

Disclaimer: These meeting minutes will not be official until approved at the 8/23/13 Governor's EMS and Trauma Advisory Council (GETAC) meeting.

Meeting Minutes

Governor's EMS and Trauma Advisory Council (GETAC)

May 17, 2013, 9:00am

Council Members

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

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

The meeting was called to order at 9:05 am on Friday, May 17, 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 Jodie Harbert, to approve the meeting minutes from March 1, 2013. All council members were in favor; the motion passed.

Item 3: Chair Report

In the absence of GETAC Chair Vance Riley, Ronald Stewart, M.D., talked about the strategic plan. A presentation was made which presented the available options for meeting times for the GETAC committees which were developed from the GETAC Strategic Planning sessions. This presentation was also made available at each of the committees, respectively.

Item 4: Assistant Commissioner Report

The report was given by Kathryn C. Perkins, Assistant Commissioner for the Division of Regulatory Services. Ms. Perkins publicly acknowledged the involved stakeholders in the assistance of the West, Texas explosions which occurred in April.

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.

House Bill (HB) 15, regarding Neo-natal intensive care unit (NICU), would create a committee to develop 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. Other bills of interest for the stakeholders include: Senate Bill(SB) 1191 which relates to the provisions of care for sexual assault victims; and HB 1976 regarding military reciprocity.

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, 268 designated trauma facilities; 29 in active pursuit; 111 designated stroke facilities (3 Comprehensive care; 104 Primary care; and 4 Support care). Beginning in June 2013, the department will be implementing a performance improvement program process for the designation program. The department will send a survey to the administrators and trauma nurse coordinators to ask questions on how the department can improve its current process.

Ms. Guerrero also announced there will be changes to the Texas EMS Magazine. The last printed copy will be the June/July volume and it will now transfer over into an electronic version. The updated electronic version will focus on EMS, trauma systems, and grants and will

become more of a newsletter format.

As requested by councilmember Jodie Harbert, Ms. Guerrero will provide a copy of the funding report for the council members to review during these meetings, starting with the next scheduled meeting.

New staff: Joseph Schmider is the new State EMS Director for the department. He is currently the Director of the EMS Office at the Pennsylvania Department of Health. He will officially start in his new position on June 11, 2013.

FY13 uncompensated trauma funds: 3588: funds have been distributed to the facilities that did not participate in the program matching funds to Medicaid (SDA) and facilities that were eligible for the Standard Dollar Amount (SDA) Trauma Add-On that did not receive their full calculated award. The appropriated amount for FY2013 UCC funding was \$57.5 million, but \$54 million was distributed in the same format as FY2012 UCC funding. From the 911 account, the available amount that was distributed to hospitals was \$500,000 and distributed from the 1131 account was \$606,000 with a rollover of \$31,000.

Local Projects Grant: For FY13, 111 applicants, 103 eligible. 82 grants awarded, and the contract ends August 2013. The FY2014 RFP has been released and is accepting applications until May 28th.

Extraordinary Emergency Fund: For FY13, 6 applications have been completed and there is a remaining of \$634,000.

Item 6: Assistant Commissioner Report

The report was given by John Villanacci, Unit Director for the Environmental and Injury Epidemiology and Toxicology Unit. Mr. Villanacci discussed the Texas EMS/Trauma Registry and mentioned it was fully functional as well as able to add users through assigned managers. Mr. Villanacci reported there is online training available for new users. New features such as searching for patient care reports, medical care reports, and submersion data is now available. Testing will be conducted in August to link EMS records with trauma. The department will also have acute care and long-term hospitals added into the registry. The department will be working with users and the current vendor for the registry to identify issues and work on resolving them. There is a pilot program being initiated in the RAC D to develop best practices on trauma reporting and how to best use this data. Funding for the registry has been secured for the following fiscal year as well as full-time employees (FTE).

Item 7: Preparedness Coordinating Council

The report was provided by Lissett Osborne. The report for the Hospital Preparedness Program (HPP) provided updates for FY 2014. There are 4 FY 2014 funding opportunities and awardees will receive a prorated contract for 9 months. There are currently 12 tentative awardees and contracts will begin July 1st.

