

Disclaimer: These meeting minutes will not be official until approved at the 11/25/13 Governor's EMS and Trauma Advisory Council (GETAC) meeting.

Meeting Minutes

Governor's EMS and Trauma Advisory Council (GETAC)

August 23, 2013, 9:00am

Council Members

Attendance	Name	Position (representing)
X	Vance Riley, LP	Fire Chief, Chair
X	Nora Castañeda-Rivas	Public Member
X	Mike Click, RN	Rural Trauma Facility
X	James (Mike) DeLoach	County EMS Provider
X	Linda W. Dickerson	Public Member
X	Robert D Greenberg, M.D.	Emergency Physician
	Jodie Harbert III, LP	EMS Educator
X	Ryan Matthews, LP	Private EMS Provider
X	Donald G. Phillips, DO	EMS Medical Director
X	Karen Pickard, RN, LP	EMS Volunteer
X	Shirley Scholz, RN	EMS Air Medical Service
	John D. Smith, Lieutenant	Fire Department
X	Ronald M. Stewart, MD	Urban Trauma Facility
X	Alan H. Tyroch, M.D.	Trauma Surgeon
X	Robert Vezzetti, M.D.	Pediatrician

Department of State Health Services Staff

Attendance	Name	Position
X	Kathryn C. Perkins, RN	Assistant Commissioner for the Division of Regulatory Services
X	Renee Clack, LNFA	Director, Health Care Quality Section
X	Jane G. Guerrero, RN	Director, Office of EMS and Trauma Systems Coordination
X	Joseph Schmider	State EMS Director, Office of EMS and Trauma System

Item 1: Governor's EMS and Trauma Advisory Council (GETAC)

The meeting was called to order at 9:01 am on Friday, August 23, 2013, at the Crowne Plaza Hotel in Austin, Texas. A quorum of the members was present.

Item 2: Approval of Minutes

A motion was made by Mike Click and seconded by Ronald Stewart, M.D, to approve the meeting minutes from May 17, 2013. All council members were in favor; the motion passed.

Item 3: Chair Report

GETAC Chair Vance Riley welcomed everyone to the meeting and introduced Sam Vance from the Emergency Medical Services for Children (EMSC) with a presentation on the National Pediatric Readiness Project which is about quality improvement efforts for pediatric care in emergency departments. It has completed its first phase of this project by completing a national assessment of the emergency departments' readiness to care for children and Texas had similar results to the rest of the nation. This presentation and the information can be found on the EMSC website.

Item 4: Assistant Commissioner Report

The report was given by Kathryn C. Perkins, Assistant Commissioner for the Division of Regulatory Services. Ms. Perkins provided a summary of what has been happening during the 83rd Texas Legislative Session concerning bills and appropriations that could affect EMS and trauma in Texas as well as the three special sessions that occurred. During the 83rd Regular Session of the Texas Legislature, House Bill 3556 and Senate Bill 8 were enacted, which require the Department of State Health Services (DSHS) to implement provisions that establish new requirements for licensing emergency medical services (EMS) providers. These new requirements become effective September 1, 2013, and include a moratorium on the issuance of most new EMS provider licenses between September 1, 2013, and August 31, 2014. DSHS is allowed to continue to issue new EMS provider licenses to the following: municipality, county, emergency services district, hospital, emergency medical services volunteer provider organization or EMS provider who provides 9-1-1 response in a rural area. Between September 1, 2013 and August 31, 2014, DSHS will develop licensing rules to further define requirements to implement the provisions of these new laws and the agency would like to receive stakeholder input for this to have a report ready by the due date of January 1, 2014.

SB 1191, which relates to the duties of health care facilities, health care providers, and DSHS with respect to care provided to a sexual assault survivor in an emergency department of a health care facility, will be a hospital rule addition and will become effective September 1, 2013.

