

Disclaimer: These meeting minutes will not be official until approved at the 5/16/2014 Governor's EMS and Trauma Advisory Council (GETAC) meeting.

Meeting Minutes

Governor's EMS and Trauma Advisory Council (GETAC)

February 14, 2014, 9:00am

Council Members

Attendance	Name	Position (representing)
X	Vance Riley, LP	Fire Chief, Chair
X	Nora Castañeda-Rivas	Public Member
	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
X	Jodie Harbert III, LP	EMS Educator
X	Ryan Matthews, LP	Private EMS Provider
X	Jeffrey Beeson, D.O.	EMS Medical Director
X	Karen Pickard, RN, LP	EMS Volunteer
X	Shirley Scholz, RN	EMS Air Medical Service
	James D. Williams, Lt.	Fire Department
X	Brian Eastridge, M.D.	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
	Kathryn C. Perkins, RN	Assistant Commissioner for the Division of Regulatory Services
X	Renee Clack, LNFA	Director, Health Care Quality Section
	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 9:00 am on Friday, February 14, 2014, 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 DeLoach, and seconded by Dr. Alan Tyroch, to approve the meeting minutes from November 25, 2013. All council members were in favor; the motion passed.

Item 3: Chair Report

GETAC Chair Vance Riley welcomed everyone to the meeting and reminded everyone to remember the vision of the council: a unified, comprehensive, and effective EMS/Trauma Systems for a healthy, safe Texas. The chair also stated the mission for the council: to promote, develop, and maintain a comprehensive EMS/Trauma System that will meet the needs of all patients and that will raise the standards for community health care by implementing innovative techniques and systems for the delivery emergency care for the entire population.

Chief Riley announced the re-appointed and newly appointed GETAC members as of January 1, 2104.

The re-appointed members are:

Linda W. Dickerson, Public Member (Expiration: 1/1/2020);
James M. “Mike” DeLoach, County EMS Provider (Expiration: 1/1/2020); and
Robert D Greenberg, M.D., Emergency Physician (Expiration: 1/1/2020).

The newly appointed members are:

Jeffrey Beeson, D.O., EMS Medical Director (Expiration 1/1/2018);
Brian Eastridge, M.D., Urban Trauma Facility (Expiration: 1/1/2020); and
James D. Williams, Lt., Fire Department (Expiration: 1/1/2020).

Chief Riley presented Dr. Ronald M. Stewart with the certificate of recognition in honor of his time served on the council.

Item 4: Assistant Commissioner Report

In the absence of Kathryn C. Perkins, Assistant Commissioner for the Division of Regulatory Services, Jane G. Guerrero provided this report.

The agency is under review by the Sunset Advisory Commission. The agency has been providing this commission information on how the agency works. The Sunset Commission is in process of developing their report which is anticipated to be released in the Spring of 2014. The time for public comment on this report tentatively planned to happen during the summer. Once more information becomes available, it will be passed along to the council.

At the last legislative session, House Bill (HB) 3556 and Senate Bill (SB) 8 were passed and the department has been in the process of implementing the legislative changes that were mandated for the agency to complete. The rule packet that was made available at the previous GETAC meeting has moved forward as it was presented (with the exception of grammatical changes), and it will be posted on the Texas Registrar website for public comment for the next 30 days. Also being worked on is the report that was due to the legislature January 1st according to the statute. The department was granted more time to complete this report which was combined with the Texas Medical Board (TMB), HHSC, and DSHS. It was decided between these agencies would provide separate agency reports and then merge them as one main report which will serve at the required report as needed by SB 8. The report is in its final draft stage and currently being reviewed before it is submitted to the legislature. Included in the report are the DSHS recommendations as well as EMS Committee report as an addendum.

There is also a Centers for Medicare and Medicaid Services (CMS) moratorium that took effect in July 2013 for Harris County and its surrounding counties for enrollment in Medicare which was to be effective for six months. It has been extended from February 1, 2014 to August 31, 2014

Item 5: State EMS/Trauma System Coordination Office Report

Trauma and stroke designations: Jane G. Guerrero, Director of Office of EMS/Trauma Systems, Division for Regulatory Services, informed the council of the newly hired EMS Specialist for the East Group Regional Office: Sasha Shepard, Blake Milnes, and Chuck Rowe. In the Office of EMS/Trauma Systems Coordination, a State Trauma Systems Director was hired: Colin Crocker. The hiring of this position was a recommendation that came about from the American College of Surgeons (ACS) 2010 state assessment. Mr. Crocker is the RAC Coordinator for the department and was promoted to the position of State Trauma Director.

