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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 27, 2009, 9:05 a.m. – 12:36 p.m.

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

**Approval of Minutes:** *A motion was made by Vance Riley and seconded by Luis G. Fernandez, MD, to approve the meeting minutes from November 22, 2008. All council members were in favor; the motion passed.*

**Chair Report:** Interim Chair Pete Wolf welcomed everyone to the meeting and announced the two new GETAC committees: Disaster/Emergency Preparedness Committee and Cardiac Care Committee; thus, GETAC committees now total 10. Mr. Wolf introduced the chairs for the new committees: David Persse, MD, for the Cardiac Care Committee and Eric Epley for the Disaster/Emergency Preparedness Committee. He also introduced the new chairs appointed to existing committees: Dudley Wait for the EMS Committee and Rick Moore for the Injury Prevention Committee.

Mr. Wolf asked for input from the public and the council concerning the recent changes to scheduled meeting times for committees. He also referred to the procedural rules and recommended the council review them once again for possible changes.

Mr. Wolf also informed the council and stakeholders of his conversations with the Governor's Office concerning selections for the replacement of the council chair. No information or selection has been presented at this time.

### **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 legislative session and its progress. The bill filing process has been rather slow, but the deadline for submitting bills is March 11, 2009, and she assumes that as the deadline approaches, more activity will be seen. DSHS has placed a request that GETAC council members be reimbursed for travel, and this request was included in the base bill. It will have to remain the final appropriation bill in order to pass. The second item requested by DSHS was monies received above the bi-annual revenue account from last year (approximately \$23 million) to be available. This request was added to the base bill as well. The appropriation in the uncompensated trauma care account is estimated to be \$74 million.

Another issue for this division is the requested exceptional item for \$20 million to add 133 new full-time positions to five regulatory strategies; this exceptional item will be further reviewed.

Ms. Perkins pointed out to stakeholders key bills to watch during the legislative session. Senate Bill (SB) 492 prohibits sex offenders from EMS certification. Based on the language, this bill would include current EMS personnel and would not allow them to continue certification. Other bills to watch include: House Bill (HB) 509, 823, which is related to drawing blood; HB 846, which would prohibit the department from requiring people to provide criminal history that has already been provided; SB 896, which would repeal the driver's responsibility program, a major funding source for the uncompensated care fund; HB 1310 is about free standing emergency rooms; SB 736 would sweep balances and fees, which are used to balance the budget and go into general revenue. The stroke bill (157.133) went to council and will soon be in public comment.

Ms. Perkins announced that the Office of EMS/Trauma Systems has a Program Specialist III position open. This position would mainly correspond with the Regional Advisory Council (RAC) groups. Interested parties should contact the office for more information.

Adolfo Valadez, MD, MPH, Assistant Commissioner of Prevention and Preparedness, introduced Lucinda Suarez, PhD, the newest member of the Environment Epidemiology and Disease Registries. Dr. Suarez will be working with Texas EMS, Trauma and Acute Care (TETAF) for feedback on problems with the current trauma registry. Dr. Suarez informed the council and stakeholders of the progress that has been made with the current trauma registry. With the assistance of Texas Department of Transportation (TxDOT), some of the data reports are now functioning and retrievable. A steering committee, which consists of the Chief Financial Officer (CFO), Chief Operations Officer (COO), Assistant Commissioner for the Regulatory Services and Prevention and Preparedness, Director of Information Technology (IT), legal representation and Governmental Affairs representative, is in place. The next step is to find an actual replacement for the Trauma Registry. This will be done by reviewing possible vendors using a vendor selection committee, and then assessing what a functional registry would look like. A proposal has been submitted to TxDOT to continue the progress in three phases for the next three years.

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

**Air Medical Committee** – Chair Shirley Scholz, RN, reported the committee discussed several topics. The committee suggested that safety initiatives developed by the Texas Association of Air Medical Services (TAAMS) should be implemented as soon as possible. These programs have minimal or no cost, and the committee will be looking for support from the Texas Hospital Association (THA), the EMS Committee, GETAC, and other related groups. The National Transportation Safety Board (NTSB) webcast hearings, which took place February 3-6, 2009, are now available online at [www.nts.gov](http://www.nts.gov) and are open for public comment. The committee would like to gather clinical data and studies that are currently being conducted by the Regional Advisory Councils (RAC) and share their findings with other Texas stakeholders. The committee would like to work on developing “best practices” from these findings and determine whether significant impact is being made as a result of these studies. Lastly, the committee was introduced to House Bill (HB) 978; the purpose of this bill is to provide regulatory control for the states. The National Association of State EMS Officials (NASEMSO) and the American

College of Emergency Physicians (ACEP) have published “white papers” on this topic to support the unnamed bill. Future agenda items for the committee are to develop work groups to address clinical issues, safety issues, medical operations, Federal Aviation Administration (FAA) preemptions, Federal Airline Deregulation Act of 1978, the Commission on Accreditation of Air Medical Services (CAMTS) standards, and safety initiatives developed by TAAMS. The committee would also like to continue discussions on NTSB hearing reports; alternative to CAMTS survey process; joint surveys by FAA, DSHS and other entities; and HB 978 and its progress.