House Bill (HB) 15, relating to level of care designations for hospitals that provide neonatal and maternal services, will have an appointed committee by December 1, 2013 to assist with developing rules for the designation of facilities that provide this service. The Health and Human Services Commission (HHSC) will initially move this bill forward, but the designation component of this bill will fall under DSHS that will be similar to the Trauma and Stroke

designation program. A facility does not have a neonatal designation once it becomes available, the facility will not be eligible to receive federal funding such as Medicaid.

The budget for trauma systems did not receive a cut, but there wasn't an increase to its funding either. This year, DSHS transferred over \$26 million this year from the Designated Trauma Facility and Emergency Medical Services Account (Comptroller's Account 5111) to HHSC to maximize the receipt of federal funds that HHSC receives under the medical assistance program (MAP), and it has now asked DSHS to transfer \$28 million this year and \$35 million for the following year.

Item 5: State EMS/Trauma System Coordination Office Report

Trauma and stroke designations: The report was given by Jane G. Guerrero, Director of Office of EMS/Trauma Systems, Division for Regulatory Services, There are 267 designated trauma facilities; 27 in active pursuit; and 116 designated stroke facilities.

Ms. Guerrero announced that the GETAC committee applications will become available September 3, 2013 and will be posted on the department website on that date. The deadline to submit an application for the GETAC committees will be October 1, 2013.

The American College of Surgeons (ACS) completed an assessment of the Texas Trauma Systems in May 2010. The department recently had a follow-up conference call with ACS to discuss the ACS review of this assessment. The department would like to conduct regional assessments to comply with the ACS recommendations from this initial assessment. It was discussed with the Regional Advisory Committees (RACs) and the department would like to complete the assessment of all 22 RACs by the next biennium.

FY13 uncompensated trauma funds: 3588: final funds have been distributed to the eligible facilities which included 46 Standard Dollar Amount (SDA) Trauma Add-On facilities that did not receive their full calculated award for FY 2013. The uncompensated trauma care application will become available in mid-October of 2013.

Local Projects Grant: For FY13, the department had \$1.3 million set aside and received an additional appropriation of \$600,000 for this account which allowed the department to fund 20 additional request applications. For FY14, the department received 114 applications and were able to award 86 of these application requests.

Extraordinary Emergency Fund: For FY13, the department has funded 6 requests and has one pending at this time. The remaining balance for this account is \$638,000.

Item 6: Assistant Commissioner Report

The report was given by Tammy Sajak, Manager of Epidemiology Studies and Initiatives and EMS/Trauma Registry. Ms. Sajak discussed the Texas EMS/Trauma Registry Workgroup Committee plans for further development for the Trauma Registry. The department has been

addressing user's issues and error messages as needed as well as addressing stakeholders questions and concerns from the meeting held in May. The registry has been able to expand its search capabilities, reference lists, link patient records, and review results. Lastly, the registry has been successful at securing funding from the Texas Department of Public Safety (DPS) for FY 2014.

Item 7: Preparedness Coordinating Council

The report was provided by Eric Epley. The council met in July and discussed several topics such as: the events from the West, Texas explosion; demonstrating to the Centers for Disease Control and Prevention (CDC) why funding is still needed; evaluating community needs through task forces; and working on building a national tool to help with mass fatalities.

Item 8: Standing Committee / Task Force Reports

Air Medical Committee

Chair Shirley Scholz, RN, presented the report. Ms. Scholz wanted to thank Eric Epley for meeting with committee to discuss the Air Medical Providers MOA in order to finalize this document. The committee has been working with DSHS and is waiting to finalize the fixed wing reimbursement rates. The committee would like to form a workgroup to participate in the EMTF to complete the air medical MOA. The topic of unlicensed out-of-state EMS providers transporting patients into the state and assisting Texas-licensed EMS providers with patient care during in-state transport which is referring to fixed wing providers. Some of these aren't emergencies, but the accountability for these providers needs to be further discussed. The committee review the EMS Educational Program and Course Approval rules in Title 25 of the Texas Administrative Code, Section 157.32 as they may or may not address the allowance of students in a Texas EMS training program to participate for credit in clinical rotations (in-hospital observations and hands-on experience under the supervision of preceptors) in settings outside of the state of Texas. The idea of completing these rotations with other states that follow the National Registry of Emergency Medical Technicians to ensure these students are not deviating from Texas standards. The Air Medical Committee would like to schedule a meeting in October to continue working on the draft revisions to the EMS rules in Title 25 of the Texas Administrative Code, Chapter 157 and its comparison to the model state guidelines published by the Association of Air Medical Services (AAMS).

