

#### **Meeting Agenda**

### Thursday, 17 November 2011 10:00 am until 1:00 pm

Call to order and Chairman's report Dr. Dennis Ashley

Appreciation of Kelli Vaughn and Rich Bias Dr. Dennis Ashley

Welcome New Georgia Trauma Commission members: Dr. Dennis Ashley

Dr. Robert Cowles
Dr. Fred Mullins

Quorum established Dr. Dennis Ashley

Election of Officers (Vice chair and Secretary/Treasurer)

Dr. Dennis Ashley

15 September Meeting Minutes Approval (Action Required) Jim Pettyjohn

Agenda and Administrative Report review Jim Pettyjohn

Commission Business Operations Report Judy Geiger

Trauma Communications Center Report John Cannady

Proposed Trauma System Entry Criteria Changes Dr. Dennis Ashley

System Development Reports:

RTAC V Regional Trauma Plan Presentation Kristal Claxton Smith

(Action Required)

RTAC VI Regina Medeiros

DPH, OEMS, and Office of Trauma

Dr. Pat O'Neal and Staff

Presentation:

Brain & Spinal Injury Trust Fund Commission Kelley Mautz

State Action Plan Coordinator

Brain and Spinal Injury Trust Fund Commission

Law Report Alex Sponseller

Old Business Dr. Dennis Ashley

Next meeting: Annual Workshop and Retreat, 26, 27 January in Rome. Dr. Dennis Ashley

Venue: 4th Floor Weaver Board Room, Peyton Anderson Health Education Center, Medical Center of Central Georgia, 877 Hemlock Street, Macon, Georgia 31208.



#### **ADMINISTRATIVE REPORT**

#### **November 2011**

Super Speeder Revenues for period July 2011 thru October 2011: Report details attached.	Page 3
\$200.00 Fine- collections <u>up</u> for July thru October 2011 over July t \$3,750,950 vs \$2,610,540 respectively.	chru October 2010:
Reinstatement Fee- collection <u>up</u> for July thru October 2011 over J 2010: \$1,762,560 vs \$1,174,409 respectively.	uly thru October
Total collections for July thru October 2011 over July thru October \$5,513,510 vs. \$3,784,949.	2010:
Open Contracts Tracking: Reports Attached. Jim Pettyjohn to present	Page 5
Performance Measures Review: Reports attached Judy Geiger to present	Page 7
FY 2012 Expenditure Report To Date: Report Attached. Judy Geiger to present.	Page 9
Proposed Trauma System Entry Criteria Changes: Current TSEC and CDC criteria attached. Dr. Ashley to present	Page 15
EMS Region VI Trauma Advisory Committee Report: Report Attached Regina Medeiros to report	Page 17

			ent of Driver Service			
		HB 160 Not	ce and Revenue Tracki	ng		
SUPER SPEEDER - \$200 F	INE					
		Second Notice -				FY
	Initial Notice	Suspension			Amount	Collection
Month and Year	(\$200 Fine)	(\$50 Fine)	Receivable Total	Revenue Collected	Outstanding	Rate
Y 2010						
January 2010	142	0	\$ 28,400	\$ 200	\$ 28,200	
February 2010	1,084	0	216,800	15,200	201,600	
March	2,546	0	509,200	73,012	436,188	
April 2010	3,659	0	731,800	97,368	634,432	
May 2010	4,746	57	952,050	226,095	725,955	
June 2010	4,927	505	1,010,650	293,195	717,455	
′ 2010 Total	17,104	562	\$ 3,448,900	\$ 705,070	\$ 2,743,830	20.4
′ 2011	C 1CC	007	1 270 550	402.600	706.050	
July 2010	6,166	927	1,279,550	482,600	796,950	
August 2010	5,863	1,536	1,249,400	637,600	611,800	
September 2010	6,669	2,157	1,441,650	695,450	746,200	
October 2010	5,760	1,980	1,251,000	794,890	456,110	
November 2010	5,107	2,471	1,144,950	696,250	448,700	
December 2010	4,301	2,688	994,600	787,700	206,900	
January 2011	4,498	2,958	1,047,500	847,285	200,215	
February 2011	7,111	2,256	1,535,000	1,135,695	399,305	
March 2011	5,886	2,073	1,280,850	1,019,570	261,280	
April 2011	5,056	1,479	1,085,150	778,250	306,900	
May 2011	5,334	1,577	1,145,650	907,290	238,360	
June 2011	5,390	3,367	1,246,350	766,655	479,695	
' 2011 Total	67,141	25,469	\$ 14,701,650	\$ 9,549,235	\$ 5,152,415	65.0
2012						
July 2011	6,264	2,382	1,371,900	971,355	400,545	
August 2011	7,083	2,247	1,528,950	920,895	608,055	
September 2011	6,725	2,322	1,461,100	955,200	505,900	
October 2011	6,672	2,064	1,437,600	903,500	534,100	
November 2011				111,300	-	
December 2011			-		-	
January 2012			-		-	
February 2012			-		-	
March 2012			-		-	
April 2012			-		-	
May 2012			-		-	
June 2012			-		-	
7 2012 Total	26,744	9,015	\$ 5,799,550	\$ 3,750,950	\$ 2,048,600	64.70
		_				
OVERALL TOTALS	110,989	35,046	23,950,100	14,005,255	9,944,845	58.5
				,,		
			FY 2011	2,610,540		
1 11		1	FY 2012	3,750,950	1	

