



**Capital Area Trauma Regional Advisory Council
Executive Board & General Membership
Meeting Agenda
April 23, 2009
1 – 3 pm
Seton Medical Center Williamson**

I. Call To Order

Jackie Gondeck called the meeting to order at 1:08 p.m. Jackie asked the board members to introduce themselves.

II. Approval of minutes:

Marsi Ferris made a motion to approve the January 22, 2009 General Membership minutes and Greg Knapp 2nd the motion. A unanimous vote followed. Approve Executive Board minutes from March 26th. Scott Fernandes made a motion to approve the Executive Board minutes from March 26th. Sylvan Mersiovsky 2nd the motion and a unanimous vote followed. Dave Reimer took a minute to explain that he prefers to send the minutes out by email instead of making multiple copies at each meeting. Sending them by email in advance gives members a chance to review them prior to the meeting. The membership agreed this made sense.

III. Treasurer's Report

Kat Gann provided a financial summary report for March 31, 2009. Kat distributed a grant funds summary handout that was designed to help clarify the various CAT-RAC funding sources for the membership. Tom Partin made a motion to accept the Treasurer's report and Dr. Dire 2nd the motion. A unanimous vote followed. See handout on file at the CATRAC.

IV. Public Comments

Scott and White University Medical Center has made a name change to Scott and White Round Rock.

V. Chair Report

Jackie acknowledged that Vangie Barefoot has been named the SANE nurse of the year. Jackie extended congratulations to Vangie. Evangeline Barefoot RN,BSN,CEN,CA-CP,SANE, CFN, SANE-A,CMI-II received the Edith Rust Medical Services award from the Texas Association Against Sexual Assault.

VI. DSHS Update

No one was available to make comments. Dave explained that Arlen has changed positions at DSHS and is not our RAC representative any more. Dave will keep the membership posted on who the new DSHS representative will be and he will work to involve them in CATRAC meetings.



VII. Trauma Center Update

Dr. Brown discussed the American College of Surgeon's (ACS) visit in June for both UMCB and DCMC. Both facilities are asking for a level I designation and look forward to working with the ACS. Dr. Brown reminded the membership of the Trauma Conference being held June 5-6th. He mentioned that the deadline for early bird registration is coming up.

VIII. Director's Update

Dave Reimer reported that the Hurricane Conference went very well based on his experience. Dave discussed the tracking system that is being proposed to use for evacuees. He mentioned that some pieces are in place, but planning is still going on and is necessary prior to going live. Dave is going to a hurricane drill in College Station in a few days to get an idea of how patients will be moved during hurricane season. Our RAC has a tracking program called EMTrack and has looked at other RACs who are using it and how to improve coordination among those RACs.

OASPR: Dave reported that some OASPR equipment purchases for hospitals and the region are getting finalized. Training funds from this grant need to be expended by July 31st. Anyone is welcome to come to the OASPR meetings that are held the 2nd Friday of each month at the CATRAC offices. Dave added that the group has evolved from going beyond just hospitals to being more regional in its focus. Dave is working on partnership that would permit having a regional command platform vehicle to allow better and more central coordination at disaster events. The next OASPR grant period will likely begin July 31st 2009 and the state has indicated that the grant will continue for another 3 years. Many of the benchmarks and priorities will remain the same. Dave would like to leverage multiple grants from different organizations and coordinate the efforts to avoid duplication of efforts and resources. Dave will keep the membership updated on the grant as more information becomes available. Dave would also like to explore other grant opportunities.

OLD BUSINESS:

I. San Saba County Representative

Dave announced that Charles Peeler has taken the spot formerly held by Glenda Ragland. He could not make it to the meeting today. He will be the interim representative for San Saba County until the slot expires and is up for nomination again.

II. A TOPIC Course (Trauma Outcomes and Process Improvement Course.) is being held on May 10th. The course is sponsored by the RAC and TETAF. Dave announced that the RAC can subsidize course costs for up to 7 people. Most of the designated hospitals have expressed a need for the course in this area. The course is one day and will be held at the RAC offices from 8:00 a.m.-5 p.m.



