



Georgia Trauma Commission

Right Patient, Right Hospital, Right Time, Right Means

GEORGIA TRAUMA COMMISSION

Thursday, November 17 2016
 Wellstar Atlanta Medical Center
 303 Parkway Drive NE
 Atlanta, Georgia 30303

COMMISSION MEMBERS PRESENT	COMMISSION MEMBERS ABSENT
Dr. Dennis Ashley, Chairman Dr. Fred Mullins, Vice Chair Mr. Victor Drawdy, Secretary/Treasurer Dr. Jeffrey Nicholas Dr. James Dunne Dr. John Bleacher Mr. Courtney Terwilliger Dr. Robert Cowles	Mark Baker

STAFF MEMBERS & OTHERS SIGNING IN	REPRESENTING
Dena Abston Erin Bolinger Katie Hamilton Marie Probst Renee Morgan Keith Wages Lori Mabry Scott Maxwell Laura Garlow Kristal Smith Billy Kunkle Aruna Mardhekar Cassandra Burroughs Kathy Segoo Kathy Browning Christopher Hogan Brandon Fletcher Jamey Crosby Tawnie Campbell Tracy Johns Lynn Grant Sharon Nieb Kim Littleton Dwayne Morgan Jill Brown	Georgia Trauma Care Network Commission, staff Georgia Trauma Care Network Commission, staff Georgia Trauma Care Network Commission, staff DPH SOEMS/T DPH SOEMS/T DPH SOEMS/T Georgia Trauma Foundation Mathews & Maxwell, Inc. Wellstar Kennestone MCNH- Trauma Services Region III RTAC Wellstar North Fulton Wellstar Atlanta Medical Center Wellstar Atlanta Medical Center American College of Surgeons, Georgia Chapter Doctors Hospital GAEMS Foundation Gold Cross EMS Coliseum Medical Center Navicent Medical Center Fairview Park Hospital Injury Prevention Research Center at Emory GAEMS Baldwin County Fire & Rescue Coliseum Medical Center

STAFF MEMBERS & OTHERS SIGNING IN	REPRESENTING
Deb Battle Jesse Gibson Anastasia Hartigan Greg Nickel	North Georgia Medical Center North Georgia Medical Center Doctor's Hospital of Augusta Monroe County Emergency Services

Call to Order: 10:01 AM

Quorum Established: 10:01 AM, 8 of 9 commission members present.

Welcome/Chairman's Report

Presented by Dr. Dennis Ashley

Dr. Ashley welcomed everyone to the meeting. There is much committee work, OEMS/T work, and commission work. Today Dr. Ashley will cover the successes and go over the Georgia Collaborative that was presented at the National TQIP meeting. Dr. Ashley will also go over the national Stop The Bleed Campaign. Dr. Ashley gave a recap of the Georgia Collaborative that was presented at the annual TQIP conference. Dr. Ashley proceeded to go over the report with slides.

Beginning in 2011 when TQIP began, this initiative and all its components allow us to benchmark ourselves against other hospitals. We were the 2nd state in the country to do this. The funding for trauma centers was broken down into readiness costs and uncompensated care. TQIP sub committees were formed from staff, medical directors, nurses and they worked together with the data which was very little at start up and we were able to find data points to begin to compare our centers with. We then began to refine our data and had ACS review our work and Ms. Atkins presented this in 2015. Error rates dramatically decrease after we began standardizing our data and educating our registrars. This was then published in the American College of Surgeons and recognized nationally. After review, the unknown data for the state of Georgia was 6% while the country was 20%. The hard work put into this made a difference in patient care, trauma survivor outcomes, and showed our system was paying off. In summation once we worked on getting good data we are able to look at outcomes.

GRIT (GA Research Institute of Trauma) is working together, sharing data with several medical directors taking leads. The collaboration and the data being collected exposes areas that we can focus on .An example would be when we unblinded the data we saw that pneumonia and ARDS were items all centers showed struggle with. We are in a new era in trying to deal with our outcomes. If you look at the Fall 2015 benchmark report and compare it to the Spring 2016, you can see significant improvement. We continue to work on our quality of care model. That model focuses on structure, outcomes, and processes. We also continue to improve trauma quality as a group. There is a robust EMS community with educational workshops, leadership, networking, and training. Momentum is strong now with many successes to date in the past 5 years.

Dr. Ashley began with the national consensus on bleeding control. A brief history of this initiative as it was created 4 years ago due to the Sandy Hook active shooter incident outside Hartford, Connecticut. There was need for hemorrhage control as many wounds were extremity wounds. What was determined is that bleeding control taught to citizens was needed to help in situations like this before paramedics arrive. The group has met yearly and worked to create a training course on how to stop a bleed that is easy for any one to learn.

