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Governor's EMS and Trauma Advisory Council (GETAC) Meeting**

**MEETING MINUTES**

Governor's EMS and Trauma Advisory Council (GETAC)

Friday, February 26, 2010, 9:05 a.m. – 12:00 p.m.

**Call to Order:** Chair Vance Riley called the meeting to order at 9:05 a.m. Members present included: Vance Riley, Chair; Mike Click, RN; Linda Dickerson; Luis G. Fernandez, MD, FACS; Jodie Harbert III, LP; Ryan Matthews, LP; Donald Phillips, DO; Shirley Scholz, RN, CCRN, EMT-P; Joan Shook, MD; John D. Smith; and Pete Wolf, EMT-P. Members absent: James Randall Loflin, MD; Ronald Stewart, MD; and Marti VanRavenswaay.

**Approval of Minutes:** *A motion was made by Shirley Scholz and seconded by Jodie Harbert to approve the meeting minutes from November 23, 2009. All council members were in favor; the motion passed.*

**Chair Report:** Newly appointed chair, Vance Riley, welcomed everyone to the meeting and introduced recently appointed GETAC members Linda Dickerson, General Public member; and Donald G. Phillips, DO, EMS Medical Director member. Riley formally introduced himself to the council and the audience as the new GETAC chair.

**Department of State Health Services (DSHS) Staff Reports**

Kathryn C. Perkins, Assistant Commissioner for the Division of Regulatory Services, began her report with an update on the requested budget cuts for state agencies in Texas. In January, all state agencies were asked to propose a five percent budget cut from fees and revenues within their departments. Regulatory Services suggested a number of changes, including reducing the uncompensated trauma care account by \$5 million a year. A hiring freeze was also demanded throughout state agencies as part of the budget cuts. Because Regulatory Services had been approved to hire new positions as part of the exceptional items request, cutting these positions first helped fulfill the request. We are still asking to fill empty positions that weren't part of the

exceptional item requests, including inspectors, investigators and EMS positions. It hasn't been determined how long this hiring freeze will last, but updates will be presented as they come.

Jane Guerrero, Director of the Office of EMS and Trauma Systems Coordination, reported on the progress of the American College of Surgeon (ACS) trauma survey for the state of Texas. The dates for this survey will be May 18-21, 2010, in conjunction with the GETAC committee and council meetings. The GETAC meetings will be concurrent with the survey to allow stakeholders and committee members the opportunity to provide statements and figures to the ASC survey team without necessitating a second round of meetings.

Ms. Guerrero reported that 251 Texas hospitals had currently achieved trauma designation status. The department also reported that 25 Texas facilities have received stroke certification and 15 more are pending approval.

Ms. Guerrero also informed the group that DSHS has been working with the Texas EMS, Trauma, and Acute Care Foundation (TETAF) on developing support for a stroke level III designation program. TETAF has submitted their plan and revisions are being made.

Adolfo Valadez, MD, MPH, Assistant Commissioner of Prevention and Preparedness, briefly discussed the H1N1 virus in Texas and outlined the progress the department has made monitoring the virus. H1N1 vaccinations are still available and the department will continue to monitor and evaluate this virus until its planned demobilization, scheduled in March.

Dr. Valadez also talked about the budget cuts his department is making, but he emphasized that the Trauma Registry budget would not be touched. More information on its progress and the next steps will be available on their website. The vendor selection process is planned for May and a selection committee is being drafted. The anticipated date to implement the new Trauma Registry, with necessary training, is January 1, 2012.

## **Standing Committee/Task Force Reports**

**Air Medical Committee** – Chair Shirley Scholz, RN, presented the committee report. The Air Medical licensing workgroup presented recommended changes to DSHS rules 157.12 and 157.13. Some of the recommendations included: concerns about the fixed-wing section verbiage requiring stretchers to be removable; to be less specific about the type of equipment listed; address extended shifts and defined rest periods; and the need to list specific ethical practices rather than stating providers “must demonstrate ethical practices.” The committee decided to present a motion to the council to edit language in the draft rules for 157.12 and 157.13, as requested during the meeting discussions. Future agenda items include: Memorandum of Agreement Disaster Response progress; report from Texas Association of Air Medical Services (TAAMS) on the disaster plan as it pertains to Air Medical; review potential revisions to DSHS rules 157.12 and 157.13; and the 12-lead capability on aircraft as recommended by the Cardiac Care Committee.

