

EMS SUBCOMMITTEE ON TRAUMA

MEETING MINUTES

Thursday, 8 June 2017 10:00 am State Office South at Tift College 300 Patrol Rd Forsyth, GA 31029

SUBCOMMITTEE MEMBERS PRESENT	SUBCOMMITTEE MEMBERS ABSENT		
Courtney Terwilliger, Chair & GA Trauma Commission	Dr. Jeffrey Nicholas- GA Trauma Commission		
Vic Drawdy – GA Trauma Commission	Pete Quinones - Region Three		
Lana Duff – Region One (Conference Line)	David Moore- Region Nine		
Chad Black – Region Two			
Paul Beamon – Region Four			
Lee Oliver – Region Five			
Blake Thompson – Region Six			
Jimmy Carver-Region Seven			
Brandon Fletcher – Region Eight (Conference Line)	K		
Huey Atkins – Region Ten			
OTHERS	REPRESENTING		
Dena Abston	Georgia Trauma Commission, Staff		
Erin Bolinger Georgia Trauma Commission, Staff			
Katie Hamilton Georgia Trauma Commission, Staff			
Billy Kunkle Georgia Trauma Commission, Staff			
Kim Littleton GAEMS			
Renee Morgan OEMS/T			
Dewayne Morgan Baldwin County Fire and Rescue			
Tim Boone	GTRI-AVLS		
David Newton	DPH		
Danny Edwards	Community Ambulance		
Judy Sherling	Twiggs County		
Cynthia Peterson	Mercer University School of Medicine		
Hugh Sosbee	Mercer University School of Medicine		
Laura Bland	Mercer University School of Medicine		
Matt Hatchett	District 150 State Representative		
Bubba Epps	District 144 House of Representative		

CALL TO ORDER

Mr. Terwilliger called the 8th of June 2017 meeting of the EMS Subcommittee on Trauma to order and established quorum with 10 of 13 members present or by phone at the State Office South at Tift College located at 300 Patrol Road in Forsyth, Georgia 31029.

MOTION EMS Subcommittee 2017-6-01:

I make the motion to approve the minutes from the May 10, 2017 EMS Subcommittee meeting as written.

MOTION BY: Vic Drawdy SECOND BY: Paul Beamon VOTING: All members present voted in favor of the motion, ACTION: The motion PASSED with no objections, nor abstentions.

Twiggs County Presentation

By: Representative Bubber Epps

Mr. Epps represents Twiggs County and all of Wilson and Bleckely and parts of Jonesville and other adjoining counties. Mr. Epps appreciates the time and under that last 2 years under Governor Purdue's reign he voted for the support of the Georgia Trauma Commission and its creation. Mr. Epps is hoping to address some rural health challenges with several smaller rural hospitals closing across the state. Mr. Epps says particularly in his counties they suffer from not having a rural area hospital or a 24 hour/ 7 day per week EMS services. Mr. Epps says his county does not have their own ambulance and appreciates our willingness to let him present to us their request. Mr. Epps is requesting an ambulance for his county. Timber harvesting in his area is heavily populated and the local nursing home has ambulatory needs regularly.

Ms. Judy Sherling of Twiggs County presented to the Subcommittee a recap of the last 10 years and her contributions to economic development in Twiggs County. Over this time period there has been economic growth in Twiggs County. There are currently 22,000 cars and trucks going through Twiggs County on I-16 daily and there are needs for ambulatory help. Ms. Sherling says it is a hard sell to new businesses when we cannot provide the area with its own ambulance service. Also there are several new distribution centers and a nursing home that has daily EMS needs. Ms. Sherling hopes today to start a process to obtain 2 ambulances for Twiggs County and they are here today to ask how they begin the process to acquire the EMS needs that rural counties like Twiggs really need.

Mr. Thompson asked who provides ambulatory coverage to Twiggs County at this time. That would be Navicent out of Macon. Mr. Thompson suggests if you are looking to run 2 ambulances 24/7 that the costs could run over \$ 700,000.00 when you consider staffing. Mr. Thompson suggests if you need any help on billing and information for rural county information, Mr. Thompson would be happy to provide guidance. Mr. Drawdy suggested we might appoint a committee from the Subcommittee to provide advice for these rural areas that have EMS needs. Several Subcommittee members offered help, guidance, and suggestions as to how to start the process. Mr. Atkins asked if they had discussed housing an ambulance at Navicent and suggested that a one ambulance EMS service is a challenge to run. Ms. Abston asked about distance to the closest Trauma Center.

