

**Georgia Committee for Trauma Excellence
Minutes May 19, 2010
Medical College of Central GA**

Members Present:

Athens Regional Medical Center	Kathy Sego	Michele West	
Atlanta Medical Center	Rochella Mood		
CHOA Egleston	Greg Periera	Karen Johnson	
CHOA Scottish Rite	Julie McInnis		
Floyd Medical Center	Cherry Jones (online)		
Grady Memorial Hospital	Fran Lewis		
Gwinnett Medical Center	Gina Solomon	Mary Lou Dennis	
Hamilton Medical Center			
John D. Archbold Memorial Hospital	Kelli Vaughn		
Medical Center of Central Georgia	Debra Kitchens	Inez Jordon	
The Medical Center - Columbus		Imogene Willis (online)	
Medical College of Georgia	Regina Medieros		
Memorial Health University Med Ctr	Silla Sumerlin		
Morgan Memorial Hospital			
North Fulton Regional Hospital	Jim Sargent		
Taylor Regional Hospital			
Walton Regional Medical Center	Bambi Bruce		
Guest Facility:			
Barrow Regional Medical Center			
Chatuge Regional Hospital			
Emanuel Hospital			
Medical College of Georgia Nursing			

May Minutes	Approved as written
Trauma Associates of Georgia (TAG)	<p>TNCC course at Fannin was well received. A number of small area hospitals were represented at the Fannin course. Fannin is interested in scheduling another course. Looking for other TNCC venues.</p> <p>TNCC is not free for TAG to conduct but is done basically at cost. There are nominal travel expenses incurred.</p> <p>ENPC: Tifton is interested in a course per Kelli Vaughn.</p> <p>Rural Trauma Team Development Course (RTTDC), April 23 at Emanuel Medical Center, Swainsboro, GA. Course was well received. Instructors were D. Kitchens, R. Medeiros and Dr. Ferdinand. There was no charge for this course on this date. Requests have been received for more courses (Colquit, Morgan Mem., Wills). A budget will be developed for this course. There is a \$ ___ fee for this course, payable to ACS. Instructor time is volunteered. The printing of manuals needed for this course will be the responsibility of the hosting facility. Debra K. reports that there is an ACS meeting in October and more info regarding RTTDC will be available. TAG will consider offering financial assistance for future RTTDC courses.</p> <p>TAG Officers: Chair-Bambi Bruce, Vice-Chair-Rochella Mood, Secretary-Kathy Sego, Treasurer-Jim Sargent. Each of the positions will be for a period of two years, effective this date.</p> <p>By-laws were reviewed. There may be existing by-laws in papers transferred from Rochella to Bambi. Will follow up. In the absence of existing by laws, those proposed will be accepted.</p> <p>Approved whistle blower policy as required.</p> <p>TAG will continue holding TNCC & ENPC Courses to support trauma education in Georgia, especially in the areas of need. There will be two (2) TNCC courses this year and one (1) ENPC course held in the fall.</p>
GAEMS CHANGES Conference	<p>Courtney Terwilleger chairs EMSAC.</p> <p>CHANGES Conference was held in Atlanta this year. This was a two day event. There were more vendors but fewer participants. Plan is to have the conference in Atlanta again in 2011. There is an EMS conference planned for September in Savannah.</p>

	<p>TAG is considering helping with the nursing component at future CHANGES conferences. The nursing component will work if CEUs are available. TAG would endeavor to develop an education track.</p> <p>TAG is willing to coordinate speakers. Need further discussions with GAEMS. Will speakers be paid?</p> <p>GOAL of TAG/GAEMS collaboration is to bring nursing and EMS together. Debra K. and Kelli V. will be in dialogue with Courtney T at the May 20th Trauma Commission meeting. Bambi B. will attend a future GAEMS meeting to make contact between TAG and the EMS community.</p> <p>TAG agreed that the group does not want to be involved in the event planning aspect of the CHANGES conference.</p> <p>Debra K. proposed to GAEMS that TAG gets a financial percentage of all nursing registrations payable to TAG. All agreed.</p>
DI and Report Writer	<p>Greg will send a thank you letter to Josh at DI for his help with the NTDB download and the personal assistance.</p> <p>Report Writer: Consider having DI come to one facility and have a training day for Report Writer. Consideration to have this training at CHOA.</p> <p>Marie: RW learning curve is steep and must start using immediately after training. RW terminology is different but the program is more flexible than FoxPro.</p> <p>Report Writer fees: (from Kelli V., email dated 3/2/10)</p> <p>The quotes below are what Tim gave the State in Oct 13, 09.</p> <p>NTRACS -- \$3000</p> <p>DI Report Writer -- \$2000</p> <p>NTRACS Support -- \$1600</p> <p>DI Report Writer Support -- \$700</p> <p>TriCode -- \$975 (if acquired with DI Report Writer) then the RW annual maintenance fee is waived.</p> <p>Web-based training is \$500 for NTRACS and \$500 for Report Writer (Foxpro or DI)</p> <p>Email from Marie (found on same email from Kelli)</p> <p><i>Hello Everyone,</i></p> <p><i>The quote Karen distributed is the most current.</i></p> <p><i>The DI RW group quote for the web entry technology was cheaper. The rate applied only if all users switched to the web data entry. The GCTE decided</i></p>