**Cardiac Care Committee** – Newly appointed Chair David Persse, MD, introduced the newly formed committee to stakeholders. The committee has been asked to develop a charge for future meetings and to discuss the structure of GETAC and its functions in the state. Dr. Persse also reminded new committee members to complete the required video training provided by the Office of Attorney General. General public comments encouraged the Committee to strive to provide common definitions and other standardizations. The stakeholders described the current status of existing cardiac/ ST-Segment Elevation Myocardial Infarction (STEMI) care in the RACs. They also encouraged data collection along with increased involvement of non-trauma center hospitals. Topics that the committee would like to discuss at the next scheduled meeting include drafting a charge and a mission statement, organizing an information session with DSHS to better educate the committee about RACs and GETAC and possibly gathering information from the American Heart Association (AHA) on Mission: Lifeline and other applicable resources.

**Disaster/Emergency Preparedness Committee** – Newly appointed chair Eric Epley began his report with a discussion on integrating the Memorandum of Agreement (MOA) for EMS personnel with the MOA for ground ambulances. The committee discussed possibly adding an MOA contract to the provider licensure application, since providers are submitting applications on a routine basis. The Preparedness Division has approved eight ambulance strike team leader courses and will be making these available in the next two to three months. In the next committee meeting, the members will be deciding the rotation of these classes and who should be contacted for the courses. The committee was presented with an update from Texas Intrastate

Fire Mutual Aid System (TIFMAS). TIFMAS supported the current system of management of EMS assets, but expressed frustration with the methodology for calling up needed assets and how they were utilized. TIFMAS strongly recommended DSHS consider a regional approach, so that companies approached by the state could better coordinate through a central regional command. The Disaster/Emergency Preparedness Committee developed a draft of a new EMS regional command last year, but it was not utilized. It will present this method and practice the command system this year in the event of a disaster. The TAAMS group is putting together a disaster response capability in order to provide more medical assets in events of disaster or emergency. There was a question on their part of the MOA, especially with the fixed wing and specialty teams.

The committee will be reviewing the recommendations that came to GETAC in May 2007. Mr. Epley feels that many of these recommendations have been met and will refine the list to ensure that the items are still applicable and should still be completed. The committee will be meeting on a monthly basis starting March 25, 2009, in conjunction with the Homeland Security meeting held in San Antonio. Meeting place and time have not been officially set, but details will be sent to DSHS to announce. The committee received an update from Ray Apodaca on the progress of the statewide patient tracking system. Mr. Apodaca will meet with the Governors Division of Emergency Management (GDEM) with Chief Jack Colley on this topic. The possibility of having a ?MG ? representative on the HHSC Region 6 Ambulance workgroup was discussed with the EMS medical directors. The current Federal Emergency Management Agency (FEMA) contractor, which is American Medical Response (AMR), has expressed interest in initiating federal conference calls as a part of a plan to ensure consistent protocols are being practiced throughout the states AMR contracts with. Discussions on ambulance staging were brought up, and the committee has created a template for how many people would be necessary, the scope, how many vehicles are needed, and so on for disaster staging. The Texas WebEOC Interoperability project is moving forward. Multiple improvements have been made, which will be presented at the planned rehearsal drills.

