Regional Advisory Council Annual Report

Report Form

An annual report is to be submitted to DSHS, OEMS/TS in or around October 15th, and will report on/for the past fiscal year (September 1 thru August 31) in accordance with Texas Administrative Code, Title 25; Rule 157.123: Essential Criteria II. D. 4. Additional information can be entered or submitted as an attachment to this report.

RAC		
Report Period	FROM:	TO:

1. On a separate form (Attachment A) provide current information for RAC Officers and Executive Committee/Board as of September 1st.

2. Needs Assessments (*provide details on how these needs were met*)

Identified Need	Targeted Beneficiary (EMS/Hospital)	How Were These Needs Met?
Education/Training		
Equipment		
Other		

3. Administrative/Operational & Clinical:
   a. Summary the need for and outcomes for special called RAC meetings:

   b. Projected realignments of counties in trauma service area?

   c. Describe the RAC's function prior to or during trauma center designations/re-designations within trauma service area that occurred within past twelve months?

   d. Describe how the RAC administratively and operationally contributed to and participate in Injury Prevention initiatives within past twelve months. (*Provide a brief summary of no less than three quantifiable events*)

   e. Describe the most significant findings of the RAC's SQI/Performance Improvement Committee within past twelve months.

   f. To what degree were physicians in the trauma service area involved in the resolution of adverse patient care findings identified by the RAC's SQI/Performance Improvement Committee.

   g. Describe activities the RAC was involved in to assist or encourage EMS and FRO participated in the RAC within past fiscal year (i.e. teleconferencing, video/conference calls, etc.).

h. Identify problems or areas of concern identified in past twelve month that adversely impact RAC operations.

4. Is the information identified on Texas Secretary of State/Comptroller of Public Accounts (http://ecpa.cpa.state.tx.us/coa/Index.html) web site current? If not, what actions have been taken to ensure Certification of Franchise Tax Account Status (Registered Agent/Office) is current with the Texas Secretary of State/Comptroller of Pubic Accounts?

5. Issues/concerns that occurred in past twelve months that required technical assistance from the Office of EMS/Trauma System Coordination Group.

6. What method will the RAC utilize to ensure member organizations receive a copy of this Annual Report?

_____ _____
RAC Chair Date Submitted

Complete and attach to the Annual Report the following:

Attachment A – Officers/Board Members
Attachment B – Annual Bylaws Affidavit
Attachment C – Annual Regional Trauma System Plan Affidavit

Regional Advisory Council Annual Report
Report Form

Attachment A
Officers/Board Members

Name	Office/Board Position	Term	Affiliation	Telephone	Fax	Email

ANNUAL BYLAWS AFFIDAVIT

Attachment B

In accordance with Texas Administrative Code, §Rule 157.123, and Performance Measures for EMS Funding allotments, each system should establish its authority commensurate with its ability to provide trauma care.

> *The RAC shall document an annual review of its bylaws.* (§ Rule 157.123: Essential Criteria Defined. A.12)

_____ has completed an annual review and/or revision of the RAC's Bylaws with a documented date of and ratified by member organizations on _____.

A current copy of the RAC's bylaws is available for review on the RAC's web site.
[ ] Yes [ ] No

_____ Chair

_____ Date

The Annual Bylaws Affidavit is to be completed and submitted along with the RAC's Annual Report.

ANNUAL REGIONAL TRAUMA SYSTEM PLAN AFFIDAVIT

Attachment C

In accordance with Texas Administrative Code, §Rule 157.123, and Performance Measures for EMS Funding allotments, each system should establish its authority commensurate with its ability to provide trauma care.

> *The RAC shall document an annual review of regional EMS/trauma system plan.* (§ Rule 157.123: Essential Criteria Defined. A.12)

_____ has completed an annual review and/or revision of the RAC's regional trauma system plan with a documented date of and ratified by approval from member organizations on _____.

Each essential component of the plan has a revision date of:

COMPONENT	DATE
Access to the System	_____
Communication	_____
Medical Oversight	_____
Pre-hospital Triage Criteria	_____
Diversion Policies	_____
Bypass Protocols	_____
Regional Medical Control	_____
Facility Triage Criteria	_____
Inter-hospital Transfers	_____
Designation of Trauma Facilities, Planning for	_____
Performance Improvement	_____
Regional Trauma Treatment Protocols	_____
Regional Helicopter Activation Protocols	_____
Injury Prevention	_____

A current copy of the RAC's regional trauma system plan is available for review on the RAC's web site.
[ ] Yes [ ] No

_____ Chair

_____ Date

The Annual Bylaws Affidavit is to be completed and submitted along with the RAC's Annual Report.