Item 8: Standing Committee / Task Force Reports

Air Medical Committee

Chair Shirley Scholz, RN, presented the report. The committee had a brief discussion about bringing patients in and out of Texas by unlicensed out of state EMS providers and receiving assistance from these providers. House Bill 1656, which talked about funding for emergency medical air transportation provided to patients enrolled in the state Medicaid, did not make through the legislative committee. The committee would like to work on drafting some language for this bill to have ready for the next legislative session and send to the department for review when it has been completed. There were questions and concerns from the committee regarding clinical rotations being completed in other states and vice versa. A discussion about the GETAC committee and council meetings schedule changes took place during the committee meeting. The committee's selected preferences for the presented meeting plans (in descending order) are as follows: Options D; E; A; B; and C. Comments were made that an alternate choice that was not presented as an option should be to leave the meeting schedule as it is currently, and the option to make meetings 75 minutes long instead of 60 minutes.

No action items for the council.

Cardiac Care Committee

Chair Richard Smalling, MD, was not available and committee member Karen Pickard presented the report. Ms. Pickard reported on the ST Segment Elevation Myocardial Infarction (STEMI) system development in Dallas-Ft. Worth. The program started with 15 hospitals and found out that 50% of patients were being brought in by EMS, leading the committee to believe more education needs to be provided to the public informing them to call 911 when they are experiencing cardiac issues. The program now has 31 hospitals dedicated to the program. Committee member Catherine Bissell provided a presentation about web portal development for the committee to post educational materials and other resources that would be helpful towards creating a strong STEMI system. A report on University of Texas Health Science Center (UTHSC) – Center for Clinical and Translational Sciences (CCTS) STEMI Database development was presented by Dr. Richard Smalling at the committee meeting. A discussion about the GETAC committee and council meetings schedule changes took place during the committee meeting. The committee's selected preferences for the presented meeting plans (in descending order) are as follows: Options C; F; E; A; D; and B. Comments were made that an alternate choice that was not presented as an option should be to leave the meeting schedule as it is currently which would be a third choice including the available options.

No action items for the council.

Disaster/Emergency Preparedness Committee

Chair Eric Epley was not available and Dudley Wait presented the report. There were several presentations made during the meeting which included the Texas Biowatch and Strategic National Stockpile (SNS) and are available online at: www.TDEMS.org. A report from the Emergency Medical Task Force (EMTF) which stated almost all 8 Task Forces (TF) have been utilized for real activities such as the events that occurred in West, Texas and in Grandbury, Texas. The Mobile Medical Unit (MMU) was made available during the festivities in San Antonio and the Rio Grande Valley EMTF-11 was used during the week of Spring Break and

local events occurring during the week. The TF are hopeful they will continue to receive these types of requests for responses in order to utilize this equipment and new equipment they are accumulating. A discussion about the GETAC committee and council meetings schedule changes took place during the committee meeting. The committee's selected preferences for the presented meeting plans (in descending order) are as follows: Options D; E; C; A; and B. Comments were made that an alternate choice that was not presented as an option should be to extend the meetings scheduled to 90 minutes.

No action items for the council.

Education Committee

Chair Jodie Harbert, LP, presented the report. The committee met in April as well as during these scheduled meetings to discuss the items on their agenda. The committee discussed setting a statewide standard for EMS certification equivalency and transfer processes for EMS training programs. The committee reviewed several programs and they all had different criteria for each program. The committee would like to make several recommendations for a policy on this, but would like to spend more time evaluating the equivalencies and not just on the transfer process. The recommendations would provide guidance and information for the college on the course transfer in question and not necessarily procedures on what to accept. The committee also discussed the Negotiation of contiguous state regulatory agreements by DSHS for the purpose of out-of state clinical / field experiences required for Texas EMS training programs. Clinical space is getting harder to find; thus, the committee is looking at partnering with bordering states of Texas as possible options. Chair Jodie Harbert will work with the department's legal department on the details and possible issues. The committee examined the Medical Directors Committee's view on the amount of oversight of students during clinical and field experiences of an EMS training program and felt the site's medical director should have the final say for the student as well as add it to the contract. A discussion about the GETAC committee and council meetings schedule changes took place during the committee meeting. The committee's selected preferences for the presented meeting plans (in descending order) are as follows: Options E; D; B; A; and C. Comments were made that an alternate choice that was not presented as an option should be to leave the meeting schedule as it is currently. The next workgroup meeting will be July 26, 2013 in Austin, Texas, and the location will be determined where the education training manual will be reviewed.

No action items for the council.

