

GEORGIA TRAUMA COMMISSION

Thursday, 21 November 2019

Children's Hospital of Atlanta Scottish Rite Campus- Main Auditorium 1001 Johnson Ferry Rd. NE. Atlanta, Georgia 30342

COMMISSION MEMBERS PRESENT	COMMISSION MEMBERS ABSENT
Dr. Dennis Ashley, Chairman	Dr. Robert Cowles
Dr. Fred Mullins, Vice Chairman	
Mr. Victor Drawdy, Secretary/Treasurer	
Dr. John Bleacher	
Dr. James Dunne	
Dr. Regina Medeiros	
Dr. James Smith	
Mr. Courtney Terwilliger	
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STAFF MEMBERS & OTHERS SIGNING IN	REPRESENTING
Liz Atkins	Georgia Trauma Commission, Staff
Billy Kunkle	Georgia Trauma Commission, Staff
Katie Hamilton	Georgia Trauma Commission, Staff
Amanda Jackson	DPH
Alex McKeithan	DPH
Renee Morgan	DPH/OEMST
David Newton	DPH/OEMST
Marie Probst	DPH/OEMST
Leona Rittenhouse	Governor's Office of Planning and Budget
Sharon Nieb	Emory IPRCE
Becca Hallum	GHA
Scott Maxwell	M&M, Inc.
W. Scott Lewis	Region I RTAC Coordinator

Mark Peters	Region III RTAC Coordinator
Stephanie Jordan	Region IV RTAC Coordinator
Kristal Smith	Region V RTAC Coordinator
Farrah Parker	Region VI RTAC Coordinator
Stephanie Gendron	Region IX RTAC Coordinator
Kara Allard	GQIP
Lori Mabry	Georgia Trauma Foundation
Tracy Johns	Navicent Health Medical Center
Karen Hill	Children's Hospital of Atlanta
Jennifer Hutchinson	Children's Hospital of Atlanta
Gabriele Saye	Children's Hospital of Atlanta
Moe Schmind	Children's Hospital of Atlanta
Job Johnson	Children's Hospital of Atlanta
Mary Alice Aubrey	Children's Hospital of Atlanta
Gina Solomon	Northside Gwinnett
Jessie Gibson	Northeast Medical Center
Maria Silva	Northeast Medical Center
Jessica Mantooth	Northeast Medical Center
Fred Jones	Medical Association of Georgia
Lynda Drawdy	Region 9

Call to Order: 8:30 AM

Welcome/Chairman's Report

Presented by Dr. Dennis Ashley

Dr. Linda Cole welcomed the Georgia Trauma Commission (GTC) to the Scottish Rite Campus of Children's Hospital of Atlanta. Dr. Cole is a founding member of the GTC and discussed her role in pediatric trauma and the formation of the Commission.

Dr. Ashley gave the Chairman's report starting with a brief recap of last week's annual conference of the American College of Surgeons Trauma Quality Improvement Program (TQIP). He noted it was a very informative meeting with many takeaways. Georgia was very well represented at this year's annual meeting participating in both podium and poster presentations. See attached list of podium and poster presentations. Dr. Ashley made special note of a presentation given by Ms. Karen Hills titled; developing and implementing state-wide pediatric trauma imaging guidelines.

Dr. Ashley also provided a brief summary of the GEMSA meeting held in Savannah this past October. Dr. Eileen Bulger gave a presentation on the gaps in research in pre-hospital care. This talk generated a lot of discussion, including the desire to work with Dr. Bulger and incorporate pre-hospital research into our state.

Dr. Ashley noted that Mr. Kunkle attended the ACS Committee on Trauma meeting in San Francisco. Georgia is making a significant impact that is being noticed by the college as well as other states.

Quorum Established: 8 of 9 commission members present.

Administrative Report

Presented by Elizabeth Atkins

Ms. Atkins gave a brief overview of recent GTC operations, thanked the GTC team for their outstanding support in her onboarding over the last sixty days and welcomed special guest Leona Rittenhouse from the Governor's Office of Planning and Budget who was in attendance at the meeting today. She then directed GTC members to their packets for a review of the August 16, 2019 GTC minutes. All minutes will now include any presentations as attachments to add context for reference back to discussions.