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The White House put out a mandate and wanted this to be a national initiative. Stopthebleedcoalition.org is the website. Today after the meeting, we have this training available and would like as many of you as possible to get certified in stopping the bleed. Dr. Ashley showed a PSA about the campaign and showed the video of what the public is seeing. After the PSA, the national stop the bleed website went from 100 views to 15,000+ views.

Dr. Ashley reviewed the stop the bleed presentation on the Stop The Bleed website and covered the process and the use of the tourniquet and applying pressure until paramedics are there. There was a demonstration on how the stop the bleed kits work. Mr. Terwilliger showed the group how to apply a tourniquet properly. Next up was how to pack a wound and what wounds can only be packed due to their location. Dr. Ashley covered the slide show and told the group our stop the bleed initiative will be explained during the foundations report today. Dr. Ashley wanted to congratulate Chad Black and Deb Battle from Northeast Georgia. They just held their first annual trauma symposium with over 300 people. At that meeting they were able to train over 200 in the bleeding control initiative.

The Data Sub Committee is working on the Dr. Pracht study recently completed. There is a lot of data to go through. We have held one conference call but have plenty to do. Dr. Prachts' report covers NBATS (needs based assessment of trauma services).

Governor's Annual Report

Presented by Dr. Fred Mullins

Dr. Mullins, Ms. Abston, and Mr. Drawdy met with Governor Deal in November. Dr. Mullins presented the Governors' annual report this year. The governor was pleased with all the progress the trauma system has made over the past couple of years. They discussed the fireworks sales tax as well as the super speeders funding. It was an excellent meeting and everyone thought the meeting went well. Ms. Abston added that the Governor was really excited about the Stop The Bleed campaign and many of the commissions' successes to date.

Administrative Report

Presented by Dena Abston

Ms. Abston stated the Administrative report was sent to everyone electronically, was posted to the website, and is in our packet. There is a copy of last minutes meeting in the back of your folder.

MOTION GTCNC 2016-11-01

I make the motion to approve the minutes from the August 2016 Commission Meeting as presented.

MOTION BY: Mr. Vic Drawdy

SECOND BY: Dr. Dennis Ashley

VOTING: All members are in favor of motion.

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

Ms. Abston wanted to confirm the Strategic Planning Workshop to be held in Macon and asked the commission if there was a need to change the dates of this workshop due to the presidential inauguration. It was decided

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that we would leave the dates unchanged, which are Thursday January 19th and Friday January 20th 2017. Ms. Abston went over the super speeders revenue report and the funding received as of late. Ms. Abston created an Amendment 4 Fact Sheet and provided one to each of the commissioners'. Dr. Mullin's indicated that there has not been a significant increase in fireworks accidents since the legalization of fireworks in the state.

Ms. Abston is working on the new web site and presented the logo to the commission. The commissions new website will be easier maneuver than the old website. There will be a physical calendar, all information will be easily found, and more user friendly than what we have used in the past. Ms. Abston reviewed the most recent Trauma Center list and map that Ms. Morgan with OEMS/T has updated. Ms. Abston reviewed the RTAC updates. All RTACS are up and working or already progressing depending on how long the RTAC has been formed. Ms. Abston put a copy of the state wide collaborative poster that Ms. Atkins presented recently in the commission packet.

Georgia Trauma Foundation

Presented By Ms. Lori Mabry

Ms. Mabry began by giving an update as to where the foundation is. The mission of the foundation is to support the trauma system of Georgia through Education, Injury Prevention, and Research. The Georgia Trauma Symposium will be at the end of April 2017 at the Chateau Élan in Braselton.

Education is the foundations priority and the Spring COT and Georgia Trauma Symposium will be April 28th and 29th with courses, meetings, and a welcome event. Ms. Mabry presented a power point presentation and covered grant funded courses recently held. Ms. Mabry discussed organizing of the Trauma Day at the Capital. This event is tentatively scheduled for February 7, 2017 and focus is our Stop The Bleed campaign. Ms. Mabry is looking to develop a statewide work group to work on this initiative. This will be a huge event for our foundation as well as our commission. Ms. Mabry is working with TCAA to make February 7th GA's official Trauma Day. There is a work group being formulated and within the next 3 to 4 weeks we need to have our plan in place for our Day of Trauma.

BCON courses will be held November 29th at Piedmont in Covington. Taking this course are police officers, firefighters, and teachers. The February 8th TNCC (Trauma Nursing Core Curriculum) is currently full but there are still openings for the other February date. Ms. Mabry is looking to build her database of course instructors and hosts for the classes. There is a need for both at this time. There are TCAR courses scheduled; some courses have space while others are full.

Ms. Mabry said the \$5,000 research grants will be rolling out in March 2017 but submission is due by end of December to be considered. Applications are on the Trauma Foundation website.

