

APPROVED
08.11.2022



GEORGIA TRAUMA COMMISSION

Georgia Trauma Commission Meeting Minutes

Thursday, May 19, 2022

9:00 AM-12:00 PM

Morgan County Public Safety Complex

Meeting Recording: <https://youtu.be/LejZ2C87Fck>

Meeting Attachments: trauma.ga.gov

COMMISSION MEMBERS PRESENT	COMMISSION MEMBERS ABSENT
Dr. Dennis Ashley, Chairman Dr. James Dunne, Vice-Chairman Dr. Regina Medeiros, Secretary /Treasurer Dr. John Bleacher Mr. Courtney Terwilliger Dr. Michelle Wallace Mr. Victor Drawdy	Mr. Jim Adkins Dr. James J. Smith

STAFF MEMBERS & OTHERS SIGNING IN	REPRESENTING
Gina Solomon Katie Hamilton Gabriela Saye Tracy Johns Cheryle Ward Becca Hallum S. Rob Todd Kelli Vaughn John Harvey Jesse Gibson Nadirah Burgess Michelle Archer Bernard Restrepo Jonathan Lieupo Michael Johnson Renee Morgan Kelly Joiner Heather Morgan Richard Jacob Karen Hust Pamela Vanderberg	GTC, QIP Director GTC, Finance Operations Officer GTC, Executive Assistant Atrium Health Navicent (Medical Center Navicent Health) Georgia Trauma Foundation Georgia Hospital Association Grady Health System John D Archbold Memorial Hospital MAGMRC NGMC Northside Hospital Gwinnett OEMST OEMST OEMST OEMST OEMST OEMST OEMST Piedmont Athens Piedmont Walton Piedmont Walton Hospital Wellstar Atlanta Medical Center

Call to Order (00:00:07 on the recording)

Dr. Dennis Ashley called the meeting to order at 9:11 AM with six of nine Commission members present. Dr. John Bleacher arrived a few minutes after Call to Order.

Chairman's Report (00:00:48)

Presented by Dr. Dennis Ashley

Dr. Ashley started his report by recognizing our EMS colleagues for EMS week and appreciation for everything they do for us throughout the state. He shared some events his facility did to celebrate the week and success stories thanks to first responders.

I have also been amazed by the volunteer work with the Committees. Without the Committees, the Commission would not be anything. Thanks to everyone who participates.

Thanks to all the Level III/IV trauma centers that participated in the Readiness Cost Survey. We submitted an abstract to the American Association for Surgery of Trauma, and it was accepted for podium presentation at the national meeting in September. The abstract will also be considered for publication and journal trauma. We are excited that it gives the Level III and IVs national prominence and gets the word out on their costs. We will get you more information about it as we develop the slides.

Liz Atkins asked for a motion to approve the meeting minutes before continuing to the Executive Director Report.

MOTION GTCNC 2022-05-01:

Motion to approve the March 2, 2022, and Called April 28, 2022 meeting minutes as submitted.

MOTION BY: Courtney Terwilliger

SECOND BY: Michelle Wallace

VOTING: All members are in favor of the motion.

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

Executive Director Report (00:09:00)

Presented by Liz Atkins

Liz congratulated Jesse Gibson on winning the national Leadership Award at the Society of Trauma Nurses Annual Meeting. Jesse is the Chair of the Georgia Committee for Trauma Excellence, which is comprised of all the trauma programmatic staff. Thank you Jesse, for leading our state.

Liz referenced page on page 20 of the meeting packet. We track the Super Speeder revenue to ensure we are on target with our budget. Dr. Dunne asked what would be the reason for a decline in revenue. Are people speeding less? Katie Hamilton clarified that the revenue depends on when the fines are paid, not when they incur the ticket. Liz added that it doesn't appear we are in jeopardy of having to adjust our budget. Due to the trust fund, we have our FY23 funds in full. We have to settle up at the end of year on the Fireworks Excise revenue, which can act as a buffer for our budget. We haven't inquired what happens if the revenues fall short of what we were allocated. Vic Drawdy mentioned that state police or patrol might not know where the Super Speeder funds go. Once they find out, they are more diligent on the matter. Dr. Ashley mentioned he is willing to go to a police training day or

banquet to thank them and inform on the result of their labor. Vic Drawdy stated that Stop the Bleed has been the easiest way he can access and educate them on the Super Speeder funds. There are research opportunities too if we can get the data to find out where most of the speeding occurs and correlate with accidents and traumas.

