtually
Jeffrey	Harden	Memorial Health Meadows Hospital	In person
Kelsey	Palladino	Memorial Savannah	Virtually
Kristina	Licursi	Memorial University Medical Center	Virtually
Michelle	Benton	Morgan Medical Center	In person
Christie	Mathis	Morgan Medical Center	In person
Linda	Greene	Northeast Georgia Medical Center	Virtually
Maria	Silva	Northeast Georgia Medical Center	Virtually
Jessica	Mantooth	Northeast Georgia Medical Center	Virtually
Kathy	McDaniel	Northeast Georgia Medical Center	Virtually
Laura	Wolf	Northeast Georgia Medical Center	Virtually
Jesse	Gibson	Northeast Georgia Medical Center	In person
Jackie	Payne	Northeast Georgia Medical Center	Virtually
Elaina	Lee	Northeast Georgia Medical Center	Virtually
Rayma	Stephens	Northside Gwinnett Hospital	Virtually
Colleen	Horne	Northside Gwinnett Hospital	Virtually
Naila	Avery	Northside Gwinnett Hospital	In person
Tracy	Harris	Northside Gwinnett Hospital	Virtually
Barlynda	Bryant	Northside Hospital Gwinnett	Virtually
Nadirah	Burgess	Northside Hospital Gwinnett	In person
Sharon	Grason	Northside Hospital Gwinnett	Virtually
Dana	Davis	Northside Hospital Gwinnett	Virtually
Cassie	Longhart	OEMST	Virtually
Renee	Morgan	OEMST	In person

Marie	Probst	OEMST	Virtually
Brandi	Fitzgerald	Phoebe Putney Memorial Hospital	Virtually
Denise	Bennett	Piedmont Athens Regional	Virtually
Cammie	Cruce	Piedmont Athens Regional	Virtually
Heather	Morgan	Piedmont Athens Regional	In person
Shannon	Thomas	Piedmont Athens Regional	Virtually
Mary Jane	Brock	Piedmont Athens Regional	Virtually
Michael	Shotwell	Piedmont Athens Regional	In person
John	Роре	Piedmont Cartersville	In person
Kelly	Gasser	Piedmont Columbus Midtown	Virtually
Mary	Bizilia	Piedmont Columbus Regional	In person
Karen	Hust	Piedmont Walton	In person
Marty	Wynn	Piedmont Walton	In person
Lesa	Jackson	Polk Medical Center	Virtually
Brian	Dorriety	RTAC 7	Virtually
Tina	Miller	South Georgia Medical Center	Virtually
Jolleen	Thies	South Georgia Medical Center	Virtually
Jill	Williams	Tanner health	Virtually
Kerry	Carter	WellStar AMC	In person
Emily	Page	WellStar AMC	Virtually
Kionna	Harvey	WellStar AMC	Virtually
Katherine	Kohler	WellStar AMC	In person
Roger	Smith	Wellstar AMC	Virtually
Pamela	Vanderberg	Wellstar AMC	In person
Courtney	Baker	Wellstar AMC	Virtually
Karen K	Johnson	Wellstar AMC	Virtually
Rhonda	Jones	Wellstar AMC	Virtually
Dawn	Schelkopf	Wellstar AMC	Virtually

Tamra	Skinner	WellStar Cobb	In person
Temprest	Jones	Wellstar Health System	Virtually
Megan	Dawson	Wellstar Kennestone Hospital	Virtually
Jamie	Van Ness	Wellstar Kennestone Hospital	In person
Nancy	Friedel	Wellstar Kennestone Hospital	Virtually
Christina	Ucci	Wellstar Kennestone Hospital	Virtually
Dana	Bouse	Wellstar Kennestone Hospital	Virtually
Anthony	Vizzinia	Wellstar Kennestone Hospital	Virtually
Debora	Dabadee	Wellstar North Fulton	Virtually
Leigh	Pack	Wellstar North Fulton	Virtually
Taitiana	Woods	Wellstar North Fulton	Virtually
Susan	Baldridge	Wellstar Spalding Regional Hospital	Virtually
Danielle	Johnson	Wellstar Trauma Services	Virtually
Rachel	Hand	Wellstar West Georgia Medical Center	In person
Riley	Benter	AdventHealth Redmond	In person