B 160, PART I - REINSTATEN	IENT FEES					
						FY
		Combined No.			Amount	Collection
Month and Year		Notices	Receivable Total	Revenue Collected	Outstanding	Rate
1222						
Y 2010			<u> </u>		ļ.,	
July 2009			\$ -		\$ -	
August 2009		15,489	-		-	
September 2009		14,435	-		-	
October 2009		12,585	-		-	
November 2009		11,538	-		-	
December 2009		16,697	-		-	
January 2010		16,152	-		-	
February 2010		13,481	-		-	
March 2010		17,882	-		-	
April 2010		14,764	-		-	
May 2010		15,558	-		-	
June 2010		16,846	-		-	
Y 2010 Total	-	187,170	\$ 15,988,315	\$ 1,331,835	\$ 14,656,480	8.3
	Average	15,598				
Y 2011						
July 2010		17,940	1,604,035	292,125	1,311,910	
August 2010		22,614	1,951,045	253,505	1,697,540	
September 2010		16,314	1,535,960	274,585	1,261,375	
October 2010	,	19,805	1,725,135	354,194	1,370,941	ı.
November 2010		17,032	1,573,985	208,000	1,365,985	
December 2010		17,270	1,525,570	291,530	1,234,040	
January 2011		12,649	1,196,620	306,805	889,815	
February 2011		13,270	1,332,835	774,490	558,345	
March 2011		16,119	1,612,015	623,935	988,080	
April 2011		13,667	1,325,830	442,465	883,365	
May 2011		16,119	1,526,300	439,905	1,086,395	
June 2011		15,753	1,511,050	356,725	1,154,325	
Y 2011 Total	-	198,552	\$ 18,420,380	\$ 4,618,264	\$ 13,802,116	25.1
Y 2012		16.121	1 150 500	155.145	1 212 225	
July 2011		16,131	1,469,530	456,445	1,013,085	
August 2011		19,288	1,775,010	390,445	1,384,565	
September 2011		18,457	1,678,330	414,480	1,263,850	
October 2011		16,530	1,521,305	501,190	1,020,115	ı
November 2011		-	-		-	
December 2011		-	-		-	
January 2012		-	-		-	
February 2012		-	-		-	
March 2012		-	-		-	
April 2012		-	-		-	
May 2012		-	-		-	
June 2012		-	-		-	
Y 2012 Total	-	70,406	\$ 6,444,175	\$ 1,762,560	\$ 4,681,615	27.4
OVERALL TOTALS		456,128	40,852,870 FY 2011	7,712,659	33,140,211	18.9
				1,174,409		