Senator Lucas of Hancock County reiterated the need for an ambulance in their area. Senator Lucas shares the same sentiments in regards to the needs in his rural county and the ambulatory need for

Twiggs County and several rural areas along I-16. MR. Terwilliger thanked everyone for coming today and will discuss this request further when the Subcommittee discusses the budget.

AVLS Report

By: Tim Boone

Tim Boone presented a power point slide that will be attached to the end of these minutes. Mr. Boone says the AVLS units began in 2010 and now, in Phase 8 (current year) with a total of 112 agencies with over 1,098 units purchased and in service. The total AVL units in service are 1273 for the state. All of this is being tracked in the Georgia Data base if there is a need for mutual aid or a mass casualty incident. Mr. Boone presented the power point presentation.

Mr. Black discussed the need to have all units online and those that are not properly using the AVL units it was suggested we go out and get those units to distribute to another agency. Mr. Black suggested perhaps having agencies sign and agrees to use their units and have them online in a timely manner. Discussion about future AVL replacements and future collaboration was discussed.

(Mr. Boone's reports are all attached to the end of the minutes)

Update on Scope of Work for FY16 and FY17

By: Brandon Fletcher

Mr. Fletcher began with FY16 work details he indicated that update would need to come from Ms. Littleton or Mr. Beamon with GAEMS for an update. Several programs are in process right now to include PHTLS and TECC. Remaining items include GEMSIS, Just Culture, Child Safety, which Ms. Reese is working on this one and the EMS Instructor class. Mr. Fletcher asked if there were any questions. Mr. Terwilliger said there is one item that needs approval from the group is in the Scope of Work there are 2 instructional level 2 courses where over 40 people applied. Mr. Terwilliger asks that we combine those 2 classes into 1 class and allow 48 students. Mr. Fletcher asks to avoid any contract amendments to just host the 2 classes at the same time to avoid amending the contract. Ms. Abston says that when you submit the progress report that you just add this information.

MOTION EMS Subcommittee 2017-6-02:

I make the motion to combine the two instructional level courses to run concurrently.

MOTION BY: Blake Thompson
SECOND BY: Jimmy Carver
VOTING: All members present voted. David Moore and Huey Atkins voted against the motion.
All others present voted in favor.
ACTION: The motion PASSED with no objections, nor abstentions.

Ms. Littleton gave an update; the 2016 training classes under the MOA, they have announced for the PHTLS training classes that closed at the end of May and they have awarded all of these with announcements of the remaining courses to go out next week. The EMR grant application process has ended at this time. They believe they will be able to award all the applications received, which is around 40, and those should all be awarded and the announcement is coming on that within 2 week. The issue of theses is the timeframe of course completion. There will be additional information to follow on this.

Mr. Terwilliger would like to address the 2016 funds of \$ 135,116.80 that we had allocated to do an AV project. The goal had ben to go to subject matter experts in the trauma world (pediatric and adult) and create videos post these videos on the Accordent system. Many of you know that system has gone away. And the possibility of signing on with the GPSTC crew has also not been able to occur. It was suggested by DPH to use their system, SABA. So essentially we can still use this funding to create the videos but as of right now we are unable to post them. Mr. Boone suggested to look into GEMA's communications training website. He believes this is a cost of around \$7,000 per year. Mr. Boone says this system is reliable and this is the same system Georgia Tech uses. Mr. Terwilliger suggests we get together with Mr. Black and Mr. Boone and discuss this.

Mr. Black asked about two meetings back has asked for the MOU and has sent to Mr. Fletcher and was told by Mr. Fletcher that we can not proceed without Ms. Abston's signature. Mr. Black asked about the status as this is out there between the foundation board and GAEMS. Mr. Terwilliger asked if we could hold a meeting after the meeting or do a conference call to work that out with the scope of work. It was decided a conference call could be held. There are issues with the scope of work and Mr. Terwilliger has his suitcase to camp out to assure this is handled. Mr. Terwilliger directed every ones attention back to the budget screen and to the FY16 funds. Mr. Terwilliger would like to move those FY16 funds into another program. It was originally his philosophy to use these for Regional System Improvement Grants. Mr. Drawdy likes the idea of moving these funds to the regional improvement grant area. Mr. Terwilliger asks if Ms. Abston is on board for this.

