

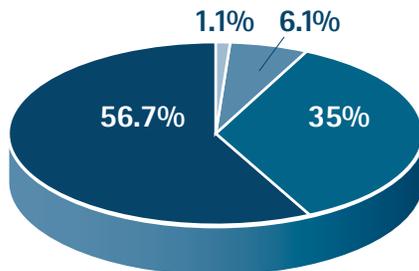


HealthVoices

Trauma Care in Georgia: Overburdened, Underfunded, and Fragmented

Issue 1, 2007

How important is it for Georgia to have a statewide trauma system?



Over 90% of Georgians believe it is important to have a statewide trauma system in the state.

- Extremely important
- Very important
- Somewhat important
- Not at all important/not sure

"The state of emergency care affects every American. When illness and injury strike, Americans count on the system to respond with timely and high quality care. Yet, today, the emergency and trauma care that Americans receive can fall short of what they expect and deserve."

Harvey Fineberg
President, Institute of Medicine

Getting the *right patient to the right hospital at the right time*

would save the lives of approximately 700 Georgians each year.¹ Motor vehicle crashes, falls, gunshot wounds and other traumatic injuries cause over 5,400 deaths² in Georgia and result in over 100,000 calls for Emergency Medical Services (EMS).³ Trauma patients who receive care at a trauma center within the first hour following the injury have a better chance of survival.⁴ Yet, Georgia is served by only 15 trauma centers, with four level one trauma centers located in metropolitan areas, and does not have a comprehensive, coordinated statewide trauma system. The result, death rates higher than the national average, resulting in *over 700 lives lost that could be saved.*

Are Georgians ready to change this grim picture? A December 2006 statewide public opinion poll says they are: Georgians want a statewide trauma system that is capable of providing emergency services within the "golden hour" following a life threatening injury.⁵

Key findings of the poll:

A statewide poll by the University of Georgia Survey Research Center found that:

- Nine out of ten Georgians believe it is extremely important or very important to have a trauma system.
- Eight out of ten Georgians believe it is extremely important or very important for rural areas to have the same speed and quality of trauma care.
- Eight out of ten Georgians are extremely concerned or very concerned about trauma centers closing in Georgia.
- Of seven possible solutions for financing the trauma system, the four methods preferred by Georgians who responded to the survey are: appropriation of state funds, increased fines for traffic violations, increased taxes on the purchase of guns, rifles, and ammunition, and increased insurance/Medicaid payments to trauma care hospitals.

Who participated in the poll?

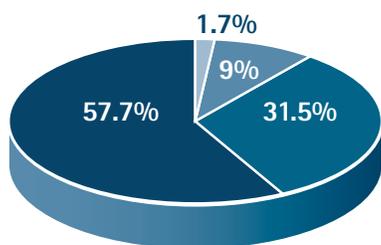
More than 800 people 18 years or older participated in the telephone poll during December 2006: 70.3% were women and 29.7% were men; 76.8% were white, 20.9% were black, 1.2% were Hispanic, and 1.1% represented other races; 78.2% live in urban areas and 21.8% in rural areas; and 32.9% graduated high school or had less education. The median income reported was between \$50,000 and \$74,999 per year. When compared to 2005 U.S. Census data for Georgia, the respondents included a higher proportion of women, whites, people living in metropolitan areas, and individuals with a college education.



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The Findings

How important is it for Georgians in rural areas to receive the same speed and quality of trauma care as people living in urban or suburban areas?



- Extremely important
- Very important
- Somewhat important
- Not very/not at all important/not sure

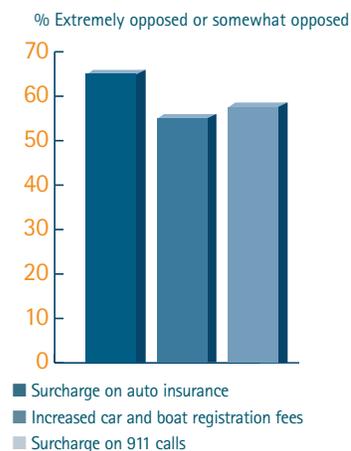
Over 89% of Georgians emphasized the importance of trauma services in rural as well as urban areas. Respondents living in urban and rural areas were equally committed to the need for quick response and high quality trauma care in rural areas. When asked about the time from their home to the nearest trauma center, 4.7% estimated greater than 2 hours, 8% said 1-2 hours, 31.4% said 30 minutes to one hour, 31.1% said less than 30 minutes, and 24.8% were not sure. When asked about their confidence in receiving the best medical care for a life-threatening injury, Georgians living in urban areas were more confident in the quality of trauma care than those living in rural areas.

What approaches to paying for a statewide trauma system do Georgians support?



Four out of five respondents were extremely supportive or somewhat supportive of appropriating state funds to pay for a statewide trauma system. At least half of those surveyed supported increased fines for traffic violations (74.4%), an additional tax on gun, rifle, and ammunition purchases (64.1%) and increased insurance/Medicaid payments to trauma care hospitals (55.2%). Women were more supportive than men of use of public dollars, increased traffic fines, and increased taxes on gun, rifle, and ammunition purchases. Of 15 other states that have created funding mechanisms to support their trauma systems, seven have increased fines for traffic violations.⁶

Which approaches to paying for a statewide trauma system do Georgians oppose?