Ms. Mabry discussed Injury Prevention and the 2017 calendar events and offered help to the Injury Prevention committee.

Trauma on the Capital will be about trauma awareness. If you own a white coat and can make it to the Capital that day, please wear it. We are seeking trauma survivors across the state so please send recommendations to Ms. Mabry. There will be some installation of the large Stop The Bleed kits that day at the Capital. There will be talking points for those to start dialogue or answer legislature questions. A grant was given to GTF from

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ACS for this day. Ms. Mabry hopes to utilize the funds in transportation efforts to get many to the capital that day.

For Trauma Awareness Month in May and for Fall Prevention, Ms. Mabry mentioned that she would be happy to help with all messages and activities surrounding both Injury Prevention initiatives. She has templates built for several things to include logos and poster formats.

Dr. Ashley asked the commission members to please put the February 7th 2017 on their calendars for the Trauma Day at the Capital.

Office of EMS and Trauma update

Presented by Ms. Renee Morgan

Ms. Morgan began with congratulating Navicent with the ACS visit and accreditation for their Level 1 Trauma Center. There are now 30 designated trauma centers with the recent addition of Appling in Baxter and Fairview Park in Dublin. Ms. Morgan noted that this is the most we have ever had at one time. We are averaging about 2 trauma center additions per year and we are working with Wellstar for a rural trauma team.

Education is robust and we are making sure needs are met. Ms. Morgan is putting mentors with each new trauma center. If the trauma center is a level III, she is using a mentor of that same level. The registry information being received and the TQIP data is good, it is important to get this information and Ms. Morgan is pleased with data received. Processes are moving forward with how OEMS/T is working with the commission about the PBP (performance based payment) requirements.

Mr. Wages spoke about the RTAC II conference and the excellent job that Mr. Black did in bringing both the EMS community and the hospital together. Mr. Wages said the newest software version migration (GEMSIS elite) 3.4 for GEMSIS would be challenging in 2017 as the data converts and the new software is implemented. Mr. Wages believes 2018 will be a great year and the software will be established. The OEMS/T office will be moving in early spring 2017.

GCTE SUBCOMMITTEE

Presented by Ms. Laura Garlow

TCAA conference held in San Diego in the fall where Ms. Atkins presented the poster for our state and did an excellent job. TQIP conference was held recently in Orlando. There was an excellent presentation surrounding the Pulse Orlando massacre and there was an abundance of information those that attended took away from the conference.

GCTE sub committees are all actively working to bring best practice to our state. Injury Prevention is working on the Car Fit initiative and has added some new members from North Fulton and West Kennestone. There are some upcoming training events for this initiative in March in Hinesville, Georgia. There are several great balance collaborations throughout the state and cross training is occurring in different regions. Fall Prevention Day at the Shepherd Center had 116 attendees and was an excellent event with lots of help from several

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centers. Injury Prevention resources has a request and would like to ask the trauma foundation to allow repository of injury prevention resources on the foundations' website. This is in the works with Ms. Mabry.

The Emergency Preparedness Committee is working to make sure everyone is compliant with new CMS emergency preparedness requirements. When GCTE meets this afternoon they will review how the state handled Hurricane Mathew. The PI sub committee has not held a meeting since August but a new chair has been named. The Education committee is working with the foundation on some courses. We do need more participation on the TNCC and TCAR topic courses and have some more volunteers that are certified to teach. The registry committee is working on the Georgia data dictionary; they are working on getting this finalized shortly. The resource sub committee will be meeting very soon.

EMS Subcommittee on Trauma

Presented by Mr. Courtney Terwilliger

Mr. Terwilliger reported that the distribution of triage bags is complete. The distribution to all the first responders and EMS personnel that requested the kits was completed by October 31st.

Work is being done with Tim Boone on the AVLS distribution of new equipment. We have purchased 90 new units for primarily Regions' 5 and 6 purchased with the trauma commission funding. The AVLS plan will roll out at the December 2nd EMS committee meeting with Tim Boone of GTRI working on the distribution plan.

Mr. Terwilliger reported that the leadership class had 28 students and all 28 students completed the program and it is a very successful program for our state.

GEMSIS meetings are still occurring and the rollout of 3.4 is looking for timeliness and accuracy of data and validation of data. There is a hope to have some videos available about this in January 2017.

First Responder and EMT classes like extrication and TECC courses are still filling up quickly and being held across the state. Mr. Terwilliger would like to see some stop the bleed related courses this year and he is looking for standardization across the state of these classes.

Strategic Workshop Planning

Presented by Dr. Ashley

Dr. Ashley opened the floor to the commission and audience to begin collecting ideas to work on at the upcoming strategic workshop.

Ms. Abston referred the commission to Pages 18-20 of the commission report to go over last years Strategic Planning Report and where we are at today with those items.

