



Meeting/Project Name:	Combined GQIP and TMD Meeting		
Date of Meeting:	05.17.2022	Start time:	4:00 PM
Location:	Zoom Meeting	End time:	5:00 PM
Chair:	Rob Todd	Minute taker:	G.Saye

Attendees

Last Name	First Name	Organization
Todd	Rob	GQIP, Chair
Solomon	Gina	GQIP, Executive Director
Codner	Jesse	GQIP, Research Fellow
Trotter	Monica	Advent Health Redmond
Mayfield	John	Advent Health Redmond
Ashley	Dennis	Atrium Health Navicent
Johns	Tracy	Atrium Health Navicent
Fabico-Dulin	Josephine	Atrium Health Navicent
Medeiros	Regina	AU Health
Holm	Kyndra	AU Health/Children's Hospital of GA
Hatley	Robyn	AU Health/Children's Hospital of GA
Faircloth	Ashley	Augusta University
O'Keeffe	Terence	Augusta University
Bays	Brian	Augusta University
Routly	Maia	Children's Healthcare of Atlanta
Smith	Alexis	Children's Healthcare of Atlanta
Bhatia	Amina	Children's Healthcare of Atlanta
Rowker	Kellie	Children's Healthcare of Atlanta
Schmid	Moe	Children's Healthcare of Atlanta
Bhatia	Amina	Children's Healthcare of Atlanta
Register	Alicia	Crisp Regional
Bullington	Ashley	Crisp Regional
Siffring	Corydon	Doctors Hospital of Augusta
Kiefer	David	Effingham Hospital
Lewis	Lindsey	Effingham Hospital
Codner	Jesse	Emory
Benjamin	Elizabeth	Emory/Grady
Grant	Lynn	Fairview Park Hospital
Cribbs	Ashley	Grady
Garza	Robin	Grady
Parker	Sarah	Grady
Todd	S. Rob	Grady
Sanabria	Angela	Grady
Rothenberg	Roxanne	Grady Memorial Hospital Burn Unit
Ingram	Walter	Grady Memorial Hospital Burn Unit
Atkins	Elizabeth	GTC
Brown	Kim	Hamilton Medical Center
Paynter	Steve	Hamilton Medical Center
Homsombath	Bounthavy	JMS Burn Center
Parker	Farrah	JMS Burn Center
Goodwin	Mary Beth	John D Archbold
Vaughn	Kelli	John D Archbold
Patterson	Greg	John D Archbold
Page	Karrie	Memorial Health Meadows Hospital
Dunne	James	Memorial Health University Medical Center
Palladino	Kelsey	Memorial Health University Medical Center



Williamson	Whitney	Memorial Health University Medical Center
Palladino	Kelsey	Memorial Health University Medical Center
Urhuogo	Awharitefe	Morgan Medical Center
Gibson	Jesse	Northeast Georgia Medical Center
Vassy	Matthew	Northeast Georgia Medical Center
Burgess	Nadirah	Northside Hospital Gwinnett
Avery	Naila	Northside Hospital Gwinnett
Hannay	Scott	PCRM
Morgan	Heather	Piedmont Athens
Pope	John	Piedmont Cartersville
Gasser	Kelly	Piedmont Columbus Midtown
Bizilia	Mary	Piedmont Columbus Regional
Jacob	Richard	Piedmont Walton Hospital
Hust	Karen	Piedmont Walton Hospital
Martin	Catherine	Polk Medical Center
Hogue	Sharon	Polk Medical Center
Carter	Kerry	Wellstar
Curran	Arthur	WellStar
Page	Emily	Wellstar AMC
Vanderberg	Pamela	WellStar AMC
Kohler	Katherine	WellStar AMC
Renz	Barry	Wellstar Cobb
Ruiz	Kristy	Wellstar Cobb
Thomas	Kyle	Wellstar Kennestone
Van Ness	Jamie	Wellstar Kennestone
Dawson	Megan	Wellstar Kennestone
Gattegno	Mariana	Wellstar North Fulton
Gravlee	Mark	Wellstar North Fulton
Fish	Abraham	Winn Army Community Hospital
Evans	Michele	Winn Army Community Hospital

Agenda Items

Georgia Collaborative Spring 2022 TQIP Report Review

Dr. Rob Todd stated that everyone should have received the TQIP Collaborative report and their centers in the last couple of weeks. Dr. Todd reviewed the presentation and notated some findings.

- Slide 4 (Risk-Adjusted Mortality by Cohort): We are a high outlier for all patients, blunt multisystem, elderly, and elderly blunt multisystem. Penetrating trauma is where we are performing best.
- Slide 5 (Risk-Adjusted Major Hospital Events by Cohort): Looking at the patient categories from all patients across the board, once again, you can see in all patients, the elderly, and the isolated hip fractures as high outliers. If you look across the top, you can see we're really in the eighth plus decile on all these categories as an overall collaborative.
- Slide 6 (Risk-Adjusted Major Hospital Events Including Death by Cohort): you can see all patients, blunt multisystem, shock, and elderly as high outliers. Pointing to the top of the deciles, we're probably performing the best in penetrating in the seventh decile.
- Slide 7 (Risk-Adjusted Specific Hospital Events by Cohort): This breaks it down and looks at the individual event categories. AKI remains an outlier. The other categories were in the fifth-eighth deciles across the board.