The \$ 94,000 Mr. Terwilliger would like to see put towards Critical Incident Stress Management Program. Mr. Black and Mr. Terwilliger have discussed working collaboratively with several entities; The Sherriff's Association and Georgia State Patrol and Fire. Mr. Terwilliger suggests we move \$ 67,154.00 to this program. Mr. Terwilliger has a prepared scope of work for this. This is included in the budget and also includes funds to hire Dr. Tim Boone to manage this. The goal of this would be for Tim Boone to be the lead. Mr. Terwilliger presented to the group his budget plan. Ms. Abston noticed a difference in projected funds required for the program. This is the first phase and will occur over the first year. Mr. Terwilliger would like us to build a strong foundation with the their agencies. Mr. Black asked him Jim Nelms would be included in this as he had presented to the group is Critical Incident Stress program idea. Mr. Terwilliger wants across the board buy in and doesn't want to specify at this time to utilize Mr. Nelms program versus a ground up collaborative commitment of all front line agencies. Mr. Terwilliger discussed the initial plan for this program and the first set of meetings to get this program off the ground. Mr. Terwilliger says this is the short term; the long term of this is to get the Governor involved. Discussion of how many suicides for 2016 nationwide was around 135 for EMT, first responders, etc.

Mr. Boone says the post trauma stress does not necessarily lead to suicide but can cause hell and havoc in other aspects of these folk lives and in the workplace. It is critically important to have (he has managed and facilitated big organizations and companies prior to) e-learning systems that can cost upwards of \$20million. In talking with Mr. Terwilliger and Mr. Black about this you have to get to those that are the owners and managers to buy in first. It is necessary to get the right group to own this and can make a commitment and a difference in getting this type of program off the ground. So once we have a group taking ownership those folk can help identify those in their programs and departments that we need to get together for the 2nd level of planning of this.

Mr. Terwilliger gives an overview of the potential stress program that needs to have 3 components. He hopes it would have a resiliency component that can be put into each training module for new officers, EMT's, fire fighters, and other front line new employees. The critical incident stress management portion and the third portion would be a suicide awareness program that is performed periodically. Mr. Boone would oversee the initial program development. Ms. Abston asked how this course will differ from the one offered by the Department of Public Health. Mr. Terwilliger said the ASPR funding has gone away. Ms. Abston says there are 6 active courses for 2017 on their calendar. Mr. Nelms had been doing the classes

and the ASPR funding will be no longer in 2018. Ms. Abston asked if all of these entities have agreed to come together. Mr. Terwilliger stated the first meeting would include all front line agencies and his hope is to have 100% participation and buy in at the first meeting. Mr. Black wants a statewide initiative where there is a class that those agencies go through together and become part of the team. Lots of discussion about the potential funding of this ensued.

Mr. Terwilliger went back to the budget and it looks like \$ 61,409.00 plus 10% for administrator fees. Ms. Abston asked if Mr. Nelms or Mr. Boone would be administering this. Mr. Terwilliger said Mr. Boone would be handling this. Mr. Atkins asked if Mr. Nelms was willing to work with the team on this, as he understood the last meeting with Mr. Nelms to be that he wanted to take on the program himself. Mr. Boone says this program will have several layers of initial meetings to make sure the right people are well trained for all types of situations. It is intended that we will then have established regional teams of the appropriately trained persons to go out across the state and assist in stressful situations. Mr. Terwilliger and Mr. Black suggest that funding the initial request will provide us enough to get the program going and to monitor its creation. Mr. Drawdy is concerned about how much of a cost we are willing to put towards this and reminded the Subcommittee members of prior funding that did not give projected outcomes. Mr. Boone says he has to figure this thing out and find out who the real players will be in the initial phase. Mr. Terwilliger says after the first meeting we would see whom all is buying in and if it does not come to fruition we can re purpose the funds and not put the big chunk towards this initially. Ms. Abston asked for Mr. Terwilliger to clarify his projection about this program. Would there be 45 students or 20 students with 25 trainers as the spreadsheet presented was confusing. Mr. Terwilliger says there will be 2 different groups, first group of 20, and second group of 25. Mr. Boone says we will not know these numbers until the first meeting.

