

# Readiness Cost Survey CY 2024



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GEORGIA TRAUMA  
COMMISSION

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01.

# History



# Readiness History

Survey Data	Level I	Level II	Level III	Level IV
2008	X	X	X	X
2009	X	X	X	X
2011	X	X	X	X
2016	X	X		
2019			X	X

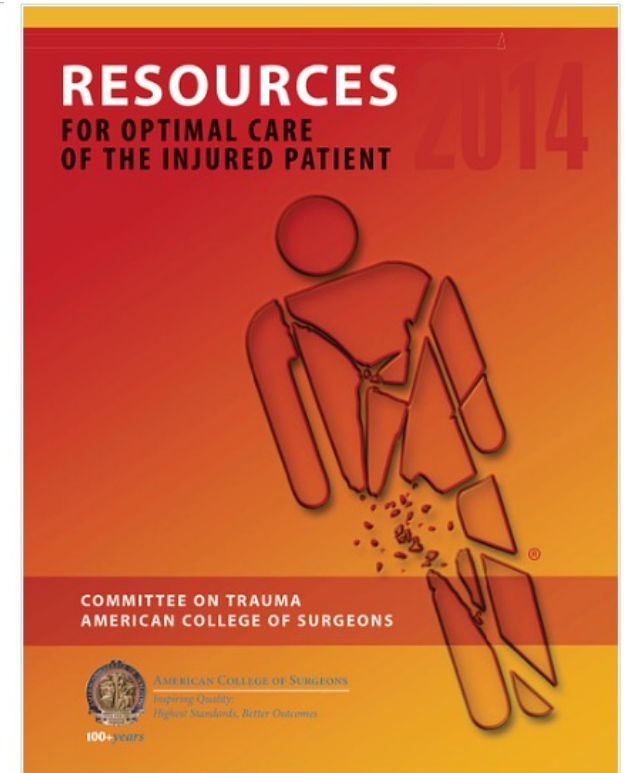


# Level I & Level II 2016 Data Published in 2017

Trauma Center Name:		Please attach an Organization Chart (PDF) for your facility displaying oversight/accountability for the trauma care at an Executive level.	CFO Name (print)		
Survey Completed by:			CFO Signature		
Phone Number:			2016 Readiness Assessment <b>due date: 10/2/2017</b>	Total # records that met STATE REGISTRY criteria for calendar year 2016	
Email Address:					
Trauma Med Dir (TMD)					
TMD Signature		Send completed assessment to Jessica Story: <a href="mailto:jessica.story@warrenverett.com">jessica.story@warrenverett.com</a>			

**All hospital data will be kept confidential and will be reported only on a consolidated basis that precludes the disclosure of individual hospital information.**

LINE ITEM	LEVEL				SURVEY INSTRUCTIONS	Salary (if applicable)	Benefits (if applicable)	AMOUNT Total Actual Costs CY2016
<b>Criteria by Trauma Center Designation Level Based on standards from 2014 ACS Optimal Care of the Trauma Patient</b>	Respond to items ONLY if applies to your Trauma Level.				<b>Follow Instructions for cost calculation for each item below.</b>			
<b>ADMINISTRATIVE</b>								
Senior Administrator Support: highest level senior executive with oversight & accountability for trauma	1	2	3	4	% of time focused on trauma by main senior administrator involved in trauma X salary and benefits			\$ -
Program Administrator: Trauma Director	1	2	3	4	Salary & benefits X % of time on trauma (if position has other duties)			\$ -
Trauma Program Manager	1	2	3	4	Salary & benefits X % of time on trauma (if position has other duties)			\$ -
Trauma Coordinator	1	2	3	4	Salary & benefits X % of time on trauma (if position has other duties)			\$ -
Participation costs for state, regional and national activities	1	2	3	4	Travel costs to required meetings for administration level personnel (exclude CME only travel expenses)			\$ -
<b>Trauma Center Staff Support</b>	If any of the following positions generate reimbursement or supported by grants, use net hospital costs X time spent on trauma to calculate costs.							
Divide the total number of records submitted to the state (STATE=Y) by 333 (calculate to 1 decimal place). This is the estimated FTE's needed. Use this "facility multiplier number" to multiply X average	If position employed by trauma program or other department which focuses trauma responsibility on few staff, use salary & benefits less revenue and grant support for costs.							
	If employed by another department which spreads trauma responsibility among most staff, use portion of trauma pt admits out of total admits X department salary costs.							
Education/Outreach Coordinator	1	2	3					\$ -
Case Management, Discharge Planning, and Social Services	1	2	3		Facility multiplier X average salary and benefits			\$ -