#### **OUTSTANDING NON-HOSPITAL CONTRACTS**

Vendor	Contract Description	Budget Year Funding	Contract Amount	Amount Outstanding
*Zoltrice, LLC (formally Broselow Luten Solutions LLC)	Hospital and EMS eBroselow software	FY2010	\$200,000.00	\$11,000.00
Turner County EMS Grant	Ambulance Replacement Grant	FY2010	\$73,275.87	\$73,275.87
*Emanuel Medical Center	New Trauma Center Startup Grant	FY2010 funded by FY2011	\$55,000.00	\$13,750.00
Wellstar Foundation	New Trauma Center Startup Grant	FY2010 funded by FY2011	\$330,000.00	\$81,000.00
Wills Memorial Hospital (Hospital Authority of Wilkes County)	New Trauma Center Startup Grant	FY2010 funded by FY2011	\$55,000.00	\$13,750.00
*Zoltrice, LLC (formally Broselow Luten Solutions LLC)	Hospital and EMS eBroselow software	FY2011	\$50,000.00	\$5,000.00
*Georgia Association of EMS	First Responder Training Grant	FY2011	\$115,319.22	\$115,319.22
Georgia Tech Research Institute	TCC software, hardware and operations support	FY2011	\$1,373,679.00	\$906,851.80
Meriwether County EMS Grant	Ambulance Replacement Grant	FY2011	\$73,275.87	\$73,275.87
Heartland EMS Grant	Ambulance Replacement Grant	FY2011	\$72,500.00	\$72,500.00
Lumpkin County EMS Grant	Ambulance Replacement Grant	FY2011	\$72,500.00	\$72,500.00
Wilkinson County EMS Grant	Ambulance Replacement Grant	FY2011	\$72,500.00	\$72,500.00
Glascock County EMS Grant	Ambulance Replacement Grant	FY2011	\$72,500.00	\$72,500.00
Emanuel County EMS Grant	Ambulance Replacement Grant	FY2011	\$72,500.00	\$72,500.00
*Bishop & Associates	Technical Support	FY2012	\$98,900.00	\$62,350.00
*Gifford Hillegass & Ingwersen	Hospital and EMS Audit procedures	FY2012	\$59,545.00	\$26,803.00
OPH/OEMS/T	SB 60 Provision	FY2012	\$489,715.00	\$367,286.75
MOA Dept. of Public Health	Office space rental	FY2012	\$1,642.22	\$1,642.22
Frauma Associates of Georgia	AAAM and RTTD courses	FY2012	\$37,530.00	\$37,530.00

### Hospital Contract Execution Tracking for SFY 2012

Grantee Name	NOA Number	Purchase Order Number	Date PO Created	Notice of Award (NOA) Amount	Date NOA sent to Grantee	Date of NOA execution	Number of Days from date NOA sent to grantee to execution
Athens Regional Medical Center	GTC_Athens2012.1	894	10/21/11	\$366,918.00	09/30/11	10/18/11	19
Atlanta Medical Center	GTC_AMC2012.1	893	10/21/11	\$1,336,794.00	09/30/11	10/18/11	19
Children's Health Care of Atlanta -Egleston	GTC_Egleston2012.1	854	10/17/11	\$398,952.00	09/30/11	10/11/11	12
Children's Health Care of Atlanta-Scottish Rite	GTC_ScottishRite2012.1	856	10/17/11	\$396,704.00	09/30/11	10/11/11	12
Floyd Medical Center	GTC_Floyd2012.1	892	10/21/11	\$445,020.00	09/30/11	10/18/11	19
Grady Hospital	GTC_Grady2012.1	900	10/24/11	\$3,137,764.00	09/30/11	10/03/11	4
Gwinnett Medical Center	GTC_Gwinnett2012.1	857	10/17/11	\$583,025.00	09/30/11	10/11/11	12
Hamilton Medical Center	GTC_Hamilton2012.1	773	10/05/11	\$393,594.00	09/30/11	10/03/11	4
John D. Archbold Memorial Hospital	GTC_Archbold2012.1	895	10/21/11	\$481,487.00	09/30/11	10/18/11	19
Lower Oconee Community Hospital	GTC_LowerOconee2012.1	879	10/19/11	\$43,441.00	09/30/11	10/11/11	12
Medical Center of Central Georgia (MCCG)	GTC_MCCG2012.1	772	10/05/11	\$1,045,067.00	09/30/11	10/03/11	4
Medical College of Georgia	GTC_MCG2012.1	1039	11/09/11	\$1,205,508.00	09/30/11	10/28/11	29
Memorial Health University Medical Center	GTC_Memorial2012.1	855	10/17/11	\$1,384,106.00	09/30/11	10/11/11	12
Morgan Memorial Hospital	GTC_Morgan2012.1	974	11/01/11	\$43,441.00	09/30/11	10/28/11	29
North Fulton Regional Hospital	GTC_NorthFulton2012.1	774	10/05/11	\$506,529.00	09/30/11	10/03/11	4
Taylor Regional Hospital	GTC_Taylor2012.1	776	10/05/11	\$77,160.00	09/30/11	10/03/11	4
The Medical Center Inc.	GTC_Columbus2012.1	775	10/05/11	\$486,381.00	09/30/11	10/03/11	4
Walton Regional Medical Center	GTC_Walton2012.1	1049	11/10/11	\$88,862.00	09/30/11	11/08/11	40
					TOTAL DAYS		258
					NUMBER OF CONTRACTS		18
					AVERAGE DAYS TO EXECUTION		14.3