MOTION GTCNC 2019-11-01:

I make the motion to approve the minutes of 16 August 2019 Commission meeting with noted changes.

MOTION BY: Vic Drawdy **SECOND BY:** Dr. Dunne

VOTING: All members are in favor of motion.

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

Ms. Atkins shared the Commission's goal to go paperless for future meetings. She reviewed the new process for having all key meeting information available electronically at least one week prior to a meeting to allow time for stakeholders to review content. The changes will be implemented over the next couple of meetings to ensure a smooth transition.

Ms. Atkins discussed some updates to performance base pay requirements and the additional orientation meetings, further discussions on this to come.

The GTC annual report is available on the GTC website. All GTC members received hard copies of the annual report with today's packets. Many thanks to our partner agencies for the great collaborative effort on the GTC annual report.

We will be moving our January 16th, 2020 GTC meeting to the Capitol. We anticipate starting with a breakfast for the legislators at 08:30AM to give the GTC members an opportunity to interface with the elected officials and then commence the GTC meeting at 10:00AM. Details for the January meeting will be posted to the website.

Ms. Atkins was also in attendance at this year's TQIP meeting and shared with the group some highlights from her sessions. The trauma system development breakout session included a discussion on time to care vs. time to the "right" care, strategic helicopter placement and system metrics. The live simulation was excellent and generated much discussion around broader implementation; as many of 50% of attendees were not actively engaged in simulation of some sort.

There was also a recurring theme around high reliability principles as they relate to trauma care. Ms. Atkins noted that we are already tracking a lot of the mentioned data in our quarterly reports. She will continue working with Ms. Morgan and Ms. Probst to collaborate, and she suspects by 2021 have a dashboard looking at system health.

Ms. Atkins congratulated Ms. Johns for winning first place in the abstract competition in the geriatric category.

As part of the business of the annual meeting Ms. Atkins asked the members to review the current commission bylaws. Dr. Ashley asked commission members for any comments or recommendations for changes to the bylaws. There were no requested changes or updates to the bylaws. A motion was made to approve the bylaws as written.

MOTION GTCNC 2019-11-02

I make the motion to approve bylaws as they were presented.

MOTION BY: Dr. Fred Mullins **SECOND BY**: Dr. John Bleacher

VOTING: All members are in favor of motion.

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

Per the bylaws it is necessary to elect new offices for the trauma commission. Dr. Ashley took a moment to thank Dr. Mullins and Mr. Drawdy for their service over the past four years as officers of the commission. Dr. Mullins in the role of vice chair and Mr. Drawdy in the role of secretary/treasurer.

Dr. Ashley then reviewed the current slate of nominees: Dr. James Dunne nominee for vice chair and Dr. Regina Medeiros, nominee for secretary/treasurer.

The Commission was unanimous in approving both Dr. Dunne and Dr. Medeiros for the appointed positions.

VOTING: All members voted in favor of the new officers.

Ms. Atkins reviewed the recent super speeders revenue report. Ms. Hamilton reviewed (Pg. 10) the budget items starting with the 4% reduction budget. Discussions about the issues with contracts and DPH processes. Mr. Drawdy made mention of being behind on RTAC coordinator payments. Mr. Drawdy asked if we could submit for a month early on our contractors to get them paid on time. Ms. Atkins suggested Mr. Drawdy and Ms. Hamilton and she talk offline. Ms. Hamilton proceeded with her review of the budget. The operations budget was also reviewed.

The look of the budget report will change beginning with the January meeting. You will see a breakdown of all Operation expenses. Ms. Atkins says the goal in using QuickBooks is to give us precise insight and transparency into the budget and funding allocations.

System Planning Report

Presented by Billy Kunkle

Mr. Kunkle began with an update on the Stop the Bleed school response program (Attachment A). To date, approximately 96,306 individuals have been trained throughout Georgia. This portion of the project is close to completion with just a few schools in a few counties remaining. The School Bus initiative is still ongoing with approximately 52% of the school bus systems completed. Several training sessions have been scheduled to take place during the holiday breaks.

