

APPROVED
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GEORGIA TRAUMA COMMISSION

Georgia Trauma Commission Finance & Budget Committee

January 13, 2025

Meeting Minutes

[Meeting Documents Link](#)

Zoom Meeting

COMMITTEE MEMBERS PRESENT	COMMITTEE MEMBERS ABSENT
Pete Quinones, Chair, GTC Secretary/Treasurer	
Dr. Dennis Ashley, GTC Chair	
Dr. Regina Medeiros, GTC Vice-Chair	
Dr. James Dunne, GTC Member	
Courtney Terwilliger, GTC Member	
Jesse Gibson, Northeast Georgia Medical Center	

OTHERS PRESENT	REPRESENTING
Elizabeth Atkins	GTC, Executive Director
Katie Vaughan	GTC, Finance Operations Officer
Gabriela Saye	GTC, Business Operations Mgr
Crystal Shelnutt	GTC, Regional Trauma System Development Mgr.
Gina Solomon	GTC, GQIP Director

CALL TO ORDER

The meeting began at 3:30 PM on Monday, January 13, 2025, with six committee members present.

APPROVAL OF MEETING MINUTES

Presented by Pete Quinones

With a quorum established, Pete requested a motion to approve the October meeting minutes.

MOTION GTCNC FINANCE COMMITTEE 2025-01-01:

Motion to approve the October 21, 2024, meeting minutes as submitted

MOTION BY: James Dunne

SECOND BY: Courtney Terwilliger

VOTING: All members are in favor of the motion.

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

BUDGET UPDATE

Presented by Katie Vaughan

Katie Vaughan presented the standing agenda items, which included budget-to-expense updates through December:

- The current financials are in line, with slight variance due to pending trauma center invoices, expected by the end of the month (**ATTACHMENT A**)

- A 7% year-over-year increase was noted in Super Speeder revenue (**ATTACHMENT B**). The need to explore whether this is tied to a population increase or higher speeding incidents was mentioned.
- The fiscal year budget timeline was reviewed (**ATTACHMENT C**).
- The trust fund statement was mentioned and included in the packet for review (**ATTACHMENT D**). It was noted that \$20 million of the budget is allocated to the trust fund, and \$7.5 million is distributed to state funds, subject to budgetary conditions. Concerns were raised about the potential redirection of funds during state budget shortfalls. Katie confirmed the funds had been reliably received since 2020 due to adherence to the legislative code.

FY2026 PERFORMANCE-BASED PAY UPDATE

Presented by Gabriela Saye

Gabriela shared a presentation (**ATTACHMENT E**) highlighting significant progress made by the PBP workgroup, which included representatives from all trauma center levels. The discussion covered key changes, tiered metrics, attendance reformatting, and the introduction of outcome measures.

The PBP workgroup has been actively meeting since October, with the last meeting on December 17th. The group diligently worked to revise tiered metrics, criteria percentages, and other essential elements of the PBP. All workgroup members were acknowledged for their collaboration and contributions.

Key highlights of the FY2026 PBP included:

- A new tiered approach for eligible criteria aims to reduce the penalty of missing single meetings by introducing multiple attendance opportunities and tiered levels of engagement.
- Two new outcome measures will be incorporated: timely VTE Prophylaxis and timely surgical repair for geriatric hip fractures. The initial percentage at risk will be 0%, and future tiers will be outlined to ensure gradual implementation.

Potential challenges were addressed, such as delays in VTE prophylaxis for traumatic brain injury patients, ensuring alignment with best practices. Gina Solomon clarified that the trauma registry from all levels is housed on the GQIP central site. The system filters for specific cases based on length of stay and trauma service admission, enabling precise reporting by the center. Further refinements to the reporting process are ongoing.

- Additional changes to the PBP included:
 - Level I participation requirement for the GTC Research Workgroup.
 - Education requirements for Level IV trauma center registry professionals
 - Removal of redundant criteria already covered by ACS standards or contract requirements.
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The PBP workgroup is set to meet again to review minor revisions and percentage allocations before broader dissemination. The proposed FY 2026 PBP will undergo an open comment period and be presented to all relevant GTC committees. Stakeholders will have the opportunity to provide feedback via the survey and during the Committee meetings.

The goal is to have the FY2026 PBP approved by the Commission during the May 15, 2025 meeting for implementation in the FY 2026 contracts, which are set to be released in June 2025.

FY2025 INITIAL REALLOCATION PLAN AND FUNDING PROPOSALS

Presented by Katie Vaughan

Katie Vaughan outlined the current status of the unallocated budget and funding priorities (**ATTACHMENT F**). Key highlights included:

- \$42,00 reallocation from the Department of Administrative Services fee adjustment.
- Unused funds from Region 9 RTAC due to position vacancy.
- Reallocation of funds of trauma centers that were not ACS-verified.
- \$1.5 million in revenue from fireworks, alongside FY 2025 carryover funds.
- Registry startup grant with outstanding funds.

The initial reallocation plan, if approved, would leave \$3.8 million available for other initiatives.

Dr. Dunne inquired about the nature of the registry startup grants, clarifying that they are one-time allocations to support new Level IV trauma centers. Elizabeth Atkins explained that these grants are provided over three years, ensuring centers meet specific metrics for continued readiness.

The committee reviewed the following proposed priorities in need of funding:

- **PTSF Consultative Visits for Level IV Trauma Centers**

Elizabeth Atkins proposed a \$75,000 allocation for Pennsylvania Trauma System Foundation (PTSF) consultative visits to five Level IV trauma centers (**ATTACHMENT G**). The purpose is to review Level IV progress, address ongoing challenges, and provide guidance based on previous recommendations. It was noted that the proposal may be slightly less than \$75,000 as a Level IV center has dropped out of the system, and the number of centers will need to be adjusted.

