

**Meeting Minutes (DRAFT)**  
**Governor's EMS and Trauma Advisory Council (GETAC)**  
**May 11th, 2018**  
**8:00 AM**  
**Wyndham Garden**  
**3401 S. I-35**  
**Austin, Texas, 78741**

Disclaimer: Meeting minutes will not be official until approved at the August 24th, 2018 Governor's EMS and Trauma Advisory Council (GETAC) meeting

Video recordings of GETAC quarterly meetings may be viewed at <http://www.ustream.tv/channel/getac>. This webcast archive service is provided courtesy of the Texas EMS, Trauma, and Acute Care Foundation (TETAF).

Governor's EMS and Trauma Advisory Council member attendance at the May 11th<sup>h</sup>, 2018 meeting:

COUNCIL MEMBER NAME	YES	NO	COUNCIL MEMBER NAME	YES	NO
Barnhart, Jeffery (Jeff)	X		Harbert III LP, Jodie		X
Beeson D.O., Jeffrey	X		Isbell, Robert	X	
Clements, Michael (Mike)		X	Matthews LP, Ryan	X	
DeLoach, James (Mike)	X		Pickard RN, LP, Karen		X
Eastridge M.D., Brian	X		Tyroch M.D., Alan	X	
Faske, Sheila	X		Vezzetti M.D., Robert	X	
Greenberg M.D., Robert	X				
STAFF MEMBER NAME	YES	NO	STAFF MEMBER NAME	YES	NO
Crocker, Colin	X				
Guerrero RN, Jane G.	X				
Huss, Jon		X			
Schmider, Joseph	X				

**Welcome and Call to Order**

Dr. Robert Greenberg called the meeting to order at 8:00 AM. Dr. Greenberg:

1. Read the Vision and Mission statements;

2. Took roll and asked Council members to introduce themselves;
3. Asked for public comment and reminded attendees about the public comment sign-in sheet process.
4. Announced the GETAC Retreat would be held at the Austin Wyndham Garden Hotel on October 5<sup>th</sup> and 6<sup>th</sup>.

### **Opening Public Comment**

No public comment was given.

### **Review and Approval of Previous Meeting Minutes**

The Council approved the February 2018 Council meeting minutes.

### **State Agency Reports**

#### **Associate Commissioner Report, DSHS Consumer Health Improvement**

Jane Guerrero, RN (Director, DSHS Office of EMS/Trauma Systems Coordination) reported her office was preparing to distribute the 2016 Standard Dollar Amount (commonly referred to as 'SDA') "trauma add-on funds" to facilities. Regional Advisory Council (RACs) funding was scheduled to remain level with 2018 amounts. She also reported that although the department will undergo a "fiscal size-up" after the fiscal year ends, she did not anticipate RAC funding levels to be impacted. Almost \$446,000 in Local Project Grant monies were distributed to the RACs so far this year. A portion of the Extraordinary Emergency Fund remains unspent and Ms. Guerrero urged interested and eligible parties to apply.

Christina Coleman was introduced as the new EMS/Trauma Systems Information Specialist. Emily Hyde has moved from EMS Compliance group to a manager's position in the EMS Licensing group.

Rule revision work on the trauma, RAC, and stroke designation sections of Texas Administrative Code (Chapter 157) are scheduled to resume later this summer. Statewide stakeholder meetings to discuss revisions will be likely be held in July and August.

## **GETAC Committee Action Item Reports**

### **Air Medical and Specialty Care Transport Committee:**

Lynn Lail gave the report for the Air Medical and Specialty Care Transport Committee. The committee requested GETAC approved planning strategies for Medical Orders for Life-Sustaining Treatment and Provider Orders for Life-Sustaining Treatment (MOST/POLST) be disseminated to the RACs. Dr. Greenberg agreed and said the issue was on the agenda to be discussed further.

### **Cardiac Care Committee:**

Dr. Smalling (committee chair) gave a brief report on committee activities and an overview of their goals. There were no action items for the Council.

### **Disaster/Emergency Preparedness Committee:**

Eric Epley (committee chair) gave a brief report on committee activities. Plain language issues, Hurricane Harvey after-action reporting, active shooter response, evacuation, destination, and tracking during disasters, and special populations in disasters continue to be priorities for the group. Mr. Epley asked DSHS to try to schedule future quarterly GETAC meetings in the third week of the month. Mr. Epley said to expect a workgroup report on the use of lights and sirens by EMS personnel during emergency response and transport situations at the November 2018 GETAC meetings.

Dr. Greenberg asked Mr. Epley if someone from the End Stage Renal Disease (ESRD) group would be willing to address Council in August 2018. Mr. Epley agreed to ask his ESRD contact if she would be willing.

There were no action items for the Council.

### **EMS Education Committee:**

No report was given. There were no action items for the Council.

