

APPROVED
09.20.24



GEORGIA TRAUMA COMMISSION

Georgia Trauma Commission Finance & Budget Committee

August 19, 2024

Meeting Minutes

[Meeting Documents Link](#)

Zoom Meeting

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

OTHERS PRESENT	REPRESENTING
Elizabeth Atkins	GTC, Executive Director
Katie Vaughan	GTC, Finance Operations Officer
Gabriela Saye	GTC, Business Operations Mgr
Crystal Shelnett	GTC, Regional Trauma System Development Mgr
Becca Hallum	Georgia Hospital Association
Rich Elliot	Clayton County Fire and EMS

CALL TO ORDER

A quorum was established at 3:30 PM on Monday, August 19, 2024, with six committee members present. Dr. Regina Medeiros welcomed everyone and expressed appreciation for their attendance.

APPROVAL OF MEETING MINUTES

Presented by Dr. Regina Medeiros

Dr. Medeiros requested a motion to approve the July meeting minutes.

MOTION GTCNC BUDGET COMMITTEE 2024-08-01:

Motion to approve the July 15, 2024, meeting minutes as submitted

MOTION BY: Dennish Ashley

SECOND BY: Jesse Gibson

VOTING: All members are in favor of the motion.

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

LEVEL IV INTER-RATER RELIABILITY (IRR) FUNDING REQUEST

Presented by Liz Atkins

Liz Atkins presented a funding request to implement an external IRR program. She emphasized the importance of this initiative in improving data quality at Level IV centers, especially since these centers are understaffed and lack resources for comprehensive data analysis.

Liz reviewed the cost structure (**ATTACHMENT A**), totaling \$191,976.25 for the first year, with a significant portion allocated to implementation fees. The ongoing costs for 8 Level IV centers would be just over \$100,000 annually. She highlighted that the program would include a software application to track and monitor data accuracy and be a valuable tool for centers.

Jesse Gibson raised questions about the potential impact of staff turnover on the program's effectiveness. Liz acknowledged this concern and noted the training needs would be ongoing.

MOTION GTCNC BUDGET COMMITTEE 2024-08-02:

Motion to approve the inter-rater reliability program funding request for the listed Level IV centers (ATTACHMENT A)

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.

Dr. Medeiros confirmed the funds were available in the current year's budget. Dr. Medeiros thanked Liz for her proposal and asked that the approval be communicated to the Level III/IV Committee.

STOP THE BLEED FUNDING REQUEST.

Presented by Crystal Shelnutt

Dr. Medeiros continued to the next funding request from the Regional Trauma Advisory Committee (RTAC) for additional Stop the Bleed program supplies.

Crystal Shelnutt provided an overview of the current status of the Stop the Bleed kits. She noted that inventory is nearly exhausted, with 800 kits remaining in storage. Due to high demand and over 2,100 kit requests, 1,200 kits (**ATTACHMENT B**) are necessary to fulfill current requests.

Crystal mentioned plans to establish an ongoing annual budget for this initiative using data collected from the recent Smartsheet implementation and feedback from the RTAC Coordinators. She discussed the need for better reporting on kit deployment and a strategy to evaluate the remaining stock in schools, ensuring ongoing training and kit availability.

Dr. Dunne expressed concerns about the program's long-term sustainability, mainly replacing used tourniquets. He emphasized the importance of understanding the financial implications and suggested the committee discuss whether to continue replacing used kits.

Crystal acknowledged the need for better reporting on kit usage. She clarified that the current request is for new applicants only and reiterated that future decisions about kit replacement would require careful consideration. Liz Atkins agreed that the kits being requested are new, not replacements. The Stop the Bleed program expanded in 2022 to distribute kits broadly. Liz emphasized that the committee should consider the program's end goal.

[MOTION GTCNC BUDGET COMMITTEE 2024-08-02:](#)

[Motion to approve the Stop the Bleed funding request to purchase 1,200 additional kits](#)

MOTION BY: Jesse Gibson

SECOND BY: Courtney Terwilliger

VOTING: All members are in favor of the motion.

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

Liz advised the pediatric toolkit funding request is on hold pending budget confirmation. Liz noted the GCTE vice-chair presented a funding request for toolkit printing and distribution support during the last Georgia Trauma Commission meeting.

INJURY PREVENTION FUNDING

Katie introduced the next agenda item concerning injury prevention funding, which Dr. Dunne asked during the Commission meeting. Dr. Dunne explained that the discussion was about the possibility of reallocating funds for injury prevention efforts, should a proposal be submitted. Liz Atkins noted that there had been budget placeholders for injury prevention in previous years, but these funds were continuously reallocated due to underutilization. She mentioned the potential partnership with the Foundation to fund injury prevention. Dr. Dunne clarified Dr. Bleacher had proposed two possibilities: the Foundation could directly fund injury prevention efforts or match funding from external grants.

Katie confirmed that the pediatric toolkit and injury prevention items would remain placeholders until further budget information was available.