A note on strategic planning starts on page 21, which is slightly different this year. They want the plans by July 11th and are in the form of an excel sheet. Our environmental scan will remain essentially unchanged. The focus shifted to internal service levels, ensuring payments tracking, finances, expenditures, and maximizing our budget. The strategic plan outlines items we have direct control over. We will send the revised strategic plan to you all and can make modifications if necessary.

In the packet, pages 25-32, you will also see the February Trauma Center of Association of America (TCAA) annual virtual lobby day. It was very successful, and we encourage everyone to participate in the future. It is an excellent opportunity to see what is going on at the federal level and eye-opening to see how many people advocate for the funds we need to build a stronger system. Cheryle Ward's sister, Radienne Slaughter, was featured as a trauma survivor and included in the meeting packet. They also provided detailed information on Mission Zero, a bill for improving trauma systems, and the emergency care act, which can be found on their website.

I included a screenshot of the cover of the new Resources for Optimal Care of the Injured Patient (page 34). Unfortunately, all the Level IV criteria was eliminated from the book. The ACS COT has recognized the oversight, and they will be adding it back. They don't know how it will get added, but we'll see how it gets incorporated. The ACS COT has stood up a rural committee comprised of multi-disciplinary rural trauma care providers. The ACS also released the national guideline for Field Triage Criteria. I would encourage you to go on their website to review all the literature and meta-analysis that went into updating the criteria.

May is Injury Prevention Month, and the American Trauma Society has many resources around safe surroundings. There is also a National Trauma Survivor's Toolkit, which is included in the meeting packet, pages 40-45.

The Georgia Trauma Commission will be funding the Pennsylvania Trauma System Foundation (PTSF) consult visits for Level IVs. A Powerpoint in your packets, pages 46-62, describes the education provided to the Level IV trauma centers for a successful visit. Both surveyors are Level IV Emergency Department physicians, which is exciting since the ER doctors drive those programs, and they can get feedback at their colleague level. In November, PTSF will come to report to the Commission on their findings: the strengths, opportunities, and recommendations. Since the November Commission meeting falls on Rural Health Day, we may move the meeting to the Macon Marriott and have it be a full-day meeting. We also have the TMD Committee revamping, and we will have a lot more reports. Dr. Dunne asked if it would be helpful for the Commission members to be present during the Level IV visits? Liz answered that Commission members are not needed during the consult visits but will need to attend the Commission meeting in November to review the results. If we move it to the Macon Marriott, we can invite the rural centers to talk about their experience during their visits. Courtney Terwilliger asked if an EMS representative would need to attend the consult visits. Liz answered that it is customary to have someone from the EMS community present and ask Courtney to bring up that option to the Level III/IV Committee.

We have an update on the malicious email that went out on behalf of Georgia Trauma Commission staff employees. We obtained a new email domain ga.gov, which will be deployed soon. We received additional recommendations for cybersecurity training and multi-factor authentication for several applications.

EMS equipment grants rolled out in April, and we had only 4 out of 177 services that did not participate. We look to have a consistent date for future grants when we open and close the application process.

COMMITTEE AND WORKGROUP REPORTS

Budget Committee Report (00:37:47)

Presented by Dr. Regina Medeiros

Dr. Regina Medeiros gave a brief report on behalf of the Budget Committee, page 65.

- We are excited to report the entire 20 million FY 2023 budget was approved.
- The next item we will tackle is the FY2024 budget, due in September.
- Our grants and contracts workgroup has concluded their recommendations for updates and changes to the existing grants and contracts. We will review a one-page summary of changes at our next Budget Committee.

