

PCC Meeting
July 21, 2025
In-Person and Via TEAMS

Meeting Minutes and Notes

Attendance:

Representatives	Agency/Division/Program
Jim Parisi	Texas Hospital Association (THA)
Eric Epley	Governor's EMS and Trauma Advisory Council
Greg Bennett	United Ways of Texas
Dr. David Fleeger	Texas Medical Association (TMA)
Michelle Havelka Melinda Torres	Texas Commission on Environmental Quality (TCEQ)
Dr. Serena Bumpus	Texas Nurses Association (TNA)
Ginny Lewis Ford	Texas Association of Regional Councils (TARC)
Scott Smith	Texas Funeral Service Commission
John Henderson	Texas Organization of Rural and Community Hospitals (TORCH)
Jeff Hoogheem	DSHS/RLHO/CHEPR Director
Dana Birnberg	DSHS/RLHO/CHEPR PMU Director
Aimee Wong	DSHS/RLHO/CHEPR PMU
Lori Upton	Southeast Texas Regional Advisory Council
Daniel Knapp	Government Relations Specialist, DSHS
Sabrina Lee Richardson	EMT Information Specialist III/Investigator – Special Projects



Discussion Item #1 Beginning Remarks

- Welcome and introductions
 - Quorum not yet met
- Jim Parisi welcomed everyone and provided overview of agenda
- Introductions of each member present.

Discussion Item #2 – PCC Business – Jim Parisi

Quorum

- Quorum was not met, unable to vote on minutes or Vice Chair nomination
 - Tabled until next meeting
- Future meetings are scheduled for
 - October 20, 2025
 - January 20, 2026
 - April 21, 2026
- Vice Chair Updates/Voting:
 - Ginny nominated Greg Bennet. Greg declined.
 - Jim nominated Serena Bumpus.
- Serena Bumpus seconded.
- Jim Parisi recognized and thanked the members and their agencies for their efforts in the recent Central Texas flood disaster response.

Questions/Discussion:

- None

Discussion Item #3 – Whole Blood Program – Eric Epley

- GETAC pre-hospital whole blood task force received funding approval from this legislative session.
 - \$10 million approved
 - Statewide roll out
- Provided an overview of Eric Epley's background and credentials.
- Provided an overview of regional organizations and the South Texas Regional Advisory Council (STRAC) responsibilities.
- San Antonio Whole Blood Program background and origin.
- Goals of STRAC Regional Whole Blood Program



- Deployment Plan was discussed
 - The whole task force has run for 6 years in San Antonio, covering their RAC area.
 - In 2016, the blood center CEO and a field surgeon talked and began the expansion of this program.
 - Finding during Sutherland Springs results, it was brought to our attention that we had a gap in whole blood and tourniquets for this incident.
 - Program originally called "Brothers in Arms" but with the extension to O+ low titer females the name was changed to "Heroes in Arms"
 - Goals to provide resuscitation efforts at the point of injury, tackle logistics, and a "Walking Blood Bank" capability
 - Over 60 units of whole blood are in the field every day in 18 of 22 counties have at least one unit on hand any given day in Ambuses, EMS supervisory vehicles or helicopters.
 - Getting the blood centers to get on board was challenging.
 - Quarterly Regional Whole Blood Committee meetings are held.
 - They have developed a blood product transfusion record. They also have a whole blood phone app that you can use to transfer and return blood products.
- Communication plan and paperwork details were discussed.
- Rotation System details were provided. This allows for minimizing costs. Waste is less than 2 percent.
- Temperature Monitoring
 - Done via Wi-Fi for all units every 20 minutes
 - Coordinated centrally at STRAC MEDCOM
- Medical Training- provided an overview of how training is conducted, as well as the equipment used.
- Paperwork process was discussed, as well as the general process.
- Provided details and walk-throughs of the Whole Blood Phone App.
- MCI Whole Blood Pushpack- discussed details. Capable of 20 units of blood that can go anywhere in Texas within less than 2 hours. TDEM has issued a standing State Mission Assignment that is perpetual.
- STRAC website (www.strac.org/blood) has additional information as needed.

Questions/Discussion:

- John Henderson- appreciates the less than 2% wastage and free rotation, some rural hospitals in West Texas are struggling with up to 50% restocking fees for rotation to avoid waste.
- As we roll this out statewide, this should be the push. For people that need it the most are the ones furthest from the Level 1 trauma centers. Money goes live on September 1.

Discussion Item #4 – How Healthcare Coalitions Save Lives and Protect Texans – Lori Upton

- Healthcare coalitions are relied on by several organizations
 - 326 HCC developed across the nation
 - 42,128 HCC members nationwide
- With the talk of HPP cost-cutting in the future. It is important to showcase how these programs work in Texas, and it is important to continue.
- Provided background and overview of SETRAC HPP Program.
- SETRAC coalitions cover 25 counties, 277 cities, 9.3 million citizens, 187 hospitals, and 900-plus nursing homes.
- Catastrophic Medical Operations Center- provided an overview and locations of the CMOC. Discussed authority and goals
- History of activations
 - Hurricane Katrina
 - Large scale transportation and transfer of patients
 - Hurricane Rita
 - Healthcare facilities, including nursing homes, evacuated
 - Large scale transportation and transfer of patients
 - Coordination of 34 counties and 2 states
 - Hurricane Ike
 - Evacuations
 - Deployed oxygen strike teams
 - Dialysis centers were without power and water
 - Sent to hospital emergency departments
 - Transport circuit to sister locations
 - Hurricane Harvey
 - One of the largest patient movements (provided figures and details)
 - Santa Fe school shooting
 - 3rd deadliest school shooting in US
 - Provided details of the response.
 - Intercontinental Terminals Company (ITC) Chemical Farm Fire
 - responder rehab was major component of this response
 - Tropical Storm Imelda
 - Several missions.
 - COVID-19
 - Warehouse operations related to PPE
 - Overall resource requests
 - Hurricane Laura
 - General response details
 - George Floyd
 - CMOC activations
 - Winter Storm Uri

- 44 hospitals placed on internal disaster
- Disaster Portable Morgue Unit was deployed
- Travis Scott- Astroworld 2021
 - Provided RCV-Q on-scene.
- Hurricane Beryl
 - General response activities
- Hill Country Flooding
 - EMTF resources deployed

Questions/Discussion:

Question/Discussion

- The importance of the RACs does make a difference when the hospitals are struggling to have someone to rely on to assist in meeting those needs.