#### Program Performance Measures as outlined in Office of Planning and Budget's (OPB) Instructions 7/25/2011

As part of OPB's effort to monitor ongoing program performance, each year agencies are required to provide updates to the program performance measures. Performance information provides crucial information for state decision-makers and establishes the context for the state's annual budget.

Program measures are particularly important during periods of fiscal constraint when agencies anticipate the impact of program funding limitations.

OPBs Performance Management staff will work with each agency in developing program performance measures for the Governor's Budget Report and the Agency Measures Report. OPB will be reporting the measures and four years of actual results for each budget program delivering services.

The process this year will consist of three primary steps:

- 1. Review and Update of Agency Program Performance Measures August 2011
- 2. Measure Update in BudgetTool for Publication in the Governor's Budget Report October 3, 2011
- 3. Agency Measures Report published on OPBs website January 2012

Alice Zimmerman, OPB Strategic Planning Coordinator

Assisted Commission Staff in developing both the Overarching Performance Measures and the Performance Measures by Budget Area.

Paula Brown, OPB Budget Analyst

Requested Performance Measures by Budget Area in order to complete the Zero Based Budgeting Evaluation for the Commission's Budget. The Zero Based Budgeting Evaluation is supposed to be available in December.

Overarching FY 2013 Georgia Trauma Commission		Data Year Results					
Performance Measures: Effectiveness, Efficiency and Workload	FY 2008	FY 2009	FY 2010	FY 2011			
Effectiveness:							
Number of EMS Regions (out of 10 possible) participating in Trauma System Regionalization activities	NA	NA	NA	2			
Efficiency:							
Average time in minutes and by Injury Severity Score for a Trauma System Patient to reach definitive care from scene of injury	NA	NA	NA	*Unknown			
Workload:							
Number of First Responders Trained using Commission Funding.	NA	NA	750	Training in progress			

NA Means Not Applicable. GTCNC did not become a budget program until SFY2011

Submitted to Paula Brown and Alice Zimmerman (Governor's Office for Planning and Budget) on 27 September 2011

FY	2013 Performance Measures by Budget Area	_			
Budget Area	FY 2013 Performance Measures	FY 2008	Data Yea	FY 2010	
Commission Operation	ine and the state of the state				
опшинания орогано	The number (in days) required to have grants and contracts executed. (day contract sent to vendor to day vendor notified of contract execution)	NA	NA	57.8	23.4
Trauma Communicatio	ns Center (TCC)				
	Average time in minutes and by Injury Severity Score for a Trauma System Patient to reach definitive care from scene of injury.	NA	NA	NA	Unknown
System Development/A	Access/Accountability				
	Number of EMS Regions (out of 10 possible) participating in Trauma System Regionalization activities with functional Regional Trauma Advisory Committees.	NA	NA	NA	2
	Percentage of eligible designated Trauma Centers participating in the Trauma Quality Improvement Program (TQIP).	NA	NA	NA	NA
Stakeholders Support					
	Percentage of actual readiness costs reimbursed to Trauma Centers	54%	14%	15%	13%
	Percentage of actual uncompensated care costs reimbursed to Trauma Centers	52%	14%	16%	12%
	Number of First Responders trained from funding provided by Commission	NA	NA	750	Training still in Progress
	Number of EMS vehicle equipment replacement grant awards.	NA	56	**19	**19
	Number of hospitals designated in FY 2013 after consultation process with the Trauma Commission.	NA	NA	NA	NA
* Partial or some data av	vailable from Trauma Commission				
state fiscal budget year.	ment Grants for Approved Commission EMS Budget was 29 for 2010 and 10			lata provi	ded is for
Submitted to Paula Brow	n and Alice Zimmerman (Governor's Office for Planning and Budget) on 27 S	Septembe	r 2011		