Level III/IV Committee Report (00:38:56)

Presented by Dr. Greg Patterson

Dr. Greg Patterson referenced the Level III/IV Committee Report submitted to the Commission, page 68.

- Level III/IV Readiness Cost Survey oral abstract was accepted for podium presentation at the AAST
- Level III/IV Trauma Center Consults are progressing. Level III ACS consult visits are already scheduled. Level IV PTSF visits will be October 10-14, 2022, and the orientation PowerPoint was included in the Executive Director Report.
- MARCH PAWS is still ongoing development with the help of Courtney Terwilliger. We hope to have some advances by our next August meeting. Some questions regarding how MARCH PAWS differs from the ACS rural trauma development program. The ACS program was taught by level one trauma surgeons in the rural centers. Ultimately, with MARCH PAWS, we want the rural centers to reach out to the smaller rural areas and create connections.
- The Level III/IV Committee is working with the Administrators Committee for access to specialty care.
- The Committee wants the Commission's attention for the support of the ESO Web-Based registry to help the Level III/IV centers catch up with the other centers in the state. Liz Atkins added that we received an updated quote to include the PRQ report package and the outcomes module. The Commission already approved Web hosting as part of the amended budget. David Newton stated that OEMST already has the system for free, and we have the PRQ reports already done. Liz Atkins noted that they would talk about that at a later time.
- The Committee wants to bring forward a request to approve the ACS Rural-Focused Consult Visit dates. The ACS would visit the vast majority of the regions to do a consult visit for the whole state and see how the trauma system functions from a rural perspective. The dates of the visit would be January 6-13, 2023. Liz Atkins added that they need to confirm the date because they are currently holding that whole week and have to coordinate schedules. We already have a placeholder for the full ACS system visit, but it has not been scheduled due to the need for a NHTSA evaluation first. David Newton informed the Commission that the NHTSA evaluation is tentatively planned for the end of August, which should last a week. The dates will be confirmed once they are assigned site surveyors. NHTSA will provide a verbal report at the end of the visit, but the official report will take weeks.

Kelly Joiner with OEMST brought up the concern of the tight turnaround between the NHTSA evaluation in August and the ACS Rural-Focused visit in January. It won't give us time to absorb whatever NHTSA finds. Regina Medeiros mentioned that OEMST wouldn't fill out the PRQ. The ACS suggests getting a multi-disciplinary group to complete it and compile the documents. It has to be submitted by whoever the requesting agency is. Dr. Dunne agreed that there isn't an ideal time, and it will always be busy. We have good engagement from the rural centers and want to keep the momentum going. Dr. Ashley recognized the trepidation about the timing, but it will be a team effort with the Level III/IV Committee doing the heavy lifting to get that data. Dr. Dunne added that it might be beneficial if David Newton sent the Commission a copy of what the NHTSA PRQ looks like so we can tailor some of those same questions. It was noted that the ACS Rural-Focused Consult visit was not a pass/fail. The ACS will give us suggestions to improve our system and provide us with data and information for action planning.

MOTION GTCNC 2022-05-02:

Motion to approve January 6-13, 2022 dates for the ACS Rural-Focused Consult Visit

MOTION BY: Courtney Terwilliger

SECOND BY: Michelle Wallace

VOTING: All members are in favor of the motion.

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

EMS Committee Report (01:06:07)

Presented by Courtney Terwilliger

Courtney Terwilliger referenced the report on page 67 for the EMS Committee.

- The Committee has a called meeting next week to review the Budget allocated to us. We will also review the issue of ambulance services in rural communities not facilitating timely transport. We will look into the EMS equipment grants to ensure we fund 911 transport vehicles, not general transport. Dr. Dunne added that the Data Committee is also looking at the time for definitive care for the rural areas. The rural hospitals do a great job contacting for transport, but there is a delay from the first hospital to the end hospital. It could be an issue of not enough EMS providers or not enough rigs. The NHTSA evaluation will look into the availability of transportation and has a section on systems of care.
- We had our last subcommittee meeting at the T-Mobile Innovation center. Several presenters gave us information on potential systems that might enhance the AVLS system. We also put out a policy of an "open enrollment" time frame for changing vendors for the InMotion devices. This will allow us to better plan our budget process.
- As part of the MARCH-PAWS initiative, we are investigating the Moodle platform for training purposes.