No action items for the council.

Cardiac Care Committee

Chair Richard Smalling, MD, presented the report. Loni Denne provided the committee with a report on the current results of the American Heart Association (AHA) ACTION Registry. Dr. Robert Wozniak reported on the efforts to interact with the Cardiovascular Disease Council. There was a presentation by Catherine Bissell regarding the Southeast Texas Regional Advisory Council (SETRAC) web portal development for GETAC Cardiac Care Committee which would have literature, resources, and other helpful information for hospitals to use regarding cardiac care. The committee requested a motion be made to allow the link to be accessible from the

Cardiac Care websites from SETRAC. No approval was needed for this request and DSHS will work with the committee to accomplish this.

No action items for the council.

Disaster/Emergency Preparedness Committee

Chair Eric Epley provided this report. The State of Texas Emergency Assistance Registry (STEAR) will be going live and will have a formal presentation in November. The Emergency Medical Task Force (EMTF) reported there are over 100 hospitals that have signed the update Memorandum of Agreement (MOA). It was also reported that the Ambulance Bus has been receiving more requests such as power outages for nursing homes and inquiries from air medical providers looking to integrate with this task force. The committee also reviewed a recommendation paper that was written in 2007, and it listed items that this committee that was previously a task force would be working on. Of the 18 items listed on this paper, 16 have been completed and are looking towards working on air medical MOAs and Regional Medical Operations Centers (RMOCs)

No action items for the council.

Education Committee

Chair Jodie Harbert, LP, was not available and committee member Jeff Hayes provided this report. The committee had one action item to present regarding the revision of the DSHS EMS Education rule at Title 25 of the Texas Administrative Code, Chapter 157, Section 157.32, and the DSHS EMS Education and Training Manual. It was recommended to GETAC to consider moving the educational standards that are contained in the Education and Training Manual to the Education rule, §157.32.

No action items for the council.

EMS Committee

Chair Dudley Wait presented the report. The committee received a report from the EMS for Children (EMSC) and an update from the Emergency Medical Task Forces (EMTF) regarding the Memorandum of Agreements (MOAs) for the 2013 hurricane season. MOA ground ambulances were void at the end of the year and were now being managed at the regional levels. Almost all of the previous EMS providers have signed the new MOA, but the need for more providers is still there and would like to request that providers that aren't participating consider signing one of these contracts.

The committee reviewed proposed revisions to Title 25 of the Texas Administrative Code (TAC), Section 157.11 regarding changes mandated by House Bill (HB) 3556 and Senate Bill (SB) 8 of the 83rd Legislative Session, 2013, and would like to approve the changes with the following 5 items that need to be addressed:

- The committee would like clarification from DSHS on the language in the law and the rules that says, "providers directly operated by governmental entities are exempt from this section." A more precise definition of what government entities are or the terms "directly operated by a governmental entity" is being requested. There are a number of 501(c) companies that contract with DSHS and there are questions arising on whether some of this would apply to them.

- In the new language, there is a requirement for \$50,000 surety bond, payable to HHSC for anybody that is going to bill Medicaid. DSHS has inserted similar language that is identical to the law that says DSHS should receive this payment. The issue is that the language found the HHSC rule and the DSHS rule are somewhat confusing and could contradict each other.
- Clarification is needed on the requirement for the letter of permission from the city or county. This will affect air medical providers since they usually extend past county lines.
- Stakeholders would like to know how this requirement will work if your letter is signed by one city and providers are conducting business in a different city. Examples of how this could be interpreted were: having an office location in one city which would be different from where the permission letter was signed off in or being able to conduct business in another city so long as the base didn't reside at this location where the permission was granted.
- The letter of credit requirements needs clarification and to be better defined. The committee would like to ask DSHS to provide clarification language in the rule as well as examples to better assist agencies when looking to obtain this letter. This would help providers communicate to their financial institutions what actual information is needed to satisfy this requirement and prevent the provider from overspending on resources or tools to meet this requirement.