Georgia Tı	auma Commission	FY 2012		
General Trauma Fund Allocations				
2% Reduction: 11 August APPROVED	Budget	Expenditures	Remaining	
Approved by General Assembly (State and Federal Funds)	\$20,156,896			
Federal Funds ARRA HIE Grant (sub award)	(\$2,500,000)			
FY 2012 State Funds Available for Commission	\$17,656,896			
2% Governor's Proposed Reduction	(\$353,138)			
Proposed Amended FY 2012 State Funds	\$17,303,758			
Commission Operations	\$387,145	(\$111,000)	\$276,145	
Trauma Communications Center	\$786,745	(\$61,580)	\$725,165	
System Development, Access & Accountability	\$419,975	(\$312,375)	\$107,600	
State OEMS/T Allocation	\$489,715	(\$489,715)	\$0	
Trauma Registry (distributed among TCs)	\$648,142	(\$648,119)	\$23	
Total of Above	\$2,731,722	(\$1,622,789)	\$1,108,933	
Available for Stakeholder Distribution*	\$14,572,036			
EMS Distribution @ 20% of available funding	\$2,914,407	(\$900)	\$2,913,507	
Trauma Centers/Physicians Distribution @ 80% of available funding	\$11,657,629	(\$11,657,634)	(\$5)	
Totals for All Allocations	\$17,303,758	(\$13,281,323)	\$4,022,435	

### Georgia Trauma Commission FY 2012

Commission Operations
2% Reduction: 11 August APPROVED

Staff	Budget	Expenditures	Remaining	Salary	Benefits	
Operations Staff Salary and Benefits	\$291,420	(\$93,274)	\$198,146	\$200,062	\$91,358	
Travel for Operations Staff	\$22,900	(\$6,223)	\$16,677	Operations Staf Coordinator	f : Executive Di	rector, Business Operations Officer, & Office
Commission Members Per Diem	\$3,780	(\$420)	\$3,360	6 members for	6 meetings at \$	3105.00 each (ESTIMATE)
Operations						
Conference call account	\$6,000	(\$1,267)	\$4,733	Premier Global: conference calls	\$500.00 per m s) ESTIMATE	onth (Includes: Commission, EMS and GCTE
Website service and support	\$2,500	(\$2,500)	\$0	Hosting and des	sign support (E	STIMATE)
Printing/Supplies	\$5,500	(\$2,906)	\$2,594	FedEx Office ar	nd Office Depot:	: Meetings and Office (ESTIMATE)
Atlanta Office set-up	\$3,500	(\$328)	\$3,172	Computer, moni	itor, fax/scanne	r/printer and supplies
Telephone/ Internet	\$4,200	(\$1,347)	\$2,853	Trenton Telepho	ne: Commissio	n Office (ESTIMATE)
Electrical	\$2,000	(\$432)	\$1,568	Georgia Power:	Commission O	office (ESTIMATE)
Shipping	\$2,500	(\$486)	\$2,014	FedEx (ESTIMA	ATE)	
Staff Cell Telephones	\$19,000	(\$1,437)	\$17,563	Estimate for 5 S Operations budg	staff Cell Phone get to pay for al	s. Moved \$15,000 from TCC budget to Il cell phones.
Contingency funding	\$23,845	(\$380)	\$23,465	Contingency Fu	nding, needed	additional website support
Total:	\$387,145	(\$111,000)	\$276,145			