**Cardiac Care Committee** – In the absence of Chair David Persse, MD, committee member Loni Denne presented the report. The committee would like to see all Regional Advisory Councils (RAC) develop a cardiac care committee that would focus on identifying cardiac acute care facilities, develop EMS transportation guidelines, and develop minimum data sets for ST-Segment Myocardial Infarction (STEMI) patients. It was brought to the committee’s attention that funding would need to be identified for RACs to develop a cardiac care committee and TETAF has offered to assist with this. The motion was made that all RACs should develop a cardiac care committee and should be tasked with

- identifying cardiac acute care facilities in their jurisdiction;
- developing EMS transportation guidelines to facilitate transportation of ST-Segment Myocardial Infarction (STEMI) patients to appropriate facilities;
- establishing a minimum data set to be reported to EMS provider agencies for continued recognition as a 24/7 cardiac cath center;
- encouraging all ALS ambulances that respond to 9-1-1 calls to have prehospital 12-lead ECG equipment.

**Disaster/Emergency Preparedness Committee** – Chair Eric Epley presented the committee report. The committee reviewed the Regional EMS Medical Director’s Memorandum of Understanding (MOU) that DSHS has developed to allow the Regional Medical Operations Centers (RMOC) to provide EMS medical direction during times of disaster if an EMS provider is unable to contact his or her primary medical control. The Ambulance Staging Logistics workgroup presented a report focusing on oxygen needs in disasters. These issues should be resolved by the 2010 hurricane season. A report on the TAAMS Air Medical Disaster Plan was presented, and they have developed a helibase typing document that allows air medical providers and coordination centers to identify types of airports to be utilized during rapid responses outside of the normal coverage areas. This document will be submitted to GETAC for review and possible approval for DSHS Multi-Agency Coordination Center (MACC) usage during the upcoming hurricane season. A draft document is expected to be available by May from the workgroup addressing equipment, staffing and capability needs. The committee is presenting the DSHS Ambulance Utilization Plan draft to GETAC for formal approval. It was agreed on by the committee that this document needs to be subject to GETAC’s annual review. The concept for the Regional Emergency Medical Task Force was also discussed. A workgroup has been developed to determine specific needs and more information will be available at the next quarterly meeting.

**Education Committee** – Chair Jodie Harbert presented the committee report. The EMS Education Training Manual is taking a little longer than anticipated, and the committee is asking educators and coordinators for feedback and assistance in completing this task. The committee continues to do research in EMS education and is working on providing a review process on different types of research. The Education Committee will continue to assist paramedic programs in the accreditation process. A list of mentors is being developed to work with programs going through the accreditation process. The next scheduled meeting will be April 7, 2010; location to be determined.

**EMS Committee** – Chair Dudley Wait presented the committee report. Larry Rascon was introduced to the committee as the newly appointed committee member for 2010. Tony Gilchrest from EMS for Children (EMSC) gave a brief presentation on the group’s current projects and

activities. A pediatric trauma symposium will be held in April. EMSC Day will be celebrated during EMS Week, and the organization is looking for stories and nominations for the EMSC Crew of the Year. The EMS Committee was asked to work with the Education Committee to sponsor a group presentation at the Texas EMS Conference to present facts and information concerning the paramedic accreditation program. The committee also received an update on DSHS rules 157.36 and 157.37 regarding certification and discipline actions after the legislative changes. A letter regarding how DSHS is going to interpret some of the legislative language will be presented at the council meeting. The Drug Enforcement Administration (DEA) and Texas Department of Public Safety (DPS) presented information to the committee in January. From this presentation, the committee created a workgroup to develop a white paper regarding narcotic diversion issues. Lastly, the committee reviewed the revised EMS County Reporting Process for 9-1-1 Providers report. The original concept failed due to excessive work from the county's perspective, but the committee will republish the form with revisions by the next scheduled meeting. The next EMS Committee meeting is March 26, 2010, in Austin, at the Austin Learning Resource Center.