Mr. Kunkle reported on the status of the training video that is being developed in conjunction with the American College of Surgeons. This video will be used in a variety of ways including ongoing education/training for teachers. This video is the result of the strong collaboration between Georgia and the American College of Surgeons cultivated by Mr. Kunkle.

The Emergency Department (ED) tourniquet training rollout has been slow. The objective is to place tourniquets and trainers in every ED across the state; the project is approximately 37% complete.

Mr. Kunkle reported on the regional trauma plans and BIS assessments by region. Mr. Kunkle discussed the development of metrics for use with RTAC to measure system health. The goal is to prepare an annual report with a final cohesive reporting structure in the 2nd quarter of FY20.

GQIP Collaborative

Presented by Kara Allard

Ms. Allard reported there were sixteen poster presentations from Georgia at the ACS Quality and Safety Conference, and seventeen oral presentations and posters presented at the Annual ACS TQIP Scientific Meeting. Georgia is well represented on a national platform. Ms. Allard included all of this information in her GQIP report in the GTC packet. Ms. Allard presented a map showing all statewide center participation in these recent events. Ms. Allard asked if there were any questions on the submitted report or interactive participation map. Ms. Allard will distribute map to members.

Injury Prevention Subcommittee

Presented by Dr. John Bleacher

The Injury Prevention (IP) subcommittee held a conference call October 29th. After much discussion they decided to proceed with injury prevention grants that could be used for research or any type of IP project. Eligibility is for all participants across continuum of care. Injury prevention priorities for Georgia include falls, transportation related injuries and intentional injury. Successful grant applications will be data driven and relatively easy to replicate across the state. There is a total of \$90,000 available for the grants. Grant awards will be in the amount of \$10,000 to \$\$30,000 with an expected 12 to 18-month timeline.

The turnaround time is fairly short with letters of intent due in late December and full proposals due February 7^{th.} The goal is to award funds during the March meeting. Dr. Dunne asked about the grant application process. It was mentioned that although we are including research, we know there are existing IP programs out there that are just missing a crucial funding piece, those are eligible applicants too.

The remaining \$10,000 will be used to support two additional IP events: Trauma Day at the Capitol (IP showcase) and the Spring Symposium IP Summit.

Dr. Ashley thanked Dr. Bleacher and the IP Subcommittee for its important work. Injury prevention is very important, and the GTC can use guidance on how to get into the IP arena. Dr. Ashley hopes this will invigorate and identify areas and processes where we can invest more in the future in injury prevention.

Injury Prevention - IPRCE

Presented by Sharon Nieb

Dr. Nieb thanked the Commission for giving her time to explain the Injury Prevention Research Center at Emory (IPRCE) program (attachment B). Dr. Nieb's presentation gave an overview of the administrative core of IPRCE task forces and the GTCE Injury Prevention program. Dr. Nieb gave a breakdown of the Task force of IPRCE: Transportation Safety, Fall Prevention, Violence Prevention Drug Safety, and Traumatic Brain Injury. The GCTE Task Forces are; Traffic injury, Falls and Violence Prevention. Dr. Ashley thanked Dr. Nieb and hopes for future collaboration with IPRCE.