GCTE Report (01:23:00)

Presented by Jesse Gibson

Jesse Gibson referenced the report on page 72 for the Georgia Committee for Trauma Excellence

- Pediatric Subcommittee continues to work on several things, including gun violence initiatives and the shock index specific to pediatrics. The group has developed a pediatric readiness package to distribute due to new ACS requirements in the Gray Book.

- The Registry Subcommittee is working on the time to definitive care report to identify themes or gaps. They are also discussing the new 2022 ACS Standards, which will require increased trauma registry staff, so there may be a potential for increased resources to our top centers to cover those costs.
- The Education Subcommittee is also working on transfer to definitive care and a PowerPoint to share with non-trauma and lower-level trauma centers. They are also working on a presentation on kidney injury since we are low performers as a state based on our TQIP feedback. The state had education funding left over from the previous FY. They have asked the education subcommittee to help fund educational offerings. The Education Subcommittee had approx. \$11,000 to help fund educational offerings around the state.
- The Injury Prevention and Outreach Subcommittee is busy with injury prevention month and working on programs such as the road ahead, child abuse prevention, and bingosize.
- PI Subcommittee is also working on our shared goal of time to definitive care. They are looking at specific cases and finding trends or barriers in getting those patients out.

There was a brief discussion on telemedicine and how it could help rural facilities treat patients. It is uncertain what kind of liability there would be. Dr. Todd added that the GQIP Advisory Committee had discussed the ability of telemedicine and the potential benefits it could provide to trauma centers.

Trauma Administrators Committee Report (01:35:25)

Presented by Michelle Wallace

- We had a great meeting in March at Barnsley, and since then, we have had a co-chair meeting and a full committee meeting in April.
- We established some workgroups: Finance, Diversion, and Education, which all have chairs. We sent out a workgroup sign-up and have 12 administrators interested in participating.
- We plan to have at least one more committee meeting in July, which will be virtual. The Co-chairs will meet during the summer meeting and have a strategy session.
- I sent some screenshots to Liz and Regina to provide some feedback to finalize our GCC request and send it to DPH. We will need to understand the education rollout. I would like the diversion workgroup to get some feedback.
- Our Co-chairs for the Committee are:
 - Katrina Keefer, LI Co-Chair, Augusta University (Finance Workgroup)
 - Frances Van Beek, LII Co-Chair, Wellstar Health System (Diversion Workgroup)
 - Amy Watson, LIII Co-Chair, Effingham Medical Center (Diversion Workgroup)
 - Damien Scott, LIV Co-Chair, Emanuel Medical Center (Education Workgroup)

Trauma System Performance Committee Report (01:37:52)

Presented by Dr. James Dunne

I am excited about all the enthusiasm around all the committees working together to resolve time to definitive care. The conversion to ImageTrend at the state office has halted our data analysis. Mare Probst added that hopefully, the transition would be completed by June. We are working with the pilot centers to resolve some issues, and once complete, the download will go to all other centers. Once all centers receive the files to download, we will have to wait on each of them to complete the installation. We are working on getting July 2021 through March 31, 2022 data. There was concern regarding relying on centers and their IT security departments to download the files, which could take longer than expected due to approval procedures within each facility.

Dr. Dunne asked David Newton about the progress of the armband project. David Newton stated they are working with EMS PCR vendors to see where the number can be entered on the trip report. Next, they will be reaching out to a couple of hospitals to see how it can be entered into their system. We are also working with the governor's Office of Highway Safety and Law Enforcement to educate on the armbands and put a process together. There is currently no live date for the pilot. The armbands will only be used on car crash victims per the funding parameters. There was concern regarding integrating the armband number into a hospital's EMR, which varies from facility to facility. It is not easy for hospitals to add extra fields to their EMRs and go through approval processes. Hospitals may share the same software, such as EPIC, but each facility has its setup and system. A suggestion of writing the armband number to the History and Physical Note. Many registrars look at the H&P note when abstracting, and the doctor can just notate it in there.