III. Trauma Registry Summit

Dave reported that TETAF sponsored a summit earlier this week in Dallas focused on trauma registries. TETAF is working on fixing the state trauma registry and making it more usable. DSHS is also working on fixing the registry and both are on different project timelines. TETAF is pushing to finish is sooner and in an effort to do that put together the Summit. Dave was disappointed by the number of vendors that participated. Dave went to get ideas about a potential regional registry in the CATRAC. Dave added that STRAC has already done it with hospitals and EMS pretty effectively in their region. He explained that having a regional registry would allow the region to have control over the registry and the data to use for multiple purposes. Dave is welcoming participation in the workgroup that is forming to develop the regional registry. Current interested workgroup members include Kat Gann, Dave Reimer, Melanie Tucker and Susan Swan and Ed Gomez (Wilco EMS).

IV. Cardiac Care

Dave has been talking with Loni Denne and Remmy Morris at the American Heart Association (AHA) about the subject of a cardiac care committee. Dave noted that GETAC has started a cardiac care committee recently. CATRAC and AHA will be hosting a kick-off meeting in June to begin the dialogue about this workgroup and to start to pull together major stakeholders. All who are interested can attend. The focus will be on an overview and start of a “road map” to develop a Cardiac Care Workgroup.

V. Strategic Planning

Dave reported that Kenny Schnell has helped facilitate the officer’s meeting to discuss RAC projects, goals and future. All aspects of RAC business are being looked at. Dave added that work on this is on-going and the Board will present a draft plan when they have one prepared.

NEW BUSINESS:

I. Committee Reports and Action Items

Dave explained that the meeting structure has changed in order to use our time more productively. He has asked committees to meet as needed between quarterly meetings and only provide updates at the General Membership meetings. He explained that he in the past, in order to chair a committee you had to be a board member. The bylaws have been reviewed and changed regarding that issue and now committee chairs do not have to be board members. Dave mentioned that he wants to improve committee membership tracking and make sure each committee chair knows who is participating and who is available to help tackle committee tasks.

The Stroke Committee will still be meeting prior to the Gen Membership meeting since it’s so big and other committees can also do this, but Dave discouraged having committees meeting during the same time slot because it prevents people from participating in several committees when they meet simultaneously. The goal is to have Committees meeting prior to General Membership meetings and being able to accomplish tasks at alternative meeting times. Marilyn added that meeting space is available at the CATRAC offices for committee meetings and there is a conference call number that is available to CATRAC members.



II. Disaster Management

Scott Gillaspia was unable to attend to provide an update. Dave shared that Scott is working on the regional disaster tags to see who has them and who needs them. Scott is looking for a co-chair for this committee. Dave would like to see more emergency management involvement in this committee. Reuel Cooper discussed briefly how existing emergency management roles and equipment can become part of RAC planning. Dave has begun to work with a regional planning group to coordinate drills.

III. Education

Chris Parker announced she is still looking for a co-chair. The committee met in March and discussed budget and recent course requests such as ABLIS. They are looking at process components right now to bring courses in demand to the region. Dave added that in the past the RAC has had a yearly schedule of course and he's working with Chris to revive that. The plan to still host a lot of core courses, but the committee is exploring other topics to bring to our region. Kim Gill was complimentary of how up-to-date the website is on educational offerings and asked if the RAC would be interested in being a clearing house for listing courses in our region? Dave agreed that would be very helpful for the region and will take that suggestion back to the Education Committee.

IV. Stroke

Dr. Harding reported on the Stroke Conference back in January and said that ~80 people attended. They are planning on hosting another conference in March 2010. Today they worked on the process to get the FAST video out as a PSA and to the hospitals for education channels. This is an educational video that discusses the signs of a stroke. Dave explained that any extra funds that are earned from an educational offering that is provided must go back into the RAC grant to be used for grant eligible educational offerings. He added that if the RAC hosts training – not part of a RAC grant, then funds accrued through that particular training can go into the general fund and be used to fund any type of educational offering.

State Stroke Guidelines - in August Stroke Designation Guidelines are expected. This will be discussed at GETAC in May 12-15th at the Omni in Austin.

V. Budget & Bylaws – Government Relations

Paula Yuma and Juliette Brown provided brief updates on legislation pertaining to trauma and injury prevention including SB 61 pertaining to booster seat use. Linda Sifuentes discussed a proposed bill (HB 2626) that would impact the reporting time of sexual assaults to law enforcement.

VI. Pre-Hospital Care & Transportation – Hospital Care and Management

Scott Fernandes reported that this committee has not met since the last general membership meeting. He added that they are in a bit of a holding pattern until the strategic planning progresses more.