The concept is a fudge factory if you will Dena and the scope of work is on the focus groups of a range of 6 to 10 to keep us within the budget. Mr. Boone says these will be a series of meetings/workshops, and each meeting will produce a product to be used. The ultimate plan that these folk develop will help guide the training and get the counselors to those in need. Mr. Terwilliger says unless there is any more discussion he would like to get a motion together.

MOTION EMS Subcommittee 2017-6-03:

I make the motion to have an initial meeting to fund a potential stress management program for the state of Georgia.

MOTION BY: Blake Thompson
SECOND BY: Paul Beamon
VOTING: All members present voted. David Moore and Huey Atkins voted against the motion.
All others present voted in favor.
ACTION: The motion PASSED with no objections, nor abstentions.

Mr. Terwilliger continued going over the budget after a brief lunch break. He asked everyone to bring their attention to the FY18 Trauma Commission budget and the total allocation to EMS is \$2.7 million and is reduced by the AVLS funding which holds 23.3% of the EMS stakeholder budget. There is agreement to \$110,000 of the budget to fund Leadership courses and \$298,000.00 towards regional grants. Mr. Terwilliger would like to take the leftover \$135,116 and the Vizitech residual funds of \$ 26,000.00 and put those into the Regional Improvement Grant fund as well. Ms. Abston reminded the group that the budget for the EMS group needs to be ready for Dr. Ashley's' review at the August Commission meeting and that it may not be smart to put an actual amount to the Regional Improvement Grant solely because

Georgia Trauma Commission: EMS Subcommittee on Trauma Meeting Minutes: 8 June 2017

that amount fluctuates. Mr. Thompson discussed placing caps in regions to help spread the funding around more effectively.

MOTION EMS Subcommittee 2017-6-04:

I make the motion to move the Vizitech residual funds and the \$135,000.00 from the AV project into the Regional System Improvement grant fund.

MOTION BY: Blake Thompson SECOND BY: David Moore VOTING: All members present voted. David Moore and Huey Atkins voted against the motion. All others present voted in favor. ACTION: The motion PASSED with no objections, nor abstentions.

Mr. Terwilliger continued to review the budget categories. There was lots of discussion to prepare for the next EMS Subcommittee meeting to finalize the FY18 budget. There are several placeholders and suggestions to fund and not fund placeholders for particular items. ACR's were discussed to not be funded this year along with the child seat tech classes as there is still funding to host some of these courses. Mr. Oliver in regards to ACR's sees that as an opportunity to raise the bar across the state in regards to patient care. Mr. Oliver, as an example suggest placing an order for ACR-4's and if the service doesn't have an ACR-4 they will be required to use their proceeds to purchase and those agencies that have ACR-4's can use the funds received for other equipment needs. Mr. Kunkle says that most RTAC meetings he has attended have had requests for the ACR-4s. ACR-4's cost around \$ 400 each. We have put out 259 ACR's across the state at this time. Mr. Terwilliger would prefer these funds to go into the equipment grant fund pot and we can encourage agencies to use their funds to purchase the ACR-4's. Mr. Oliver believes we need to raise the bar on pediatric transfer equipment across the state. EMT instructor course was next, there are currently 2 classes going, and the cost for both classes is around \$ 22,000.00 a class. The group agreed to have room in the FY18 budget for additional instructor courses. The remaining funds Mr. Terwilligers asked the group if we can get a motion together and move remaining funds to the equipment grants. Mr. Atkins suggested that we require agencies without ACR's to use funds to purchase the ACR's. Ms. Abston asked if we would require them on all trucks. Mr. Oliver added that he would like to withhold some funds to go for Twiggs County. Ms. Abston says they need a better regional plan to come to us for funding. As the budget items were moved around it is showing a value of \$ 1,096.00 per truck and an ACR costs around \$ 600.00. Discussion about distribution and how we track those agencies that already have the ACR's ensued. Ms. Morgan gave a suggestion on how to request that an ACR be a requirement for the trucks. Mr. Terwilliger says we need to have our Scope of Work prior to the date in August Dr. Ashley would like to have everything finalized by. Mr. Terwilliger suggests a meeting perhaps by conference line to further discuss the scope of work.

MOTION EMS Subcommittee 2017-6-05:

I make the motion to move the residual funds for FY18 budget of \$ 1.3 million to the equipment grant and require agencies that do not have them to purchase an appropriate pediatric mobile restraint device.