The department's funding and designation information details have been provided in the council's meeting packets to review this information accordingly.

The department has been working on the 13 priority recommendations from the ACS survey for the state. One in particular is to complete ACS regional assessments of all 22 regions in the State of Texas. The department has been working with ACS and schools of public health to assist with the completion of this project. There have been stakeholder meetings held to work on developing a process on how this assessment should be completed.

Item 6: Assistant Commissioner Report

John Villanacci, PhD, Director, DSHS Environmental Epidemiology and Disease Registries Section provided this report. The department will be collecting the National Emergency Medical Services Information System (NEMSIS) national elements in June 2014. Starting January 1, 2014, anyone that is doing web data entry into our system will be doing that for the 2014 National Trauma Data Bank (NTDB) questions for patients admitted starting January 2014 and after. Hospitals that are uploading a file now have information on file specifications to the

vendors and have scheduled meetings with the vendors to discuss these specifications further for needed improvements and updates.

The department is currently working with NEMESIS to be certified on the EMS reporting for the latest version of this software. The department will be working with EMS users and vendors to test this product for processing to tentatively be ready by the summer.

The department has been working to upgrade the EMS/Trauma Registry to the latest version of its operating software, Maven. This will be able to provide additional functions and one of them is data validation. The target date to complete this update is February 21, 2014.

The funding proposal has been submitted to the Texas Department of Transportation (TxDOT) to consider funding the registry for next scheduled fiscal year. The department will keep the stakeholders informed as information becomes available on the progress of this submitted proposal.

Item 7: Assistant Commissioner Report

Dave Gruber, Assistant Commissioner for the Division for Regional and Local Health Services provided this report. Mr. Gruber talked about Sunset in Texas and how there is minor interaction from this commission with this division. There have been two regional visits from the Sunset Commission: Houston and San Antonio. There are two major initiatives coming through this office. One of these is the initiation of information exchange strategy to develop a public health information exchange. Hospitals are now required to link to a public health department for meaningful use and, up to this point, have been receiving waivers. The office is working towards the success of this information exchange and to ensure the capability is there throughout the state. This is at the beginning stages of its implementation and will continue moving forward with the necessary steps to complete this project. The other initiation is to look at an overarching strategy health system that would include a five-tier system. There will be a vision and a mission created to recognize the entire enterprise and not by individual components of this overarching health system. At this point, it has been asked of the local health services and regions to provide a list of what services are currently provided in the field to get a “snapshot” of what is currently available. In the future, it will be determined where this enterprise should be heading to meet its mission and vision. There is also a preparedness strategy being created that will later on be sent out to its external stakeholders to make sure the office is understanding of the public health preparedness system in Texas. The key is to support all those involved when necessary, but also be able to have the support needed when necessary.

Item 8: Preparedness Coordinating Council

Eric Epley informed the group there was no report at this time.

Item 9: Standing Committee / Task Force Reports

Air Medical Committee

Chair Shirley Scholz, RN, presented a summary report. The committee discussed the progress of the Air Medical Workgroup to participate on Emergency Medical Task Force (EMTF) for the completion of an air medical disaster response Memorandum of Agreement (MOA). The committee reviewed the comments submitted on the rule language that was presented at the November 24, 2013 Air Medical Committee meeting and finalized the language to forward to the council for approval which can be sent over to DSHS for review.

Action Item:

Ms. Scholz made the motion to pass the Air Medical draft rule language with the additions made and approved in the Air Medical Committee meeting. The action item was not listed in the GETAC agenda and could not be discussed at this time. It was requested to add this item to the next meeting agenda for review and approval.

Cardiac Care Committee

Committee Chair Richard Smalling, M.D., presented the report. Committee member Loni Denne provided a summary on American Heart Association (AHA) ACTION Registry. Committee member Robert Wozniak, M.D., provided a report on the DSHS Cardiovascular Disease Council Interface as the liaison for the committee and that council. The Southeast Texas Regional Advisory Council (SETRAC) web portal development is being worked on by committee member Catherine Bissell. The report on the Regional Advisory Council (RAC) STEMI Survey was discussed and the committee would like to present suggestions on how to start up a statewide STEMI registry. Information was shared from the Texas Council on Cardiovascular Disease and Stroke with the group regarding financial allocation from Rider 97 for the support of stroke and STEMI data collection. The allocated money would be used to extract information from related registries.

