



**Capital Area Texas Regional Advisory Council  
Board of Director's Meeting  
April 20, 2023  
12:30 – 3:00pm**

**Minutes - APPROVED**

**I. Call to Order**

Ben Oakley called the meeting to order at 12:33pm.

**A. Roll Call of Board of Directors**

Mr. Oakley conducted roll call of the Board of Directors. A quorum was established.

**II. Secretary's Report**

**A. Approve February 20th, 2023, Meeting Minutes**

A motion was made by Jim Persons to accept the February meeting minutes as provided. Josh Vandever seconded the motion. None opposed and motion carried.

**III. Treasurer's Report**

**A. Financial Report through February 2023**

Mike Knipstein deferred to Alesia Palmer to present the financial report.

**B. Banking Update**

CATRAC has established a second checking account at Truist in April. Five signatory cards have been completed, and the initial deposit has been placed. There is a need to update the open resolution to have all Board of Directors present. The approved budget was \$3,001,034 and the current balance is \$2,203,340. Year-to-date expenditures are \$1,186,778 at this time. The remaining balance is trending well to carry CATRAC through the HPP fiscal grant year ending in June.

**C. County Pass Thru Update**

CATRAC has not spent any of the EMS County Pass through funds at this time. CATRAC staff have distributed letters stating the deadline is July 31. Three county packets have been returned. Packets are reviewed as they are received.

Josh Vandever made the motion to approve the financial report. The motion was seconded by Wesley Alexander. Motion carried with none opposed.

**IV. Public Comments**

None

**V. Chair Report**

As discussed in the last general membership meeting, a Pulsara Task Force has been developed. The Task Force will be Co-Chaired by Dr. Emily Kidd and Samuel Schuleman. There is a representative from each hospital system and from each type of EMS agency. The desired outcome is for all stakeholders to come to a consensus on defining the regional standard. James



Green will represent air medical. Representatives from the roster will be reaching out to people within their organization to ensure all concerns are voiced. If a consensus is not made through the Task Force, Pulsara will be an agenda item at the next general membership meeting for further discussion.

## **VI. Executive Director Report**

The RFP for the regional data repository was posted on the CATRAC website with a due date of April 28. Three vendors have already submitted questions. Douglas will review proposals with Executive Committee members and the Chair of the Data Committee.

The federal A133 single audit is scheduled for mid-May. We have 9 months until the end of fiscal period to submit the report. There are no anticipated issues.

Training continues for EMTF/RMOC. There have been a number of planning meetings regarding October 2023 eclipse and April 2024 eclipse. RMOC will be hosting a health and medical planning considerations discussion mid/late May to discuss expected impacts with a focus on the rural areas in this region.

There are many physical and structural issues with the current office building. There is a construction company that is interested in occupying the building. The leasing agent and or landlord has not been responsive regarding an extension of the lease for neither short nor long term. Since the lease is up in June, CATRAC will be moving.

Douglas asks the Board of Directors for permission to move forward with a new lease. There is a new property off Toro Grande and 1431 in Cedar Park. This building will provide office space for staff, a small meeting area for workgroups and task forces, and is adjacent to a storage facility. A partner agency located four blocks away is willing to lease space to hold our assets for 1k/yr. Need to look at a 5-year lease. Douglas has negotiated a 1-year out clause. There will construction costs of about 35k. We will lose the deposit if we exercise an out clause in May/June of 2024, assuming there is an issue with the HPP contract. The organization would not be liable for the property after that. If we resign the renewal at 5-year renewal, or 6-year lease, the 35k would come back to the organization as credit. Our recommendation is to move forward. This new space would cost 130k a year for a 6-year term. Wesley Alexander made a motion to move forward with the office off Toro Grande Blvd. Lynn Lail seconded this motion. 12/0. None opposed and motion carried.

We are continuing to work on 2021 SMA reimbursements packets. There are five FY2021 ATCEMS outstanding packets and one FY2021 Signature Care packet we are working through. We are also waiting on State funding. There are four additional CATRAC, San Marcos Hays County EMS, Texas A&M EMS, & Bryan FD packets. Thank you to those organizations for your patience.

There is still funding available for EMS scholarships. Currently, CATRAC has spent about 8900 out of the 900k for six EMTs (tuition reimbursement) and 154k for nineteen paramedics. If your organization is not sponsoring, there is funding available for them. Many RACs have already spent all of the scholarship money. Those interested will be directed to Rayse Richardson, CATRAC EMS Education Coordinator.



Bylaws compliance will be monitored. As a reminder, the designated “voting member”, or member representative, must attend at least 75% of the quarterly general membership meetings. Additionally, the “member”/organization must attend at least 75% of either the Prehospital Committee (EMS) or EHS Committee (facility). Any representative may attend the Committees to earn credit for member attendance. CATRAC will begin issuing letters related to adherence to this expectation on a rolling 24-month period. This expectation went into effect February 2022. Participation requirements come into consideration related to EMS pass through funds eligibility and hospital participation letters.

