Capital Area Texas Regional Advisory Council Board of Director's Meeting February 28, 2024 12:30 – 3:00pm

Minutes - DRAFT

I. Call to Order

Ben Oakley called the meeting to order at 12:34pm and encouraged the membership to scan the QR code to effectively collect attendance.

A. Roll Call of Board of Directors

Mr. Oakley conducted a roll call of the Board of Directors. Those present included Josh Vandever, Dr. Ira Wood, John Hamilton, Mike Knipstein, Robert Luckritz, Wesley Alexander, Jim Persons, Ken Strange, James "Scooter" Green, Rodney Mersiovsky, Dr. Samson Jesudass, Dr. Sally Gillam, and Justin Soulier.

II. Secretary's Report

A. Approval October 26,2023 Meeting Minutes

Wesley Alexander made a motion to approve the minutes as presented. James Green seconded the motion. Motion carried 12-0.

III. Treasurer Report

A. Financial Report September through November 2023

Alesia Palmer presented the financial report for September through November 2023. Board members were provided with outstanding accounts receivable report and were requested to assist with helping to resolve them. Douglas Havron explained the EMS County Pass-Thru distribution formula that was previously approved. CATRAC staff is moving forward with the distribution plan. Mike Knipstein made a motion to accept financials as reported and Joshua Vandever seconded the motion. All approved and motion carried 12-0.

B. HCC Financial Transparency

Mr. Havron reported that there have been questions in some of the healthcare coalition meetings regarding who is responsible for making fiduciary decisions. The CATRAC Board is responsible for reviewing and approving the budget. Mr. Havron presented a roles and responsibilities flow chart for the Board to review.

IV. Public Comments

No comments

V. Chair Report

Board members were given Conflict of Interest forms to sign. Any potential conflicts will be reviewed by all board members and the executive director.

VI. Executive Director Report

CATRAC's annual report is expected to be completed by early next month. The report will be provided to hospital executives and elected officials. CATRAC established a provisional indirect rate with HHSC. The RFAs for HPP and EMTF contracts have been cancelled by HHSC. They will issue one year extension for current contracts and will rebid in the future. CATRAC still has \$400k remaining in SB8 scholarship funds. To date, CATRAC has processed 66 paramedics, 22 EMTs, and paid 3 incentives for schools. Mr. Havron reminded the membership that funding must be spent by December 31st, 2024. Mr. Havron introduced two new CATRAC staff members, Nancy Roller and Bri Pizarro.

VII. Committee Reports

A. Data Committee

Diana Norris reported CATRAC's ESO integration is starting with EMS then Trauma. ESO provided multiple options to be able to get uploads sooner. Four options were presented. Mr. Havron made a recommendation for option 3 "Wait for new SaaS Regional Trauma Product (Long Term Solution)" with option 4 "SFTP site for hospital Trauma data submission files" as an intermediate option. Option 1 and 2 would make CATRAC change platforms twice. The plan is to submit data monthly. The EMS repository is live. Most EMS BAAs have been signed. Hospitals need to complete BAAs by end of Q2 to remain in good standing with RAC and to get RAC participation letter.

B. Education/IP Committee

Rhonda Manor-Coombes provided an update on the CATRAC Education Symposium. The committee has acquired 8 presenters and 3 confirmed vendors to sponsor the symposium. Ms. Manor-Coombes would like to accomplish more injury prevention initiatives. Mr. Alexander suggested "Riding for Ryan". To promote visibility and reduce pediatric bicycle accidents and injuries, CATRAC could provide bicycle flags to agencies for distribution in the region.

C. Prehospital Committee

Dr. Heidi Abraham reported that the committee will be reviewing wall times and diversions. The committee also discussed how hospitals are doing interfacility transfers by 9-1-1 providers or private EMS. Field triage guidelines were shared out for review, and they are waiting on the new rule changes before finalizing. Mr. Havron would like any issues regarding Pulsara to be sent to him. He's been reporting issues to Pulsara to fix. The committee also reviewed fentanyl administration for patients in active labor - literature was reviewed and determined that it was safe.

D. Whole Blood Workgroup

Dr. Emily Kidd stated that they are working on data collection aggregations and how to use the data to enhance projects in the area and state. The workgroup would like to collect the following four patient's outcomes: died in ED, admitted then died, discharged home, and discharged to long-term care facility. All EMS should be using the new whole blood forms. There are challenges with getting hospitals to use enough whole blood to

develop a rotation system. Early April will switch to 35-day bags. There are challenges with developing a dedicated donor pool. Williamson County EMS went live with the whole blood program. GETAC is starting a whole blood workgroup to figure out how to get whole blood to the entire state.