	<p><i>it did not want to switch to this technology because the data set was not as complete as the one used in house at your facilities.</i></p> <p><i>The State provides the facilities with adequate funds to cover the registry expenses. It will be up to the GCTE to negotiate the rates for the software. The State will intervene only to insure all users are paying the same rate.</i></p> <p><i>Please include your Trauma Coordinators in the negotiations with DI as they are responsible for the trauma registry within each facility. Also, as a reminder there are Trauma Coordinators not included on this email that do not have registrars. They need to be included as well.</i></p> <p><i>Regards, Marie</i></p> <p>Fran: Talked to other vendors at STN whom had similar products. From a PI perspective, other products were better.</p> <p>Kelli: PI/Outcomes will be very important reportable measures to the Trauma Commission. PI/Outcome functionality should be considered in the registry product maintenance and/or purchase in the future.</p> <p>Karen will send out a question to the NTDB users group asking for feedback on DI RW.</p>
<p>Registry</p>	<p>Registry Chair: Inez has been nominated, Debra will follow-up.</p> <p>AAAM Book. Updated version is \$225.</p> <p>AirLife Georgia, PCR 982 (formerly known as Rescue Air 1, Emory Life Flight and Air Methods) is to be used for helicopter transports.</p> <p>Marie reports that the latest download went well for all.</p> <p>Haitian inclusion criteria: Mechanism of Injury is earthquake. Primary E-Code is Struck by Object.</p> <p>Haitian transfers: Most are greater than 30 days, error received. Should be downloaded to NTDB, if file does not download, will deal with later.</p> <p>CT Angiogram: some are not using since it is not the primary test.</p> <p>Complications: Grady is using both Old/New list of complications in NTRACS. This is being done for reporting purposes.</p> <p>Snakebites: to code or not? Majority of group is not including, however, some capture but do not download.</p>

	<p>EMS service documentation in NTRACS: PCR/Description. Can description be used as primary vs PCR number?</p> <p>Registry manuals: Updates will be on flash drives. Cherry J. has but they are not ready. Manuals need to be sent to new group members.</p> <p>Registry Officers: Karen is accepting nominations for the position of Chair.</p>
Broselow System	Greg reports that DCH has yet to issue contract.
STN	<p>Greg P. attended conference April 6-8. Greg reports there was good representation from the state. Membership from this group is encouraged. There will be a push to get GA RNs more involved in STN. GCTE and TAG's strength would be an asset to STN.</p> <p>Greg is the state STN Chair and Debra K. is the Regional Chair.</p> <p>Subcommittees: Peds (Greg) and Legislative (Regina).</p> <p>Savannah Georgia is being considered as site for the 2012 conference. Also being considered is Charleston, SC.</p>
Trauma Grants	<p>Kelli V:</p> <p>Ambulance grant announcements will not be made public until DCH has: signed contracts, public notice period and the appeal process.</p> <p>SR277: \$10 car tag fee for trauma: November 2010, voters to decide. May 17, there was a conference call with GHA/AHCC (Access Health Care Coalition) to discuss marketing/PR to garner public support of the bill. AMC's CEO Bill Moore is Chair. GCTE will have a voice. It is important that any campaign not be self-serving. Need to involve many entities (GHA, Chambers of Commerce, service organizations, etc.) for support, this is not just a Trauma Commission initiative.</p> <p>GCTE will campaign for support. Need more information. Will wait for a report from the Trauma Commission. Kelli V. will report.</p>
Committee Chairs	<p>GCTE: Chair-Greg Pereria, Vice-Chair-Regina Medeiros.</p> <p>TAG Officers: Chair-Bambi Bruce, Vice-Chair-Rochella Mood, Secretary-Kathy Sego, Treasurer-Jim Sargent. Each of the positions will be for a period of two years, effective this date.</p> <p>Registry Chair: Inez has been nominated, Debra will follow-up.</p>
Report from State Office of EMS	<p>Renee M. is reviewing grant applications.</p> <p>Fiscal year 2011 contracts are being worked on.</p> <p>Interviewing for an epidemiologist to analyze/review trauma registry data. Data will be</p>