**Injury Prevention Committee** – Chair Rick Moore presented the committee report. A presentation on child fatality review teams was available at this meeting. The committee discussed and supported the safe sleeping initiatives as well as the House Bill (HB) 1510 from the 81<sup>st</sup> Texas Legislature. There were discussions on the need for geriatric fatality review teams, and the results of the injury prevention workforce survey were reviewed. A discussion on statewide anoxic brain injury prevention and improved central nervous system injury recovery methods took place, and Mothers Against Drunk Driving (MADD) requested the committee's support of a sobriety checkpoints proposal.

**Medical Directors Committee** – In the absence of Chair Steve Ellerbe, DO, committee member Donald Phillips, DO, presented the report. The committee reviewed the qualifications and process for the proposed Medical Directors Registry. The committee talked with TETAF regarding the Comprehensive Clinical Management Program (CCMP), and a survey is in progress to obtain more information concerning CCMP. A recommendation from the committee was submitted concerning AEDs. It is difficult to obtain specific information from an AED

because the various programs are incompatible. The committee would like to work with DSHS on this issue and will provide an update as new information is discovered.

**Pediatric Committee** – Chair Joan Shook, MD, presented the committee report. She began her report with the introduction of new committee members Charles Jaquith, Juan Juarez, MD, and Vern Walker; and presented committee liaison reports from the committee members. The EMSC partnership grant report was presented by Tony Gilchrest, including the trauma symposium in April and a sample survey of EMS providers, focusing on 9-1-1 providers only. Ambulance equipment guideline recommendations were looked at, and the group endorsed this document and requested it be posted on the DSHS website to replace the 2006 version. Editorial changes for the statement of purpose were presented at the meeting, and the current version of the statement is available on the DSHS website. Any additional changes or recommendations are welcomed at this time. The National Surveillance Database participation was also discussed and new information was uncovered. There were several attempts in previous legislative sessions to amend the law to allow the use of patient identifiers for the purpose of linking data with other databases. The last attempts were not successful, but the committee is expecting to try again in the 2011 legislative session. The committee feels strongly that EMS should be able to administer the patient's prescribed medication, but there are some barriers. It was agreed upon that education about this topic would need to be available for the EMS community, and the committee will return to this issue at the next scheduled meeting. The group strongly endorses the need for level III pediatric trauma centers in the trauma system and groups such as TETAF and CHAT are assisting with this.

**Stroke Committee** – Chair Neal Rutledge, MD, presented the report. DSHS provided an update on the approved organization to conduct Level III stroke surveys and an update on the Joint Commission certification which are in progress. TETAF has been working with DSHS to complete the survey process and finalize the presented draft. If completed, this will be presented in September 2010. There are 25 to 30 state-certified centers and this number continues to rise. The committee will ask the council to recommend that DSHS perform a survey on all RACs concerning their transportation plan for stroke patients with the rules listed in 157.133 (t).

**Trauma Systems Committee** – In the absence of Chair Ronald Stewart, MD, committee Vice-Chair Jorie Klein presented the report. She began with a summary from Texas EMS, Trauma, and Acute Care Foundation (TETAF) and an update on the Texas Driver Responsibility Act. The committee agreed to ask TETAF to work with stakeholders to support this bill. The American College of Surgeons (ACS) Trauma Systems Consultation will happen on May 18-21, 2010, which will fulfill the reporting requirement from Senate Bill 1-Rider 90 of the 81st Texas Legislature and will provide an assessment of the need for additional Level I and Level II trauma facilities. House Bill 1357 of 81st Texas Legislature, 2009 related to regulating Freestanding Emergency Medical Care Facilities was reviewed, and the committee requested that participation in a designated RAC, if applicable, be included in the requirements for qualifying as a Freestanding Emergency Medical Care Facility.