VII. Aero-Medical

Dr. Dire reported that the last meeting was in February with 12 attendees. The biggest issue was the safety problem that was discussed back in January which was the potential of having multiple helicopters coming into the same site at the same time and the lack of a helicopter dispatch center. They have come up with protocols for Travis County in the meantime. Dr. Dire shared the following: contact Seton Security on a common frequency and give direction and expected time of arrival. The Aero-medical providers are expected to communicate with each other and make decisions about triage landing priority. Seton security monitors this frequency and will keep tabs on activity. Aero-medical providers will contact Security both upon arrival and departure. This information will be posted on the RAC website in the future to help disseminate the protocols/information throughout the region. Seton has offered to monitor the radio traffic and communicate what they can, when they can. Dr. Dire reported that the future plan is to have a dedicated dispatcher at Travis County and this is a stop gap measure until something more formal such as that can be put in place.

Dr. Dire reported that there was an Aviation Summit fly-in at ABIA National Guard facility last week. They discussed specific issues about helipads with administrators of attending facilities. It was a success and all attendees were open to communication and problem solving.

Tracey Forester added that links for flight paths will be posted on the THAMEs and RAC website.

Tracey introduced Pat Hughes (Aviation/Operations Manager for PHI) who discussed new FAA requirements. Pat explained that recent hearings have modified air taxi regulations which have impacted the operators. New protocols have to be created as it relates to weather and it will slow down response times due to additional planning and documentation. PHI is working on a procedure so they can do the extra planning on a computer so it will be quicker and therefore create less of a delay in taking off. All the aero-medical operators will be impacted by this new change and it will set everyone's weather minimums equally. Additionally, because they have raised the weather minimums they will not be able to do some of the flights they used to do before. *(clarification needed on this statement-Dave Reimer)*

VIII. Pediatric – Injury Prevention

Paula Yuma reported and requested that we separate pediatrics and injury prevention into two different committees. Paula thinks that this will help ensure that pediatric trauma issues get discussed. In the past this subject has been neglected and Paula thinks that injury prevention should cover issue for the whole life span. Paula mentioned that if the group takes off then that group might need a co-chair. There was discussion about whether we even need a pediatric committee or if these issues are being addressed in PI and in pre-hospital committees. Dr. Maxon and Steve Janda are agreeable with using other committees to address pediatric components. Dr. Brown added that this makes sense.



IX. Performance Improvement Program

Dr. Brown reported that this committee has been meeting monthly and the meetings have been very productive. He shared several updates:

1) Hospital under designation requests – when a facility makes this request it will route through the CATRAC so CATRAC can review the situation. He added that this shouldn't be extra work for the facility because what the RAC is requesting parallels the information they are required to provide to the state. 2) The committee is working on guidelines for brain injuries 3) There will be a Trauma Medical Director's breakfast at UMCB for CMEs and it will include a meet and greet session 4) The committee is working on a PI data request form for hospitals and pre-hospital providers. The form will be used to obtain baseline data to see what is going on in the region. They will start with small data requests and try to not overwhelm the providers.

Dave displayed the cover letter and data request forms for the membership to view. He explained that the purpose of this is to try and improve how EMS interacts with the hospital and vice versa. The requests tentatively will be coming out May 1st.

Dr. Brown encourage all types of issues being reported on the forms and asked that members don't get hung up on worrying if the problem is a system problem or not - the PI Committee will sort that out.

Marsi Ferris emphasized the confidentiality of the reports and the PI committee members. The PI committee may decide that some information needs to be shared back to the agency where the concern lies and they will notify the person who reported the information on the form before contacting the agency where the concern lies. 5) Regional spinal motion restriction guidelines -Joe Granberry shared a handout with the information that will standardize response to spinal injuries. Joe said it's ready to go up on the website and be adopted by the CATRAC. Dr. Brown stressed that this is a guideline and is not mandatory, but is believed to be a sound standardized recommendation. He acknowledged that each patient may need customized care.

X. Discussion / Scuttlebutt

There was none to report

XI. Next Meeting Update –

- **Executive Board:** May 28, 2009
- **General / Executive Combined:** July 23, 2009 – Dell Children's Medical Center
- **Committee Meetings:** as per Chair

XII. Adjourn

Dave Reimer adjourned the meeting at 3:00 p.m. Reuel Cooper made a motion, Marsi Ferris made a second.