OEMST Report

Presented by Renee Morgan

Mr. Newton (Attachment C) discussed armbands. This armband will go on the patient that meets system of care criteria. The number on the armbands will be used to link all patient care reports (PCR) relevant to a patient. Dr. Dunne asked who will put the arm band on and what will the trauma centers do since they have their own armbands. Mr. Newton says there will be a barcode on the armband and EMS will add that band number to the patient's PCR's. This should allow for copy and paste to the trauma records and should have a same number for PCR's, crash reports and trauma reports. Ms. Probst is working to add this field to our trauma registry. Mr. Newton is working with Georgia Department of Transportation (GDOT) on crash report input. Dr. Ashley asked when this will all occur. Mr. Newton does not know how long it will take to build the infrastructure. We need to confirm the metrics we want added as a group. Ms. Johns asked if it matters who we have our registry through, it will not matter says Mr. Newton. Ms. Johns asks would we be able to get PCR's out of this. Mr. Newton says hospital hub already provides this information. Mr. Newton explains that this is because of how data is driven by first name; last name and a first responder may not know a name as a result many of the data are incomplete. Dr. Dunne asks how a patient that goes to a hospital that does not participate in the trauma registry is linked with this arm band. Mr. Newton says there will need to be education across the spectrum from first responders, police officers, to the hospitals. Discussion of PCR's and data sharing of critical care hospitals that do not participate in the trauma registry. Discussion of how bringing all front-line patient care together (GHA, first responder's, EMS) for education of the arm bands will be critical for the success of the new armband initiative. There was much discussion about the arms bands and keeping on the patients during inter-facility transfers between hospitals and how buy-in from hospitals is critical.

Ms. Morgan gave report to year end comparison of years. Ms. Morgan explains it covers designated trauma centers, over/under triage, surgeon response times to top tier trauma activations, registry record closure rates, admission to nonsurgical services and meeting

attendance. These are all deliverables we work with the Commission on and are included in the contracts for the 26 centers funded by the GTC. Over the last year we have made changes and we also worked with the burn centers to ensure the data we are collecting is worthwhile. Included is your packet is an updated trauma center list with Cobb being a new level III added to our centers. Ms. Morgan reviewed the record completion rate and data is blinded. All level 1 centers are compliant. There is also improvement in the level 2 and 3 centers. There have been noted struggles in level III and level IV centers.

Ms. Atkins discussed how she, OEMST, and Ms. Hamilton are working with those centers experiencing turnover and helping them get on board with the required reporting. Ms. Atkins and Ms. Morgan are also working together on a designation status update for the January GTC meeting.

Georgia Trauma Foundation

Presented by Lori Mabry

Ms. Mabry gave a report on the foundation. The Trauma Awareness day at the Capitol is February 20th, 2020 and we will have an injury prevention showcase. The plan will be showcasing some of our programs and survivor speakers at the capitol steps. Any updates Ms. Mabry will keep us posted. The research grant reports will be reviewed shortly. There are still two (2) \$ 10,000.00 grants available and the foundation will continue to offer these grants yearly until there are any changes. All FY19 education courses are completed and we have some FY20 course to be completed. With the budget changes we are working out some courses. The TOPIC course will be held in March at the trauma symposium at Chateau Elan. March 18-20, 2020 will be the spring meeting a trauma symposium and an injury prevention summit on 3/18. Registration is open on the foundation website. Day of Trauma in August will be moved back a week to August 6th and 7th.

Ms. Mabry and Ms. Atkins went over the grant review and status update process and reporting template. There were no questions. Awardees are required to report bi-annually (twice annually) and present at either the spring or summer meetings upon project completion.

GCTE Report Presented by Karen Hill

Ms. Hill, new chair of GCTE, reported on behalf of GCTE. Jesse Gibson is now the co-chair and Ms. Atkins will continue to serve on GCTE as past chair. Ms. Hill reviewed what each subcommittee has been working on. This information is also included in the GTC packets.

EMS Subcommittee Report	Presented: Courtney Terwilliger
See attached PowerPoint presented by Mr. Terwilliger.	
Minutes crafted by Erin Bolinger ,Regina	Medeiros, and Elizabeth V. Atkins