PROJECTS FOR FOUNDATION FUNDING

Discussion shifted to potential projects for funding by the Foundation. Dr. Ashley elaborated that the goal was to identify and propose several projects requiring external funding outside the Commission budget. He proposed developing a list of five projects for consideration, including short-term, easily fundable initiatives and longer-term projects requiring more substantial fundraising efforts.

The plan is for the Finance and Budget Committee to propose these projects to the Commission for approval at the next November meeting. Once approved, these projects would be presented to the Foundation board for consideration and assessment of feasibility. The overall goal is to establish a collaborative roadmap for achieving key objectives over the next one to three years.

Committee members reviewed potential proposals. Crystal Shelnett presented an option to fund a mobile sim lab and highlighted a two-bay mobile simulator used in Nebraska (**ATTACHMENT C**). She noted the budget would be approximately \$600,000 to \$700,000 for the vehicle alone. Additional ongoing costs would be needed to maintain the vehicle and supplies.

Dr. Ashley thanked Crystal for the proposal and emphasized the need for further planning, including understanding the specific objectives and target audience for such a program. Dr. Dunne proposed organizing the project ideas into categories such as EMS, rural, and education to foster more focused brainstorming.

Dr. Medeiros cautioned that donors are more likely to support initiatives benefiting communities rather than directly funding hospitals. She emphasized the importance of projects that could fill existing community healthcare and education gaps. Dr. Medeiros added that Crystal helped put together another project idea to support EMS partners in purchasing essential equipment for administering whole blood in emergencies (**ATTACHMENT D**).

Dr. Ashley proposed further meetings might be necessary to refine the ideas and ensure thorough

discussions. Dr. Medeiros expressed the urgency of preparing well-documented proposals, complete with budgets, to facilitate the Commission's evaluation. The group acknowledged that five projects could be ambitious, and there may be a need for more focused discussions.

Jesse Gibson asked whether the five proposed projects would be presented to the Foundation for donor attraction or if the Commission would select which projects to pursue. Dr. Ashley clarified the intention was to present the proposals to the Commission first, allowing the members to indicate preferences before forwarding them to the Foundation for further consideration.

Dr. Dunne proposed a public education campaign to increase awareness about trauma, noting that many citizens may not understand the differences between trauma centers and other hospitals. The group discussed the potential benefits of informing the community about the importance of seeking care at appropriate facilities.

Liz recommended incorporating the Stop the Bleed program as one of the initiatives, highlighting its effectiveness in schools and communities.

Committee members discussed the need to discuss and refine project proposals further. Members were encouraged to brainstorm and prepare their ideas for the forthcoming meeting. Dr. Ashley noted that the ideas do not have to be perfect. The primary goal is to initiate conversations and ensure everyone contributes to them.

Pete Quinones asked about the Foundation's potential fundraising capabilities. Dr. Medeiros clarified that while the Foundation is responsible for raising funds for specific projects, it does not cover ongoing costs. The foundation's role involves raising the necessary capital to launch projects, such as purchasing equipment or launching new initiatives. We need to choose projects wisely, as the Foundation's first fundraising effort must be successful to maintain donor confidence.

The committee discussed selecting projects with statewide impact and significant visibility, ensuring the results justify the investment and effort. Dr. Dunne added that the Foundation may want to focus on more significant, multimillion-dollar initiatives.

Dr. Dunne agreed to Chair the next Finance and Budget Committee in lieu of Dr. Medeiros's absence. Committee members were encouraged to email Regina and Gabby any project ideas for discussion during next month's call.

SUMMARY OF ACTION ITEMS & ADJOURNMENT

- Liz Atkins presented a funding request to implement an external IRR program. Liz reviewed the cost structure (**ATTACHMENT A**), totaling \$191,976.25 for the first year, with a significant portion allocated to implementation fees. The ongoing costs for 8 Level IV centers would be just over \$100,000 annually.
 - Committee approved the inter-rater reliability program funding request for the listed Level IV centers (**ATTACHMENT A**)
- Crystal Shelnutt provided an overview of the current status of the Stop the Bleed kits. She noted that inventory is nearly exhausted, with 800 kits remaining. Due to high demand and over 2,100 kit requests, 1,200 kits (**ATTACHMENT B**) are necessary to fulfill current requests. Crystal mentioned plans to establish an ongoing annual budget for this initiative.
 - Committee approved the Stop the Bleed funding request to purchase 1,200 additional kits
- The committee discussed potential projects for funding by the Foundation. Ideas included:
 - Mobile Sim Lab (**ATTACHMENT C**)

- Prehospital Blood Product Administration Equipment Support (**ATTACHMENT D**)
- Public Education Campaign
- Stop the Bleed
- Committee members discussed the need to discuss and refine project proposals further. Members were encouraged to brainstorm and prepare their ideas for the forthcoming meeting. Dr. Ashley noted that the ideas do not have to be perfect. The primary goal is to initiate conversations and ensure everyone contributes to them.
- Dr. Dunne agreed to Chair the next Finance and Budget Committee in lieu of Dr. Medeiros's absence. Committee members were encouraged to email Regina and Gabby any project ideas for discussion during next month's call.

The meeting adjourned at 4:36 PM

Minutes by G. Saye.