**DSHS Preparedness Coordination Council** – No report

**Traumatic Brain Injury Advisory Council** – No report

**DSHS Hospital Licensing Rules Review Workgroup** – No report

**Texas EMS, Trauma, and Acute Care Foundation (TETAF)**– Diana Welsh, CEO of TETAF, informed the group that the foundation has been involved in writing letters concerning DSHS budget cuts and will continue to be active as needed. TETAF is putting together a Trauma Leadership summit in Austin. The purpose of the summit is to bring leaders of EMS and trauma together with state leaders. TETAF is working with the Office of EMS/Trauma Systems trauma designation coordinators on level III and level IV surveys and on the draft survey process for stroke designation for level III. A survey is available for input on CCMP, and TETAF would like to be the designated CCMP surveyor for the state. Welsh also wanted to remind everyone of the conference calls that are available on the first Wednesday of every month. The Trauma Registry is still a big concern of the foundation, and it will continue to be active in the development process of the new system.

### **General Public Comment**

General public comments included: agreement with the Cardiac Care Committee action item recommendation and the need to find funding to move this action along; the possibility of rewording the Cardiac Care Committee recommendation; and gratitude for the certificate presentation for those that responded to the Fort Hood event.

### **Action Items**

*A motion was made by Joan Shook, MD, and seconded by Luis Fernandez, MD, that all Regional Advisory Councils should:*

- *develop a cardiac care committee tasked with identifying cardiac acute care facilities in their jurisdiction;*
- *develop EMS transportation guidelines to facilitate transportation of ST-Segment Myocardial Infarction (STEMI) patients to appropriate facilities;*
- *establish a minimum data set to be reported to EMS provider agencies for a facility to be recognized as a 24/7 cardiac cath center;*
- *encourage all ALS ambulances that respond to 9-1-1 calls to have prehospital 12-lead ECG equipment.*

*A friendly amendment by Pete Wolf was made to include air ambulances as well. This friendly amendment was accepted by Luis Fernandez, MD. The motion passed unanimously.*

*A motion was made by Shirley Scholz and seconded by Pete Wolf to support the Texas Association of Air Medical Services (TAAMS) helibase typing document, and to forward it to DSHS Multi-Agency Coordinating Center (MACC) and Governors Division of Emergency Management (GDEM) for consideration for use during the 2010 hurricane season. The motion passed unanimously.*

*A motion was made by Luis Fernandez, MD, and seconded by Shirley Scholz to support the DSHS 2009 Ambulance Utilization Plan draft as presented and recommend an annual review at the beginning of each calendar year. The motion passed unanimously.*

*A motion was made by Mike Click and seconded by Shirley Scholz to recommend that DSHS survey RACs' stroke transportation plans with rules listed in the DSHS rule for Title 25 of Texas Administrative Code, Chapter 157, Section 157.133-Requirements for Stroke Facility Designation, section (t). The motion passed unanimously.*

*A motion was made by Luis Fernandez, MD, and seconded by Joan Shook, MD, to have the council request the assistance of an assigned workgroup to mitigate the recent criticism regarding the Texas Driver Responsibility Program. The motion passed unanimously.*

*A motion was made by Luis Fernandez, MD, and seconded by Jodie Harbert to support the recommendation to require free-standing emergency medical care facilities participate in their respective RACs and have regional transport protocols established. The motion passed unanimously.*

*A motion was made by Mike Click and seconded by Ryan Matthews to accept the proposed GETAC meeting dates for 2011 as follows: February 23–25, 2011; May 11–13, 2011; August 17–19, 2011; and November 20–22, 2011, in conjunction with the Texas EMS Conference in Austin. The motion passed unanimously.*

*A motion was made by Mike Click and seconded by Pete Wolf to allow DSHS to start the process to readopt the following DSHS rules in Title 25 of the Texas Administrative Code (TAC):*

- *Section 157.1 – Purpose;*
- *Section 157.2 – Definitions;*
- *Section 157.3 – Processing EMS Provider Licenses and Applications;*
- *Section 157.4 – Audits; and*
- *Section 157.5 – Rule Exemption Requests.*

*The motion passed unanimously.*

**Meeting dates in 2010:** May 19-21, 2010, in Austin; August 18-20, 2010, in Austin; and November 20-22, in conjunction with Texas EMS Conference in Austin.

**Adjournment:** The meeting was adjourned at 12:00 p.m.