MOTION BY: Lee Oliver **SECOND BY**: Blake Thompson **VOTING**: All members present voted. David Moore and Huey Atkins voted against the motion. All others present voted in favor. **ACTION**: The motion PASSED with no objections, nor abstentions.

MOTION EMS Subcommittee 2017-6-06:

I make the motion to approve the FY18 budget as presented.

MOTION BY: Vic Drawdy SECOND BY: Blake Thompson VOTING: All members present voted. David Moore and Huey Atkins voted against the motion. All others present voted in favor. ACTION: The motion PASSED with no objections, nor abstentions.

Meeting was adjourned at 1:15 P.M.

Minutes Crafted By: Erin Bolinger



GEORGIA AUTOMATIC VEHICLE LOCATION SYSTEM (AVLS)

Status Report 8 June 2017

AVLS UNITS DEPLOYED SINCE 2010

Phase	Agencies	AVLS Units Purchased	AVLS Units in Service
Phase 1	27	200	234
Phase 2	20	200	218
Phase 3	27	150	153
Phase 4	8	128	112
Phase 5	12	110	97
Phase 6	5	77	107
Phase 7	14	150	192
Phase 8	5	83	160
Totals	112	1,098	1273

Georgia EMS AVLS Program Participants Phases 1 – 7



Region	# UNITS
1	99
2	84
3	263
4	65
5	149
6	107
7	10
8	81
9	133
10	81
Grady	101
Mid GA	100
Total	1273

AVLS UNITS WITH AIRTIME AND SW MAINTENANCE PAID BY GTCNC

- Was up to1164 with 90 replacements this spring
- Will be ~964 by end of June

REPLACEMENT SCHEDULE

We have 10 in inventory we can swap when needed

From now forward will be replaced with MG90 units at ~\$1500 each

Recommend we replace on as needed basis vs. large numbers at once

```
Lifecycle ~ 8 years = \bar{a} ~125 units per year =
```

Verizon Airtime 950-1000 units at ā \$32.00/month =

Sierra Wireless Service fees \$125.00 per unit =

\$187,500 per year

~ \$ 365,000 per year

<u>\$120,500 per year</u> \$673, 000

COST/BENEFIT RESEARCH

UNDERSTANDING THE VALUE AND COSTS OF THE AUTOMATIC VEHICLE LOCATION SYSTEM FOR GEORGIA TRAUMA CARE

PLEASE TELL US STORIES ABOUT:

HOW AVLS SUPPORTS TRAUMA CARE

- 1. THE WAYS THE SYSTEM ADDS TO THE PROVIDERS' ABILITY TO SAVE LIVES IN TRAUMA SITUATIONS?
- 2. WAYS THE SYSTEM MAY HINDER SAVING LIVES IN TRAUMA SITUATIONS?

HOW AVLS CONTRIBUTES TO FLEET MANAGEMENT

- 1. WAYS THE SYSTEM ADDS VALUE BY HELPING TO MANAGE THE AMBULANCE FLEET IN DAY TO DAY TRAUMA AND MEDICAL RESPONSE?
- 2. WAYS THE SYSTEM DETRACTS VALUE FROM MANAGING THE AMBULANCE FLEET IN DAY TO DAY TRAUMA AND MEDICAL RESPONSE?

HOW AVLS AFFECTS PROVIDER BUDGETS

- 1. WAYS THAT THE SYSTEM COSTS THE PROVIDER MONEY OUT OF POCKET, HOW MUCH MONEY, AND HOW SEVERE THE BURDEN IS?
- 2. WOULD THE PROVIDER BE ABLE TO ASSUME MONTHLY AIRTIME FEES OF \$40.00/UNIT IF FUNDING WERE NOT AVAILABLE FROM THE STATE?
- 3. WOULD THE PROVIDER BE ABLE TO ASSUME ANNUAL MAINTENANCE FEES OF \$125.00/UNIT IF FUNDING WERE NOT AVAILABLE FROM THE STATE?

HOW AVLS SUPPORTS MUTUAL AID AMONG PROVIDERS

- 1. HOW HAVE YOU USED AVLS IN SUPPORT OF MUTUAL AID?
- 2. HOW COULD IT BE USED MORE EFFECTIVELY TO SUPPORT MUTUAL AID?

SUGGESTIONS ABOUT HOW GTCNC COULD MAKE THE AVLS MORE EFFECTIVE FOR TRAUMA CARE, EMS OPERATIONS, MUTUAL AID ETC...