Two out of three Georgians extremely opposed or somewhat opposed a surcharge on auto insurance to fund a trauma system. At least half of those surveyed opposed a surcharge on 911 calls (57.8%) and increased car and boat registration fees (55%). Of the 15 states with special revenue streams for trauma care, four have a motor vehicle registration fee and one has a surcharge on 911 calls. Maryland's strong EMS and trauma system uses statewide protocols and a communications center, funded in part by a surcharge on motor vehicle registration fees.⁷ If one of these approaches is adopted in Georgia, public education will be needed on the benefits of financing the trauma system.

A trauma system is a comprehensive and coordinated statewide and local injury response network that includes all facilities to care for the injured, including trained emergency response workers, transportation, and trauma centers that are able to provide rapid, specialized emergency room and hospital care for people who have severe or life threatening injuries.



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Conclusions

The findings of this 2006 poll of Georgians' attitudes regarding trauma care and the trauma system in Georgia converge with national and state trauma studies. In 2006, the Institute of Medicine examined the state of the emergency medical system in the United States and identified actions to be taken by consumers, providers, and state and local policymakers to achieve the vision of a 21st century emergency care system capable of responding to natural disasters, bioterrorism, and emergency situations of daily life. In January 2007, the Joint Comprehensive State Trauma Services Study Committee issued its landmark report and recommendations on improving the trauma system in Georgia. All three call for strategic investment in a statewide trauma system.

Common themes:

- Georgians recognize the value and importance of a statewide trauma system.
- A comprehensive, coordinated and accountable statewide trauma system is needed in Georgia to respond to all causes of traumatic injuries, including natural disasters.
- Investments are needed to strengthen the core components of the system: emergency medical services, communications, 911 systems, ground and air transportation, hospital-based trauma

care, including specialized health care providers, and workforce development.

- Multiple funding mechanisms will be needed to finance and sustain a state-wide system.
- Public education and leadership will be needed to build public support for the strategies selected to finance the trauma system.

The financing of trauma care and emergency medical services is inevitably intertwined with other complex health issues: providing health care for the uninsured, uncompensated health care, and inappropriate utilization of emergency services for primary care. Yet, Georgians view high quality emergency medical care as fundamental – for rural and urban areas. These views provide impetus for state and local leaders to take action to support investment in a state-of-the-art trauma system while continuing to develop broader strategies for providing affordable quality health care for all Georgians.

Endnotes

- 1 Georgia Hospital Association, *It's About Time Fact Sheet*, www.georgiainsabouttime.com, June 2006
- 2 Georgia Department of Human Resources, Division of Public Health, *Online Analytical Statistical Information System (OASIS), Deaths from External Causes, 2004*
- 3 Georgia Department of Human Resources, Division of Public Health, *Office of Emergency Medical Services/Trauma, Operating Report, 2006*
- 4 MacKenzie, EJ et al, *New England Journal of Medicine, A National Evaluation of the Effect of Trauma-Center Care on Mortality*, Volume 354:366-378, January 26, 2006
- 5 University of Georgia Survey Research Center, *2006 Poll on Knowledge and Perceptions Related to Trauma Centers and Systems in Georgia*, December 2006.
- 6 Institute of Medicine of the National Academies, *Hospital-Based Emergency Care, At the Breaking Point, Future of Emergency Care Series*, June 2006.
- 7 Ibid.

"Each area of our trauma care system has significant problems that must be addressed in order for Georgia to have a comprehensive, accessible health care system that meets the needs of our growing population."

Joint Comprehensive State Trauma Services Study Committee, established by the 2006 Georgia General Assembly



Healthcare Georgia Foundation is a statewide, private independent foundation whose mission is to advance the health of all Georgians and to expand access to affordable, quality healthcare for underserved individuals and communities.

The Poll

The Survey Research Center at the University of Georgia conducted the Knowledge and Perceptions Related to Trauma Centers and Systems in Georgia with a grant from Healthcare Georgia Foundation. Data were generated from a telephone interview of a RDD (Random Digit Dial) probability sample of 803 Georgia residents 18 years old or older, conducted between November 24th and December 6th, 2006. The purpose of the survey was to assess perceptions and knowledge of Georgia residents about trauma centers and existing trauma care systems in Georgia. Estimates based on a sample of this size are subject to sampling error of +/- 3.4% at the 95 percent confidence interval. Sampling error is the probable difference in results between interviewing a sample of the population of adult Georgians versus interviewing the entire population of adults in Georgia. Sample surveys are subject to other sources of error such as non-response error and error associated with the wording of questionnaire items. The cooperation rate for the study was 46.4%. The questionnaire and survey results can be found at www.healthcaregeorgia.org.

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Healthcare Georgia Foundation is a catalyst for better health and health care in Georgia. Through strategic grantmaking, Healthcare Georgia Foundation supports organizations that drive positive change; promotes programs that improve health and health care among underserved individuals and communities; and connects people, partners, and resources across Georgia.

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