SYSTEM PARTNER REPORTS

Georgia Trauma Foundation Report (01:59:40)

Presented by Cheryle Ward

- We have entered into a partnership with Alexandar Haas, a top fundraising consulting firm. They have worked with thousands of non-profits to get them where they need to be financially. Our first engagement with them is to help us put resources in place to reach the levels of success that we need to advance the state's trauma system. Another item is board expansion and we have successfully onboarded one director. Under the advisement of Alexander Hass, we won't be adding any more until we put together a recruitment strategy that is targeted toward our fundraising needs.
- The Foundation has historically been involved with education, and we are currently working on a project with the State Office of Rural Health to spearhead a continuing education database. It will serve as a one-stop-shop to identify course faculty for the state and nationally approved programs.

Dr. Dunne asked if it is reasonable to assume that the Foundation will be self-sustaining in the future. Dr. Bleacher answered that the Commission will always fund the operational costs of the Foundations. In turn, the Foundation will be able to provide resources and funds for Commission initiatives.

Georgia Quality Improvement Report (02:09:30)

Presented by Gina Solomon

- Workgroup Updates
 - AKI: Plan for more recent data pull for comparison to 2017 data. Poster submitted by Dr. Jesse Codner on AKI Physician Practice Survey accepted at Quality & Safety Conference. Dr. Codner will be leaving us in June to start his clinical. We will have a research resident from Emory take over that role.
 - TBI: Completing larger data pull from centers for analysis.
 - Opioids: Continuing to work on Multimodal guidelines.
- VAP Guideline Review: Workgroup developed to review and update as needed.
- The new contract process requires contracts involving software to be reviewed by the Georgia Technology Authority (GTA). Their review requested numerous changes. Changes completed & back to commercial contract team to finalize and resend to GTA for approval. Once GTA approves can send to benchmarking platform vendor. Awaiting project timeline and SOW for central site project. Liz Atkins added that we could add the platform as part of the center's PBP criteria for the next three years.

- Meetings continue with the special counsel and AG office. The recent focus on clarifying status in regards to HIPAA-covered entities. Moving forward, GTC is clarified as a noncovered entity regarding HIPAA.
- GQIP Trauma Advisory Committee continues to meet monthly. They recently submitted their input for the Day of Trauma Agenda, page 80

Office of EMS and Trauma Report (02:24:17)

Presented by Renee Morgan

Renee Morgan referenced the report on page 81 and gave a couple of highlights:

- We have sent out a copy of the 2019 Trauma Registry Report, which is included in your packets, pages 83-148. Special thanks to Marie and Danlin for putting a lot of hard work into it. We intend to have these reports go out annually, and we are already working on 2020.
- Redesignations are revamping back up.
- We have two new level IV designations in region 4, West Georgia Medical Center and Lagrange.

MAG MRC Report (02:28:17)

Presented by Dr. John Harvey

MAG MRC report can be found on pages 149-150 of the meeting packet. Dr. John Harvey presented on the efforts of the MAG Medical Reserve Corps, such as facilitating deployments for volunteer physicians and aiding with vaccinations during COVID. They have developed some new protocols for a response that were utilized throughout Georgia. In addition to state responses, they have done several trainings, including active shooter drills and Stop the Bleed training. Recently, MAG MRC has partnered with the Georgia Department of Public Health to coordinate shelter support during hurricanes.

Dr. Medeiros asked if most of the MAG MRC operating funding comes from the Commission or if you have funding from outside sources. Dr. Harvey states they do receive other funding in federal funding and grants.

Dr. Ashley thanked Dr. Harvey for the continued support.

MOTION GTCNC 2022-05-03: **Motion to adjourn**

MOTION BY: Vic Drawdy

SECOND BY: Dr. James Dunne

VOTING: All members are in favor of the motion.

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

Minutes Respectfully Submitted by Gabriela Saye