

**Capital Area Trauma Regional Advisory Council
General Membership
April 25, 2019
1:00 – 3:00 pm
St. David’s Medical Center, Medical Office Building (MOB),
5th Floor Classrooms
(Corner of IH-35 & 30th Street) 3000 North IH35, Austin, TX**

Minutes

I. Call To Order

The meeting was called to order by Dr. Gonzalez at 1:13 pm.

II. Welcome and Introductions

A. Roll Call of Executive Board

Dr. Gonzalez conducted roll call of the Executive Board members and CATRAC staff.

B. Introductions of General Membership and Guests

General Membership attendees introduced themselves and the agency they represented.

III. Approval of Minutes

A. January 31, 2019: General Membership

The minutes from the January 31, 2019 General Membership meeting were presented. A motion was made by Scooter Green and seconded by Mike Knipstein. The general membership and executive board voted to approve the minutes 45/0.

IV. Public Comments

None were made.

V. Treasurer & Financial Report

Robin presented Budget Summary: EMS/RAC - \$238,956, EMS County (“pass through”) - \$152,487, HPP - \$1,366,081 (\$740,338 for TSA-O, \$164,669 each for L, M, N), EMTF-7 - \$131,736. CATRAC has \$9,272 for regional projects and \$5,000 for educational programming to spend. Committees need to present the Board with ideas for projects. The Local Project Grant (LPG) is \$26,335. FY20 Tobacco Grant is currently \$124,083, but it may change depending on this legislative session.

VI. Chair Report

Thanks from Dr. Gonzalez to members for their hard work in setting and achieving goals in committees and raising regional awareness. CATRAC is more than just Trauma. Dr. Gonzalez would like to change CATRAC’s name to Capital Area of Texas Regional Advisory Council. If CATRAC were to file a DBA, then we would not have to rebrand everything at once.

VII. Executive Director Report

CATRAC has several job openings to include Inventory Coordinator/Exercise Assistant and Healthcare Preparedness Coordinators for M, N and O.

VIII. DSHS/HHSC Update

A. DSHS Trauma Registry

Judy Whitfield with Trauma Registry presented. DSHS will begin notifying facilities that are not entering information. At 30 days they will call the agency, at 90 days they will call the RAC, and at 180 days the EMS Director at DSHS will be notified. Hospitals still need to enter data even if they are no longer trauma designated if they are transferring patients out. The 2019 version of the National Trauma Database for mapping and translation has been released. The NEMSIS 3.40 for EMS will be complete by the end of 2019. They want to learn more from stakeholders about issues or if they can be of service. They also want to know how stakeholders want to use the information.

IX. TETAF Update

TETAF is hosting Friday afternoon calls for stakeholders interested in legislative news. The legislation is working to balance the budget. There are updates on the TETAF website for Bill Tracking.

X. Legislative Updates

See TETAF update.

XI. EMResource

CATRAC reminded facilities to update their status in EMResource at 0900 and 2100. The EMResource Workgroup meets on the first Thursday of every month at CATRAC. EMResource Training available on the first Friday of each month at 10:00am. The training is web based.

XII. Action Item: Membership Dues

Karla Jones presented Membership Dues Increase. The Executive Board and CATRAC staff have spent an excessive amount of time discussing the increase and how best to implement. The Board has discussed ways to sustain CATRAC if all grant funding goes away. Increasing the membership dues allows us to build a contingency fund and support new projects, programs, and a grant writer. The membership dues are the only unrestricted funds that CATRAC has. They can support equipment and vehicle maintenance and replacement, marketing and public outreach. Karla presented increasing the membership dues over the next 3 years to the following:

	2020	2021	2022
Hospitals (General & Surgical)	\$200 Base Fee + \$10 per Licensed Bed	\$200 Base Fee + \$15 per Licensed Bed	\$200 Base Fee + \$20 per Licensed Bed
EMS (Ground)	\$300 Base Fee + \$15 per Licensed Unit	\$300 Base Fee + \$20 per Licensed Unit	\$300 Base Fee + \$25 per Licensed Unit
EMS (Air)	\$500 Base Fee + \$15 per Licensed Unit	\$500 Base Fee + \$20 per Licensed Unit	\$500 Base Fee + \$25 per Licensed Unit

The members expressed concerns that money will not go towards a contingency fund first. The CATRAC Executive Board will establish a definition of when contingency funds will be used, and will ensure that the first year increase in dues will go completely towards the contingency fund. A motion was made to accept the increase by Mike Knipstein, and Ben Oakley seconded the motion. The motion passed 44:1.

XIII. Committee Reports

- Pre-hospital: The committee discussed “hopscotching”. A presentation was given on whole blood administration for pre-hospital agencies from STRAC. The group also discussed common badging. LPG funding is \$26,000 for the region and must be spent quickly.
- Injury Prevention: The committee is focusing their attention on Child Passenger Safety and Adult Fall Prevention workgroups. There are 5 injury prevention related bills in legislation.
- Education: CATRAC will be sending out a survey on regional education needs. The co-chair position is currently open.
- Trauma Systems: Presentation from Dr. Winkler in San Antonio on use of whole blood. Committee agreed to look into the feasibility of whether this would work for the CATRAC region.
- Stroke: May is Stroke Awareness Month, Press Release coming!
- Perinatal and Maternal Workgroup: Leadership Meeting today with Dr. John Lloyd and Laura Evans. They plan to look at other workgroups across the state and if there are duplicated efforts, look at data collection. Focus on patient outcomes.
- Mission Lifeline Cardiac Systems: Group is focusing on revisions to Field Triage, Pre-hospital cath lab activations for STEMI data project, and hospital protocol for hydration for STEMI patients.

XIV. HPP/EMTF Update

A. Healthcare Coalitions TSA's L, M, N, O

New annual requirements for Healthcare Coalitions to include a Work Plan for the Coalition to determine priorities. Surge Tests have determined patient loads in the region and how we can move them to other facilities or out of the region. The coalitions will continue to work on hazard vulnerability analysis based on risks, information systems plans, and inventory plans. The coalition will need to conduct a pediatric surge test in 2019. In 2020, will focus on burn surge. In 2021, will focus on infectious disease & PIO training. In 2022, coalition will focus exercise around radiation. In 2023, exercise will focus on chemical surge. Regional Full Scale Exercise February 2019 will be coordinated with CAPCOG and NDMS. Ron Weaver will continue to send out weekly briefings regarding local events that could cause significant surge.

B. Emergency Medical Taskforce (EMTF)

Individuals interested in the EMTF program, as well as current members, need to sign up and or complete their profiles on the TDVR (Texas Disaster Volunteer Registry) and fill out an EMTF-7 Membership Form

XV. Hospitals Update (All Levels)

- Westlake passed accreditation survey
- Seton Hays is rebranding to Ascension Seton Hays. Eventually all Seton hospitals will undergo rebranding.

XVI. Other Business

Nothing was presented.

XVII. Adjourn

A motion to adjourn the meeting was made by Karla Jones and second by Darlene Parker. The meeting adjourned at 2:54pm.