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## How much green does it take to be orange? Determining the cost associated with trauma center readiness

Dennis W. Ashley, MD, Robert F. Mullins, MD, Christopher J. Dente, MD, Tracy J. Johns, MS, Laura E. Garlow, MHA, Regina S. Medeiros, DNP, Elizabeth V. Atkins, MSN, Gina Solomon, RN, Dena Abston, BS, Colville H. Ferdinand, MD, and Georgia Research Institute for Trauma Study Group, Macon, Georgia

Trauma Center	Average annual readiness cost	Most significant cost	Lowest Cost
Level I	\$10,078,506	Clinical Medical Staff	Education and Outreach
Level II	\$4,925,103	Clinical Medical Staff	Education and Outreach

# Leon L. Haley, Jr., MD, MHSA, FACEP, CPE

*“The Haley Model”*

Trauma Readiness

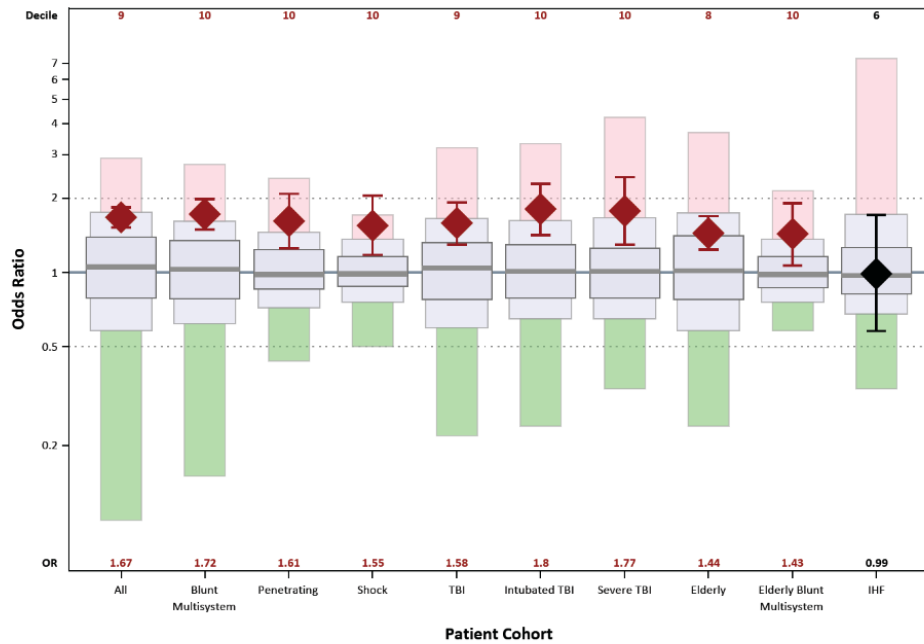
Costs Assessment Tool



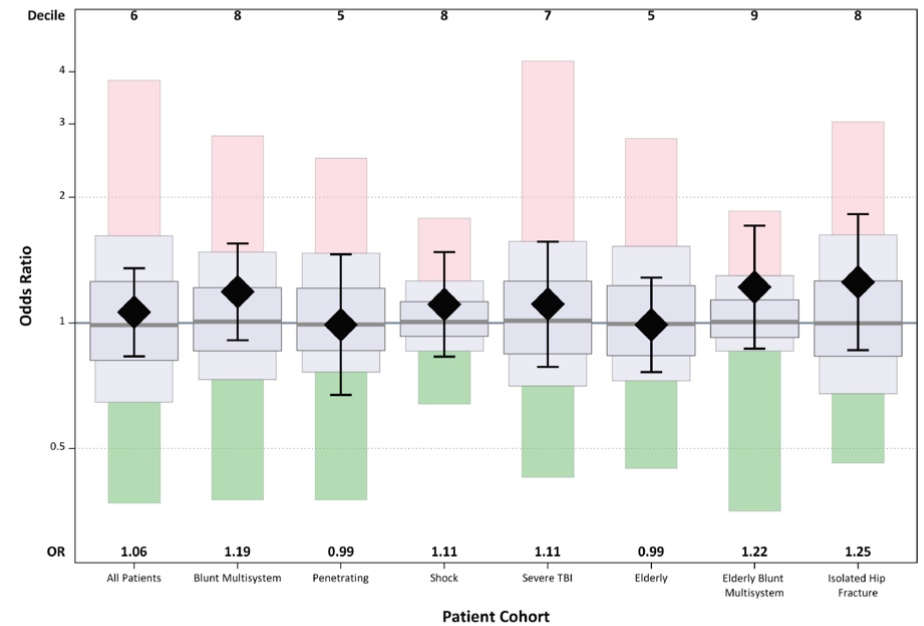
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# Our Journey

