

Capital Area Texas Regional Advisory Council
Board of Director's Meeting
April 25, 2024
12:30 – 3:00pm

Minutes – DRAFT

I. Call to Order

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

A. Roll Call of Board of Directors

Mr. Oakley conducted the roll call of the Board of Directors. Absent members were Dawn Handley and Justin Soulier.

II. Secretary's Report

A. Approval February 22, 2022, Meeting Minutes

Motion by Wesley Alexander, Seconded by Ken Strange. Motion carried.

III. Treasurer's Report

Alesia Palmer presented the financial report from December 2023 to February 2024. Review of all account balances to the end of February provided. Reimbursements for January to February are complete. SB8 Grant awards for December 2023 through Feb 2024 reviewed. FY24 budget was approved by DSHS in February. As of March, there are 43 outstanding invoices equaling to \$35,000. We have begun collecting EMS transport data and started processing EMS County payments.

Ms. Palmer requested approval of the Treasurer's report. Josh Vandever made motion to approve, Seconded by Mike Knipstein. All were in favor, motion carried.

Douglas Havron reported that the Grant Budget for FY 24 are on target with spending levels. Everything is below 66% for the HPP Grant. RAC portion of grants are in line with current spending. FY25 Proposals are due April 26. DSHS extended the current HPP contract for an additional year. FY25 budget was built on actual expenditures from FY 24. Funding has not changed; funding is the same as the year before. In addition, DSHS allowed 3% COLA for staff, but did not allow for merit increase. For FY 25, DSHS only allowed 7 days to turn in the budget.

Mr. Alexander made a motion to approve the FY25 Budget, Dr. Escott seconded the motion. Motion carried.

There are many outstanding accounts receivable. Invoices were sent over 6 months ago. We will be sending out participation letters only to eligible members. Mr. Havron reminded the membership that beginning June 1st, if dues haven't been paid, they will receive a letter stating that they are not in good standing. Membership may email accounting@catrac.org for any questions.

IV. Public Comment

No comments received.

V. Chair Report

Mr. Oakley reported that Board members participated in a Strategic Planning Retreat in February. The high-level priorities that came out of the Board Retreat are listed on page four of the annual report and include Regional Navigation of Care, Financial Diversity, and Promoting Recognition. Mr. Oakley stated that they have been attending HPP meetings around the region.

VI. Executive Director Report

Mr. Havron requested feedback on the Annual Report. Board members have a report of contract and agreements that have been executed in their packets.

In the process of many SMA Reimbursements; three from CATRAC, Buda Fire, Hamilton EMS, Fayette County EMS, San Marcos/Hays County EMS, Austin/Travis County has 6 in process. Old outstanding reimbursements are being processed.

County Pass Through Funds have been sent to eligible agencies who have already submitted their packet. Applications for reimbursement are due by the end of June.

There is still \$300,000 for SB8 scholarships but we are on track to spend all of it. We moved funds out of education, equipment, and salary savings to make more funding for scholarships.

Recent Regional Medical Operations Center (RMOC) activations include the bus crash MCI, solar eclipse, and partial activation for UT campus protest.

The Federal Declaration of Emergency requires hospital covid reporting through April 30th. DSHS advised they are working on a new reporting for weekly. We are unaware of that data set yet, more to come.

DSHS office of EMS & Trauma is reviewing the public comments of the trauma rules. CATRAC has made comments against it & we are awaiting a response. Medicare CMS is in the process of coming up with new standards of data collection as a condition of hospital participation. This is open for comment starting in June. We will share the link to the 412-page document.

Brandon Thorpe has been deployed. We will be collecting donations to send him a care package at the next meeting. We have also hired a temporary employee, Jay, part time to cover until Brandon gets back in November. Kelly Isham is no longer with the organization.

Mr. Havron stated that ESRD network, Allegiant Health, will no longer support dialysis centers in using EMResource. EMResource is how we communicate with dialysis centers to know when they are closing or have disasters. We may be asking for help voicing opinions related to that.

VII. Committee Reports

a. Data Committee – Diana Norris

1. For current ESO users, the BAA signed with CATRAC will not need an additional one for ESO.
2. If they are not current ESO user, then they will have to have a BAA with ESO in order for data to pass through.

b. Education/Injury Prevention – Rhonda Manor-Coombes

1. July 26th will be the first ever Symposium. There are 8-9 speakers. Five paid vendors at this time. We are asking for swag from CATRAC member organizations. This event is limited to 90 participants. Look out for your ticket to register.
2. Bike & Pedal cycle Accident data
 - a. Jasmine has requested data from DSHS for 2022 bike and pedal accidents. Looking at all 11 CATRAC counties, broken down by zip code and ICD10 codes. Bike flags from Riding for Ryan organization are available for pick up. Rhonda requested to know how many flags were taken, how many were given out, and if there was interest in them.

c. Prehospital Committee

1. The Committee, in conjunction with the EHS Committee, have developed a Wall Times Escalation Process. This process was intended to facilitate the return of service of ambulances in the region.
 - a. 20 min-crew talk to ED charge nurse.
 - b. 30 min – EMS supervisor talks to house supervisor.
 - c. 45 min – EMS supervisor calls RMOCC Duty officer
2. Working on a more formal process for when EMS needs to leave the patients quickly during insufficient EMS resource availability.
3. GCS has been added to the trauma reporting template.
 - a. Reminder to membership to fill out Pulsara feature request form.

a. EMS Medical Directors Workgroup – Ben Oakley

1. The group has not met since the last membership meeting. Referred the OB field triage to OB group for their recommendations. Working on gap analysis for special population. Discussed fentanyl administration for OB patients. Dr Jaynes from perinatal advised there was no problem, no concern.