Action Item:

Dr. Smalling presented the motion to the council to require DSHS to require that all state RACs complete the cardiac care GAP analysis survey as a pre-requisite for being a recipient of the funds being allocated to the RACs from Rider 97. If funding were to become available in the future, the results of this survey would be able to provide an idea of where these funds should be allocated and where assistance is needed further.

Since this item was not available as an agenda item on the council agenda, it will be added to the next meeting agenda for further discussion. Items to be added to the May meeting agenda: considering making STEMI a reportable disease and to add the funding component by doing the GAP analysis.

Disaster/Emergency Preparedness Committee

Chair Eric Epley presented a summary report. There was a workgroup report on the Texas Disaster Medical System Mass Facility Management. The committee discussed the Emergency Medical Task Force (EMTF) projects. EMTF program has finalized the Memorandum of Agreement (MOA) integrating air medical providers. There is a Medical Incident Support Team

(M-IST) course available March 27th and 28th in Arlington and Ambulance and Ambulance Staging Manager (ASM) course available February 18th and 19th in Galveston. There was also discussion on a name change regarding Regional Public Health and Medical Operations Center which is known previously as Regional Medical Operations Center (RMOC). The committee also discussed the next initiatives it would like to start focusing on: pandemic flu, power grid in Texas, and the effects of the Affordable Care Act (ACA) during a disaster. Mr. Epley voiced his concerns over the GETAC meeting dates happening in May in regards to this committee being able to meet. The Texas Division of Emergency Management is having their annual Emergency Preparedness Conference the same week that GETAC is meeting, but will be meeting in San Antonio. Mr. Epley has requested that the council consider making accommodations for people meeting for GETAC and suggested the GETAC meetings be held in San Antonio, in conjunction with the preparedness conference.

No action items for the council.

Education Committee

Chair Jodie Harbert presented a summary report. The committee met January 10, 2014, in Hurst, Texas as well as during this GETAC committee meeting sessions. Mr. Harbert asked the council members to review a draft letter created from the January 10, 2014 meeting regarding the Texas Higher Education Coordinating Board recommendation proposing to reduce associate degree requirement from 72 to 60 hours, and the effect it will have on the associate degree in EMS. The GETAC Education Committee drafted this letter in support of the exception to present to the Texas Higher Education Coordinating Board to consider an Associate's of Applied Sciences in EMS under the exemption to the 60-hour rule based upon the concept of EMS accreditation and better education. It is not the intent of this committee to change what any accrediting program is already doing, but instead provide them the right to continue on with their program requirements if more than 60 hours are required.

The committee also reviewed the recommendations on ethics and integrity standards and competencies in EMS continuing education and initial training. The EMS and Education Committees will be working together to evaluate other health care profession exams and their relevance to EMS.

The committee reviewed the online Medical Directors Courses agenda item presented by State EMS Director, Joseph Schmider. DSHS would like to provide this course online for one year to medical directors that are interested and absorb the cost for this course for the first year.

The committee is planning on meeting again on April 4, 2014, from 9:00 AM to 3:00 PM in Austin with the location to be determined.

Action Item:

Chair Jodie Harbert presented the motion to ask GETAC to support the letter of exemption to allow paramedic associate degree programs to standardized their credit hours. Dr. Robert Greenberg second the motion and mentioned this item was also discussed in the Medical Directors Committee meeting and was unanimously agreed on at their discussion. This letter

would be a letter of support for accrediting programs that are looking for support on the needed exemption to Education Code 61.5151 to present to the Texas Higher Education Coordinating Board.

EMS Committee

Chair Dudley Wait presented a summary report. The committee had a presentation from the Texas Medical Association's Hard Hats for Little Heads program that provides helmets to children and discussed their current grant program. The committee discussed the recommendations to DSHS regarding the changes mandated by HB 3556 and SB 8 from the 83rd Legislative Session and these recommendations will be posted on the Texas Registrar starting February 15, 2014 for public comment. An update from EMS for Children was presented at this committee meeting as well as an update to the timeline to the revisions of the rules in Chapter 157. An updated report from the Trauma Systems Registry Workgroup was provided at this meeting by EMS Committee member Brian Petrilla. A report from the workgroup examining the language in Title 25 of the Texas Administrative Code (TAC), Section 157.11 and 157.13, respectively, regarding patient care issues when EMS ground and air providers are both present. There are still additional questions needing to be answered on this topic and DSHS will continue to work with the committee on this issue.