EMS Committee

Chair Dudley Wait presented the report. The committee last met on April 26, 2013 to work on developing a manual and will ask the council to place this on the next agenda to review and approve. The committee has asked to increase the requirements for the EMS administrators since they are currently the point of contact for the providers. It is not required that the position be filled by an EMT certified person, but the committee feels providing more training for the administrator can increase the accountability. Other recommendations made towards this accountability were: run background checks, only have one administrator per agency, develop a DSHS certification for administrators to help with the hiring process; and have Continuing Education (CE) courses and administrator like courses available to teach the legalities of the business. The committee received a report from the EMS for Children (EMS-C) from the newly appointed project manager. The committee also received an update from Emergency Medical

Task Force (EMTF) / Disaster Preparedness Committee on ambulance MOAs for 2013 hurricane season, encouraging providers to sign new contracts with EMTF since their previous contracts with DSHS is now void. Some discussion was brought up in the meeting about drug shortages and compounding pharmacy issues. Control medications are readily available once again and a discussion about accredited compound facilities to help with the shortage issues. A discussion about the GETAC committee and council meetings schedule changes took place during the committee meeting. The committee's selected preferences for the presented meeting plans (in descending order) are as follows: Options E; D; B; C; and A. Comments were made that an alternate choice that was not presented as an option should be to leave the meeting schedule as it is currently.

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 is planning to have a workgroup meeting July 26, 2013 in Austin, Texas. A discussion about the GETAC committee and council meetings schedule changes took place during the committee meeting. The committee's selected preferences for the presented meeting plans (in descending order) are as follows: Options E; D; A; B; and C. Comments were made that an alternate choice that was not presented as an option should be to leave the meeting schedule as it is currently, and the option to make meetings 75 minutes long instead of 60 minutes.

No action items for the council.

Medical Directors Committee

Chair Robert Greenberg, M.D., presented the report. The committee previously met in April and discussed several items that are currently listed on the agenda for this May meeting. In regards to the factors for DSHS to consider in its making a determination to be utilized by the Texas Medical Board (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, the committee suggested DSHS develop a board to make these decisions. This would need to be addressed in statute for DSHS in order to implement which may not be approved. A discussion about the GETAC committee and council meetings schedule changes took place during the committee meeting. The committee's selected preferences for the presented meeting plans (in descending order) are as follows: Options E; D; A; B; and C.

Action item:

The committee would like to request the approval of the GETAC Medical Directors Committee position paper regarding EMS transport to non-traditional, freestanding emergency clinics. The committee would like to provide direction for EMS providers in Texas by providing these guidelines.

Pediatric Committee

Chair Charles Macias, M.D., presented the report. The committee received available committee liaison reports from its members and were introduced to the new EMS for Children (EMSC) project manager, Stan Riley. Mr. Riley provided an update on the pediatric protocol recourse tools that will soon be available for public use. Mr. Riley mentioned that a readiness assessment was conducted to ask facilities to assess their emergency departments (ED) on how ready they are to receive pediatric patients and received a 66% response rate. He would like to provide a more detailed report at the next scheduled meeting. The committee is looking to assign committee members as administration coordinators to the EMSC to provide assistance as needed to find best practices and benchmarks. A position paper was created regarding pediatric imaging implementation strategies and defined six elements which will be worked on by committee members. A discussion about the GETAC committee and council meetings schedule changes took place during the committee meeting. The committee's selected preferences for the presented meeting plans (in descending order) are as follows: Options C; A; B; E; and D.
No action items for the council.

Stroke Committee

Chair Neal Rutledge, M.D., was not available and Council Member Ronald Steward, M.D., presented the report. Sub-committee reports were provided at the meeting for the following topics: Regional Advisory Council (RAC) stroke data collection, EMS Stroke Education program, and Stroke survey workgroup. The report on Trauma Systems Committee Registry Workgroup (TSCRW) will be talked about in more detail at the next scheduled meeting for the committee. The committee also decided to review the Healthcare Facilities Accreditation Program (HFAP) with a non-quorum workgroup meeting to be scheduled in the future. A discussion about the GETAC committee and council meetings schedule changes took place during the committee meeting. The committee's selected preferences for the presented meeting plans (in descending order) are as follows: Options A; B; C; D; and E. Comments were made that an alternate choice that was not presented as an option should be to make meetings 75 minutes long instead of 60 minutes.
No action items for the council.

Trauma Systems Committee

Chair Jorie Klein presented the report. Ms. Klein discussed the report on Trauma Systems Committee Registry Workgroup (TSCRW) and mentioned the Trauma Registry website will have future communication and recommendations on their website. The website will also have educational materials available as well as the most current information pertain to the Trauma Registry. Ms. Klein did mention there were some current issues for Trauma Registry users and she has communicated these issues with the Trauma Registry staff as well as the contracted vendor for the registry. The committee would like to ask that the other committees appoint two people to address what type of patient categories and reports would be beneficial from the registry. The committee would like to schedule a workgroup session to establish a "best practices" before the August committee meetings. Ms. Klein provided a geriatric trauma update and the committee would like to recommend for the committee to work with the Trauma Quality Improvement Program (TQIP) workgroup on best practices. An update on alcohol related injuries crashes during holiday periods was provided and reviews show these occurrences go up

35-40% during the holidays. A discussion about the GETAC committee and council meetings schedule changes took place during the committee meeting. The committee's selected preferences for the presented meeting plans (in descending order) are as follows: Options A; B; C; D; and E. Comments were made that an alternate choice that was not presented as an option should be to leave the meeting schedule as it is currently.