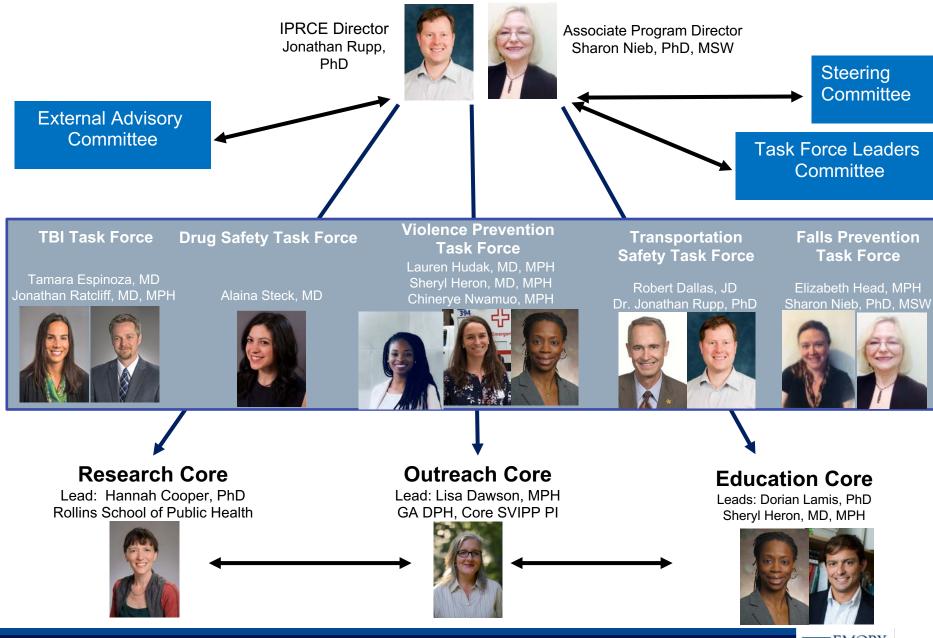
IPRCE Task and the GTCE Injury Prevention Program

Thursday, November 21, 2019

Sharon Nieb, PhD, MSW



Administrative Core





Task Force Break Down

IPRCE

Transportation Safety

Falls Prevention

Violence Prevention

Drug Safety

Traumatic Brain Injury

GCTE

Traffic Injury Prevention

Falls Prevention

Violence Prevention



Fundamental Work

Using data to develop and validate tools and interventions to prevent injury.

Using trauma data as a basis for implementing validated programs.

Dispersing research based tools as a means of education.



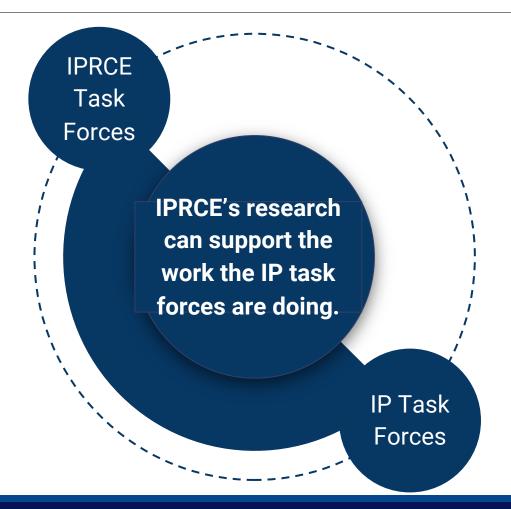
Task Force Members

Task forces includes a wide variety of stakeholders from the community, from the lay person to leaders in health systems and physicians.

Task forces include state and members of the trauma community.



Synergy



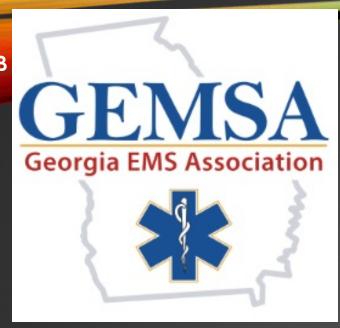


Injury Prevention Research Center at Emory

Questions?



ATTACHMENT B



Updates on 2016FY, 2017FY, 2018FY and 2019FY Contracts with the Georgia Trauma Commission