CATRAC Yard Day is scheduled for May 25<sup>th</sup>. More to come.

There are several legislative bills we are monitoring. HB2470 is related to first responders and mental illness/employment abilities. SB2090 addresses prehospital providers and PTSD diagnosis. HB3037 is related to criminal penalty assault for health care workers. HB624 addresses medical transport by firefighters and transport in an alternative vehicle aside from an ambulance. HB4009 addresses retention orders for psychiatric holds. House resolution 1080 recognizing first responders in Lampasas County. Wesley Alexander reported that in March, Hamilton EMS crews responded to a call regarding critically injured patients who were stuck in a cave. Crews swam upriver and were successfully able to rescue them. The House Representative publicly recognized how well they worked together.

## **VII. Committee Reports**

### **A. Data Committee – Diana Norris**

1. Tara Neeley reported on Diana’s behalf. The Committee last met on April 12<sup>th</sup> and discussed regional cardiac data definitions. Still waiting for a list of metrics from trauma, prehospital, and whole blood work groups. The goal is to receive data that is already reported.
2. Waiting on Data Use Agreement and funding.

### **B. Education/IP Committee – Rhonda Manor-Coombes**

1. The Committee met on April 12<sup>th</sup>. The current focus is discussing the 2024 CATAC conference/symposium. We have narrowed the date down to the last two weeks of July, or first week of August. The location may be at WCEMS. The Committee is tasked with narrowing down topics/speakers. There was a suggestion to send out a call for speakers. Working on CEs for prehospital, physicians, and nurses. Blanco County EMS has volunteered to assist.
2. Still conducting monthly Stop The Bleed classes but need additional instructors as Rhonda cannot do every class every month.
3. Develop Take10 program. Will be a training class and intend to combine with Stop the Bleed.

### **C. Prehospital Committee – Dr. Heidi Abraham**

1. Ben Oakley reported on Dr. Abraham’s behalf. The Prehospital Committee is focusing on EMS-ED hand off process. A small group has been formed with intent to standardize transfer of care in ED in a safe and efficient manner.
2. The regional use of Pulsara will be discussed with hope for a regional consensus by the next Board of Directors/General Membership meeting in July.

### **D. Whole Blood Workgroup – Dr. Emily Kidd**

1. The Workgroup last met in March. The MOU revision is just about complete after receiving input from Douglas, We Are Blood, Dr. Kidd, and reviewed by members of the workgroup.

2. The program needs more hospital partners to act as rotation centers. It is important to continue to grow this program so there is more blood available for EMS agencies. Several hospitals are interested in becoming a rotation center and some are close to coming onboard. Dr. Kidd is working on setting up meetings with leadership at various hospitals.
3. CATRAC has developed a blood administration dashboard. Additional data points the Workgroup would like to see include receiving feedback from hospitals. The next meeting is scheduled for May 18 in conjunction with the EHS and Prehospital Committees.
4. There is intent to add a whole blood section in the EHS plan.

**E. EHS Committee – Dr. Taylor Ratcliff**

1. The Committee has met once and discussed the scope of work.
2. Perinatal Workgroup is working on the neonatal temperature management project.
3. Working to operationalize Pediatric Workgroup and identifying a lead.
4. We are working to standardize interfacility-stroke terminology but need further discussion on how it is done since everyone has their emergency transfer plan. There is also discussion on a pre-arrival MRI screening tool.
5. STEMI workgroup liked the opportunity for interventionalist to communicate to group prior to arrival through use of Pulsara.
6. MCI level Task Force ongoing. Smaller group together.
7. Transferring radiology images from facility to facility to avoid double radiating patients.
8. Burn presentation from Dell Seton.

**F. Cardiac Workgroup – Dr. Robert Schutt**

1. The goal has been to provide a STEMI System of Care document to the Board to take forward into EHS plan. Between those two meetings, the Workgroup has revised that to match with the DSHS Self-Assessment tool. The field guide has been brought into EHS plan and relabeled. Not many changes to STEMI care since 2013.

**G. Perinatal Workgroup – Dr. John Loyd**

1. Mollie Adams reported on behalf of Dr. Loyd. The focus during the last meeting was reviewing the changes to Maternal Rules 133.211. As a RAC, we are now required to have QA/PI in this region. Through the sharing of data and process improvement strategies, we will improve regional care. The next meeting will be spent focusing on establishing the QA/PI process.

**H. Stroke Workgroup – Dr. Gaurang Shah**

1. Shandel Milburn reported on Dr. Shah's behalf. The Workgroup is reviewing the Stroke System of Care in EHS plan. Working to add pediatric stroke pathways and recommendations.
2. Planning to reintegrate all stroke facilities in EMResource.
3. Interfacility stroke terminology is being reviewed.
4. Working with the Data Committee to address regional stroke data definitions.