Dr. Dunne expressed concerns about investing resources into centers that might drop out of the system, citing financial constraints and leadership changes as potential causes.

- **Proposal for GQIP Performance Improvement Specialist**

Gina Solomon presented a proposal (**ATTACHMENT H**) for a part-time contract position to support the GQIP Collaborative, addressing increased workload and data validation. Key details:

- The position would require 30-40 hours per month, with a \$70,000 annual budget
- Responsibilities would include assisting with data validation, supporting performance improvement projects, and preparing the trauma center for ACS verification.

Concerns were raised regarding the hourly rate for this position, and suggestions were made for further research to determine an appropriate cost.

- **Stop the Bleed Funding**

Crystal Shelnett provided an overview of the current status and future funding needs for the Stop the Bleed program (**ATTACHMENT I**). \$53,595.62 was requested to cover the cost of October 2024 kit applications.

Additionally, projections for the year ahead were provided using the averages of 2024 application periods, requesting an overall budget of \$250,000 to support ongoing kit distributions. This funding would cover over 4,000 kits across 10 regions with four application periods and \$10,000 for training supplies such as replacement tourniquets and wound-packing gauze.

Crystal shared that 60% of Georgia counties have received kits under the expanded program, kits have been effectively utilized in critical incidents, such as the Apalachee school shooting, and the school bus project has increased to 94% completion.

The total funding request was noted as \$303,595.

MOTION GTCNC FINANCE COMMITTEE 2025-01-02:

Motion to approve the Stop the Bleed funding request, \$303,595.

MOTION BY: Courtney Terwilliger

SECOND BY: Jesse Gibson

VOTING: All members are in favor of the motion.

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

- **EMS Initial Education Testing Software Funding**

Crystal Shelnutt proposed to continue funding an EMT testing software program to improve success rates in grant-funded initial education programs (**ATTACHMENT J**). The platform will help address areas where grant-funded students perform below the state average on certification exams. Six months of the program data show nearly 500 students enrolled, with granular insights into testing performance in areas such as chest trauma and upper airway obstructions.

Crystal proposed \$40,000 to fund the program for six months, supporting approximately 650 EMT students.

MOTION GTCNC FINANCE COMMITTEE 2025-01-03:

Motion to approve the EMT testing software funding request, \$40,000.

MOTION BY: Courtney Terwilliger

SECOND BY: James Dunne

VOTING: All members are in favor of the motion.

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

Elizabeth Atkins highlighted two pending funding items that require urgent consideration due to timeline constraints: PTSF Consultative Visits for Level IV Trauma Centers and GQIP Performance Improvement Specialist funding. The PTSF consult visits are scheduled in June and must be confirmed soon to avoid delays or postponement. The GQIP PI Specialist is needed to avoid hindering GQIP progress. Pete asked if these items could wait until the next Finance Committee meeting in February for further clarification and discussion.

Dr. Dunne sought clarification on how these proposals would impact the yearly budget. Elizabeth Atkins explained that some of these roles, such as the PI specialist, would initially be contracted before considering transitioning into full-time positions. She outlined that the funds for these initiatives would come from the reallocation budget. Dr. Dunne expressed concerns about budget prioritization but was reassured that these funds would not affect other ongoing allocations.

MOTION GTCNC FINANCE COMMITTEE 2025-01-04:

Motion to approve the PTSF Consultative Visits for Level IV Trauma Centers, \$75,000, and the GQIP Performance Improvement Specialist, \$70,000, funding requests

MOTION BY: James Dunne

SECOND BY: Courtney Terwilliger

VOTING: All members are in favor of the motion.

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

SUMMARY OF ACTION ITEMS & ADJOURNMENT

- Katie Vaughan presented the standing agenda items, which included budget-to-expense updates through December:

- Budget-to-expense (**ATTACHMENT A**)
- Super Speeder revenue (**ATTACHMENT B**).
- Fiscal year timeline (**ATTACHMENT C**)
- Trust fund statement (**ATTACHMENT D**)
- Gabriela shared a presentation (**ATTACHMENT E**) highlighting significant progress made by the PBP workgroup, which included representatives from all trauma center levels. The discussion covered key changes, tiered metrics, attendance reformatting, and the introduction of outcome measures.
- Katie Vaughan outlined the current status of the unallocated budget and funding priorities (**ATTACHMENT F**).
- The committee reviewed the following proposed priorities in need of funding:
 - Elizabeth Atkins proposed a \$75,000 allocation for Pennsylvania Trauma System Foundation (PTSF) consultative visits to five Level IV trauma centers (**ATTACHMENT G**).
 - Gina Solomon presented a proposal (**ATTACHMENT H**) for a part-time contract position to support the GQIP Collaborative, addressing increased workload and data validation.
 - Crystal Shelnutt provided an overview of the Stop the Bleed program's current status and future funding needs (**ATTACHMENT I**).
 - Crystal Shelnutt proposed continuing to fund an EMT testing software program to improve success rates in grant-funded initial education programs (**ATTACHMENT J**).
- The committee approved the Stop the Bleed funding request, \$303,595.
- The committee approved the EMT testing software funding request of \$40,000.
- The committee approved the PTSF Consultative Visits for Level IV Trauma Centers, \$75,000, and the GQIP Performance Improvement Specialist, \$70,000, funding requests.
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The meeting adjourned at 4:30 PM

Minutes by G. Saye.