

**Capital Area Texas Regional Advisory
Council General Membership
February 18, 2022
1:00 – 3:00 pm**

I. Call to Order

The meeting was called to order at 1:05pm by Ben Oakley

A. Roll Call of Executive Board

In attendance, James “Scooter” Green, Ben Oakley, Terri Thompson, James “Jim” Jewell, Josh Vandever, Ken Strange, Wesley Alexander, Mike Knipstein, Cassie Campbell, Sarah Leech, Kimberly Baker, and Dr. Ira Wood.

B. Introductions of General Membership and Guests

General Membership attendees introduced themselves and the agency they represented.

II. Secretary’s Report

A. Approve October 2021, General Membership Minutes

A motion was made by Mike Knipstein with second by Kim Barker to approve the October General Membership minutes. Motion approved unanimously.

III. Treasurer’s Report

A. Financial Report

Mr. Knipstein requested for Slade Willes to present the Treasurer’s Report for review (attached in meeting packet). A motion to approve the financials as presented was made by Mr. Alexander and second by Ms. Leach. Motion approved unanimously.

B. Staffing Update

Mr. Havron introduced new CATRAC staff members to include Wayne Oberhoff (Controller), Tyler Lichnovsky (Emergency Operations Specialist), and Carissa Thomas (Executive Assistant).

IV. DSHS Update – Jorie Klein

New TSA rules went into effect yesterday and will be enforced beginning March 1, 2022. With the new rule, counties requesting to change TSA regions will have to have support from their current RAC.

Also, new Stroke Rules were passed yesterday and will be enforced beginning September 1, 2022. DSHS is currently working on a compliance document for the different levels and will post once it is available.

Changes to the Maternal Rules are out for public comment. Rule changes go through a legal system and a financial system and so on, for the process of forty-three weeks before it comes back out. DSHS has intergraded all the comments for the rules that we accepted and will go back to the rules on the 22nd.

The Neonatal Rules are out right now for review and informal comment. Informal comment period ends on the 28th. Then they will go through that same process. The Trauma Rules are a little bit behind, and the reason is they are over twenty years old

and need a lot of work. When DSHS drafts rules they need to go to the lawyers and the lawyers ensure they have the statutes of the state behind them.

DSHS is working with the RACs on the new RAC Rules along with the RAC Self-Assessment Tool being developed. The Self-Assessment Tool is designed for the members of the RAC to complete and be engaged in. DSHS referenced the American College of Surgeons guidelines and several other sources for system development. DSHS would like RACs to score a three or higher in all areas, but we know that is probably not going to happen. If a RAC scores less than a three with the proposed RAC Self-Assessment Tool, DSHS will ask for an Action Plan. It will not affect the RAC funding. It is truly an assessment to figure out where the RAC is at and what needs to be improved. It is very important that everyone understands that it is designed for members, stakeholders, and leadership to participate and complete. Also, DSHS added stroke, cardiac, maternal, and neonatal systems of care into the RAC Rule which currently only has language regarding the trauma system.

The Trauma Center criteria is also changing drastically in the new Trauma Rules. Currently and historically, Texas follows ACS criteria for Level I and Level II, but once passed all levels I through IV will follow ACS criteria. DSHS is expecting the rules to go into effect September 1, 2023. Currently they are being reviewed by legal.

Senate Bill 8 is bringing \$21.7M to the EMS community for recruitment and retention. There is an advisory group that has been established to oversee that.