**I. Trauma Workgroup – Dr. Marc Trust**

1. Ben Oakley reported for Dr. Trust. Working on updating the Trauma System Plan updates.
2. Working to identify trauma data points to review for regional registry.

**J. Health Care Coalition – Dr. Mark Escott**

1. Douglas reported on behalf of Dr. Escott. The Coalition is meeting in early May. Current projects include quick connects for water and power for each of the facilities.
2. Significant update to radiation annex in base plan. There was an ABIA exercise and a regional hospital exercise. Baylor Scott & White Marble Falls, Christus Santa Rosa San Marcos, Baylor Scott & White Austin, Baylor Scott & White Pflugerville, Baylor Scott & White



- Round Rock, Baylor Scott & White Taylor, Northwest Hills Surgical Hospital, Baylor Scott & White Institute for Rehab attended the CATRAC HPP exercise. Ascension Seton Williamson ran their own exercise. EMS participated at the ABIA exercise.
3. Looking at doing a functional full scale exercise next year with an earlier planning period to encourage more participation of all healthcare systems.
  4. HPP budget was approved by DSHS this week. FY24 budget approved.

**K. Committee Meeting structure and schedule**

1. Ben Oakley discussed ensuring the member attendance process is as convenient as possible. In the past, committees were held on various days. This is challenging for multiple in-person meetings on separate days. The goal is to conduct as many committee meetings on one day as possible. The Prehospital Committee, Whole Blood Workgroup, and the EHS Committee are now all meeting on the same day. Ben proposed the idea of having committee days. Open to suggestions.
2. Douglas would like to remind the general membership that committee and workgroup participation is measured at facility level. Feedback for committee scheduling is encouraged.

**VIII. By-Laws Review and Revision**

**A. Annual review**

CATRAC is required to provide an opportunity for the general membership to review the by-laws annually. There was no specific feedback provided by the general membership for this quarter.

**B. Workgroup participation requirements**

**1. By-laws impact**

In the new maternal rules, the maternal medical director and maternal program manager participation is required in the PCR (Perinatal Workgroup). DSHS requires the RACs to define participation. The same participation requirements are also anticipated to be listed in the new Trauma rules that are scheduled to be adopted in 2024 for the trauma medical director and trauma program manager to meet participation requirements in the trauma workgroup.

**2. Participation percentage**

This quarter, we hope to define minimum participation standards. It would be a disservice to have various standards for each workgroup or committee. If we define the minimum participation requirements and adopt that as our standard, anything CATRAC evaluates will be consistent and objective. There is some flexibility with cadence of meetings. The proposed bylaw change will be written to include DSHS participation as listed in the Texas Administrative Code will be defined by our RAC as 75% in a rolling 24 months. Additionally, DSHS will be asking RAC for individual organization participation in advance of approving EMS pass through funding and UCC funding.

As a region, we cannot revise the by-laws today and will vote at the July meeting. The proposed language will be sent out to the membership for thorough review. Josh Vandever made the motion that CATRAC has completed the annual by-laws review. Jim Persons second. None opposed. Motion passed.

**IX. Regional Asset Usage Discussion**

There are a number of requests for assets by member and non-member institutions. Historically, there have not been agreements signed for responsibility for damage and usage. There are also



members who request assets for extended periods of time. If we have a non-members requesting to use an asset for a profitable event, should CATRAC deny that request? If we have a coalition stakeholder, not a RAC member, requesting assets, CATRAC would support that request as long as it was in the best interest of the organization. How should CATRAC handle requests from members that are requesting resources for a prolonged period of time? There was discussion on establishing a system to pay for the particular use of assets and would be deposited into the general fund. More to come.

## **X. Open Discussion**

### **A. Dell Children's Medical Center North Campus – Opening**

Brittany Snead, Trauma Program Manager for Dell Children's Medical Center North, reported that DCMCN will be opening at 0800 on April 27<sup>th</sup>. In the first week of May, the facility will be placing an application for active pursuit of a trauma level 3 center. The Trauma Medical Director is Julia Chin from DCMC Main. Any patient needing a higher level of care will be stabilized and transported to DCMC Main. The address is 9010 N Lake Creek Pkwy, Austin, TX 78717.

On the morning of April 27<sup>th</sup>, a formal announcement will be published in EMResource and the facility status will be changed to open. There were questions regarding radio encoding. When DSHS Trauma ID number is assigned, that will be funneled through the RAC.

## **XI. Review Action Items**

### **A. Board Meeting Minutes**

Completed; no further comments made.

### **B. Treasurer's Report**

Completed; no further comments made.

## **XII. Next Meeting**

July 27, 2023, at Wimberly Community Center

## **XIII. Adjourn**

John Hamilton made the motion to adjourn. The motion was seconded by Wesley Alexander. The meeting adjourned at 1:54pm.