## GQIP Fall 2015 Risk Adjusted Major Hospital Events Excluding Mortality



## GQIP Fall 2023 Risk Adjusted Major Hospital Events Excluding Mortality



# Our Journey

**2015**

One ACS Verified TC in GA  
(Level II)  
2 TCs already had  
Consultative Visits

**2019**

All Level I and Level II ACS  
Consultative Visits  
Completed

**2023**

11 of the original 15  
centers achieved ACS  
verification



02.

# CY 2024 Survey



Trauma Center Name \_\_\_\_\_

Survey Completed By \_\_\_\_\_

Phone Number \_\_\_\_\_

Email \_\_\_\_\_

Trauma Medical Director (Print) \_\_\_\_\_

Trauma Medical Director Signature \_\_\_\_\_

Chief Financial Officer (Print) \_\_\_\_\_

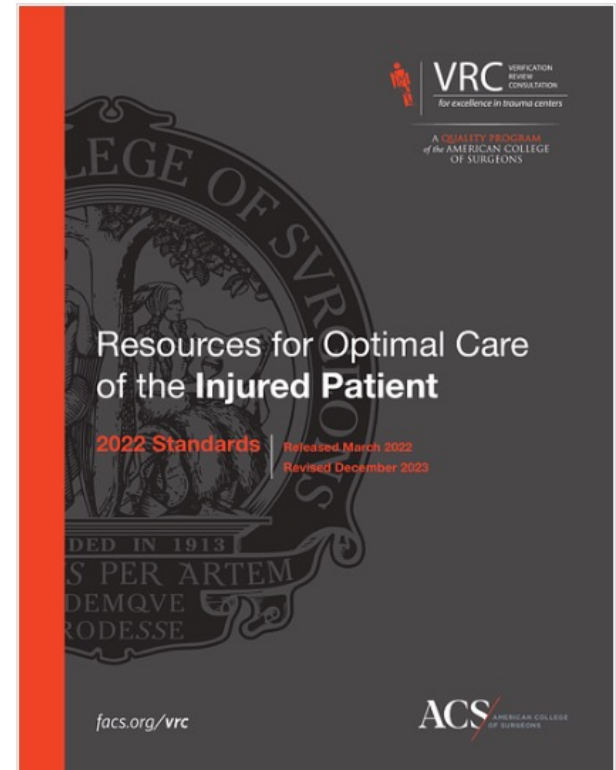
Chief Financial Officer Signature \_\_\_\_\_

\*Please submit an Organization Chart (PDF) for your facility displaying oversight/accountability for the trauma

All hospital data will be kept confidential and will be reported only on a consolidated basis that precludes the disclosure of individual patient information.