GEMSA is honored to partner with the Georgia Trauma Care Network Commission

Fiscal Year 2016 & 2017 Simultaneously

2018FY

2019FY

LEADERSHIP PROGRAM



2016FY - 28 STUDENTS COMPLETED

2017FY - 22 STUDENTS - COMPLETED

2018FY - 25 STUDENTS - COMPLETED

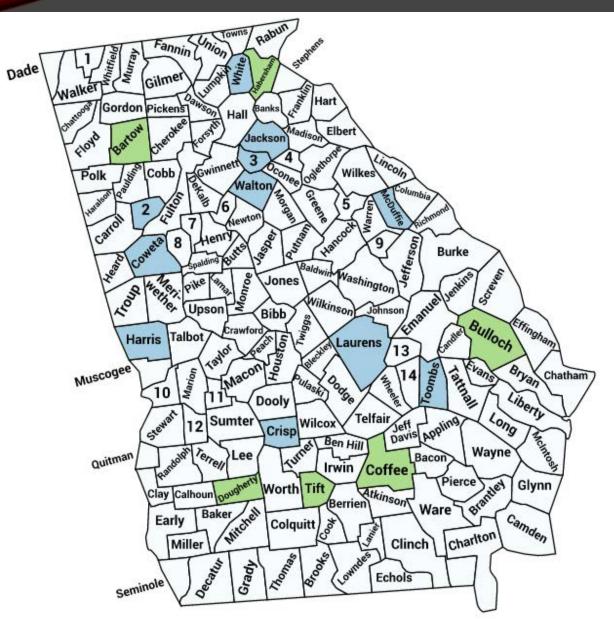
2019FY - 25 STUDENTS - COMPLETED

Leadership Program Year 1 through Year 8



TACTICAL EMERGENCY CASUALTY CARE

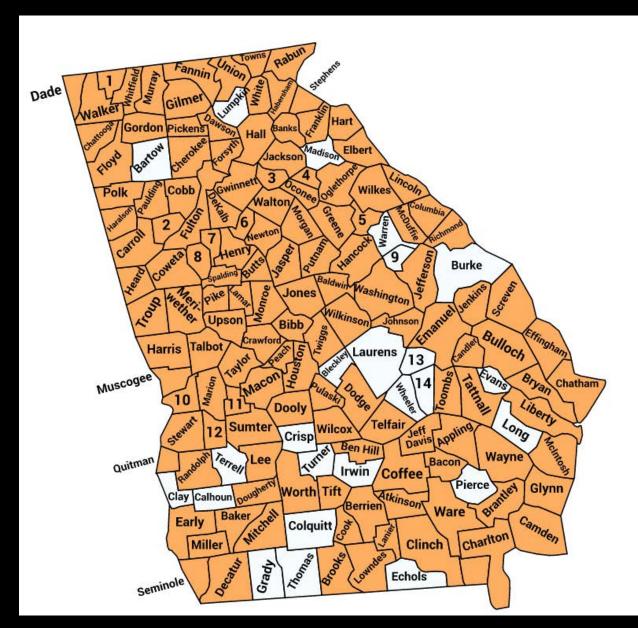
- 2016FY Classes
- 2017FY Classes
- In 2016FY 2 Classes taught in Habersham County
- In 2017FY 2 Classes taught in Tift County



- 1 Catoosa
- 2 Douglas
- з Barrow
- 4 Clarke
- 5 Taliaferro
- 6 Rockdale
- 7 Clayton
- 8 Fayette
- 9 Glascock
- 10 Chattahoochee
- 11 Schley
- 12 Webster
- 13 Treutlen
- 14 Montgomery

TRAUMA TRIAGE PROGRAM

- This Program was delivered over Fiscal Years 2014, 2015 & 2016
- Coordination and Delivery of 2400 Trauma Triage Bags and 22,500 Triage Tags to 105 Services
- This Program is completed



- 1 Catoosa
- 2 Douglas
- 3 Barrow
- 4 Clarke
- 5 Taliaferro
- 6 Rockdale
- 7 Clayton
- 8 Fayette
- 9 Glascock
- 10 Chattahoochee
- 11 Schley
- 12 Webster
- 13 Treutlen
- 14 Montgomery

TRAUMA SYMPOSIUM

Scotty Bolleter, MD. (Inventor of Easy I.O.) and his Team delivered lecture and 'hands on' training to these students

2017FY - Savannah, Georgia 106 Students

2019 FY - Savannah, GA Trauma Symposium & Cadaver Lab Savannah, GA Students ?? Cadaver Lab Instructor Workshop – 22 Students