	<p>analyzed for PI/Outcome measures. Legislative: House removed funding for trauma but was put back in by senate. The House believed that the Trauma Commission was an overlap with OEMS/Trauma. The House was educated. New Registry users: Working towards Level 4 status, Taylor, Wills, Emanuel and Ocone. Registry interest: Houston, Kennestone, Appling and N.E. Georgia. OEMS/Trauma is doing outreach. A sample FY 2010 Trauma Center Funding Summary was handed out. Kelli V. will f/u with Commission to get clarification on due date for uncompensated component. June 30th plus 90 days?</p>
Trauma Commission	EMS-uncompensated: Regina will send a memo to group (GCTE) detailing how to provide registry info to EMS.
Facility Round Table	
CHOA	Have been approved for a new clinician. There are 13 personnel in Trauma. Has a business operations coordinator.
	<p>Julie reports that EMS video systems to tape lectures of educational presentations to made available to EMS statewide. There will be corresponding tests CE credits available in Peds. RNs are participating in grand rounds. ATCN: Course in August and an Instructor course this year.</p>
Gwinnett	<p>Trauma Nurse Specialist in Sept. ER/ICU RNs. Will have physician speakers. Will start Open Heart service, January 1, 2011. Aortic repairs with vascular. Meeting with Kennestone as a consult as they seek Level 2 status.</p>
Emanuel	Actively recruiting a general surgeon. Census is down.
Barrow	Not present.
Walton	Nothing reported.
Athens	Opening 2 new Ors, new tower with OR/Endo and ortho.
Morgan	Not present.
Columbus	Not present.
Grady	<p>Trauma Nurse Specialist class, have had 10 to date. Future classes: Will determine the most important topics; two days in the classroom and 5 days in the Trauma bay w/a preceptor. Two trauma service managers to be hired. Harland Stone Trauma lecture (5/27). Surgical grand rounds at Eggleston. STN trip to FL. Visited 3 Level 1 centers: ORMC, Gainesville Shands and Jacksonville.</p>

MCCG	New Trauma surgeon, August 1. August 4, 2010: 20 th Annual Trauma Symposium Breaking ground on new Cancer Center. ATLS at Floyd Medical in future. ATCN in Columbus, August 5/6.
Floyd	Not present.
Memorial	Two new ortho/trauma MDs in June. Trauma Dept. is restructuring, will have a new director. Participating in TQIP.
Atlanta Medical	New Trauma surgeon starting 7/10, bringing total to 6.
Archbold	New tower for OR/ER to be constructed. New registrar. New ENT on staff.
N. Fulton	New neurosurgeon joining existing group in July. Will bring group total to 4. Have two thoracic surgeons taking call. Expect to have vascular coverage starting in September. Hosted a dinner, attendees were TMD and TC from AMC and Trauma Committee from NF.
Hiwassee	
MCG	New Trauma surgeon with critical care. Interviewing for a new registrar. Lead registrar to be a back up for state as new centers come on board. Awaiting approval for surgical and critical care fellowships.
Taylor	Preparing for state visit and designation.
Next meeting	July, 2010.

Georgia Committee for Trauma Excellence
Trauma Registrar Sub-Committee
 Agenda/Minutes

March 17, 2009
 1000-1100

Welcome to the Skyland State Office in Atlanta		<p>Attended: Karen J, MaryLou D, Imogene W, Lauren B, Michelle W, Kim B, Marie P</p> <p>Conf Call-In: Inez J, Senesta C, Julia H, Gretchen G, Cherie D, Melissa B, Lynn G</p>
Approval of Minutes	All	Please review Minutes included with this transmission and draft. No modifications noted.
Using the Search of Active Record Status	Marie	<p>Active records can easily be found using the NTRACS main menu Record Manager/Search.</p> <p><i>Find the Record Status by selecting either Active or Closed in the drop down box. Search for Active records status to be sure they are appropriately documented as Ready to Send = No. After doing the Check, if Ready to Send is No, select No do not mark to close (leave active). If Ready to Send is Yes, select Yes mark to close.</i></p> <p><i>Marie will contact each of us via phone to reconcile our records counts as needed.</i></p>

