



Georgia Trauma Commission

Georgia Trauma Care Network Commission

Right Patient, Right Hospital, Right Time, Right Means

EMS SUBCOMMITTEE ON TRAUMA

MEETING MINUTES

Thursday, 07 March 2013

Scheduled: 12:00 pm to 2:00 pm

Juvenile Justice Building Rm. 103

Georgia Public Safety Training Center

Forsyth, GA

CALL TO ORDER

Mr. Ben Hinson called the March meeting of the EMS Subcommittee on Trauma to order at the Juvenile Justice Building located at the Georgia Public Safety Training Center in Forsyth, GA at 12:03 PM.

SUBCOMMITTEE MEMBERS PRESENT	SUBCOMMITTEE MEMBERS ABSENT
Ben Hinson, Chair Subcommittee & GA Trauma Commission Member Pete Quinones- Region Three Lee Oliver – Region Five Blake Thompson – Region Six Huey Atkins – Region Ten Courtney Terwilliger – GA Trauma Commission/EMSAC Linda Cole – GA Trauma Commission Richard E. Lee – Region Four David Moore – Region Nine	Jimmy Carver – Region Seven Craig Grace – Region Eight Dr. Leon Haley-GA Trauma Commission Randy Pierson – Region One/Excused Chad Black – Region Two/Excused Keith Wages - OEMS

OTHERS SIGNING IN	REPRESENTING
Jim Pettyjohn John Cannady Kristal Smith Russ McGee Mark Peters	Georgia Trauma Commission Georgia Trauma Commission Region 5 RTAC Region 5 OEMS/T Gwinnett County Fire & EMS

Welcome and Introductions

Mr. Ben Hinson welcomed all who were present and thanked everyone for coming.

Approval of Minutes from January 2013 Meeting

The first order of business was the approval of the minutes from the January, 2013 subcommittee meeting.

MOTION #1 EMS Subcommittee 2013-03-07:

I make the motion to approve the minutes from the January 2013 meeting as written.

MOTION BY:

HUEY ATKINS

SECOND:

RICHARD LEE

ACTION:

The motion ***PASSED*** with no objections, nor abstentions.

DISCUSSION ITEMS:

Mr. Ben Hinson stated that before discussing the DOAA report he would like to address some discussions that have taken place via email recently. Mr. Hinson indicated that he felt there was a need to evaluate the current EMS system. Mr. Hinson referenced the recent audit, indicating that there was some question as to how things were being done.

Mr. Hinson continued, indicating that the Trauma Communications Center was created to solve two problems. The first of which was to tell the medics which hospital to take their patient to in a real time manner. The second was for the purpose of assisting hospitals with patient transfers. The TCC is now in place and operational, while not being utilized properly and there needs to be some explanation as to why.

Mr. Hinson continued by stating that he was aware of some issues where medics felt that they already knew where to take their patients, and some did not understand why Regions 5 and 6 were chosen for the pilot. He explained that Region 5 and 6 was used to begin with because the medics already knew where to take their patient. The purpose was to get the system working and see how well it worked toward improving patient care. The logistics of the EMS system should be evaluated to decide how to make improvements inside county lines.

Mr. Hinson invited the Subcommittee members to discuss what the purpose should be of this Subcommittee.

Mr. Blake Thompson responded indicating that there is an issue for rural areas in the lower part of the state below Macon, as there are no trauma centers. Discussion followed regarding the level of patient care in certain counties by comparison, and the equipment which is needed.

Mr. Courtney Terwilliger added that this was a statewide issue; the issues in one area are not the same as another. This group was formed to bring together representatives from each region, because each region is different.

Discussion ensued regarding the challenges of grant programs and effectively meeting the needs of the citizens and EMS personnel.

Mr. Pete Quinones spoke for Region 3, indicating that there was an issue with the process. Mr. Quinones continued by stating that there should have been a means test to assess where and what the needs are.

The statewide trauma system is welcomed by Region 3; however the distribution of funds needs further research to ensure that finances are distributed properly.

Further discussion ensued regarding how data should be collected, indicating that the medics should be focused on their patients. Suggestions included the usage of GEMSIS data, and creating a way to make the information available for those who need to access the information.

Mr. Hinson continued, stating that there should be more studies conducted to find out what needs to be done to improve response times, save on costs, and improve death rates and EMS.

Mr. Huey Atkins agreed, and added that although he was representing Region 10 he would like to see improvements for trauma care over the entire state of Georgia. Measuring data to include what works best for each community should be conducted. Mr. Atkins agreed with Mr. Quinones regarding the statewide trauma system, indicating that the medics should be focused on their patients rather than making a phone call for the purpose of data collecting. He further agreed that there should be a merging of data sets between GEMSIS and trauma centers as they are already collecting patient data.

Mr. Lee Oliver responded for Region 5, indicating that at a recent council meeting, the directors were overwhelmingly in support of vehicle replacement grants. Mr. Oliver reminded the group that the goal was improving patient care. Mr. Oliver continued, indicating that possibly the TCC pilot should have been conducted in Region 3 where there is more than one trauma center. However, Region 5 has complied and supported the program. He agreed that each region had different needs, and that the priority should be for the patient.

Mr. Hinson stated that he felt there should be a decision regarding how and what data should be collected; indicating a need to find out how many trauma patients arrive at definitive care within an hour from the time the 911 call was originally created. Mr. Hinson felt that this information was not available at this time, indicating incomplete data and a misleading representation regarding response times.