These Programs are completed

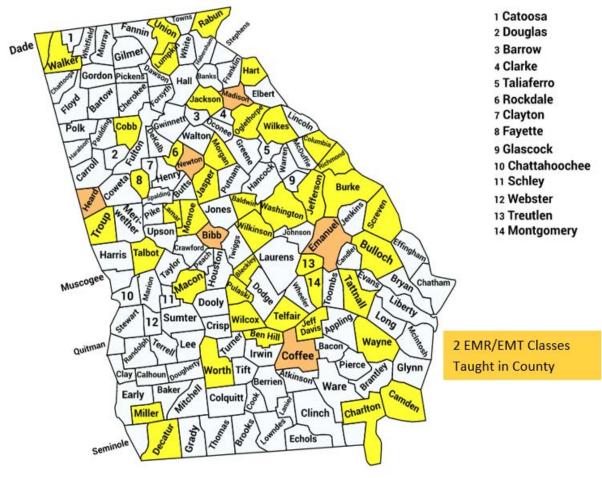
EMR/EMT PROGRAM

37 courses required by contract deliverables - 59 classes delivered

2016FY & 2017FY EMR/EMT Programs were administered simultaneously

This Program is completed

2016FY EMR/EMT Courses

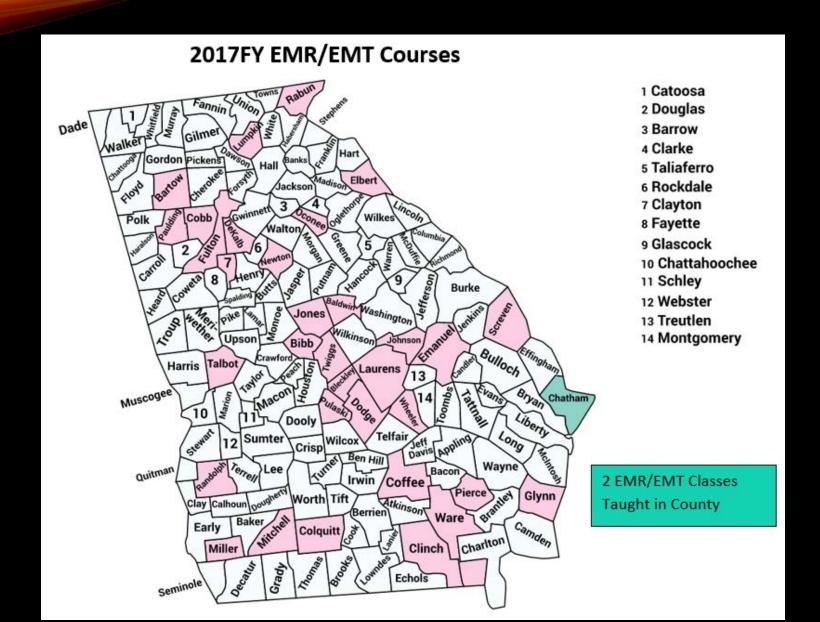


- 37 courses required by contract deliverables 59 classes delivered
- 2016FY & 2017FY EMR/EMT Programs were administered simultaneously

37 courses required by contract deliverables - 36 classes delivered (7 courses awarded but Services did not utilize Grant)

This Program has classes in progress

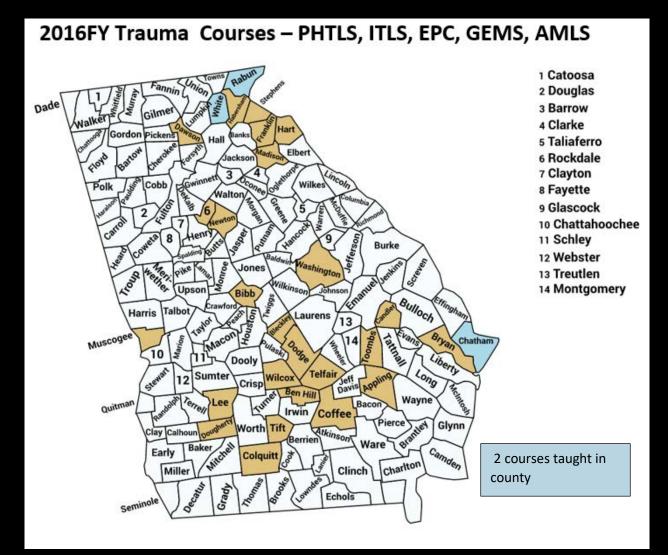
2016FY & 2017FY EMR/EMT Programs were administered simultaneously



