

**APPROVED**  
**01.16.26**



# GEORGIA TRAUMA COMMISSION

## Georgia Trauma Commission Finance & Budget Committee

December 15, 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. James Dunne, GTC Member	
Jesse Gibson, Northeast Georgia Medical Center	
Courtney Terwilliger, GTC Member	

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

### **CALL TO ORDER**

The meeting commenced at 3:30 p.m. on Monday, December 15, 2025, with four committee members in attendance.

### **FINANCE & BUDGET ITEMS**

*Presented by Katie Vaughan*

Katie reviewed financial materials provided in the meeting packet (**ATTACHMENT A**), including Super Speeder and fireworks revenue reports. It was noted that Super Speeder revenue reflected an approximate 3% decrease compared to the prior year, but remained consistent with established seasonal trends. Fireworks revenue for FY 2026 was reported as slightly lower than that of FY 2025. The budget cycle timeline, including Georgia budget milestones, and the trust fund statement were also presented for informational purposes.

### **APPROVAL OF MINUTES**

*Presented by Pete Quinones*

With quorum established, the Chair, Pete Quinones, called for consideration of the minutes from the September 15 and November 17 meetings.

#### **MOTION GTCNC FINANCE COMMITTEE 2025-12-01:**

**Motion to approve September 15, 2025, and November 17, 2025, meeting minutes as submitted**

**MOTION BY:** Jesse Gibson

**SECOND BY:** Dr. James Dinne

**VOTING:** All members are in favor of the motion.

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

The committee then proceeded to New Business with consideration of the Trauma Center Education Proposal. Before the discussion, clarification was provided that the State Office of EMS had no authority or requirement to mandate allocation of fireworks revenue, and that their request for early planning information was informational in nature only.

### **TRAUMA CENTER EDUCATION PROPOSAL**

*Presented by Elizabeth Atkins*

The Trauma Center Education Proposal, submitted by the Georgia Committee for Trauma Excellence (GCTE), was presented in detail (**ATTACHMENT B**). The proposal outlined a two-year educational plan to support trauma centers through a series of courses focused on trauma program management, performance improvement, injury prevention, rural trauma challenges, and trauma registry education. The proposal included both in-person and virtual courses, with additional funding requested to cover logistical expenses. It was noted that the proposed funding would be drawn from existing trauma center funds, including unexpended balances.

Following discussion regarding course sequencing, relevance to rural and non-rural trauma centers, and the extent of institutional support provided by hospital systems, a motion was made to approve the Trauma Center Education Proposal.

#### **MOTION GTCNC FINANCE COMMITTEE 2025-12-02:**

#### **Motion to approve the GCTE Trauma Center Education Proposal**

**MOTION BY:** Courtney Terwilliger

**SECOND BY:** Dr. James Dunne

**VOTING:** All members are in favor of the motion.

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

The Chair introduced the following item of new business, the consideration of an EMS Education Contractor position.

### **EMS & TRAUMA EDUCATION PROGRAM CONTRACTOR**

*Presented by Crystal Shelnutt*

Crystal presented the proposed role, explaining that it would be a contracted position comparable to existing RTAC coordinator roles and funded through the EMS education budget. The initial proposal (**ATTACHMENT C**) contemplated a six-month contract to align with fiscal year planning, with compensation discussed in the range of \$35,000 to \$50,000 for the contract period, in addition to a separate travel and business expense allowance of up to \$10,000. It was clarified that the contractor would be engaged directly by the Commission, rather than through a hospital system, and would serve the entire state.

The committee discussion focused on the scope of responsibilities, anticipated workload, and appropriate compensation. Crystal described the position as responsible for statewide coordination of EMS education courses, including serving as a liaison with vendors and host agencies, managing course logistics, enrollment, data collection, surveys, reporting, and ensuring accountability for expenditures. Questions were raised regarding whether the position could reasonably be considered part-time, with several members expressing concern that the workload might ultimately require near full-time effort. Alternative compensation models, including hourly payment, were discussed but deemed difficult to administer and budget effectively.

Further discussion addressed the need to attract a qualified and experienced candidate, the lack of benefits associated with a contract role, and the importance of maintaining flexibility should the position later

transition to a full-time role. It was clarified that travel and business expense allocations would be reimbursed only upon submission of appropriate documentation and that any unused funds would roll forward. After discussion, a consensus emerged to authorize a higher compensation ceiling for the initial six-month term, while retaining discretion to evaluate performance and workload before renewal.

A motion was made to approve funding for the EMS Education Contractor position at a salary of up to \$45,000 for a six-month contract period, with an additional \$10,000 allocated for travel and business expense reimbursement. The motion was seconded. It was clarified that the contractor would primarily function as a facilitator and coordinator, rather than as an on-site instructor, for all courses.