Торіс	Discussion
Call to Order, Establishment of Quorum, Approval of Minutes, and Introduction of New Members	Jesse Gibson, Committee Chair, called the meeting of the Georgia Committee for Trauma Excellence (GCTE), a committee of the Georgia Trauma Commission (GTC), to order at 12:03 pm. A quorum was established, with eight of nine members present. Due to a large amount of in-person attendance, Jesse asked those present in the room to introduce themselves. Introductions then continued to new virtual attendees.
Georgia Trauma Commission (GTC) Update	 Liz Atkins gave an overview of the recent updates from the Georgia Trauma Commission. There will be a new invoice process for contracted trauma centers in FY 2024. Our dedicated funds are now in code, so we have access to more funds upfront. As a result, all those additional funds you would typically get in the amended, you're going to get upfront now. For FY 2024, those funds will be subject to

Торіс	Discussion	
	 prospective PBP, similar to CMS. Your current performance on your scorecard is your future economic forecast. We will not be making changes to the upcoming PBP within FY 2023. This new process is not set in stone, but this is our first pass on what it will look like. Katie will now present some details regarding the changes Katie Hamilton presented a brief overview of proposed trauma center contract changes for FY2024 (ATTACHMENT A). No questions or concerns were raised during or after the presentation. 	
Office of EMS & Trauma Update	 Renee Morgan reported on behalf of the Office of EMS & Trauma: Within the next 90 days, you'll see three new centers. Redesignations and ACS visits are ramping back up. David Newton has moved up to Deputy Director over Health Protection. Our Office of EMS Director is now an open position. Michael Johnson, the coordinator for our Cardiac Care Division, has moved into Deputy Director for our Systems of Care. We have an epidemiologist now for the EMS and Cardiac section. Welcome to Wellstar Paulding on their new designation as a Level IV trauma center. Congratulations to Emanuel Medical Center on its re-designations as a Level IV trauma center. 	
	 Marie Probst shared some updates: Thanks to all centers for reviewing the quarter to OTCPE reports. All reports are now closed. The following form for quarter three will open on March 15th and close on April 29th at 11:59PM. It will be due April 15th; please take notes of those days. Everyone should have received the year-end national update; ESO DI is calling the update "Form 40". If you have not received the update, please reach out to ESO DI tech support and request the Form 40 update or if you need help with installation. Form 40 is a prerequisite for installing the files before you're able to begin downloading your V5 data to our new ImageTrend patient registry central site. V5 ImageTrend patient registry pilot project volunteers have installed the updates. We discovered a glitch during our dry run last week, which has been fixed. We will hold the training this Thursday for those pilot 	

Торіс	Discussion
	 centers to go through the steps to install their downloads. If the pilot imports go according to plan, DI will send out the installation files to all V5 users. Everyone must install the update files, create the export, and upload it to the new ImageTrend site. Each center will receive the login credentials needed for the ImageTrend registry. Please send any V5 changes for year-end 2022 by the end of March to Kelli Vaughn. We can then share the suggestions with the GCTE group and open them up for discussion. Afterward, our office will take those change requests to the V5 and ImageTrend by the end of May, and they can let us know if the changes we want are doable. Our OEMST staff, Cassie Longhart, and Dipti Patel worked with Northeast Georgia last week to help them navigate the hospital hub to see if they could see another hospital's EMS transfers in. After the demo, we determined that the system doesn't allow a hospital to see another hospital's transports. If you're missing a report, put that information in the detail of that record and keep track of those. You can run a report either from the PI section or the missing ems report field and then take that list to your regional council meetings and start sharing it with the EMS providers. Jesse Gibson added that their (NEGMC) plan is to reach out to those four or five hospitals that are our top referring facilities to see if they would give us access to their ImageTrend PCRs. Linda Greene plans to reach out to Kelli Vaughn to share some tips they discovered during the demo to share with the Registry Subcommittee
	After updates, Marie presented and reviewed the trauma registry data set from April to June 2021 (ATTACHMENT B). We're looking for the time from scene arrival to hospital 2, which is time to definitive care. A theme in the analysis was the number of records with missing data. If the record was missing data in one or more fields, we couldn't include that record in the analysis. We want to encourage everyone to begin to QA their data thoroughly before the data is downloaded to ensure fields are completed: the ems provider role field, the ems report dates and times, and your hospital ED arrival date and time. Some solutions to collecting better data are to use the hospital hub to find the EMS report hospitals, report missing PCRs to your RTAC, and communicate with the sending facility. We want to encourage you to do the QA and PI of the cases to evaluate the timely transport of the trauma patients to ensure they're going to the appropriate facility in a timely manner. If there are issues with the transport to you, then certainly PI those cases and discuss that with EMS. Starting January 1, 2022, all referring