### **EMS Committee:**

Committee chair Dudley Wait said workgroups examining both EMS agency response standards where community-level contracting was concerned and the use of lights and sirens by EMS personnel during emergency response and transport situations were operational. The contractual workgroup should likely have a report for Council by November. Fatigue issues in EMS has also been a topic of discussion at the committee level and recommendations to Council may be forthcoming.

There were no action items for the Council.

### **Injury Prevention & Public Education Committee:**

Shelli Stephens-Stidham (committee chair) asked to present core component injury prevention recommendations for Level III and IV (and potentially undesignated) trauma facilities to the Council at the August 2018 Council meeting. Council agreed.

Ms. Stephens-Stidham announced future workday meeting dates for July San Antonio (July 27, 2018) and Corpus Christi (October 26, 2019).

### **EMS Medical Directors Committee:**

Dr. Jeff Jarvis (committee chair) gave an overview of committee activities. According to Dr. Jarvis, the EMS Medical Directors Committee discussion regarding MOST/POLST raised two questions:

*1. Considering a situation in which paramedics begin resuscitation of a patient (no Do Not Resuscitate [DNR] form/bracelet, family, or physician present) and reach the point at which, by protocol, they consider further resuscitation to be futile, can the medical director write a protocol to authorize the paramedics to terminate resuscitation by protocol without making contact with a physician for on-line medical control?*

*2. Considering a situation in which a paramedic responds to a patient whom they determine to be in cardiac arrest, without a valid Texas Out-of-Hospital DNR form/bracelet, and no family present or available, but with a Texas MOST form indicating a desire to not have CPR performed, can the medical director write a protocol to authorize the paramedic to recognize the MOST as an expression of the patient's wishes and not begin resuscitation without making contact with a physician for on-line medical control?*

The Council moved to forward the questions to the DSHS. Jane Guerrero said she would seek guidance from DSHS legal and the Texas Medical Board.

Dr. Jarvis updated Council on the National Highway Safety Administration's *EMS Agenda 2050: Envision the Future* draft document.

### **Pediatric Committee:**

Sally Snow, RN, (committee chair) reported the committee continued to help the EMS for Children (EMSC) State Partnership recruit facilities for the Voluntary Pediatric Recognition pilot program. She said the work group investigating the feasibility of implementing a cloud-based imaging service statewide to facilitate sharing of images between referring and receiving facilities was still under development.

Ms. Snow requested the Council approve the following recommendation regarding Stop the Bleed training in all Texas schools:

1. *All Texas school disaster management plans include Stop the Bleed training*
  - a. *Provide Stop the Bleed training to all staff, faculty, and volunteers*
  - b. *Provide Stop the Bleed training to eligible students*
  - c. *Support trainers for Stop the Bleed programs to ensure sustainability and reinforcement of skills.*
2. *Bleeding Control Equipment will be located at schools and during sponsored activities*
3. *Schools should submit grant applications to provide for Stop the Bleed training and equipment*
4. *School systems should establish ongoing funding for Bleeding Control Equipment.*

Council approved the wording. Sally Snow agreed to report progress to Council at the February 2019 GETAC meetings.

**Stroke Committee:**

Neil Rutledge, M.D., (committee chair) reported the committee was developing guidance on exclusions to bypass in chronically debilitated patients suspected of having acute Large Vessel Occlusions. Dr. Rutledge asked if the issue could be added to the August 2018 Council agenda for review. Dr. Greenberg agreed.

Dr. Rutledge asked the Council to recommend the National Stroke Association's 2018 Face-Arms-Speech-Time "FAST" Program as an informational resource. The Council moved to approve the request.

Dr. Rutledge asked that the internet application "Stroke Scales for EMS" be posted to the DSHS webpage as an informational resource. Colin Crocker agreed to request permission to post linking information about the app to the webpage.

### **Trauma Systems Committee:**

Jorie Klein, RN (committee chair) reported ongoing efforts to collaborate with the Texas & EMS Trauma Registries and fill data requests more effectively but raised concerns about the overall integrity of registry data.

Ms. Klein reported the Stop the Bleed coalition approved by Council in February met on Thursday, May 24<sup>th</sup>. She challenged all the RACs to be more consistent about reporting bleeding control training numbers.

There were no action items for the Council.

### **GETAC Liaison Summary Reports**

#### **Texas EMS, Trauma, and Acute Care Foundation (TETAF):**

Dinah Welsh (Chief Executive Officer of TETAF) updated the Council on recent board personnel changes and disseminated copies of the *TETAF Impact Report* to the audience and Council members. Ms. Welsh announced the creation of a new TETAF website focused on maternal and neonatal intensive care ([texasperinatalervices.org](http://texasperinatalervices.org)).