**MOTION GTCNC FINANCE COMMITTEE 2025-12-03:**

**Motion to approve funding for the EMS Education Contractor position at a salary of up to \$45,000 for a six-month contract period, with an additional \$10,000 allocated for travel and business expense reimbursement.**

**MOTION BY:** Courtney Terwilliger

**SECOND BY:** Dr. James Dunne

**VOTING:** All members are in favor of the motion.

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

**ARBORMETRIX FUNDING**

*Presented by Liz Atkins and Gina Solomon*

Liz Atkins provided an update regarding the ArborMetrix platform. Liz reported that she and Gina Solomon recently conducted an initial discussion with ArborMetrix concerning the continuation of the current subscription. A brief background was provided, noting ArborMetrix is the analytics and benchmarking platform used to support statewide risk-adjusted trauma data analysis, similar to the system utilized by the State of Michigan for its Level I and II trauma centers. Georgia currently uses the platform for Level I through IV trauma centers, including pediatric-inclusive centers, though burn center data is excluded.

Liz reviewed the contract's history, noting that the initial three-year subscription, which began in 2021, included analytics, data conversion, storage, and platform support for all participating centers, as well as expanded administrative access. The total annual cost was approximately \$455,000, and the full three-year amount was encumbered through a single purchase order rather than paid annually. The committee was informed that the current fiscal year represents the final year of that agreement. Because renewal would occur mid-fiscal year, planning is required to establish a dedicated budget line item should the program continue.

Liz Atkins noted that, despite rising information technology costs across the industry, ArborMetrix has incorporated anticipated increases through an annual fee structure that includes an uplift (**ATTACHMENT D**). She emphasized that the subscription includes comprehensive analytic services, as the program does not currently employ in-house statistical personnel. She stated that this agenda item was presented for information only and that the Georgia Quality Improvement Program (GQIP) Committee would further evaluate the platform and provide a recommendation at the February meeting regarding continuation.

Discussion included a comparison with Michigan's long-standing and more robust use of the platform. Liz explained that Michigan's system has evolved over more than a decade through incremental additions and internal analytic capacity. She indicated that ArborMetrix had been asked to outline what would be required to bring Georgia's platform closer to Michigan's level of functionality, and that a cost-benefit analysis would be conducted comparing continued vendor support versus hiring internal analytic staff. Gina Solomon added that Georgia's current implementation remains in an early developmental phase and that recent enhancements, such as the addition of venous thromboembolism metrics, demonstrate the platform's ability

to expand over time.

Further discussion addressed the importance of extending meaningful benchmarking and reporting to Level III and Level IV trauma centers, which currently lack access to national risk-adjusted reports such as TQIP. Liz Atkins and Gina Solomon emphasized that proposed enhancements are intended to reduce administrative burden by providing automated, actionable reports rather than increasing data entry requirements. Gina Solomon noted that ArborMetrix reports are already being pushed directly to Level IV centers to support performance improvement and upcoming site surveys.

Budget considerations were briefly discussed, including the potential use of accrued interest or unallocated trauma center funds to support a multi-year commitment. It was clarified that while funds may be encumbered in advance, ArborMetrix requires annual payment rather than a single lump-sum payment. Members expressed concern regarding increasing software and registry costs for smaller trauma centers, particularly Level IV facilities.

In response to a question, Liz confirmed that no vote was required at this time; however, formal committee action will be necessary at or around the February meeting to determine whether to continue the ArborMetrix subscription and to identify a sustainable funding approach. The Chair then moved the agenda forward to the next item of business.

### **SIMULATION FELLOWSHIP AND RURAL TRAUMA OUTREACH PROGRAM**

*Presented by Liz Atkins*

Liz Atkins directed members to the detailed proposal included in their meeting materials (**ATTACHMENT D**), noting that each page outlined the projected annual costs associated with sustaining and expanding the program.

Liz reported that the State Office of Rural Health and the Trauma Foundation had expressed interest in partnering to support the long-term viability of the program. She advised that a joint planning call with those entities was scheduled in the coming days to determine potential cost-sharing arrangements. The committee was informed that a key consideration would be identifying the portion of annual funding the committee would be willing to support to maintain the program.

Liz emphasized that no vote was requested at this time and encouraged members to raise questions or concerns so they could be documented and addressed in advance of future budget decisions. She further indicated that Dr. Mabes could be invited to a future committee meeting to provide additional detail and respond directly to member inquiries, noting that a recording of her November presentation was available for review.