#### **Georgia Trauma Commission FY 2012**

### Trauma Communications Center Operations

2% Reduction: 11 August APPROVED

Staff	Budget	Expenditures	Remaining	Salary	Benefits	Travel		
		•		1				
Communications Center Coordinator	\$90,800	(\$14,295)	\$76,505	\$52,000	\$23,800	\$15,000	Forsyth-based	
EMS and Hospital Educator	\$81,745	\$0	\$81,745	\$60,000	\$24,135	\$15,000	Atlanta-based	
Communications Center Agents ** 30% Of Payment Goes to Temp Service Abacus	\$336,000	(\$2,640)	\$333,360	\$12 an hour + approximately	- 30% Admin. Fe December 1, 2	ee for 24/7 doub 2011.	ole coverage. To	begin
Capital Expenditures				•				
Hospital CPUs and monitors	\$32,000	\$0	32,000	Reimburse 32	2 Hospital CPU's	s and Monitors	up to \$1,000	
Operations								
AVLS (200 AVLS Unit in Regions 5 and 6)								
Verizon Airtime @ \$42/month/unit EMS Regions 5 and 6	\$50,400	\$0	\$50,400	Current contra shown for 6 m	act with GTRI co nonth ESTIMATI	overs airtime thr E)	ru 31 December	2011 (Amoun
In Motion Service Support Agreement @ \$12.50/month/unit	\$30,000	(\$30,000)	\$0	Currently paid	thru 30 June 2	011 (12 month l	ESTIMATE)	
5 oMM logins per agency @ \$180/agency	\$2,300	\$0	\$2,300	Currently paid	thru 31 Decem	ber 2011 (6 mo	nth ESTIMATE)	
Building Lease and Utilities	\$13,500	(\$13,056)			ties per year at	GPSTC		
Telephone and Internet Access	\$25,000	\$0	\$25,000	ESTIMATES				
SAAB Software licensing fees	\$0	\$0	\$0	SAAB (yearly	) No licensing fe	es until FY 201	3	
SAAB Software Enhancements	\$75,000	\$0	\$75,000	Estimates				
TCC "office" operations and staff telephones	\$0	\$0	\$0	*Moved this b	udgeted amoun	t of \$15,000 to	the Operations E	Budget
Contingency	\$50,000	(\$1,589)	\$48,411	Unforeseen e	xpenses			
Total:	\$786,745	(\$61,580)	\$725.165	Approximately	v 3% cut			

#### **Georgia Trauma Commission FY 2012** System Development, Access and Accountability 2% Reduction: 11 August APPROVED Development and Access Budget Expenditures Remaining Trauma System Regionalization Activities in EMS Region 9 (Memorial Trauma System Regionalization Activities \$0 Health- \$75,000) Continuation funding for EMS Region 5 (MCCG \$115,000 (\$115,000)\$20,000) and EMS Region 6 (MCG \$20,000) TCC and AVLS integration technical assistance and support: 01January Georgia Tech Research Institute \$100,000 \$0 \$100,000 2012 - 30 June 2012 (Current contract extended to 31 December 2011) **ESTIMATE** National Foundation for Trauma Care \$1,500 \$0 Annual membership (\$1,500)\$0 RTTD courses x 3 and AAAM course Trauma Associates of Georgia (TAG) \$37,530 (\$37,530)Accountability Audit and Accounting Services: CY 2009 Uncomp Claims audit; FY 2011 \$0 EMS Uncomp program (claims) audit; and Trauma Physician funding Gifford Hillegass & Ingwersen \$59,545 (\$59,545)process review with recommendations on best practices. (Actual Cost) Technical Services: Evaluate burn care support and financial needs, \$100 Assist CY 2010 TC Financial Survey, Reevaluate TC and physician Bishop + Associates \$98.900 (\$98,800)funding methodologies to include burn centers for FY 2013 (Actual Costs) For additional contracts, accommodating budget short fall and or \$7,500 Additional contracts and costs \$7,500 \$0 unforeseen and increased costs or other contingencies.