Dr. Dunne stated they had put a lot of work into ventilator-assisted pneumonia over the past years, and now it's high in black. I am curious as to why it is so elevated. Dr. Todd mentioned that at the Barnsley meeting, we brought up the VAP guideline, and many people weren't aware we had one. Some centers didn't use the state guideline because they developed their complementary ones. We have not had the VAP guideline readily available for everyone, but Gina and Naila are reviewing it and setting up for a relaunch.

Dr. Ashley asked if we could ask high performers with AKI about what they are doing and learn from them. Dr. Todd stated Jesse Codner surveyed the GQIP centers regarding AKI and endpoints resuscitation. He submitted an abstract, which has been accepted for the upcoming summer ACS meeting. Jesse Codner stated we looked at the survey results for mostly dichotomous answers, yes or no. Then we averaged out the odds ratios that those centers had for AKI. Centers with a designated resuscitation algorithm had a lower mean odds ratio of AKI than those that didn't. What can we disseminate to the centers that don't have a designated algorithm? Another interesting finding is that centers that use the point of care creatinine testing to decide whether to do a CT scan also had a decreased mean odds ratio of AKI.

There were some comments and suggestions from the attendees: Dr. Ashley suggested teaming up the 2 or 3 high-performing centers so they can come back to the collaborative and present how they stay low. Liz Atkins stated blunt multisystem had been an issue for all but two reports over the last several years (for risk-adjusted hospital events, incl death). It might be good to drill down on that and see if any of these are related to transfers.

Dr. Ashley asked what our COVID numbers were? Gina Solomon stated we have not asked for the performance matrix summary from all the centers and have not dug into it for the Spring report yet.

Patient Safety Organization (PSO) Discussions

Gina Solomon stated that they had a presentation by our SAG attorney working on the peer protection policies to see if GQIP meets the criteria to be a Patient Safety Organization. I think GQIP would qualify, and some of the benefits of being a PSO is protection for performance improvement activities on the federal level. Dr. Todd added that the Advisory Committee favors pursuing this, and we don't see any downsides to it.

Workgroup Updates

TBI

Dr. Elizabeth Benjamin stated we are putting together some reports to get some more comprehensive data from each of the centers so that we can get a clear picture of uh sort of the overall view of the TBI patients. Then we can parse out different subgroups as needed. We will be figuring out what our high-risk populations are and what the things that seem to be affecting their outcome. We have sent the reports to various centers and now have most of the data back. We're pulling the data together and then figuring out a subgroup analysis that will make the most sense. Hopefully, we will have some results for the summer meeting.

Opioid

Dr. Katherine Kohler stated that after discussing the multi-modal guideline at Barnsley, I was put in touch with one of the orthopedists at Grady and began looking at the next steps. We have the medications in place for how to do a multimodal guideline, but we realize there's a lot of other education that needs to go into opioids. Over the subsequent meetings, we will be looking at other forms of non-medication therapies for opioid use from an education standpoint.

AKI

Gina Solomon provided an update and stated Jesse Codner had done a lot of work around the 2016-2017 data set analysis, but the group felt it might be time for some new data. The next goal is to pull data using the report from 2016-to 2017 and add a few additional data points. We were waiting for the TBI data pool to complete before sending out another ask.

VAP Guideline Update

Dr. Naila Avery stated we had our first meeting this week, and we saw from the Winter Meeting that many people were not aware that we had a state guideline. We reviewed it and saw a couple of things we wanted to follow up on to ensure the statistics and recommendations were still current and applicable. Hopefully, we will have it finished for review and recommendations for our Summer Meeting.

Dr. Codner mentioned that we have been working on getting the website updated and have a place where people can find the guidelines and who to reach out to. Dr. Todd mentioned that Jesse goes back to clinicals in July, so this will be his last official meeting. He thanked Jesse for all the hard work he had done for our group.

Summer Meeting Agenda

Dr. Todd reviewed the Summer Meeting Agenda on slide 8.

- Thursday, August 11 – Commission Meeting/Evening Reception
- Friday, August 12 – Day of Trauma/Resident Paper Competition
 - We have added a Level III/IV and Pediatric Focus based on the feedback we received at the last meeting
 - We'll have improving practice presentations
 - Spend some time with the workgroups
 - Keynote address from Dr. Lillian Kao
 - Discuss the updates about Arbormetrix. We are finishing up the contract process with them, and our tentative will go live in the first quarter of 2023.
- Registration and room reservation through GSACS Website

Dr. Todd asked any questions or concerns about the GQIP Meeting.

Important Dates

- **ACS Quality & Safety Conference – July 15 - 18, Chicago, IL**
 - *GQIP poster accepted on AKI physician practice survey*



- **TQIP Conference** – December 11 – 13 Phoenix Convention Center, Phoenix, AZ
 - Call for abstracts now open through June 30
 - Room reservations now open and Limited!

GQIP Meeting adjourned at 4:30 PM. The attendees stayed on the call to continue with the TMD Committee Meeting.