DI RW	All	<p>Will be discussed in the big meeting.</p> <p><i>Most hospitals are interested in RW and want to know if there is a discount for the group to purchase and receive training. Group would like training in one location, possibly classroom at CHOA Office Park, at one time. Fran will call DI to discuss details.</i></p>
Trauma List Serve FYI Only	All	<p>The American Trauma Society (ATS) is pleased to announce the roll out of the ATS Trauma Register Distance Learning program. This program can be ordered on-line at www.amtrauma.org<http://www.amtrauma.org/>.</p> <p>ATS members can purchase this program for \$599 each and non-members can purchase it for \$699 each. ATS is offering a bulk rate pricing for ATS members only for purchases of 10 or more for the rate of \$499. All 10 persons participating in the bulk rate must be ATS members.</p>
Question from Savannah	Mary Lou	<p>On the ED Assessment 1 screen, if pt is DA (direct admit) should you look for ETOH and Hematocrit info on the referring hospital documentation since they will not go thru the ED?</p> <p><i>Yes, if you can find this info on the RH info, use it.</i></p> <p>On ED Assess 2 for a DA what should the ED Dispo be?</p> <p><i>Do not leave blank as previously said, use either</i></p>

		<p><i>actual location the pt is sent or N/A or ?Unk selection.</i></p> <p>For an ER to OR then d/c directly to home, since there is no Home selection, what is used?</p> <p><i>We will use N/A or ?Unk</i></p>
2010 Data Dictionary Changes in Hosp Dispo screen	Mary Lou	<p><i>1 Discharged/Transferred to a short-term general hospital for inpatient care</i></p> <p><i>EMS transport is no longer required</i></p> <p><i>2 Discharged/Transferred to an Intermediate Care Facility (ICF)</i></p> <p><i>Long-term Facility is removed, only in #9</i></p>
First 24 hr Blood	?	<p>If blood is given at Referring Hospital before Transfer, should we use their blood amount? What if pt receives blood at Ref Hosp and our ED?</p> <p><i>Yes, if documented that blood was given in the first 24 hours, use Ref Hosp info. If blood was also given at your ED, use both.</i></p>
Base Deficit		<p>Where is this info found?</p> <p><i>Typically done in the ED in pts w/head injuries and on vent, found in ED documentation, Respiratory Therapy reports ABG</i></p> <p><i>Some feel Lactic Acid is a better choice and have made a Custom Data Point to collect this info.</i></p>
DI Patch/Update	Mary Lou	<p><i>DI will be sending out a new patch that must be applied before the next download. If Hospital cannot do the patch, DI will take care of it, but you must ask</i></p>

		<i>them.</i>
Transfers s/injury	?	<p>Do we include transferred pt if there is no injury?</p> <p><i>No, this pt does not meet criteria for registry if they do not have an injury that falls within the ICD9 range of 800.00 – 959.9 with exclusions 905-909, 910-924, and 930-939. As discussed before, if pt has isolated seat belt sign (belly contusion) without known internal injury the generic code can be used, i.e., 959.12/510402.1 in order to get the pt into the registry and in case they come back for related injury.</i></p>
Deleted Records	Karen	<p>DI stated the deletion of a record for any reason will not delete same record from the NTDB database which is separate within NTRACS, unless you choose to reuse the registry number. Karen will send process for deleting these records.</p>
State Report	Marie	<p><i>Marie has run Trauma reports for each registry and will plan meeting with each registrar to discuss findings as they relate to the Ready to Send records Active vs Closed status. All RTS No records should be Active, all RTS Yes records should be Closed. Additional reports handed out were those regarding Monthly Reporting, Attendance and Contract information.</i></p>
Other: Position Rotation	Karen	<p>If anyone is interested in co-chairing the Registry Sub-Committee Mtg for the next 2 years, please send me your names. We will have 2 co-chairs and volunteers will be accepted.</p>
Next Meeting		May 20, 2010 Macon

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Addendum: State Grant Summary 2010

Contract Name	Eligible centers	Time Period	Deliverables
Annual money for Registry support	All designated trauma centers	July 1, 2009 - June 30, 2010	Quarterly reports Quarterly registry downloads to State Office Annual report 75% attendance @ GCTE mtgs
Trauma Capital grants	Levels 1 and 2	April 1, 2009 - March 31, 2010	Monthly reports Form 5111, if applicable
Uncomp care & Readiness costs, incl Performance Based Payments	All designated trauma centers		Readiness: Maintain designation Meet criteria of ACS 25% of funds to MDs Performance Based Payments: Participation in readiness costs webinar Participation in readiness costs summit Registry data submission to State Office Uncompensated care: Submission of financial data upon request to Bishop & Associates 25% of money allocated to physician claims Monthly reports
New Trauma Center start up grants	Newly designated centers or those with intent to start - must have paperwork of intent		