Торіс	Discussion
	 hospital fields are required. Please reach out to any of us if you have any questions or suggestions on capturing the time to definitive care. Dr. Alexis Smith asked if we have looked at the differences in pediatric adolescents when they have gone to more than one center and look at the barriers. Tracy Johns responded that adults and peds were a consideration when looking at the data, but the most significant barrier was missing information. We want to beef up the information in the registry and emphasize the validation of those data points so we can focus on specific areas, particularly the double transfers and preventing them. Jamie Van Ness asked if we could field out urgent transfers versus non-urgent transfers. Gina Solomon answered that they have tried to do that but have primarily focused on ISS scores, systolic blood pressure, and shock index and try to find high-risk patients. Jesse Gibson stated first and foremost, we've got to get the data. Our subcommittees can be valuable resources to
	move the needle and help improve the data quality.
Georgia Quality Improvement Program (GQIP) Update	 Gina Solomon gave the following updates: Dr. Todd will be presenting the GQIP updates tomorrow during the Winter Meeting. The workgroups will also be able to share their updates as well.
	• We are in the contracting phase with Arbormetrix, and we hope to send it to them soon. Once we sign that, we can start with a project build, and that's about a five-month process. We hope we will have some tangible items by the end of the year.
Georgia Trauma Foundation Update	Cheryle Ward briefly discussed the change in focus for the Georgia Trauma Foundation. Since our inception, our activities were mostly focused on education and advocacy, but what we're going to do going forward is to focus on the purpose for which we were created, providing philanthropic support to the state's trauma system. The gala that was scheduled for April 30 th has been changed. Next year, we will resume our gala at the Porche Experience Center during National Trauma Awareness Month in May. Jesse Gibson encouraged attendees to ask their institutions to contribute to the foundation and connect people you know with Cheryle.
Subcommittee Reports	Education: Jessica Mantooth provided the following activities:
	The Education Subcommittee is working on two primary goals aligned with GCTE goals.

Торіс	Discussion
	 Develop a PPT presentation on improving time to definitive care for the trauma patient (complete by 6/30/22). Distribute to all centers that participate in GCTE and RTACs.
	 Develop a PPT presentation on acute kidney injury in the trauma patient (complete by 6/30/22). Scheduled offerings will start by October 1st, 2022.
	We did have some educational funding that was left over from the state. We submitted a proposal, which was approved, and will try to prioritize courses for the non-trauma centers. Funding could include a TNCC instructor
	course, partial funding of ATCN, and a regular TNCC course. We have some educational funding opportunities, so we'd like to provide three \$500 materials. The caveat here would be that the course you are utilizing the supplies for would be open to participants throughout the region. Be on the lookout in the next couple of weeks for an email from us.
	Jesse Gibson commented on the utility of these education PowerPoints, which everyone in the state can send out. They can even be utilized to send to your non-trauma centers to demonstrate the importance of these topics.
	Registry and Education Subcommittee is a great example of the concept of catch ball on the goals and working together towards the same outcome.
	Pediatric: Kelli Rowker updated the committee:
	The Pediatric Subcommittee was stalled in 2021 and looking forward to marching onward in 2022. One of our goals is to close the pediatric radiology project and work with our current data and information. To align with the GCTE goals, we plan to:
	 Concentrate on time to definitive care for pediatric trauma patients (< 15yo), emphasizing pediatric imaging guideline use at transferring facility & cloud-based image sharing.
	 Create an educational presentation on SIPA (shock index, pediatric age-adjusted) score for use in pediatric trauma patient care.
	https://pubmed.ncbi.nlm.nih.gov/30952455/
	We have been collecting data about SIPA since our Scottish Rite ACS visit. It can be a good tool to use when transferring pediatric patients to ensure they are stable before transfer. We plan to work with the Education Subcommittee to figure out how to distribute this information across the state, especially to Level III and IVs.

