

FY 2024 PBP CRITERIA

Domain	Criteria for All Centers	Additional Criteria by Level			
		Level I & II	Level III	Level IV	Burn
System Participation	1. 75% TMD Call Participation in Quarterly TMD/GA COT/GQIP Conference Calls * 2. 75% TPM participation in Georgia Committee for Trauma Excellence (GCTE) meetings.* 3. Summer 2023 "Day of Trauma" (St. Simons) GQIP mtg attendance by: •TMD/Physician Leader (or designee) AND •TPM (or designee) 4. Winter 2024 meeting attendance by: •TMD/Physician Leader (or designee) AND •TPM (or designee) AND •Senior Executive (or designee)	1. Participation by trauma program staff member in ONE GCTE official subcommittee* 2. Trauma Medical Director must be member of the Georgia Chapter Committee on Trauma (COT)	1. Participation in Level III Level IV Rural Committee* 2. Trauma Medical Director must be member of the Georgia Chapter Committee on Trauma (COT)	1. Participation in Level III Level IV Rural Committee*	1. Participation by burn program staff member in Burn Center Workgroup 2. Burn Center Medical Director must be member of the Georgia Chapter Committee on Trauma (COT)
ACS Optimal Resources Document Criteria (ABA Criteria for Burn Centers)	6. Peer Review Committee attendance at 50% for all Peer Review Committee required members.** 7. Timely quarterly NTDS data submissions	3. Surgeon response time compliant with established thresholds** 4. In Level I and II trauma centers, the TPM must be full-time and dedicated to the trauma program** 5. Trauma registry FTE meets minimum requirement** 6. Maintain ACS Verification***	3. Surgeon response time compliant with established thresholds** 4. TQIP Participation 5. Trauma registry FTE meets minimum requirement** 6. Achieve & Maintain ACS Verification by 6.30.2025 7. Multidisciplinary participation in "MARCH PAWS" rural trauma educational initiative by hosting the course at the level III trauma center during fiscal year	2. Multidisciplinary participation in "MARCH PAWS" rural trauma educational initiative by hosting the course at the level IV trauma center during fiscal year	3. Peer Review Committee attendance 50% * 4. Identify two quality metrics, with associated reports for reporting and sharing in the GQIP statewide quality collaborative (9.13) 5. The burn program regularly participates in regional education related to burn care (17.2) 6. Attendance at burn continuing education meetings in regional, national, or international (3.11, 6.7, 7.8) by: •Burn Surgeon AND •Burn Nursing leader AND •Burn Therapy
GQIP		7. Participation in external data validation visit 8. Timely email submission of facility-specific TQIP performance matrix and drill-down exercises for summer and winter meetings 9. National TQIP In-Person meeting attendance by: •TPM (or designee) AND •TMD (or designee) AND •TPIC (or designee) AND •Registrar (or designee) 10. All full and part-time registrars will complete the "2023 TQIP Continuing Education: New for 2023" online course and at least 50% of the TQIP monthly educational experiences	8. Timely email submission of facility-specific TQIP performance matrix and drill-down exercises for Summer and Winter meetings 9. National TQIP In-Person meeting attendance by: •TPM (or designee) AND •TMD (or designee) 10. All full and part-time registrars will complete the "2023 TQIP Continuing Education: New for 2023" online course and at least 50% of the TQIP monthly educational experiences	3. Timely submission of facility-specific Emergency Department length of stay aggregate report to GQIP	7. (SAME AS #4 above) Identify two quality metrics, with associated reports for reporting and sharing in the GQIP statewide quality collaborative (9.13)
% of Total Readiness Dollars		80%	60%	19%	50%

* Compliance timeframe defined as calendar year 2023

**Per the 2022 Published "Optimal Resources for Care of the Injured Patient" (2014 Standards for Level IV Trauma Centers)