**ADMINISTRATIVE COMMITMENT, PROGRAM SCOPE, & GOVERNANCE**

LINE ITEM	ACS #	APPLIES TO LEVEL:						SURVEY INSTR	FOLLOW-UP	BUDGET	FTE	SALARY
		1	2	3	4	5	6					
Criteria by Trauma Center Designation Level Based on standards from the 2022 Resources for Optimal Care of the Injured Patient (rev. Dec. 2023) & Verification Change Log	Standard Number	Respond to items ONLY if applies to your Trauma Level.						Follow Instructions for each item				
Senior Administrator Support: highest level senior executive with oversight & accountability for trauma	1.1	1	2	3		P1	P2	Salary & benefits X % of time on trauma				
Program Administrator: Trauma Director, or equivalent	1.1	1	2	3		P1	P2	Salary & benefits X % of time on trauma				
Trauma Medical Director (stipend for TMD role, IF paid above & beyond salary OR FTE carve-out)	1.1, 2.8	1	2	3		P1	P2	Salary & benefits X % of time on trauma				
Trauma Program Manager, or equivalent	1.1, 2.10, 2.11	1	2	3		P1	P2	Salary & benefits X % of time on trauma				
Education/Outreach Coordinator	1.1, 8.1	1	2	3		P1	P2	Salary & benefits X % of time on trauma (if position has other duties & minus grant support if applies)			\$ -	
Designated Injury Prevention Professional	1.1, 2.12	1	2	3		P1	P2	Salary & benefits X % of time on trauma (if position has other duties & minus grant support if applies)			\$ -	
Research Coordinator	1.2, 9.1	1				P1		Salary & benefits X % of time on trauma (if position has other duties & minus grant support if applies)			\$ -	
Performance Improvement Staff	1.1, 2.11, 4.35	1	2	3		P1	P2	Salary & benefits X % of time on trauma (if position has other duties & minus grant support if applies)			\$ -	
Trauma Registrar	4.3, 4.31	1	2	3		P1	P2	<b>EMPLOYED:</b> Salaries & benefits X % of time on trauma (Limit of .5 FTE dedicated to registry per 200-300 patients annually).			\$ -	
If CONTRACT used, how paid? Click circle to select payment method		1	2	3		P1	P2	<b>CONTRACT:</b> (Use column L for record/number of hours and			\$ -	