For the recommendations to DSHS, as required by Senate Bill 8 of the 83rd Texas Legislative Session, 2013, regarding the laws and policies related to the licensure of nonemergency EMS transportation providers that would reduce the incidence and opportunities of fraud, waste and abuse, the committee has decided to set up stakeholder meetings around the state to work on getting the needed recommendations from stakeholders. The committee is planning to schedule four meetings, and with the possibility of a fifth meeting, depending on how much can be accomplished with the first four. The following meetings are tentatively scheduled as follows:

- September 27th in Houston, Texas at the Harris County ESD #1 from 10:00am to 3:00pm;
- October 11th in Harlingen, Texas at the Business Professional Building from 1:00pm to 5:00pm;
- October 18th in Amarillo, Texas at the Lower Bush Institute at the university campus from 10:00am to 3:00pm;
- November 1st in Dallas, Texas at the University of Texas Southwestern campus at the Fire and Rescue Training Center from 10:00am to 3:00pm.
- The potential fifth meeting would take place in the Central Texas area, but will be determined once the first two meetings have taken place.

The goal of this is to bring back a prepared report to GETAC before the scheduled November meetings in order to review the report at the scheduled meetings to better assist with the action that could take place at the November meetings.

The committee would like to request for the following agenda item to be added for the November meetings for the Medical Directors Committee, the Education Committee, and the EMS Committee: to look at forming a joint task force to evaluate the findings of the survey on the availability of paramedic education in the different regions of Texas. There have been some concerns expressed throughout rural regions on this topic. The RAC Chairs have also been

approached regarding this topic and are willing to assist with the distribution of this survey. Once this survey is conducted and completed, the committee would like to ask the previously mentioned committees to discuss the results and with the development of a taskforce, address these issues and come up with possible solutions.

Action items:

The committee would like to request that DSHS elaborate on the proposed revisions to Title 25 of the Texas Administrative Code (TAC), Section 157.11 regarding changes mandated by House Bill (HB) 3556 and Senate Bill (SB) 8 of the 83rd Legislative Session, 2013 and have the five points previously mentioned to be addressed.

The committee would like to request for a taskforce to be created that would be comprised of members from the following committees: EMS Committee, Education Committee, and Medical Directors Committee. This taskforce would be created to evaluate the availability of paramedics in different regions of Texas after reviewing the survey results that will be conducted, and to develop possible solutions to improve the number of paramedics available around the state.

Injury Prevention Committee

Chair Shelli Stephens-Stidham provided this report. A presentation by Fort Worth Safe Communities was available at this meeting and this group is only the second area to receive its Safe Communities designation on behalf of the World Health Organization's Collaborating Centre on Community Safety Promotion. There was discussion on the Centers for Disease Control and Prevention Stopping Elderly Accidents, Deaths, & Injuries (STEADI) Toolkit for older adults to review and use. The committee also discussed the possibility of a position statement for the recommendation of injury coordinators. There is a potential meeting being set up for October 25, 2013 and the place is to be determined.

No action items for the council.

Medical Directors Committee

Chair Robert Greenberg, M.D., presented the report. The committee discussed the possibility of moving forward to GETAC a position statement on mental health care in EMS and emergency care. The committee is working with DSHS as well as the Texas Medical Board (TMB) to develop a type of waiver as well as collaborate with TMB to implement a developed procedure. At this point, there have been no requests for waivers, there is no action needed at this time since there isn't a definitive plan developed yet to whether a physician should be granted a waiver of TMB's new rule in 22 TAC 197.3(c) which requires a physician to not hold the position of an off-line medical director for more than 20 EMS providers.