The committee also talked about possible agenda items for the next meeting: look at the Local Project Grants (LPG) program and some of the dollar values listed in the grant guidance for acceptable items. There have been times that this grant cannot meet the feasible needs of those applying when making purchases for needed equipment for better patient care and the committee would like to have further discussion about the program's requirements for the next application period; look at reciprocity policies; follow-up on the discussions from the medical directors regarding the transport of psychiatric patients when they don't have medical needs; and to discuss the letter of approval requirements for new EMS organizations to start after the moratorium.

No action items for the council.

Injury Prevention Committee

Chair Shelli Stephens-Stidham informed the council that a quorum was not met for this scheduled meeting. The committee met January 17, 2014 in Dallas, Texas. This workday meeting focused on developing recommendations for hospital based injury prevention programs. The next working meeting that is being planned is tentatively happening May 2, 2014 in Corpus Christi, Texas with a location to be determined. The committee is looking for guidance from the council regarding the committee's member status since losing three of its current members.

No action items for the council.

Medical Directors Committee

Chair Robert Greenberg, M.D., presented a summary report. The committee reviewed and discussed their listed agenda items: mental health care position statement with the addition of the

word stakeholders in the first line; the National Association of EMS Physicians (NAEMSP) / American College of Surgeons (ACS) position statement on the use of long spine boards at the November 2013 meeting; consider ideas for flexibility on and exemptions to Education Code §61.05151; the American College of Emergency Physicians (ACEP) 2014 National Report Card on the state of emergency care, and the results for Texas; and a presentation of Texas Medical Association's (TMA) Hard Hats for Little Heads program that provides bike helmets to children, to be presented by Tammy Wishard, TMA Outreach Coordinator. For future agenda items, the committee would like to add the following: clinical guidelines concerning blood draws, discuss some talking points on the use of spinal restrictions and long back boards, and continue talking about the mental health care position statement.

Action items:

The committee endorses the position statement of the GETAC Education Committee as related to EMS education; consider ideas for flexibility on and exemptions to Education Code §61.05151, which prohibits educational institutions from requiring students to complete more than the minimum number of semester credit hours (60) required for an associate degree, unless the institution determines that there is a compelling academic reason for requiring the additional hours and appeals for an exemption to the Texas Higher Education Coordinating Board.

The committee endorses the position statement and possible sample clinical guideline on House Bill 434, 83rd Legislature, 2013, concerning blood draws and ask for this to be on the next council agenda.

The committee endorses the online Medical Directors Course adapted by the National Highway Traffic Safety Administration, developed by the National Association of EMS Physicians and the American College of Emergency Physicians.

Pediatric Committee

Chair Charles Macias, M.D., presented this report. The committee discussed their position paper on minimizing computed tomography (CT) radiation for pediatrics. The intention of this committee for this position paper is to discuss an implementation strategy for quality improvement to help institutions with this issue. It was also discussed possible rule revision ideas that govern radiation exposure which will open up again in 2017. There was a presentation of the Texas Medical Association's (TMA) Hard Hats for Little Heads program by Tammy Wishard which talked about providing helmets to children. There was an update on the EMS for Children State Partnership with most of the discussion focusing on the National Pediatric Readiness Project Regional Data Presentation. Pediatric transfer guidelines was also discussed

in this meeting and have developed a taskforce that is headed by Sally Snow. These transfer guidelines are helping to create a framework for involved facilities and pre-hospital providers. For future agenda items, the committee would like to discuss the following: consider strategies for quality improvement implementation of the Pediatrics Committee position paper on CT radiation; being able to link this to a volunteer pediatric facility recognition program; and to bring forward the pediatric transfer guidelines for review and approval.

No action items for the council.

Stroke Committee

This committee did not meet at this time.