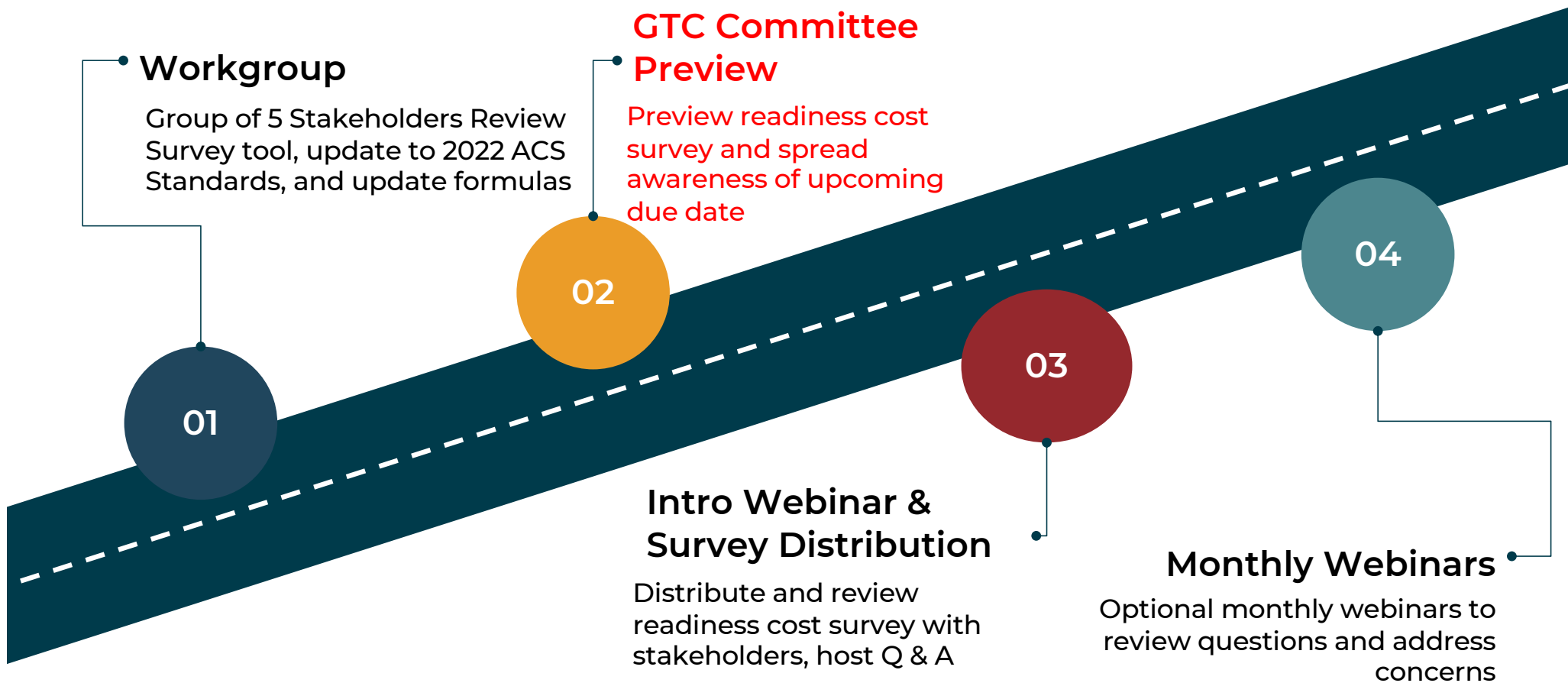


# CY 2024 Survey

- Reformatted Survey Tool
- Updating to capture 2022 ACS Standards (Grey Book)



# FY 26 Readiness Survey Roadmap



# Tentative Timeline

Item	Date
Workgroup Established	December 20, 2024
<b>GTC Committee Introduction</b>	<b>February 2025</b>
Introduction Webinar/ Q & A Survey Released	April 2025
Monthly Follow- up Webinars/ Q & A (Optional)	May, June, July, August 2025
Survey Due	September 30, 2025 *GTC Contract Requirement*



03.

# Survey Preview



# Readiness Survey Sections

Section (Mirrors ACS Grey Book)	Line-Item Examples
<b>Administrative Commitment, Program Scope, &amp; Governance</b>	<ul style="list-style-type: none"> <li>• Trauma Medical Director</li> <li>• Trauma Program Manager</li> <li>• PI Staff</li> </ul>
<b>Facilities &amp; Equipment Resources</b>	<ul style="list-style-type: none"> <li>• OR Costs</li> <li>• Blood Products</li> <li>• Registry Hardware &amp; Software</li> </ul>
<b>Medical Personnel &amp; Services</b>	<ul style="list-style-type: none"> <li>• Trauma Surgeon</li> <li>• Specialty Liasons to Trauma Service</li> <li>• Medical Staff Coverage</li> </ul>
<b>Staff Professional and Continuing Education</b>	<ul style="list-style-type: none"> <li>• ATLS</li> <li>• TPM Continuing Education</li> <li>• Registrar Certification</li> </ul>
<b>Community Education and Outreach</b>	<ul style="list-style-type: none"> <li>• Community Outreach</li> <li>• Injury Prevention</li> <li>• Outlying Hospital Education</li> </ul>