**EMS Committee** – Newly appointed Chair Dudley Wait reported that the committee discussed several ongoing topics. The prehospital intubation/rapid sequence intubation (RSI) issues were

presented and the committee agreed a meeting should be organized soon. The committee would like to invite the Medical Directors Committee and the Education Committee to participate in this conference. A work group was formed to organize the meeting, and details will be provided at the next committee meeting. Title 25 of Texas Administrative Code, Chapter 157, Section 157.37, entitled Certification or Licensure of Persons with Criminal Backgrounds, was discussed with regard to removing EMS from Chapter 53 of Texas Occupations Code, Consequences of Criminal Convictions, and placing the authority for determining what, if any, criminal backgrounds would be barred from EMS certification into the DSHS rule-making and regulation process. There was a discussion regarding Senator Nelson's bill, which would prevent any person listed as a sexual offender from being EMS certified. The stakeholders pursuing this bill are talking with Senator Nelson's staff about combining her bill with the occupations code bill once it is introduced. This was closed and the committee stated they would continue to follow its progress through the legislative process. The ongoing agenda item regarding EMS as an essential service was discussed. Along with the assistance of DSHS, the committee presented the RACs with a project to better evaluate EMS services available in Texas. The assignment is due back to the committee at the next scheduled GETAC meeting in May. Chair Dudley Wait also talked about legislation the Texas Ambulance Association is backing that would require every county in the state to prepare an annual report on what level of EMS is provided in all areas of their county and to publish that report locally and with DSHS.

The November meeting was reviewed and well as the approval of GETAC to review Section 157.11 by the EMS Committee. This was discussed at the working meeting in January, and the possibility of new language or updated language should be explored in certain areas. During this discussion, DSHS Director of EMS and Trauma Systems Coordination, Jane Guerrero, answered several questions regarding rules and how DSHS handles them. She stated there were two reasons for a rule to be "opened": 1) legislative change that forced wording to be changed (i.e., Epi-pen legislation last session) and 2) rules are opened every four years from the date of last revision for review and updating. Several questions were asked regarding possible other reasons for rule revision. It was agreed upon by the committee to continue to work on wording and language for Rule 157.11 over the next couple of quarters and take the recommendations to GETAC for approval as recommendations to DSHS. During public comments, the committee

discussed meeting between the regular quarterly meetings. Mr. Wait stated he would publicize possible dates after the Education Committee determined theirs.

**Education Committee** – Chair Jodie Harbert, LP, reported the committee met in Austin on January 30, 2009, as a work group to discuss the posted agenda items. The teaching and training of EMS education courses in languages other than English was discussed, but because of draft House Bill 1035, this method may not be an option. The EMS Medical Directors course was discussed, and the Committee decided it should present information to the Medical Directors Committee as well as offer the class at the EMS Conference in 2009. Member Joe Hamilton created binders for committee members to better keep track of all the bills that are filed or will be filed in the legislative session. With this in mind, member James Shiplett mentioned that SB 291 should be monitored since it deals with higher education programs. The next workshop meeting will take place March 27, 2009, in either Midland or Bryan from 9:00 a.m. to 5:00 p.m. Scheduling future dates, in order to plan accordingly, was brought up in public comment. Scheduling will be discussed at the next meeting.

**Injury Prevention Committee** – Newly appointed Chair Rick Moore presented summaries from the work groups created under the Injury Prevention Committee: Research and Surveillance, Legislative Affairs, Education and Programs, and Internal/External Communications. Public comments included personal experiences with impaired drivers and the need for legal documentation training to assist EMS and nursing personnel in the use of records for offender prosecution. The committee was in favor of the Research and Surveillance recommendations but had a few suggestions for improvement that would be submitted to member Rohit Sheno for modification. The committee accepted the Legislative Affairs report, which included the recommendation of having Injury Prevention members read the State and Territorial Injury Prevention Directors Association (STIPDA) report. The committee agreed to present a policy statement on child passenger safety and member Paula Yuma will work on a draft based on the American Academy of Pediatrics (AAP) and the Texas Child Fatality Review Team (TCFRT) policy statements. The committee was also in favor of putting forth a policy statement reflecting Center for Disease Control Disease and Prevention (CDC) best practice strategies for intoxicated driving prevention, which will be drafted by member Jennifer Northway. The committee

supports the STIPDA recommendations regarding establishing a DSHS Injury Prevention Coordinator and will write a letter of support to the commissioner. Future agenda items include subcommittee summaries and proposals and impaired driver prevention strategies.

**Medical Directors Committee** – In the absence of Chair Steve Ellerbe, DO, committee member James Randy Loflin, MD, reported that the peer review of EMS medical directors agenda item would not be discussed. The list with EMS medical directors has been created and submitted to the committee. On the topic of mentoring programs for EMS medical directors in Texas, the committee agreed a registration form should be developed and should contain the following information: acknowledgement, specialty training courses, contact information and the Texas Trauma Service Area (TSA) he or she is responsible for. The position paper regarding drug-assisted intubation was revised and the new draft will be presented to the council for approval. Lastly, the committee has chosen newly appointed Dr. Sharon Malone to represent the Medical Directors Committee on the upcoming task force for disaster/preparedness medical directions in the event of an emergency. The committee would like to discuss the altered standards of care in EMS at the next scheduled meeting.