Trauma Systems Committee

Chair Jorie Klein presented the report. The Trauma Systems Committee Registry Workgroup (TSCRW) meeting was discussed and the progress is has been making was mentioned. A report from the Trauma Medical Director's workgroup and the issues regarding geriatric patients is the main focus of this workgroup. TQIP did publish some standardized guidelines for trauma facilities through the American College of Surgeons (ACS), and this workgroup has been using this as a starting point. The Mid-Level (non-physician) Provider workgroup was developed and its goal is to look at collecting job descriptions to standardized elements of the job description, to look at an orientation manual, to look at how to access the ATLS courses, and to have a career track for these individuals. The Trauma Registry Workgroup will be conducting similar work as the TSCRW and will conduct similar research as the Mid-Level Provider workgroup. One of the biggest discussions was about the data and how to use the data. There is a Trauma Systems Performance Improvement Plan that was to take effect as of January 2014 and questions on data have come up with this implementation. There is a proposal available that the committee will be reviewing and ask all the committees to review as well as the RAC Chairs for feedback by the May meetings before the committee moves forward on anything else. The ACS Survey Process was major discussion at this meeting and the recommendation was to develop questions from the ACS biz format and send these to the Trauma Systems Committee, EMS Committee, and to the RAC Chairs for feedback on these questions. The committee would like to have an opportunity to meet before the scheduled May meeting to give all those involved an opportunity to comment and discuss as needed to develop a unified recommendation list. Lastly a presentation was made regarding TQIP to explain the data process collection and analysis, and the presentation led to the discussions of the possibility of have a Texas TQIP.

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 been following the Texas Sunset review closely to expand upon the self-evaluation of the trauma system, and it will be providing updates along the way of this process. The legislature has also announced their interim studies and TETAF will be following a number of these. The Driver Responsibility Program is one of those being studied, and the foundation has already had conversations with the chair of that committee. There is a Trauma Awareness Day being planned in May, but it may have to be rescheduled for August due to lack of hotel space. The foundation's planned fundraiser is also being affected by this and is being moved to August as well. The foundation launched its "Just Drive" campaign and will be rolling this out statewide. There is more information available on the website for this campaign. Lastly, the

foundation is creating a statewide stroke/cardiac care conference taking place September 26, 2014.

EMS for Children State Partnership update

Sam Vance provided this update. The statewide EMS assessment was completed January 8, 2014 and the respond rate for Texas was 71%. There were several departments that were not selected to participate in the random selection for this survey, but the opportunity to add in their information will be an option after the state and national data has been collected and submitted into a report. This report should become available by March 2014 and anticipate having the data ready for presentation in May 2014. Also, the information from the 2010 survey will be made available to this group to use as a comparison tool as part of the presentation.

Item 10: Discussion and Possible Action Items

- A. The GETAC strategic planning session took place at this meeting and no action was taken by GETAC for this item. The next strategic planning session is scheduled for April.
- B. The council reviewed the document regarding the Texas Higher Education Coordinating Board Associates of Applied Sciences in EMS and the changes made to the 60-hour rule. *Action item for the council:* Jodie Harbert made a motion to ask GETAC to support the letter of exemption to allow paramedic associate degree programs to standardized their credit hours. Dr. Robert Greenberg second the motion and it passed unanimously. This letter would be a letter of support for accrediting programs that are looking for support on the needed exemption to Education Code 61.5151 to present to the Texas Higher Education Coordinating Board.
- C. 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) took place at this meeting. No action was taken by GETAC for this item.
- D. The council reviewed the American College of Emergency Physicians (ACEP) 2014 National Report Card on state of emergency care and the results for Texas. No action was taken by GETAC for this item.
- E. The council reviewed the online medical directors adapted by the National Highway Traffic Safety Administration, developed by the National Association of EMS Physicians and the American College of Emergency Physicians. No action was taken by GETAC for this item.

- F. The presentation of the Texas Medical Association's Hard Hats for Little Heads program which provides helmets to children was not available at this meeting. No action was taken by GETAC for this item.

Item 11: Public Comment

Dudley Wait informed the council of a new organization to represent EMS of Texas. The group is called Texas EMS Alliance and its inaugural kick off is set to take place in Dallas in February. This group was created to be the voice of EMS as well as assist the industry with conflicts and concerns when needed. The concern of not being able to view all the committee meetings online was also expressed by Mr. Wait because of the lack of equipment available for the secondary meeting rooms.

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 12:03 pm.