FY 2024 LEVEL I & II PBP CRITERIA				
Domain	Criteria for All Centers	% Risk	Level I & II Center Specific Criteria	% Risk
System Participation	1. 75% TMD Call Participation in Quarterly TMD/GA COT/GQIP Conference Calls *	5	1. Participation by trauma program staff member in ONE GCTE official subcommittee*	5
	2. 75% TPM participation in Georgia Committee for Trauma Excellence (GCTE) meetings.*	5	2. Trauma Medical Director must be member of the Georgia Chapter Committee on Trauma (COT)	5
	3. Summer 2023 "Day of Trauma" (St. Simons) GQIP mtg attendance by: •TMD/Physician Leader (or designee) AND •TPM (or designee)	5		
	4. Winter 2024 meeting attendance by: •TMD/Physician Leader (or designee) AND •TPM (or designee) AND •Senior Executive (or designee)	5		
	5. 75% Participation by appointed Senior Executive in quarterly Trauma Administrators Committee meetings*	5		
ACS Optimal Resources Document Criteria	6. Peer Review Committee attendance at 50% for all Peer Review Committee required members.**	5	3. Surgeon response time compliant with established thresholds**	5
	7. Timely quarterly NTDS data submissions	10	4. In Level I and II trauma centers, the TPM must be full-time and dedicated to the trauma program**	5
			5. Trauma registry FTE meets minimum requirement**	10
			6. Maintain ACS Verification	0
GQIP			7. Participation in external data validation visit	0
			8. Timely email submission of facility-specific TQIP performance matrix and drill-down exercises for spring and summer meetings	5
			9. National TQIP In-Person meeting attendance by: •TPM (or designee) AND •TMD (or designee) AND •TPIC (or designee) AND •Registrar (or designee)	3
			10. All full and part-time registrars will complete the "2023 TQIP Continuing Education: New for 2023" online course and at least 50% of the TQIP monthly educational experiences	2
Total at Risk % Criteria for All Centers		40	Total at Risk % Level I & II specific criteria	40
Total at Risk % Level I & Level II Trauma Centers				80

* Compliance timeframe defined as calendar year 2023

**Per the 2022 Published "Optimal Resources for Care of the Injured Patient"

***Required for funding eligibility for FY 2024

FY 2024 LEVEL III PBP CRITERIA				
Domain	Criteria for All Centers	% Risk	Level III Center Specific Criteria	% Risk
System Participation	1. 75% TMD Call Participation in Quarterly TMD/GA COT/GQIP Conference Calls *	5	1. Participation in Level III Level IV Rural Committee*	5
	2. 75% TPM participation in Georgia Committee for Trauma Excellence (GCTE) meetings.*	5	2. Trauma Medical Director must be member of the Georgia Chapter Committee on Trauma (COT)	5
	3. Summer 2023 "Day of Trauma" (St. Simons) GQIP mtg attendance by: •TMD/Physician Leader (or designee) AND •TPM (or designee)	5		
	4. Winter 2024 meeting attendance by: •TMD/Physician Leader (or designee) AND •TPM (or designee) AND •Senior Executive (or designee)	5		
	5. 75% Participation by appointed Senior Executive in quarterly Trauma Administrators Committee meetings*	5		
ACS Optimal Resources Document Criteria	6. Peer Review Committee attendance at 50% for all Peer Review Committee required members.**	5	3. Surgeon response time compliant with established thresholds**	5
	7. Timely quarterly NTDS data submissions	5	4. TQIP Participation	0
			5. Trauma registry FTE meets minimum requirement.**	5
			6. Achieve & Maintain ACS Verification by 6.30.2025***	0
		7. Multidisciplinary participation in "MARCH PAWS" rural trauma educational initiative by hosting the course at the level III trauma center during fiscal year	0	
GQIP			8. Timely email submission of facility-specific TQIP performance matrix and drill-down exercises for Summer and Winter meetings	2
			9. National TQIP In-Person meeting attendance by: •TPM (or designee) AND •TMD (or designee)	2
			10. All full and part-time registrars will complete the "2023 TQIP Continuing Education: New for 2023" online course and at least 50% of the TQIP monthly educational experiences	1
Total at Risk % Criteria for All Centers		35	Total at Risk % Level III specific criteria	25
Total at Risk % Level III Trauma Centers				60