In response to a question regarding program scope, Liz stated that the proposal anticipated approximately twelve courses annually in both the first and second years of the funding period, representing an increase from the ten courses delivered during the initial year. She noted that the program also included scholarly dissemination activities.

Members inquired about funding sources and whether continuation of the program would require reallocating existing funds. Ms. Atkins explained that discussions with partner organizations were ongoing and that funding would likely be shared among multiple entities, contingent upon agreement regarding reasonable contribution levels. She highlighted the program's demonstrated reach and anticipated availability of post-course outcome data to support evaluation further.

Several members expressed support for the program but requested additional information to assess its impact and cost-effectiveness. Dr. Dunne emphasized the importance of determining whether the courses

resulted in measurable improvements in trauma care practices, particularly given competing budget priorities. Ms. Atkins responded that post-course evaluation data were being compiled and that inviting Dr. Mabe to an early committee discussion would allow sufficient time for thorough review prior to any vote.

Discussion also addressed provider participation, particularly in rural settings. It was clarified that the program had successfully engaged emergency medicine physicians and advanced practice providers and that course sites were selected to allow participation by surrounding rural hospitals. Crystal Shelnett provided firsthand feedback, stating that the courses were well received, adaptable to audience needs, and generated meaningful clinical discussion. She noted reported improvements in self-assessed knowledge across multiple content areas, including bleeding control.

Additional discussion focused on program cost structure and administrative expenses. Concerns were raised regarding the appearance of a top-heavy budget; however, Liz clarified that the proposal reflected shared costs with the Medical College of Georgia and that the anticipated funding request to the committee would likely be significantly less than the total program cost, potentially in the range of approximately \$100,000, pending final partner commitments.

Liz advised that further details regarding funding responsibilities would be available at the next meeting following completion of discussions with partner organizations. Members expressed agreement with using upcoming meetings to further evaluate the program and determine whether a formal presentation by Dr. Mabe would be beneficial prior to any funding decision.

Pete Quinones invited Courtney Terwilliger to provide an update on the MARCH PAWS initiative.

### **MARCH PAWS UPDATE**

*Presented by Courtney Terwilliger*

Courtney Terwilliger reported that a recording date had been scheduled for the 13th of the following month, at which time Dr. Mabe and Kyle would complete the final video presentation. He noted that scheduling challenges made it difficult to coordinate participation among multiple physicians; therefore, Dr. Mabe agreed to deliver the whole presentation, which would later be segmented for use in different educational contexts.

Courtney further stated that efforts were ongoing to involve Dr. Register and Kelli Vaughn in additional recorded segments. He explained that their participation had been delayed due to unforeseen personal circumstances, but that plans were in place to incorporate their contributions. The completed materials are intended to address multiple audiences, including the general public and rural leadership, with an emphasis on improving understanding of trauma system function, appropriate patient triage, and the limitations of local stabilization for certain trauma patients. Courtney emphasized the importance of increasing awareness among county leadership regarding trauma system needs and noted that progress on the project was continuing.

### **CLOSING REMARKS**

*Presented by Pete Quinones*

Pete Quinones expressed appreciation for the committee's time and effort. With no further business or discussion, the meeting was adjourned at 4:30 PM.

### **SUMMARY OF ACTION ITEMS & ADJOURNMENT**

- Katie reviewed financial materials provided in the meeting packet (**ATTACHMENT A**).
- The committee approved the GCTE Trauma Center Education Proposal (**ATTACHMENT B**).
- The committee approved funding for the EMS and Trauma Education Program Contractor position (**ATTACHMENT C**) at a salary of up to \$45,000 for a six-month contract period, with an additional

\$10,000 allocated for travel and business expense reimbursement. Performance and workload will be reevaluated before contract renewal.

- The committee reviewed the ArborMetrix renewal costs (**ATTACHMENT D**). The Georgia Quality Improvement Program (GQIP) Committee will further evaluate the platform and provide a recommendation at the February meeting regarding continuation. Liz Atkins advised that formal committee action will be necessary at or around the February meeting to determine whether to continue the ArborMetrix subscription and to identify a sustainable funding approach.
- The committee reviewed the Rural Interactive Trauma Simulation Outreach Program Grant Proposal (**ATTACHMENT E**). The committee was informed that a key consideration would be identifying the portion of annual funding the committee would be willing to support to maintain the program. Members agreed to use upcoming committee meetings to evaluate the program further and determine whether a formal presentation by Dr. Mabes would be beneficial before making any funding decision.
- Courtney Terwilliger provided an update on the MARCH PAWS initiative, noting that a video recording date has been scheduled.

Meeting minutes respectfully submitted by Gabriela Saye