# ADMINISTRATIVE COMMITMENT, PROGRAM SCOPE, & GOVERNANCE

ADMINISTRATIVE COMMITMENT, PROGRAM SCOPE, & GOVERNANCE											
LINE ITEM	ACS #	APPLIES TO LEVEL:						SURVEY INSTRUCTIONS		% of Time	Salary/Benefits (if applicable)
Criteria by Trauma Center Designation Level Based on standards from the 2022 Resources for Optimal Care of the Injured Patient (rev. Dec. 2023) & Verification Change Log	Standard Number	Respond to items ONLY if applies to						Follow Instructions for cost calculation for each item below.			
Senior Administrator Support: highest level senior executive with oversight & accountability for trauma	1.1	1	2	3		P1	P2	Salary & benefits X % of time on trauma (if position has other duties)			
Program Administrator: Trauma Director, or equivalent	1.1	1	2	3		P1	P2	Salary & benefits X % of time on trauma (if position has other duties)			
Trauma Medical Director (stipend for TMD role, IF paid above & beyond salary OR FTE carve-out)	1.1, 2.8	1	2	3		P1	P2	Salary & benefits X % of time on trauma (if position has other duties)			
Trauma Program Manager, or equivalent	1.1, 2.10, 2.11	1	2	3		P1	P2	Salary & benefits X % of time on trauma (if position has other duties)			
Education/Outreach Coordinator	1.1, 8.1	1	2	3		P1	P2	Salary & benefits X % of time on trauma (if position has other duties & minus grant support if applies)			
Designated Injury Prevention Professional	1.1, 2.12	1	2	3		P1	P2	Salary & benefits X % of time on trauma (if position has other duties & minus grant support if applies)			
Research Coordinator	1.2, 9.1	1				P1		Salary & benefits X % of time on trauma (if position has other duties & minus grant support if applies)			
Performance Improvement Staff	1.1, 2.11, 4.35	1	2	3		P1	P2	Salary & benefits X % of time on trauma (if position has other duties & minus grant support if applies)			
Trauma Registrar	4.3, 4.31	1	2	3		P1	P2	<b>EMPLOYED:</b> Salaries & benefits X % of time on trauma (Limit of .5 FTE dedicated to registry per 200-300 patients annually).			
If CONTRACT used, how paid? Click circle to select payment method: <input type="radio"/> per record <input checked="" type="radio"/> by the hour		1	2	3		P1	P2	<b>CONTRACT:</b> (Use column L for record/number of hours and Column M for the amount of money per record/hour)			