Action item:

The committee would like to request the approval of the GETAC Medical Directors Committee position paper regarding factors, parameters, etc. for DSHS to consider in its making a determination to be utilized by the TMB in that Board's decision as to whether a physician should be granted a waiver of TMB's new rule in 22 TAC 197.3(c) which requires a physician to not hold the position of an off-line medical director for more than 20 EMS providers.

Pediatric Committee

Chair Charles Macias, M.D., presented the report. The committee received available committee liaison reports from its members and an update for the EMS for Children State Partnership. The update on Child Fatality Review Teams introduced two new positions in the team: EMS position and a Family Violence position. The committee reviewed the position paper on minimizing radiation when performing Computed Tomography (CT) scans on children. The committee will review SB 8 as presented by the EMS Committee for any pediatric concerns and provide feedback to this committee if any. Lastly, the committee tabled the agenda item regarding pediatric transfer guidelines and work on a position paper for topic before it is addressed by this committee.

No action items for the council.

Stroke Committee

Chair Neal Rutledge, M.D., presented the report. SB1, which is the General Appropriations Act for the upcoming biennium beginning September 1, 2013, was passed in this last legislation session, and it included a rider for \$5 million dollars to be appropriated to the Texas Council on Cardiovascular Disease and Stroke. \$500,000 of this appropriated money is to be used for stroke and STEMI data collection. The Texas Council on Cardiovascular Disease and Stroke is working with this committee on the development of chronic care components to stroke emergency protocols. Data will be collected through a developed workgroup on how this component works with the RACs. The committee reviewed the Healthcare Facilities Accreditation Program (HFAP) stroke facility designation and its comparability to the primary stroke certification programs of The Joint Commission (TJC) and Det Norske Veritas (DNV). The committee has agreed and approved the HFAP designation and would like to forward this to the council for review and approval to be considered as a state-approved surveyor for stroke centers. The last agenda item discussed was regarding a proposal by Dr. James Grotta regarding alternative bypass protocols. Currently, the protocol states a patient should be transported to the highest level of care within 15 minutes of the event. A workgroup will be developed to look at modifying this protocol by instead using the severity of the stroke patient rather than a timeframe.

Action item:

To approve the Healthcare Facilities Accreditation Program (HFAP), a recognized accreditation organization with Centers for Medicare and Medicaid Services (CMS), as a primary stroke certification program, which comparable to the primary stroke certification programs of The Joint Commission and Det Norske Veritas (DNV) Healthcare, and to be accepted for DSHS stroke facility designation program.

Trauma Systems Committee

Chair Jorie Klein presented the report. The committee discussed the position paper on radiologic studies/dosing in children and recommendations developed by the pediatric subcommittee and have agreed with its contents to move forward to the council. At the previous meeting, the committee was asked to gather information statewide on what trauma centers are doing regarding blood alcohol draws in regards to alcohol related injuries during the holiday season, and the group will continue to move forward with this data collection as it becomes available. Ms. Klein

discussed the report on Trauma Systems Committee Registry Workgroup (TSCRW) and mentioned the Trauma Registry recently met and continue to move forward with its mission. The workgroups is asking for guidance and direction for educational opportunities to have in place to minimize the knowledge gap of what should be entered into the registry. DSHS staff member Colin Crocker presented the committee with information pertaining to causes of death by regions and to provide this information to better assist the regions on what steps to take in minimizing and preventing these deaths. There was discussion on developing a workgroup as the Trauma Medical Directors Best Practices Workgroup and this group would possibly meet in November to discuss issues such as what criteria should be used for trauma center screening. Lastly, the committee reviewed the Trauma Performance Improvement Plan, developed by Jorie Klein, that could be used to evaluate the progress of EMS trauma system development and identify opportunities for improvement. This plan would take effect January 2014 and the chair has suggested to send out this document to others as a reminder of what items are listed in this plan.

No action items for the council.