* Compliance timeframe defined as calendar year 2023

**Per the 2022 Published "Optimal Resources for Care of the Injured Patient"

***Required for funding eligibility for FY 2024

FY 2024 LEVEL IV PBP CRITERIA				
Domain	Criteria for All Centers	% Risk	Level IV Center Specific Criteria	% Risk
System Participation	1. 75% TMD Call Participation in Quarterly TMD/GA COT/GQIP Conference Calls *	0	1. Participation in Level III Level IV Rural Committee*	2
	2. 75% TPM participation in Georgia Committee for Trauma Excellence (GCTE) meetings.*	2		
	3. Summer 2023 "Day of Trauma" (St. Simons) GQIP mtg attendance by: •TMD/Physician Leader (or designee) AND •TPM (or designee)	2		
	4. Winter 2024 meeting attendance by: •TMD/Physician Leader (or designee) AND •TPM (or designee) AND •Senior Executive (or designee)	2		
	5. 75% Participation by appointed Senior Executive in quarterly Trauma Administrators Committee meetings*	2		
ACS Optimal Resources Document Criteria	6. Peer Review Committee attendance at 50% for all Peer Review Committee required members.**	0	2. Multidisciplinary participation in "MARCH PAWS" rural trauma educational initiative by hosting the course at the level IV trauma center during fiscal year	0
	7. Timely quarterly NTDS data submissions	7		
GQIP			3. Timely submission of facility-specific Emergency Department length of stay aggregate report to GQIP	2
Total at Risk % Criteria for All Centers		15	Total at Risk % Level IV specific criteria	4
Total at Risk % Level IV Trauma Centers				19

* Compliance timeframe defined as calendar year 2023

**Per the 2022 Published "Optimal Resources for Care of the Injured Patient"

***Required for funding eligibility for FY 2024

FY 2024 BURN CENTER PBP CRITERIA				
Domain	Criteria for All Centers	% Risk	Burn Center Specific Criteria	% Risk
System Participation	1. 75% BMD Call Participation in Quarterly TMD/GA COT/GQIP Conference Calls *	5	1. Participation by burn program staff member in Burn Center Workgroup	5
	2. 75% BPM participation in Georgia Committee for Trauma Excellence (GCTE) meetings.*	5	2. Burn Center Medical Director must be member of the Georgia Chapter Committee on Trauma (COT)	5
	3. Summer 2023 "Day of Trauma" (St. Simons) GQIP mtg attendance by: •BMD/Physician Leader (or designee) AND •BPM (or designee)	5		
	4. Winter 2024 meeting attendance by: •BMD/Physician Leader (or designee) AND •BPM (or designee) AND •Senior Executive (or designee)	5		
	5. 75% Participation by appointed Senior Executive in quarterly Trauma Administrators Committee meetings*	5		
ABA Verification Criteria			3. Peer Review Committee attendance 50%*	5
			4. Identify two quality metrics, with associated reports for reporting and sharing in the GQIP statewide quality collaborative (9.13)	0
			5. The burn program regularly participates in regional education related to burn care (17.2)	0
		6. Attendance at burn continuing education meetings in regional, national, or international (3.11, 6.7, 7.8) by: •Burn Surgeon AND •Burn Nursing leader AND •Burn Therapy	5	
GQIP			7. (SAME AS #4 above) Identify two quality metrics, with associated reports for reporting and sharing in the GQIP statewide quality collaborative (9.13)	5
Total at Risk % Criteria for All Centers		25	Total at Risk % Burn specific criteria	25
Total at Risk % Burn Centers				50

* Compliance timeframe defined as calendar year 2023

ABA Verification Criteria effective October 1, 2019: <https://ameriburn.org/quality-care/burn-center-verification/verification-criteria/verification-criteria-effective-october-1-2019/>

Open Comment Pe

ACS Optimal Resources Document Criteria	
Level	Questions/Comments
III, IV	More information on MARCH PAWS and hosting requirement clarification
III	MARCH PAWS course requirement concern of limited faculty to reach all of Level III centers during 12 month period . Allow grace if center makes attempt, but cannot facilitate.
GQIP Criteria	
Level	Questions/Comments
II, III	National TQIP attendance clarification
III	Increase registrar TQIP educational participation from 50% to 80%
III	More information on TQIP annual new data points
System Participation Criteria	
Level	Questions/Comments
II	TPIC and Registrar added to required attendees at Summer and Winter Meeting or virtual option
III	Senior Executive/Trauma Administrator clarification
IV	Difficult for both TPM and TMD to attend both GQIP in-person meetings. Suggestion for one attendee at a time.

Responses	Level
2	LI
3	LII
5	LIII
3	LIV
13	Total Responses

Period Comment Overview

Resolution
See need for more background content. Plan to post to website and clarify with LIII/IV facilities
Resolution
In-Person December 2023
Resolution
GQIP Summer and Winter Meetings content is geared toward TPM, TMD, and Administrators. PI and Registrars are welcome, but not required. Meetings will remain in-person due to hybrid costs.
The representative for an organization is best suited to someone with ultimate authority for the trauma program at the highest level of administration, typically the C-suite at the VP level or above (sometimes CNO, COO or CFO).