Discussion Item #5 – DSHS Update- EMS Update and Legislative Update

EMS Update

- EMS Registry was updated to V3.5
- Upcoming conferences were discussed
 - GETAC meeting August 20-22
 - Annual Texas EMS conference is in November in Fort Worth, TX.
- GETAC has launched the whole blood task force.
- 89th session update. Provided an overview and details of session impacts.

Legislative Update:

- Provided details and an overview of Exceptional Items, including expanded labs, as well as other items.
 - Bills filed over 9,014 filed, DSHS tracked 1,102
- Highlighted Bill- SB2312- Discussed details related to bill, which include geopolitical conflict.
 - Study drug supply chain
- Whole Blood Program- DSHS received an additional \$10M.
 - DSHS will discuss with council to determine the most cost-effective method.
 - Report is due November 1, 2026.

Questions/Discussion:

Can someone give more insight related to rural ambulance funding?

- Epley: Dudley or Butch Oberhoff from TEMSA to discuss.



- Operations are critical.
- Government affairs: it is still early, more details to come. Will keep everyone informed.

Introduced Dr. Lillian Ringsdorf as the newly appointed Regional Medical Director for the PCC. She has served as the Regional Medical Director for Region 8 since December 2012.

Updates from PCC Members

- United Ways of Texas – Mr. Greg Bennett
 - Involved in flooding response
 - UW Concho Valley have been boots on the ground since day 1 Kudos
 - United Way San Antonio is conducting fundraisers
- Governor’s EMS and Trauma Advisory Council (GETAC) – Mr. Eric Epley
 - No further updates.
- Texas Medical Association (TMA) – Dr. David Fleeger
 - Keeping up with diseases of the season, such as Measles.
 - Recent CME for providers on trauma.
- Texas Commission on Environmental Quality (TCEQ) – Ms. Michelle Havelka/Melinda Torres
 - Working with DIR on cybersecurity exercise for Executive Order GA 49
 - Responding to July flooding event
- Texas Organization of Rural and Community Hospitals (TORCH) – John Henderson
 - No update
- Texas Nurses Association (TNA) – Dr. Serena Bumpus
 - Focusing on special session
 - Texas Nurses Foundation is fundraising for nurses impacted by flooding and began giving out funds.
- Texas Association of Regional Councils (TARC) – Ms. Ginny Lewis Ford
 - Been involved in flooding response
 - Working with TDEM for future events and filing and preparing for bills being passed.
 - Question for group: behavioral health for providers and volunteers needs to be an emphasis. What are some conversations around that going forward? If not DSHS then who would be the one to contact or discuss this topic?
 - Working on hazard mitigation planning, that includes public health.
 - Working on hazardous mitigation plans due to the flooding and how to get ahead of it. Hearing tomorrow at 9 am on notification and how to fix this, for rural areas.
<https://www.legis.state.tx.us/tlodocs/89R/schedules/pdf/C2362025072309001.PDF>
 - Remark on notification impacts related to July 4 flooding incident.



- Texas Hospital Association (THA) – Mr. Jim Parisi
 - No updates
- Texas Funeral Service Commission – Scott Smith
 - Responding to July Floods incident, including fatality management
 - Texas Rangers were responsible for DNA swabbing, and that may be why they went to North Texas.

Jeff Hoogheem-

- Funding update- HPP and PHEP grants have seen reductions this year, with anticipated funding coming later. There is a significant amount of preparedness work that goes on to prepare for disaster responses. We are working with our organization with a plan on what to do if anticipated funding does not come through. Federal funding was reduced from both of our grants, HPP 33% and PHEP 28%. The remainder of the funding may be received later.
- 51% push out to the local jurisdictions for preparedness.
- Fatality management piece is part of preparedness, and funding cuts are hurting our ability to respond.

Questions-

- What can we advocate for in possible special sessions?
 - Response- there is room for that discussion. It is relevant and important.
- Is the source of money is federal? Has it been congressionally authorized, or not?
 - Response- Yes, the source of the money is federal. Has been appropriated by congress but does not think CDC and ASPR has full amounts in their budget to give to us.
- Would FY26 need to be reauthorized?
 - Response- we will see by next year. It's a 5-year project period, a budget is finalized, we will see if there is money appropriated to those agencies
- What is ballpark dollar for 28% and 33% cuts? What would the full amounts be if the state had to fill this gap?
 - Response- Level funding is about 15.6 million for HPP and about 43 million for PHEP. The reductions would be 5.1 million for HPP (33%) and 12 million for PHEP (28%).
- DSHS will be under Sunset review. Some of these items should be included in that assessment. What if federal funding was cut off?
 - Response- yes, good point. We can touch base off-line

Closing Remarks

Topics for next meeting:

- Update on special session for next meeting
- Questions related to flood response



- Serena Bumpus- can we hear a debrief of response to floods in future meetings? CHEPR will work to get in contact with her.
- Dr Ringsdorf- Region 8 preparedness and response team has been responding and working hard on fatality management. They can give a debrief on this (Sammy Sikes).

Adjourn