# FACILITIES & EQUIPMENT RESOURCES

MEDICAL PERSONNEL & SERVICES										
Special Instructions										
Includes costs of maintaining trauma physician support for your trauma center other than the costs of admin functions addressed above. Do not include amounts specifically paid to trauma physicians for care of uninsured trauma patients in the amounts for each specialty; you will be asked for a total amount of such pay at the end of this section.				<p><b>A)</b> If you pay specialty a stipend exclusively for trauma call, enter the full amount. For trauma surgeons only, you do NOT have to pay for trauma and emergent general surgery.</p> <p><b>B)</b> For other specialties: If you pay a stipend to a specialty that is for both trauma and ED call, estimate the portion attributable to trauma.</p> <p><b>C)</b> If you are supported by a faculty practice arrangement, take portion of trauma admissions to overall admissions and apply the portion of the subsidy provided to faculty practice structures.</p> <p><b>D)</b> Total number of physicians by specialty and apply AAMC salary database (at 50% of range) for SE region, add estimated total of trauma call reimbursement, and then apply portion of trauma admissions to overall admissions to arrive at net cost.</p>						
LINE ITEM	ACS #	APPLIES TO LEVEL:					SURVEY INSTRUCTIONS			
Criteria by Trauma Center Designation Level Based on standards from the 2022 Resources for Optimal Care of the Injured Patient (rev. Dec. 2023) & Verification Change Log	Standard Number	Respond to items ONLY if applies to your Trauma Level.					Follow Instructions for cost calculation for each item below.			
Trauma Surgeon(s)	4.1, 4.2, 4.3, 4.4	1	2	3		P1	P2	See special instructions above (A, B, C, or D)		
Specialty Liaisons to Trauma Service										
Emergency Medicine Physician Liaison	4.5	1	2	3		P1	P2	Administrative stipend if contracted, or if employed, salary & benefits X % of time spent on trauma center administrative functions.		
Specialized Orthopaedic Trauma Care Surgeon Liaison	4.5	1	2	3		P1	P2			
Anesthesiologist Liaison	4.5	1	2	3		P1	P2			
Neurosurgeon Liaison	4.5	1	2	3-N		P1	P2			
Radiologist Liaison	4.5	1	2			P1	P2			
ICU Physician Liaison	4.5	1	2	3		P1	P2			
Geriatric Provider Liaison	4.5	1	2							
Medical Staff Coverage										
Emergency Department Director	4.6	1	2			P1	P2			
Emergency Department Physician	4.7, 4.8									
Pediatric Critical Care Staffing	4.9					P1				
Neurotrauma Staffing	4.1	1	2	3		P1	P2			
Orthopaedic Trauma Care	4.11	1	2	3		P1	P2			
Specialized Orthopaedic Trauma Care	4.12		2			P1	P2			

# MEDICAL PERSONNEL & SERVICES

MEDICAL PERSONNEL & SERVICES										
Special Instructions										
Includes costs of maintaining trauma physician support for your trauma center other than the costs of admin functions addressed above. Do not include amounts specifically paid to trauma physicians for care of uninsured trauma patients in the amounts for each specialty; you will be asked for a total amount of such pay at the end of this section.				<p><b>A)</b> If you pay specialty a stipend exclusively for trauma call, enter the full amount. For trauma surgeons only, you do NOT have to pay for trauma and emergent general surgery.</p> <p><b>B)</b> For other specialties: If you pay a stipend to a specialty that is for both trauma and ED call, estimate the portion attributable to trauma.</p> <p><b>C)</b> If you are supported by a faculty practice arrangement, take portion of trauma admissions to overall admissions and apply the portion of the subsidy provided to faculty practice structures.</p> <p><b>D)</b> Total number of physicians by specialty and apply AAMC salary database (at 50% of range) for SE region, add estimated total of trauma call reimbursement, and then apply portion of trauma admissions to overall admissions to arrive at net cost.</p>						
LINE ITEM	ACS #	APPLIES TO LEVEL:						SURVEY INSTRUCTIONS		
Criteria by Trauma Center Designation Level Based on standards from the 2022 Resources for Optimal Care of the Injured Patient (rev. Dec. 2023) & Verification Change Log	Standard Number	Respond to items ONLY if applies to your Trauma Level.						Follow Instructions for cost calculation for each item below.		
Trauma Surgeon(s)	4.1, 4.2, 4.3, 4.4	1	2	3			P1	P2	See special instructions above (A, B, C, or D)	
Specialty Liaisons to Trauma Service										
Emergency Medicine Physician Liaison	4.5	1	2	3			P1	P2	Administrative stipend if contracted, or if employed, salary & benefits X % of time spent on trauma center administrative functions.	
Specialized Orthopaedic Trauma Care Surgeon Liaison	4.5	1	2	3			P1	P2		
Anesthesiologist Liaison	4.5	1	2	3			P1	P2		
Neurosurgeon Liaison	4.5	1	2	3-N			P1	P2		
Radiologist Liaison	4.5	1	2				P1	P2		
ICU Physician Liaison	4.5	1	2	3			P1	P2		
Geriatric Provider Liaison	4.5	1	2							
Medical Staff Coverage										
Emergency Department Director	4.6	1	2				P1	P2		
Emergency Department Physician	4.7, 4.8									
Pediatric Critical Care Staffing	4.9						P1			
Neurotrauma Staffing	4.1	1	2	3			P1	P2		
Orthopaedic Trauma Care	4.11	1	2	3			P1	P2		
Specialized Orthopaedic Trauma Care	4.12		2				P1	P2		