Ms. Welsh reported TETAF began surveying NICU centers in November and would likely be completed by June 2018. She stated 112 neonatal intensive care units had been surveyed as of May 2018.

#### **Emergency Medical Services for Children (EMSC):**

Joseph Santos gave an update on EMSC activities, including the Pediatric Readiness Program. Mr. Santos reported 12 hospitals would be selected for the pilot program but only one (Covenant Children's) has volunteered to participate as of May 2018. He encouraged any facility wishing to participate should contact EMSC.

Mr. Santos announced grant funding from the Health Resources & Services Administration has been awarded to EMSC for another four year cycle. Plano Fire and Rescue was named the EMSC Crew of the Year for 2017.

Mr. Santos agreed to update the Council on both facility and EMS recognition efforts in August 2018.

#### **Preparedness Coordination Council:**

No update given

### **Texas EMS & Trauma Registries:**

Dan Dao (Manager) gave a brief explanation of the potential reasons behind missing data and data fidelity issues raised earlier by Jorie Klein. He said a new registrar had been hired and the DSHS's ability to address fidelity and missing data issues should improve. Mr. Dao also said persistently slow data upload speeds were still an issue, but solutions were being explored with the state's software vendor and submitting entities.

Mr. Dao reported two data requests for Council's approval. The first request was from the Pediatric Committee and focused on patient demographics of hospitals receiving pediatric transfers. The second request was a joint solicitation from the Pediatric Committee and the Trauma Systems Committee concerning possibly identifying cases of pediatric abuse in 2015 state trauma data, via specific ICD-9 codes. Council motioned to approve both requests.

Mr. Dao updated the Council on the issue of whether or not free-standing emergency departments were required to report data to the registry. Per statute (Title 25, Chapter 131 "Freestanding Emergency Medical Care Facilities"), free-standing emergency medical care facilities are required to report:

- (1) The death of a patient while under the care of the facility;
- (2) a patient stay exceeding 23 hours; and
- (3) 9-1-1 activation.

Mr. Dao finished his report by giving two presentations. The first detailed the specific elements the Texas EMS & Trauma Registries collect and their corresponding ICD-10 codes. The second presentation examined shock data as compared with all other trauma records collected by the registries.

### **GETAC Mental Health Task Force:**

Jeff Barnhardt (chair) said the group met earlier in the week (Thursday, May 24th) and had guests from the Texas Medical Association and the Texas Hospital Association. Based on feedback from the meeting, Mr. Barnhardt suggested the task force become a formal GETAC committee. The Council decided the issue warranted further discussion and will continue to be explored at future GETAC meetings.

### **Other Council Actions/Comments:**

Dr. Brian Eastridge gave an update on agenda item #8 *"...the proposed joint effort (the Trauma Systems Committee, the EMS Committee, the Disaster & Emergency Preparedness Committee, the Medical Directors Committee, and the Pediatric Committee) to develop a grass-roots effort to prepare for and react to mass casualty incidences and shootings/active shooter response."* The group had their inaugural meeting earlier in the week on Thursday. Dr. Eastridge will report on this workgroup's efforts in greater detail at the Council meeting in August 2018.

Eric Epley asked to update the Council on the RAC Data Collaborative effort at the August 2018 Council meeting. Council agreed and Dr. Greenberg instructed the issue be added to the August 2018 Council agenda.

Dr. Greenberg noted the second quarterly GETAC meeting in 2019 will be moved from May to June to better accommodate legislative and attendee schedules. The third quarterly meeting will also move from August to September, starting in 2019.

Mr. Dudley Wait reported on the Mental Health Access for First Responders Initiative working group. The workgroup is chaired by HHSC and is comprised of a variety of first responders. Notable areas of focus include first responder access to mental health care, feasibility of mental health training during the certification process, and insurance plan sufficiency for mental health coverage. A report is due to the Texas legislature in January 2019. Mr. Wait and/or Rickey Reeves will keep the Council updated on workgroup progress.

Jessica George of the Texas Suicide Prevention Council (TSPC) gave a report of the TSPC's structure and activities to the Council. Miss George asked if GETAC could help the TSPC obtain suicide data from the state registry. Dan Dao said he would be willing to work with Ms. George on this request and Council approved. Jessica George agreed to report on any data findings at the November 2018 Council meeting. Per Council's February 2018 request, future TSPC reports will be added to the "GETAC Liaison Summary Reports" section of Council agendas.

Dr. Greenberg gave a brief presentation on the utility of MOST/POLST forms and how those forms are completed, stored, and used in different health systems. The chair of the MOST Coalition has agreed to present at both the 2018 Texas EMS Conference and the November 2018 Council meeting.

**Closing Public Comment:**

No public comment was given.

**Adjournment:**

There being no further business, Dr. Greenberg adjourned the meeting at approximately 11:30 AM.