V. Bylaws & Board Actions

A. Proposed Bylaws Amendment

Bylaws were presented at the last General Membership meeting. They were posted on the CATRAC website for 30 days and did not receive any public comment during that time. Dr. Wood expressed concerns that the new Board structure would lack clinical representation. Also, that the proposed Bylaws only require certain committee participation to meet requirements. It will not require members to attend workgroups for trauma, stroke, or perinatal for hospitals to receive their participation letters. He fears this will lead to lack of participation and representation in the workgroups that will be reporting to the Emergency Healthcare Systems (EHS) Committee. Mr. Vandever, Mr. Oakley, and Mr. Havron spoke in favor of the changes. The trauma, stroke, and perinatal workgroups will report to the EHS Committee, so it will ensure more hospitals and organizations receive any needed information and will drive participation. Rhonda Manor-Coombes read a letter on behalf of the Injury Prevention Committee and Education Committee chairs. They would like it to be known that they do not support combining the committees into one. Mr. Oakley reminded the membership that the two will still be able to operate as separate workgroups. Combining these committees eliminates any differences between them. It allows more participation and information to be passed between the two.

Mr. Alexander made a motion to pass the proposed bylaws and Ms. Leach seconded. After ballot votes were submitted by the General Membership, the motion passed with 29 in favor and 7 opposed.

B. Election of Board Members

Mr. Havron explained, with the new bylaws passed, the new Board of Director's structure. Among the officers currently on the Board, there is a Chair, Secretary, and Treasurer to set one-year, two-year and three-year terms for. The staggered approach is to ensure all positions are not vacant at once. Mr. Johnson requested to take the one-year term as Secretary and Mr. Knipstein requested a two-year term as Treasurer. Mr. Oakley will take the three-year term. Mr. Green made a motion to approve, and Ms. Barker seconded. The Board unanimously approved.

Mr. Oakley asked for nominations for the Vice Chair Prehospital representative and the Vice Chair Hospital representative. Josh Vandever was nominated for the Vice Chair Prehospital representative and Dr. Ira Wood was nominated for the Vice Chair Hospital representative. The Board and General Membership unanimously approved.

After establishing the Executive Officers, Mr. Oakley requested nominations for the following positions: Travis County Representative, San Saba/Llano County Representative, Burnet/Williamson County Representative, Hays/Blanco County Representative, Caldwell/Bastrop County Representative, Lee/Fayette County Representative, Ascension Seton Healthcare Representative, HCA St. David's Healthcare Representative, Baylor Scott and White Healthcare Representative, Independent Hospitals Representative, Air Medical Providers Representative, and HPP Coalition Chair Representative.

Nominations were provided and the following were elected via written ballot by the present General Membership:

- Travis County Representative – John Hamilton
- San Saba/Llano County Representative – Wes Alexander
- Burnet/Williamson County Representative – Terri Thompson
- Hays/Blanco County Representative – Ken Strange
- Caldwell/Bastrop County Representative – James "Scooter" Green
- Lee/Fayette County Representative – Rodney Mersiovsky
- Ascension Seton Healthcare Representative – Dr. Samson Jesudass
- HCA St. David's Healthcare Representative – Dr. Ken Mitchell
- Baylor Scott and White Healthcare Representative – Dr. Robin "Rob" Watson
- Independent Hospitals Representative – Thomas McKinney
- Air Medical Providers Representative – Lynn Lail
- HPP Coalition Chair Representative – Dr. Taylor Ratcliff

VI. Public Comments

No further public comments were made.

VII. Chair Report

The Chair had no further comments.

VIII. Executive Director Report

An Executive Director's Report was provided in the meeting packet. A newsletter will be going out as well.

IX. Committee Reports

- **Trauma and Emergency Healthcare Systems Committee**

Mr. Havron provided a report. The Whole Blood Workgroup has been meeting, but the committee meeting had to be rescheduled due to conflict. The Whole Blood Contract is in the final stages. There is a meeting on the 28th that will go through the final last three items in the Whole Blood EMS contract. From there, the plan is transitioning the Whole Blood Workgroup to a broader audience inclusive of trauma physicians, ER physicians, blood banks, ICU directors, trauma coordinators, etc.

No other committee reports were provided.

X. COVID-19 Update

Update was provided in the attached Executive Director's Report

XI. Review Action Items

No further items were reviewed.

XII. Next Meeting Action Items

None were mentioned.

XIII. Open Discussion

No further comments made.

XIV. Adjourn

The meeting adjourned at 3:00 pm.