(\$312,375)

Total

\$419.975

\$107,600 Approximately 2% cut

Georgia Trauma Commission FY 2012							
EMS Allocation							
11 August 2011 APPROVED							
		Budget	Expenditures	Remaining			
Available EMS Budget @ 20% of available funds for stakeholders: Reflects Governor-directed 2% budget reduction		\$ 2,914,407	(\$900)	\$2,913,507			
Staffing and Meeting Support		\$ 3,500	(\$900)	\$2,600	Staffing and minutes development		
Available for distribution	\$ 2,910,907				Available for distribution		
% Distribution from FY 2010 funding							
EMS Uncompensated Care		\$ 765,569					
EMS Vehicle Equipment Replacement Grants		\$ 1,202,787			#17 Awards at \$70,752 a piece		
First Responder Training Grants		\$ 259,071					
Trauma Care Related Equipment		\$ 400,541					
EMT- B Courses PHTLS/ITLS	4.86%	\$ 141,470 \$ 141,470					
PHILS/IILS	4.00 //	φ 141,470	<b>⊅</b> 0	φ 141,470			
Total	100.00%						
Totals		\$ 2,914,407	(\$900)	\$ 2,913,507			

Budget	Expenditures	Remaining
	Expenditures	Remaining
\$489,715	(\$489,715)	\$0
	\$489,715	\$489,715 (\$489,715)

# PRIMARY TRIAGE DECISION SCHEME\* GEORGIA TRAUMA SYSTEM

1

#### Measure vital signs and level of consciousness

Glasgow Coma Scale Systolic blood pressure ≤ 13 or < 90 or

Respiratory rate < 10 or > 29 (<20 in infant < one year)

YES

NO

Steps 1 and 2 attempt to identify the most seriously injured patients. These patients meet *Georgia Trauma System Entry Criteria*.

Take to a trauma center.

Assess anatomy of injury

2

- All penetrating injuries of the head, neck, torso, or groin associated with an energy transfer
- Flail chest
- Two or more obvious proximal long-bone fractures
- · Crushed, degloved, or mangled extremity
- · Amputation proximal to wrist and ankle
- Pelvic fractures, as evidenced by a positive "pelvic movement" exam
- · Open or depressed skull fracture
- Paralysis



NO

Steps 1 and 2 attempt to identify the most seriously injured patients. These patients meet *Georgia Trauma System Entry Criteria*.

Take to a trauma center.

Assess evidence of high-energy impact

3

#### Falls

- Adults: > 20 ft. (one story is equal to 10 ft.)
- Children: > 10 ft. or 2-3 times the height of the child

#### High-Risk Auto Crash

- Intrusion: > 12 in. occupant site; > 18 in. any site
- Ejection (partial or complete) from automobile
- Death in same passenger compartment

YES

· Vehicle telemetry data consistent with high risk of injury

Auto v. Pedestrian/Bicyclist Thrown, Run Over, or with Significant (>20 MPH) Impact

Motorcycle Crash > 20 MPH

These patients meet *Georgia Trauma System Entry Criteria*. **Take to a trauma center.** 

Assess special patient or system considerations

NO

4

#### Age

- Older Adults: risk of injury death increases after age 55
- Children: Should be triaged preferentially to pediatric-capable trauma centers

#### **Anticoagulation and Bleeding Disorders**

#### Burn

- · Without other trauma mechanism: Triage to burn facility
- In same body area, a combination of trauma and burns (partial and full thickness) of fifteen percent or greater

**Time Sensitive Extremity Injury** 

**End-Stage Renal Disease Requiring Dialysis** 

Pregnancy > 20 Weeks

EMS Provider Judgment (to include known patient medical history)

YES

NO

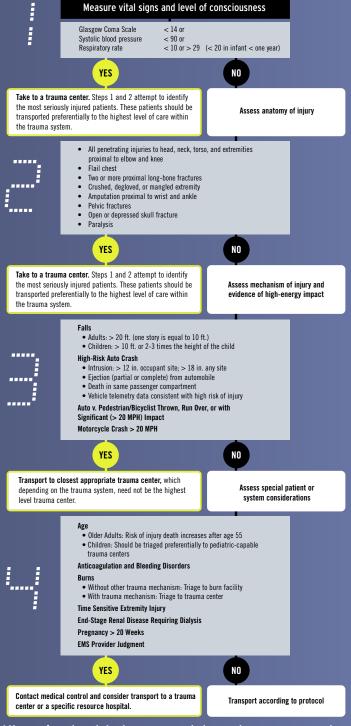
Transport according to protocol

\*Adopted largely from the National Trauma Triage Protocol of the U.S. Department of Health and Human Services Centers for

Disease Control and Prevention

These patients meet *Georgia Trauma System Entry Criteria*. **Take to a trauma center <u>or</u> other appropriate hospital identified in protocols** 

## FIELD TRIAGE DECISION SCHEME: THE NATIONAL TRAUMA TRIAGE PROTOCOL



When in doubt, transport to a trauma center.