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. Ms. Welsh mentioned the state budget for fiscal years 2014 and 2015 are being finalized at this time, but there may be a special legislative session taking place to complete these plans. TETAF has asked to increase the dollar amounts that can be awarded to facilities as well as for the RACs. She also mentioned for those interested in this request to submit their requests to their assigned state representative which are listed in the TETAF flyers. The foundation was also following other bills such as HB 104. This bill would remove the Driver's Responsibility Program, but this bill died in the House Committee. The foundation is paying close attention to the results of the committee choices for suggested meeting dates and times in order to confirm the dates for the scheduled fundraiser in August. TETAF will move along with GETAC and its committee regardless of the result of their selections.

Item 10: Discussion and Possible Action Items

- A. Stakeholders expressed concerns on 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(1), specifically on the suggested changes for the GETAC meeting schedule. Discussion among the council members regarding the efficiency of the meeting times and if their decision would affect any of its member's attendance.

Action item for the council: Mike Click made the motion that the council should make a decision at this meeting and should decide to keep the meeting structure as it is currently. Dr. Ronald Stewart added to the recommendation to look into the possibility of setting up a set schedule. Shirley Scholz seconded the motion. The motion passed unanimously.

- B. The recommendation by GETAC's Medical Directors Committee to GETAC of medical director courses for DSHS approval, as referenced in the new Texas Medical Board (TMB) rule in Title 22 of the Texas Administrative Code (TAC), Chapter 197, Section 197.3(b)(17)(A)(iii) that requires an off-line medical director for an emergency medical services.

Action item for the council: Dr. Robert Greenburg made the motion that the council approve the recommendation by GETAC's Medical Directors Committee by GETAC's Medical Directors Committee for 3 medical director courses for DSHS approval, as

referenced in the new Texas Medical Board (TMB) rule in Title 22 of the Texas Administrative Code (TAC), Chapter 197, Section 197.3(b)(17)(A)(iii) that requires an off-line medical director for an emergency medical services. Jodie Harbert seconded the motion. The motion passed unanimously.

- C. 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.
- D. The review of the draft document of GETAC standard operating procedures (SOP) to address how committee charges will be process was tabled from this meeting.
- E. The discussion to address how resource materials may be posted to the DSHS GETAC webpage mentioned that attachments that would be sent could be up to 10 MB. The preference would be to provide a weblink of the available resources if they have a copyright instead of the actual document.
- F. The council was asked to review the GETAC Medical Directors Committee position paper regarding EMS transport to non-traditional, freestanding emergency clinics.
Action item for the council: Dr. Robert Greenburg made the motion that the council approve the position paper of the GETAC Medical Directors Committee regarding EMS transport to non-traditional, freestanding emergency clinics. Mike DeLoach seconded the motion. The motion passed unanimously.
- G. The item to review the GETAC Medical Directors Committee position paper regarding education program medical director's responsibility for clinical care provided by EMS students' clinical rotation carried over from the last meeting, and it was sent over to the Education Committee.
Action item for the council: Dr. Robert Greenburg made the motion that the council approve the position paper of the GETAC Medical Directors Committee regarding education program medical director's responsibility for clinical care provided by EMS students' clinical rotation. Jodie Harbert seconded the motion. The motion passed unanimously.
- H. The review of 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 and to advise GETAC that HFAP primary stroke certification should or should not be accepted for DSHS stroke facility designation will be reconsidered at the next meeting.

Item 11: Public Comment

The position papers that were approved will be posted on the GETAC Medical Directors Committee DSHS website along with their references. Dr. Ronald Stewart suggested to DSHS

to add links that may be of interest to its subscribers to the end of the newly announced newsletter. Christi Reeves wanted to public thank everyone for their participation and assistance with the events of West, Texas and the explosion. Scott Mitchell took a moment to publicly thank DSHS Staff Member Kelly Harrell for all her efforts towards these committee and council meetings.

Item 12: Review and list agenda Items for next meeting

Item 13: Adjournment

The meeting was adjourned at 12:17 pm.