b. Whole Blood Workgroup – Dr. Emily Kidd

1. The group has not met since the last membership meeting. Currently working on data collection aggregate use on patient outcomes. Looking at 4 categories:
 - a. Died in ED,
 - b. Admitted but died in hospital,
 - c. Discharged home alive,
 - d. Discharged to another facility alive
2. Working to develop a robust rotation system to allow smaller agencies to work with whole blood. Allows smaller agencies and rural communities to participate in the whole blood system. Getting 30-day bags allows more opportunity for EMS agencies to keep whole blood longer and rotate out to hospitals.

d. Emergency Healthcare System – Dr. Taylor Ratcliff

1. The MCI task force is working to create common definitions and finding commonality between agencies.
2. Emergency Transfer Task Force is identifying challenges moving patients out of a facility and how to collaborate better to move critical patients when usual resources are unavailable.
 - a. Will have documents for pre-hospital education for physicians to use as a regional guide that will include laws and factors around EMS transfers.

e. Cardiac Workgroup – Dr. Robert Schutt

1. Working to develop STEMI Receiving Center criteria. There is a plan to have a document that will be voted on at the next Cardiac WG meeting.

2. Upcoming projects include revisiting the CAC and ECMO initiatives that were started in Sep 2023, after STEMI receiving center criteria is completed.

f. Perinatal Workgroup – Kat Knight

1. Red/yellow criteria is being reviewed for the OB perspective. Working on submitting BAAs to CATRAC.
2. Reviewed the Pediatric Capabilities survey designed by Dr. Sanya Desai and offered neonatal expertise.
3. ACOG hosted a Q&A for maternal program managers and maternal medical directors regarding site designation.

g. Stroke Workgroup – Ben Oakley

1. Working on Stroke System Plan within EHS plan to incorporate pediatric stroke.
2. Continuing to monitor utilization of EMResource for LVO/Cath lab availability updates.

h. Trauma Workgroup – Tara Neeley

1. Red/yellow criteria reviewed and sent back to Perinatal WG.
2. Developing a Mission and Vision Statement.
3. Reviewed trauma rules recent changes and edits and what it means for the group.

i. Pediatric Workgroup – Dr. Katherine Remick

1. Pediatric Capacity and Capabilities during Surge Events
 - a. A survey was sent out to all CATRAC hospitals.
 - b. Will be scheduling interviews with leads to help understand barriers and/or perspective of providers and hospitals.
 - c. Will report out in the June workgroup meeting.
2. Texas Pediatric Readiness Project
 - a. Have 3 regional pediatric champions being identified. Supporting simulation and outreach to hospitals in the region.
 - b. Ongoing education series 3rd Thursday of each month @ 0700.
3. Working to develop recommendations for use of Pulsara for tracking unaccompanied children involved in MCI.

j. Health Care Coalition Report – Dr. Mark Escott

1. Rebranding of Clinical Advisory Committee to enhance structure and ensure meetings are productive and engaged. Have changed the voting procedure to make the Chairperson vote as a tie breaker. Mr. Havron and Dr. Escott will co-chair the CAC. There are new representations; nomination ballots have gone out.
 - a. Mr. Havron advised that the ballots have been completed, however, there is a 3-way tie for the second seat as hospital representative. There will be a runoff election before representatives are announced.
 - b. Medical Response and Surge Exercises for BP5. In Process of scheduling exercises for all 4 regions. AAR will be shared with coalition afterwards.
2. MCI/MFI Trailers and Equipment
 - a. Final purchases are being made. Still working on an MCI plan that will include use of the trailers to benefit the region.

VIII. By Laws Amendment

- a. Changes include the addition of permanent board seat for Mental Health Representative. Changed voting procedure to make the Chairperson vote as tie breaker. Filling of vacant board seat by appointment, changing to voting at the next October

election regardless of when the board seat term ends. Clerical language changes around amendments. Sent out two weeks ago.

- b. Amendment passed and motion carried. 1 No, 1 Abstained, 36 Yes.
- c. Recommendations of name change
 - 1. Capital Area Public Health and Medical Preparedness Coalition has changed to: Coalition and Clinical Advisory Committee
 - 2. This change checks some grant boxes and more accurately describes the group.
- d. Mr. Strange made a motion to accept changes. Mr. Alexander seconded the motion.
- e. Membership vote completed through paper ballots to member representative in good standing.

IX. Common Badging Update – Ken Strange

- a. A survey was sent out and showed that hospitals had low interest in funding the project. Discussed pros and cons to common badging.
- b. EMS was 50/50 on willingness to fund the initiative and hospitals were not willing to fund the initiative.
- c. Common Badging will not be a regional initiative at this time.

X. Pediatric Presentation of NPRQI – Dr. Katherine Remick

- a. NORQI is a free, national initiative intended for developing a means to support general emergency departments that see low volumes of children to engage in quality improvement efforts. This effort aligns with what was proposed in the new Trauma Rules. 80% of children are seen in general emergency departments and not pediatric emergency rooms.
- b. The CATRAC Pediatric Workgroup identified priority NPRQI measures.
- c. Overview of NPRQI Performance Dashboard
 - 1. 13 hospitals in Texas are participating.
 - 2. At least ten records from each hospital.
 - 3. RAC dashboards will be available.
- d. In May, there will be a similar initiative launched for EMS.

XI. Open Discussion

XII. Review Action Items

- a. **Board Meeting Minutes**
Completed.
- b. **Treasurer’s Report**
Completed.
- c. **Bylaws Amendment**
Completed.

XIII. Next Meeting

The next meeting is July 25th at Williamson County EMS.

XIV. Adjourn

Mr. Oakley asked for a motion to adjourn at 1417. Mr. Strange made a motion to adjourn. Mr. Alexander seconded the motion.