# STAFF PROFESSIONAL AND CONTINUING EDUCATION

STAFF PROFESSIONAL AND CONTINUING EDUCATION									
LINE ITEM	ACS #	APPLIES TO LEVEL:						SURVEY INSTRUCTIONS	
Criteria by Trauma Center Designation Level Based on standards from the 2022 Resources for Optimal Care of the Injured Patient (rev. Dec. 2023) & Verification Change Log	Standard Number	Respond to items ONLY if applies to your Trauma Level.						Follow Instructions for cost calculation for each item below.	
<b>Trauma Medical Director</b>									
ATLS	2.8	1	2	3		P1	P2	Includes Cost of Courses and Travel	
Continuing Medical Education	2.8	1	2	3		P1	P2	Includes Cost of Courses and Travel	
<b>Trauma-Related Hospital Staff</b>									
Trauma Surgeon(s) ATLS	4.1	1	2	3		P1	P2	Includes Cost of Courses and Travel	
Emergency Medicine Physician ATLS	4.7	1	2	3		P1	P2	Includes Cost of Courses and Travel	
Trauma Program Manager Continuing Education	2.10	1	2	3		P1	P2	Includes Cost of Courses and Travel	
Trauma/ED Advance Practice Provider ATLS	4.30	1	2	3		P1	P2	Includes Cost of Courses and Travel	
One Registrar Certified Abbreviated Injury Scale Specialist Certification	4.32	1	2	3		P1	P2	Includes Cost of Courses and Travel	
Trauma Registrar Courses	4.33	1	2	3		P1	P2	Includes Cost of Courses and Travel	
Trauma Registrar Continuing Education	4.34	1	2	3		P1	P2	Includes Cost of Courses and Travel	
Trauma Surgeon Liaison Disaster Management and Emergency Preparedness Course	4.36	1				P1		Includes Cost of Courses and Travel	
Nursing Trauma Orientation and Education	8.2	1	2	3		P1	P2	Includes Cost of Courses and Travel	
Commitment to Postgraduate Education	8.4	1				P1		Includes Cost of Courses and Travel	



# STAFF PROFESSIONAL AND CONTINUING EDUCATION

COMMUNITY EDUCATION AND OUTREACH										
LINE ITEM	ACS #	APPLIES TO LEVEL:					SURVEY INSTRUCTIONS			
Criteria by Trauma Center Designation Level Based on standards from the 2022 Resources for Optimal Care of the Injured Patient (rev. Dec. 2023) & Verification Change Log	Standard Number	Respond to items ONLY if applies to your Trauma Level.					Follow Instructions for cost calculation. <b>Includes costs for travel, courses, training, supplies and materials for activities specific to trauma. Include personnel costs in Administrative section. for each item below.</b>			
Injury Prevention	2.12	1	2	3		P1	P2	Must be specific to trauma, and amount should be reduced by grant funding for program.		
Community Outreach	8.1	1	2	3		P1	P2	This includes public education.		
Public and Professional Trauma Education	8.1	1	2	3		P1	P2	Net cost (i.e., less participant fees and vendor fees) of offering courses, symposium, & trauma clinical education to EMS and other hospital staff in your region.		
Outlying hospital education (exclude grant & vendor money)	4.5	1	2	3		P1	P2	This addresses the unique responsibilities of Level I trauma centers in supporting outlying hospitals (e.g.,		
Prehospital Provider Training	8.3	1	2	3		P1	P2			





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Thank you!

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