

Trauma System Development for Georgia- Our Emerging Vision



Georgia Trauma Care
NETWORK COMMISSION

Dennis Ashley, MD Chairperson
Georgia Trauma Care Network Commission

www.gtcnc.org

House Health and Human Services Committee
03 February 2010



27 YEARS!

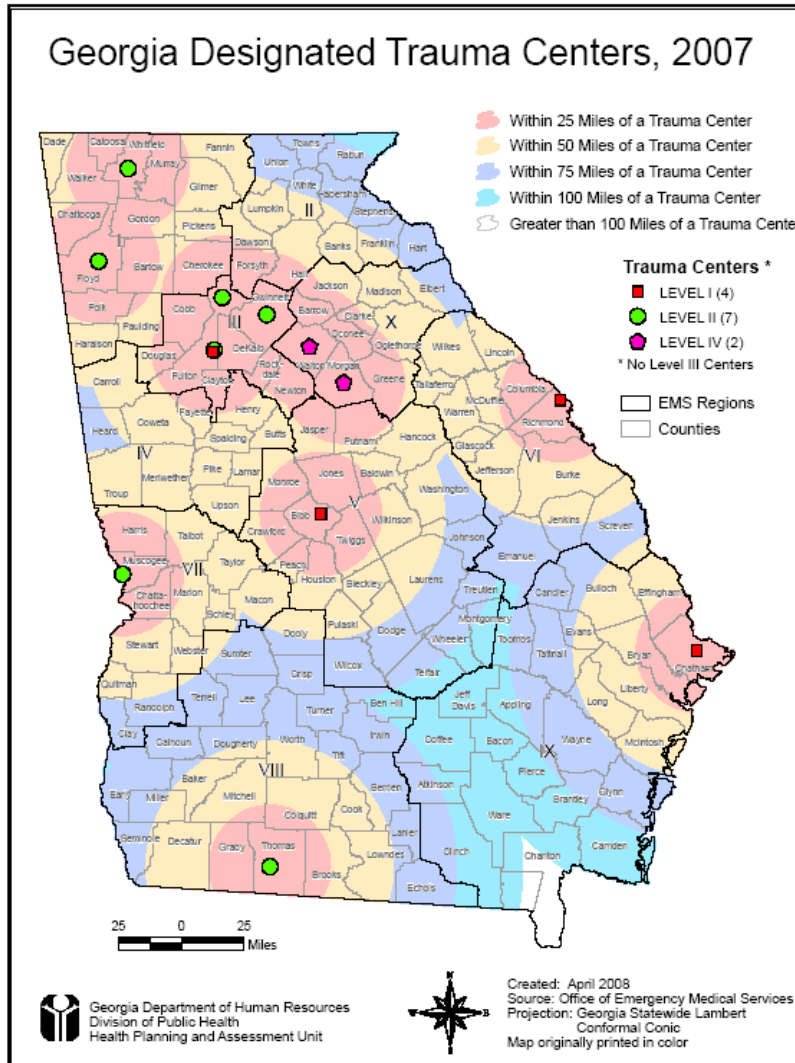
- **But who's counting?**
- **Georgia's first trauma center was designated 27 years ago—and we still do not have an optimum statewide trauma system!**

Before 2009



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Georgia Designated Trauma Centers, 2007