TRAUMA COURSES (PHTLS, ITLS, AMLS, EPC & GEMS)

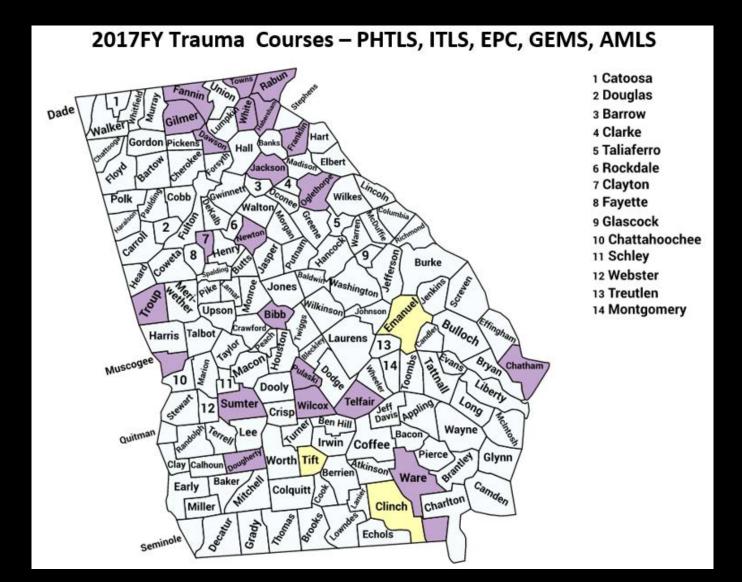
In Contract to Deliver18 Courses

31 Delivered (Program Completed)



 19 courses required by contract deliverables
 24 classes awarded to date – Courses

 This Program has classes in progress



EMS INSTRUCTOR TECHNIQUES

- 2016FY Contract called for 2 classes of 24 but with time constraints GTC allowed us to combine the 2 classes - August 2017 - 46 Students completed
- 2016FY In July 2018 and February 2019 EMS Instructor Techniques course completed for 2018FY Contract – Executive Director D. Abston suggested that use remaining funds from this 2016FY Program along with residual funds from other 2016FY Program to fund these courses 16 and 19 students completed
- 2018FY August 2019 EMS Instructor Techniques course held at GPSTC 18 students

The 2016FY Program is completed the 2018FY Programs has residual funds

GEMSIS PROGRAM

- 2016FY GEMSIS Program
 - GEMSIS Workshops by Region

• Region 1 - October 2, 2018 35 Students

• Region 2 - December 16, 2018 23 Students

• Region 3 - November 1, 2018 34 Students

• Region 4 - October 3, 2018 37 Students

Region 5 - November 2, 2018 23 Students

• Region 6 - August 28, 2019 14 Students

• Region 7 - September 12, 2018 13 Students

• Region 8 - September 13, 2018 16 Students

• Region 9 - August 29, 2018 36 Students

• Region 10 - October 17, 2018 11 Students

2016FY and 2017FY October 2019

GEMSA Educators & Providers Conference

Chatham County

145 Students

JUST CULTURE PROGRAM

- 2016FY and 2017FY Combined together to produce 1 large class
- December 5-6, 2018 32 Students at Lake Blackshear, Georgia
- Residual funds from 2016FY Trauma Triage Program (GEMSA negotiated lower rate per Triage Bag than originally quoted) were used to produce this Program

REGION 8 IMPROVEMENT GRANT FARM MEDIC COURSES

- Region 8 contracted with GEMSA to provide Farm Medic Classes - To Date – 5 classes have been conducted
- 2017FY Funds –
 Course in
 Habersham County
 completed
 December 2019
 course will be held in
 Columbia County