For more information, visit: www.cdc.gov/FieldTriage



## REGION VI TRAUMA ADVISORY COMMITTEE

#### TRAUMA COMMISSION UPDATE 11/2011

The Region VI Trauma Advisory Committee met on September 20, 2011. At that time the Regional Plan was reviewed in more detail by all members present. Region VI will utilize the Public Health Model developed by the HRSA as the framework for implementing the regional trauma plan.

There are three main components of this model: Assessment, Policy Development and Assurance

#### Assessment

- Identification of injury problems
- Assessment of system resources: infrastructure, process and performance
- Benchmarks for measurement of change

#### **Policy Development**

- Lead Agency Identification: State office of EMS&T/GTCNC
- Identification of role in policy development
- Enabling legislation: SB60
- Trauma System Plan: Region Plan and State Plan
- Management information system: Registry and TCC
- Benchmarks

#### Assurance

- Enforcement and Regulation
- Patient destination and hospital care
- EMS systems and assurance
- Training and Education
- Evaluation and Performance Improvement

It was decided that work groups would be established to assist with implementation. Five work groups were established. A member of the RTAC was appointed to chair each of the workgroups. Workgroup membership is interdisciplinary and includes stakeholders from the region.

**Education Chair: Tanya Simpson** - The education committee will be responsible for education of all health care providers participating in trauma care within Region VI. Their first task will be the development and implementation of a comprehensive plan to educate EMS providers and hospitals regarding the implementation of the plan, the CDC field triage criteria and the TCC.

Following the primary education related to the plan the Education Subcommittee will coordinate efforts related to trauma education including but not limited to ITLS, PHTLS, ATLS, TNCC and ATCN. The Education Subcommittee will also develop and implement educational programs related to issues identified in the PI committee.

<u>Performance Improvement</u> <u>Chair: Sandra McVicker</u> -The PI committee will develop a matrix for measuring process and outcomes for trauma care delivered within Region VI. The PI committee will also develop a system by which providers within region VI can submit issues for review. Data from the TCC will also be reviewed by this committee and recommendations for improvement will be reported to full committee for a vote.

TCC Chair: Ralph Randall – This committee will function as the primary POC and liaison between Region VI RTAC and the TCC. The members of this committee will make recommendations regarding TCC use and will be the POC for TCC members to report issues identified related to communication and use of the system during the pilot. This committee will assist with the education and implementation of the TCC dashboards and provide any ongoing support to hospital and provides related to the TCC as needed.

<u>Guidelines Chair: Courtney Terwilliger</u> – This committee will be responsible for the development and implementation of guidelines for the care and treatment of trauma victims within Region VI. Some examples of the guidelines they will develop include guidelines for use of the TCC, transport from the field to designated and NDPH as well as interfacility transfer. They will also develop guidelines related to education and performance improvement in conjunction with their respective committees.

<u>Regional Trauma Resource Chair: Pam Tucker</u> – This committee will be responsible for the evaluation of existing resources within Region VI related to trauma care and will make recommendations based on their finding for additional designated trauma centers.

Workgroups are expected to meet between full RTAC meeting to accomplish goals and objects according to their established timeline. Reports on progress will be given at each full RTAC meeting.

The RTAC voted on the executive members of the group. Mr. Ralph Randall was voted in as Vice-Chair and Ms. Pam Tucker was voted in as Secretary. Since that time the RTAC Chair Ms. Joan Wessman has stepped down. Mr. Ralph Randall was appointed as the new Chair and will complete the term of appointment. The vacant Vice Chair position will be discussed at the next full RTAC meeting scheduled for December 1, 2011.

Region VI RTAC is preparing for the TCC "Go Live" date. All hospitals except one have agreed to become non-designated participating hospitals. The remaining hospital is undecided at this time. The NDPH's and designated hospitals are in the process of purchasing their computers. Training efforts will be coordinated through the TCC and the Education and TCC workgroups with implementation in late November through early December.