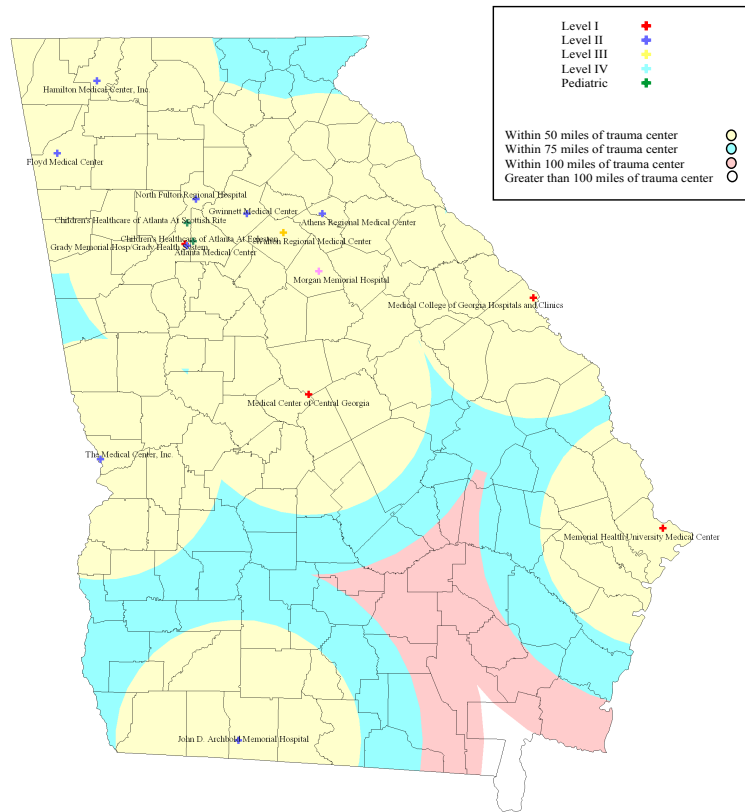


Today



Georgia Trauma Care
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Georgia Designated Trauma Centers



Source: Georgia Department of Community Health, Division of Emergency Preparedness & Response, December 2009



State Trauma Services Study Committee

- **Created during the 2006 Legislative Session**
- **Five members of House and five from the Senate**
- **Heard testimony from State and National trauma “experts”**
- **Held 5 regional public meetings**



State Trauma Services Study Committee

- **Findings:**
 - Georgia trauma death rate is 20 percent worse than the national average
 - Only 30 percent of trauma injuries are treated at designated trauma centers
 - Traumatic death rates in rural Georgia are much higher than in the urban areas of Georgia
 - Annually, Georgia's trauma care providers (hospitals, surgeons and EMS) deliver \$250 million in uncompensated trauma care



State Trauma Services Study Committee

- **Recommendations:**
 - **Creation of the Georgia Trauma Commission**
 - **Creation of Georgia Trauma Care Fund**
 - **Develop a statewide Trauma System**



2007: Senate Bill 60

The Commission was charged to:

- **Allocate the Fund fairly and effectively**
- **Oversee Fund dispersal into the entire Georgia trauma system**
- **Develop statewide trauma system**

For the first year, the overarching goal was to stabilize and strengthen the existing infrastructure



The Commission

Held monthly meetings with subcommittees meeting regularly

Assessed:

- **trauma center readiness costs**
- **uncompensated care costs**
- **best practices from other states**
- **alternate funding formulas for trauma centers, trauma physicians and EMS**



Five-Year Strategic Plan: 15 Goals

Developed through:

- **Aggressive assessment and planning processes**
- **Committed stakeholder input**
- **American College of Surgeons trauma system consultation**
- **Georgia Health Policy Center economic analysis**
- **Healthcare Georgia Foundation report**
- **Trauma Commission monthly meetings and workshops**

American College of Surgeons Described Our Challenges



- Limited budgetary support within EMS/Trauma
 - Significant tasks of center designation and registry support
 - Limited resources for system development and process improvement
 - Limited resources for data analysis
- Self described “network” of trauma centers, little true system integration
 - **“Islands of excellence in a sea of chaos”**
- Significant issues with hospital diversion
- Significant issues with medical specialty coverage

Challenges - Continued



- Statewide EMS system,
 - Local control with little central authority
 - Limited ability to transport over long distances
 - Little uniformity in triage and destination protocols
- No Organized PI/QA Programs Statewide
- No Solid Integration with Injury Prevention, Acute Care, Rehab and Emergency Preparedness