Dr. Ashley would like to look at where we are from last year on these items and go down the list. Dr. Mullins suggested that last years plan be our format for this year.

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Dr. Ashley suggests a call between all the stakeholder groups like the commission, OEMS/T, GCTE, and host a call prior to the workshop and go over everything and get input and barriers. Ms. Abston says she is grouping those persons together that worked on this last year and will plan a conference call to get statuses of deliverables.

Dr. Nicholas cautioned that we get trapped into reviewing a document that is a year old and make sure that we address new items as a lot has changed within the year. Some of the old agenda items may not be as pertinent as they were last year.

Dr. Ashley asked if there were any new agenda items. Ms. Battle suggested figuring out how we connect the state visits with the ACS visits. She suggests a planning session where all stakeholders are present for discussion.

Ms. Abston suggested we work on increasing our funding stream. Suggesting the commission develop objectives as to what our funding goals are currently and what we would like our funding goals to be. Focus should be to work on the significant gap in revenue the commission is not receiving from the super speeder law. There is so much in system development that Ms. Abston suggests we look into revising the commission initiatives and align them with the goals of the commission. Dr. Nicholas suggested setting aside some time to figure out our best presentation for legislature. Dr. Ashley suggested having time set-aside for the Trauma Day at the Capital as well.

Dr. Cowles says the message, goals, and objectives of the commission need to be worked on, as funding has remained the same each year. Mr. Terwilliger suggested developing budgets to present for things we want to do. He suggests if we can tie the budget back to our data and come up with better treatment plans to improve survivability. Dr. Nicholas agrees with the budget approach and showing deliverables. Dr. Cowles says consistent but few talking points are in our best interest. Everyone that attends the session should have the same talking points.

Dr. Dunne suggested we tie a survivor that whose life was saved due to the stop the bleed initiative. Mr. Drawdy suggests we talk to our lobbyists, as they are familiar with legislature. Ms. Littleton suggested the talking points we come up with, as a group needs to be developed early to really get the message across.

The Stop the Bleed day at the Capital will be a large focus. As a group collaborative, need to come up with a budget, specifications, impact to our state, and a definitive message. Dr. Ashley suggested that the Stop the Bleed perhaps be our main focus but not our only focus and select 1 or 2 more things to work on. Dr. Nicholas suggested that our messages all be the same for the bleeding control initiative and makes sure that our message is the same as this work is all being done a short timeline.

Dr. Ashley displayed the ACS stop the bleed kit and the items the kit contains. This kit, which Dr. Ashley said we could create our own or use one that is already built. The kit showed to the commission was \$ 70.00 and contains manuals, posters, a tourniquet, bleeding control gauze, and instructions for bleed types. It is estimated that if a bleeding kit costs \$ 70 and if every classroom (grade school K-12, public school) had a kit installed it would cost (estimated) \$8 million. If a kit were installed in every other classroom or per a certain amount of measured distance, the cost would be (estimated) \$4 million. We need some confirmed budget information. Additional questions to address are the shelf life of the items in the box and the replacement

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process for these items and those costs. The committee will need to answer these questions. Dr. Ashley says if you would like to participate in the Stop The Bleed/ Trauma Day committee you are welcome to do so and there are currently an estimated 40 participants.

Dr. Ashley would like to add the Data Subcommittee to the Strategic Planning Workshop some time to go over the Dr. Pracht report (NBATS) as there will need to be input from the OEMST and the commission.

Ms. Abston says a discussion that keeps coming up when we do visit legislature is the need for a trauma center for the South Georgia region. Mr. Drawdy reiterated that the governor did speak about that on their recent meeting. Dr. Dunne discussed several logistic issues between some EMS and some trauma centers and told the commission of the study recently done.

Ms. Atkins brought up the capacity issues recently and the diversion issues recently experienced at several region III centers. Ms. Atkins says this should be a part of our Strategic Planning as last weeks event was unprecedented. Ms. Atkins suggests our medical directors, our hospital leaders, and our center managers need to form an administrator group that will need commission support, and work on system issues that impact patient care.

Dr. Nicholas added to the capacity/diversion discussion. The diversion occurred in metro Atlanta and it appears that per best recommendations from ACS that we are in need of 2 additional metro Atlanta trauma centers currently. Dr. Nicholas says we are starting to see the gap and that this is just daily capacity not a surge capacity if we had an incident like Boston or Orlando. Several spoke to this being bigger than the metro Atlanta area that this is a state problem. Several suggested forming the Administrator group to begin discussing.

Ms. Abston reminded all attendees to please go through the Stop the Belled training and if any of the physicians have time, to please head to the AMC library to be filmed for the Trauma Patient Care video.

Meeting Adjourned: 12:26 PM

Minutes crafted by: Erin Bolinger