Item 9: GETAC Liaison Summaries

Texas EMS, Trauma and Acute Care Foundation (TETAF)

TETAF report was provided by Dinah Welsh, Chief Executive Officer for TETAF. The foundation has published a second guide for trauma centers which includes trauma team activation guidelines, a description of what a trauma system is, and what hospitals roles are in trauma to be utilized as needed. The foundation is working with AT&T on their texting and driving program as an injury prevention program for the foundation. The project is being called “Just Drive”, and the foundation is also working with the RACs to spread this awareness. Plans by the foundation in regards to the next legislative session have begun and include items such as: raising the interest of the trauma system and further explaining what the role of the RACs are in the trauma system. With the implementation of recent bills, the foundation would like to be readily available to assist on the implementation of these bills as needed. The last item presented by the foundation is the return of EMS webinar trainings which provides Continuing Education (CE) credits for those participating. These online trainings were scaled down because of the lack of participation and financial obligation.

Item 10: Discussion and Possible Action Items

- A. Stakeholders, committee members, and council members expressed concerns on the recommendations to DSHS, as required by Senate Bill 8 of the 83rd Texas Legislative Session, 2013, regarding the laws and policies related to the licensure of nonemergency EMS transportation providers that would reduce the incidence and opportunities of fraud, waste and abuse. This bill is already in place because of legislation and has taken effect as of September 1, 2013, but will be mandated as of September 1, 2014. After detailed discussion on this topic, it was decided that the items listed in legislation needed clarification before continuing

Action item for the council: Dr. Ronald Stewart made a motion that “GETAC take no formal action at this meeting and collect more data through the normal processes of GETAC and this be an agenda item at the next meeting. Dr. Robert Vezzetti second the motion and it passed unanimously.

- B. Stakeholders, committee members, and council members expressed concerns on the proposed revisions to Title 25 of the Texas Administrative Code (TAC), Section 157.11 regarding changes mandated by House Bill (HB) 3556 and Senate Bill (SB) 8 of the 83rd Legislative Session, 2013. This bill is already in place because of legislation and has taken effect as of September 1, 2013, but will be mandated as of September 1, 2014. After detailed discussion on this topic, it was decided that the items listed in legislation needed clarification before continuing

Action item for the council: Dr. Ronald Stewart made a motion that “GETAC take no formal action at this meeting and collect more data through the normal processes of GETAC and this be an agenda item at the next meeting. Dr. Robert Vezzetti second the motion and it passed unanimously.

- C. The Stroke Committee reviewed the Healthcare Facilities Accreditation Program (HFAP), a recognized accreditation organization with Centers for Medicare and Medicaid Services (CMS), to determine if the primary stroke certification program is comparable to the primary stroke certification programs of The Joint Commission and Det Norske Veritas (DNV) Healthcare.

Action item for the council: Mike DeLoach made a motion to approve the Healthcare Facilities Accreditation Program (HFAP) as a primary stroke certification program, and to be accepted for DSHS stroke facility designation program. Dr. Alan Tyroch second the motion and it was passed unanimously.

- D. The factors, parameters, etc. for DSHS to consider in its making a determination to be utilized by the TMB in that Board’s decision as to whether a physician should be granted a waiver of TMB’s new rule in 22 TAC 197.3(c) which requires a physician to not hold the position of an off-line medical director for more than 20 EMS providers still needs to be worked on and no action was taken for this item at this time.
- E. The review of the strategic plan document developed at the June 27, 2012 GETAC strategic planning session in accordance with Health and Safety Code, Chapter 773, Section 773.012(l) was discussed by Vance Riley with the council members and the request to begin working on setting up the next strategic planning session was mention by Vance Riley to GETAC. The council did not object to the suggestion of having the Chair work with DSHS to initiate this process which is stated in statute to take place every two years. No action was taken by GETAC for this item.

Item 11: Public Comment

Stakeholder G.K. Sprinkle suggested to the council that it should talk about what changes can be recommended for the next Sunset Review to help the agency work efficiently and to have the opportunity to make significant changes. Since the council cannot lobby for such requests,

stakeholders can work with the legislators to begin working on possible changes for the agency.

Item 12: Review and list agenda Items for next meeting

The next agenda items will be listed in the next scheduled meeting.

Item 13: Adjournment

The meeting was adjourned at 1:10 pm.