Discussion ensued regarding creating a process to achieve the gathering of feedback from the EMS Directors which would indicate what the needs are for their respective areas. Mr. Quinones added that the TCC could serve as a logistic center for all ten regions, assisting according to each region's unique needs.

Mr. John Cannady responded, indicating that the original vision of the TCC has changed as regionalization has progressed in an effort to meet the needs across the state. As a result of the changes, the TCC has transformed toward a Trauma Communications and Resource Center, identifying that there are many roles that the TCC can play by providing a service to each region based on their individual needs. As a result of drills, discussions have indicated a possibility of utilizing the TCC as a source for storing resource data; allowing the ability to quickly identify where equipment is available in the event of a mass casualty disaster. Mr. Cannady further indicated that there have been regions specify that they appreciate the assistance that the TCC provides as they have continuous issues with diversions, and problems with hospital to hospital transfers. How each region utilizes the TCC is based on the regional plan which is created within each region, the TCC is available as a resource for the construction of this plan. There is currently a plan in place to provide the RAD display to EMS providers.

Mr. Jim Pettyjohn replied regarding discussion for data indicating the golden hour to definitive care, and stated that the TCC has this data available. The TCC is also gathering information regarding injury severity scores and registry numbers.

Discussion ensued regarding how the TCC gathers data and what data is being gathered. Considerations were made in reference to the accuracy of times which indicate the time from injury to definitive care, indicating there is a possibility for those who report the data to represent themselves falsely. Further conversations followed regarding how the data should be evaluated and what the best course of action would be for accomplishing this task. Other topics considered included how definitive care was measured and the accuracy of the recent audit. Ms. Linda Cole reminded the group that the goal is to get the

patient to the right place or a designated trauma center, and it is important to measure how well this is occurring.

Further recommendations considered included combining GEMSIS data with the data gathered by the TCC so that the results would show an accurate representation across the entire state. Mr. Cannady informed the subcommittee that there has been outreach and communication with DPH personnel to attempt to solve the problem of data consolidation.

Further discussions ensued regarding the percentage of patients who arrive at definitive care within an hour, and how this number could improve. Suggestions included developing more level 1 or 2 trauma hospitals, speaking with the communities and recommending steps to improve the level of care; such as implementing 911 systems in rural counties, and improving equipment. Mr. Pettyjohn indicated that these were decisions for the individual RTAC's to discuss.

Mr. Courtney Terwilliger responded, indicating that recent discussions have discerned that the ambulance grants have suffered miscommunications rendering it unsuccessful. Mr. Terwilliger felt that in the future these could be improved upon and reintroduced; however at this point it should be taken into consideration that the ambulance grants become suspended. Mr. Terwilliger further suggested that those funds could be used for the purpose of hiring an individual who will look at Georgia's rural areas and determine how the EMS system is affected by those hospitals which are closing. This information will become important as emergency rooms become busier and more funds are needed to operate.

Discussion resulted interpreting how funding should be used; suggestions included further data analysis and providing the TCC with GEMSIS data as well possibly hiring experienced personnel to evaluate the collected data. Further discussion continued in effort to explain as to why there was not currently a relationship with GEMSIS and OEMS/T to assist in this effort; followed by suggestions for improving this relationship. Additional conversations included the positive and negative aspects involved in collecting data from a hired outside source.

Mr. Hinson suggested revisiting this discussion at future meetings. An ongoing discussion should take place regarding the gathering the data and implementing the integration of OEMS/T to assist in this endeavor.

DOAA REPORT:

Mr. Jim Pettyjohn reported regarding the DOAA, (*report attached*) and advised that Dr. Dennis Ashley has requested that this subcommittee discuss and provide a recommendation or comment to the Trauma Commission regarding moving forward with ambulance grants.

Mr. Hinson inquired from the Subcommittee members how they chose to proceed. Discussion followed regarding the current grant applications. Mr. Huey Atkins suggested that the current applications should continue processing. Discussion continued regarding the future of the ambulance grants; indicating that a motion should be made regarding the current grant applications. Further discussions included that a recommendation should be made regarding the future grants.

MOTION #2 EMS Subcommittee 2013-03-07:

I make the motion to affirm the grant process for the current budget cycle and continue with the grant applications already submitted.

MOTION BY:

HUEY ATKINS

SECOND:

BLAKE THOMPSON

ACTION:

The motion ***PASSED***, with no objections; Courtney Terwilliger abstained as an applicant.

(Mr. David Moore initially opposed, however changed his vote to Affirm after some discussion).

After the vote, Mr. Huey Atkins inquired if the subcommittee still maintained a quorum. Mr. Hinson confirmed less than a quorum of members were present.

EMS FUTURE STAKEHOLDER FUNDING

Mr. Courtney Terwilliger requested that the subcommittee consider funding an outside consultant, as previously discussed, to recommend areas for future funding. Mr. Hinson requested that Mr. Terwilliger provide in writing the scope of what the individual will be responsible for. Mr. Terwilliger agreed, indicating that he would send his recommendations. He further indicated that there should be some training on technology and data collection for EMS Directors, and requested consideration for increased funding for the First Responder Program.

Discussion followed regarding how to improve the EMS system; additionally concerns were expressed regarding complications with applications for funding and uncompensated care. Mr. Huey Atkins offered suggestions for making this process simple.

OLD BUSINESS

None.

NEW BUSINESS

None.

NEXT MEETING DATE AND ADJOURN

The next meeting will take place 02 May 2013, Noon to 2 PM. The subcommittee chose for the next meeting, and possibly future meetings, to take place at the Georgia Public Safety Training Center as it is a centralized location.

Meeting adjourned at 2:25 PM.

Crafted by Tammy Smith