Торіс	Discussion
	A concern was raised regarding the ACS grey book rollout requiring adult centers to be peds ready. Tracy Johns mentioned that DPH has a state initiative and committee working on this. They are working to distribute a toolkit to trauma and non-trauma centers to inform of simple things you can do to be pediatric-care ready. Dr. Alexis Smith added that they are doing a lot of pediatric-specific education in their region and have trauma grand rounds available to anyone who wants to join. Jesse Gibson suggested that adult centers start looking at their nearby peds centers to partner and collaborate with. Kristal Smith asked Kellie Rowker to reach out to them within the Injury Prevention Subcommittee to work on some crossover projects together. Performance Improvement: John Pope updated the committee. We are working on GCTE goals to support the time to definitive care and work with improving transfer out times and care for level III and IV as well as improving the transfer in times to all centers. We want to collaborate with the Registry Subcommittee to narrow it down to two or three points. We would like to present some cases in the following Winter meeting. As far as AKI, we have tabled that for now. We meet on the first Wednesday of every month at 9 am. Registry: Tracy Johns updated the committee on behalf of Kelli Vaughn.
	 The Registry Subcommittee has been very busy. We have noticed a lot of missing data and are identifying fields that most commonly have missing data.
	 We have noticed a lot of missing data and are identifying neits that most commonly have missing data. The GA data dictionary has been updated for this year and added data elements. We are concentrating on transfer patient times and time spent at the referring facility. We will create report(s) to analyze the data with the registry group concentrating on data validation and the PI group identifying why time to definitive care takes so long. We have four scheduled meetings for this year, and they will have continued education credit attached to them for your registrars who are certified.

Торіс	Discussion
	 Injury Prevention: Kristal Smith gave a detailed report including: Our subcommittee will focus on raising trauma awareness in our state. Each of our four task forces will develop a webinar/virtual event to promote injury prevention and the trauma system in general. We are looking to develop two webinars within this calendar year. We also have some upcoming opportunities for you all to join: March 03/24/22 at 6:00 pm: Prevent Trauma: The Road Ahead The second iteration of our teen driver safety virtual event April is Child Abuse Prevention Month Prevent Trauma: Child Abuse Prevalence, Prevention, & Response Stop the Bleed U-04/25/22, all-day Bingocize ongoing May is trauma awareness month (toolkit). Stop the Bleed Month Stop the Bleed Day Virtual Blitz-05/19/22, all-day Georgia Falls Coalition-Mobility Walk Bingocize Ongoing June Georgia Stay Safe Week-06/19-06/25
	Many of you should have received your Stop the Bleed hemorrhage control trainer kits. A survey was sent out in late January to get some information from you to capture your level of participation in stop the bleed. We need to designate a champion for your facility and designate a person to deliver these kits to. If you want a hemorrhage control kit from the Georgia Trauma Commission, we can have them delivered to you via state patrol. Once you receive the kit, we need you to scan the QR code to keep inventory. You can also scan the same QR code anytime the hemorrhage control trainer is utilized. If anyone is interested in getting involved with any of the events or doing something in your community that you need help with, we are happy to support and help facilitate these activities.

Торіс	Discussion
LifeLink Updates	Kim Kottemann with Lifelink gave a presentation to review 2021 data trends and updates (ATTACHMENT C). There were no questions or concerns.
Summary	 Jesse Gibson summarized the agenda items discussed. We previously discussed some initiatives we wanted to focus on as a committee: 1) Time to Definitive Care 2) Increase Public Awareness of Trauma 3) AKI Quality Improvement
	We asked each of the Subcommittees to create 1 to 2 goals around one of those. Tracy Johns was able to collect those goals, and everyone was able to report their goals during today's meeting. These goals are not something that needs to be done tomorrow, but over 2-3 years. You can also highlight these initiatives during our ACS or state visits. Jesse asked for the group the share any successes. Afterward, Liz Atkins reviewed the day schedule for Winter Meeting attendees and a brief overview of the next days.
	Jesse thanked everyone for attending in person and virtually.
Adjourn	The meeting adjourned by vice-chair Tracy Johns at 1:58 pm

Minutes Crafted by Gabriela Saye