E. Emergency Healthcare System Committee

Dr. Taylor Ratcliff reported they discussed managing radiological image transfers to prevent secondary scans and how to manage. The Board recommended a joint discussion between the Trauma Workgroup, ARA, and the EHS Committee. Hays County advised they don't have or use ARA in the area, and it is easier to rescan the patient as opposed to obtaining imaging disc, uploading, then waiting on radiologist to read. Dr. Jesudass explained further how imaging and systems work. It was stated that Massachusetts has a commonwealth repository, and it may be something to look at. There was discussion on rescanning and its impact on time sensitive patients.

F. Cardiac Workgroup

Dr. Robert Schutt reported they are working on establishing basic standards for STEMI care. The focus is on the receiving centers. If they participate in the registry, they become eligible to be a receiving center. Hospitals that haven't met criteria can still be used, just be aware. The group is looking at setting the threshold at 25% with key metrics for STEMI as a focus.

G. Perinatal Workgroup

Dr. Charles Jaynes reported that they will be looking at prehospital trauma criteria for OB patients. The workgroup recently provided guidance to prehospital that IV Fentanyl in pregnant patients was no issue.

H. Stroke Workgroup

Dr. Gaurang Shah reported that they updated the stroke plan to include adult and pediatric patients in one algorithm. Mr. Vandever made a motion to accept the modification to EHS plan, Mr. Alexander seconded the motion. All approved, motion carried 12-0.

I. Trauma Workgroup

No report.

J. Pediatric Workgroup

Dr. Katherine Remick reported that in collaboration the Pediatric Pandemic Network (PPN) group is working to understand capacity and capabilities to determine how agencies respond to disasters to move towards standardized recommendations for interfacility transfers. The workgroup is finalizing mission and vision statement. The Texas Pediatric Readiness project launched monthly pediatric education webinars. They are working on developing a QI dashboard to identify pediatric quality measures. Dr. Remick requested 30 minutes to present the dashboard to the board.

K. HealthCare Coalition

Kelly Isham reported on behalf of Dr. Mark Escott. The healthcare coalitions are working on stocking MCI trailers and placing them in all 4 HCC regions. Membership has provided information on what they want in the MCI trailers. Three out of four chemical tabletop exercises have been completed. Most recent was at Tesla with over 100 members in attendance. Working on AAR with input from attendaes. CATRAC is also coordinating full scale exercise in all four regions. Staff is working to identify partners that want to participate.

VIII. Membership Requirements

Mr. Havron will share the outstanding membership dues report at next meeting. He reviewed meeting attendance requirements and advised that the BAAs need to be signed by June 30th. CATRAC will begin enforcing in July. This will affect letters of accreditation for those that have not signed. Data submission is flowing from EMS agencies with signed BAAs. Trauma data SFTP site is running, and credentials have been issued. Monthly data submission will be late after 90 days.

IX. DSHS Rule Update

Mr. Havron reported public comments regarding the proposed trauma rules, including 157.123 (RAC rules), were submitted to the Rules Coordination Office (RCO) by DSHS. The team is working to get clarification on the rollout process and if 157.123 will pass separately from 157.2, 157.125, and 157.130. The state has received requests for a public hearing, pending scheduled date. CATRAC has submitted hundreds of public comments to HHS about concerns regarding the Self-Assessment Tool and Performance Criteria, listed in 157.123. There is a concern that the proposed rules need to be modeled to determine the impact of not only the RAC but every trauma center. Mr. Oakley is supportive of change but believes there are issues and encourages the general membership to attend the public hearing. Mr. Havron will send out information as it is received.

X. Common Badging

No report

XI. Open Discussion

- Ms. Manor-Coombes brought up the Pediatric Readiness Project. Requested smaller facilities to reach out to PECCs or Kat Knight if they need assistance completing. PECCs will come out to facilities to help them get ready for assessment.
- Mr. Havron reminded attendees about 0930 eclipse meeting specific for ESF8 health and medical tomorrow.
- Mr. Havron reported he has had several senior leadership discussions regarding ED
 Saturations over the last 6 weeks. There will be more meetings to discuss real solutions
 for long term ways to address ED saturation if anyone has ideas or suggestions, please
 email Mr. Havron or Dr Escott.

• MCI bed polling – will have discussion with MCI Workgroup to look at current policies and procedures.

XII. Next Meeting

April 25, 2024 at Wimberley Community Center

XIII. Adjourn

The meeting adjourned at 1407. Motion made by Mr. Green and seconded by Mr. Alexander