**Pediatric Committee** – In absence of Chair Joan Shook, MD, member Charles Macias, MD, conducted the committee meeting. A verbal report was not provided at the council meeting however, a written committee report was provided to DSHS after the meeting. The report submitted by Dr. Macias begins with reassignments of liaisons and their summaries if one is available. The revised liaisons are as follows:

COMMITTEE	PRIMARY	SECONDARY
Air Medical	Janet Pointer	Britton Devillier
EMS	Kimberly Aaron	Paulette Williams
Education	Paulette Williams	Wayne Rutherford
Injury Prevention	David Wesson	Sally Snow
Medical Directors	Charles Macias	Maeve Sheehan
Stroke	Maeve Sheehan	Kimberly Aaron
Trauma Systems	Sally Snow	Janet Pointer

RAC Chairs	Britton Devillier	Kimberly Aaron
Disaster/Emergency Preparedness	Bonnie Hartstein	?

Old business discussed included EMS for Children (EMSC) update, transportation of critically ill children during a disaster and emergency responses at schools and possible manuals. In new business, the Child Fatality Review Team (CFRT) contacted the Pediatrics Committee and would like to work alongside the committee in conjunction with the state CFRT Committee. Training prehospital personnel dedicated to pediatrics and staffing requirements for different types of prehospital transport vehicles was also discussed. The lack of enforcement on the rule to specifically address the amount of pediatric training needed was also discussed. Member Paulette Williams will reassess this rule and gather more information. Public comments pertained to paramedic training required for ongoing certification, but with little reference to pediatrics; Emergency Care Attendant (ECA) training and the evolving standards; and more information on CFRT. Topics to be discussed at the next scheduled meeting are liaison reports, EMSC updates, transporting critically ill patients during disasters, CFRT information and training of prehospital personnel.

**Stroke Committee** – In the absence of Chair Neal Rutledge, MD, member Beverly Welch reported that the criteria developed for stroke facilities is moving forward and should take effect August 13, 2009, if no changes or revisions are presented before then. Baylor University presented a registry, and the committee encouraged this group to work in conjunction with DSHS and their registries. For the next meeting, it was requested that DSHS define "in active pursuit of designation" in May. A TETAF representative stated it will be working with coordinators throughout Texas to develop a survey process for the support facilities, including working on recruiting stroke coordinators involved in this process. Pediatrics Committee member Maeve Sheehan, MD, will report back to the Stroke Committee on updates for pediatrics stroke care.

**Trauma Systems Committee** – Chair Ronald Stewart, MD, reported the committee began with a summary report from Texas EMS, Trauma, and Acute Care Foundation (TETAF). The committee also discussed the Texas Driver Responsibility Bill Distributions and Rider. A

subcommittee for the Trauma Registry/TQIP was established and will be chaired by Jorie Klein and Shahid Shafi, MD. The committee discussed the Trauma Systems Committee priorities and decided the main priorities will be the Trauma Registry, maintenance of and improvement on funding for trauma systems, and encouraging stakeholders to advocate for increased appropriations during the current legislative session. There was open discussion on the loss of the University of Texas Medical Branch (UTMB) in Galveston. The committee has established a work group, chaired by member Jim Parisi, to define the issues for UTMB and to resolve and continue efforts toward Gulf Coast post-disaster coordination of care. Trauma systems rule review was another topic of discussion, but the committee decided to wait until the legislative session was over to further discuss these timelines.

**DSHS Preparedness Coordination Council** – No representative was available at the meeting to present a summary for the council.

**Traumatic Brain Injury Advisory Council** – No representative was available at the meeting to present a summary for the council.

**DSHS Hospital Licensing Rules Review Workgroup** – No report was made available.

**Texas EMS, Trauma, and Acute Care Foundation (TETAF)**– Diana Welsh, CEO of TETAF, provided a brief summary of what TETAF stands for, its purpose and its mission. TETAF tries to assist DSHS and other associates on projects as well locate needed resources. TETAF has eight divisions. The priorities of each division are being discussed and will be defined in May. TETAF is planning a trauma awareness day at the capitol in May since this is when funding decisions are being made. Ms. Welsh was questioned as to whether TETAF has an active lobbyist in their group. She responded that since they are a nonprofit organization, the foundation serves as an educational group and not a lobbyist organization at this time. TETAF will have a silent auction fundraiser November 21, 2009, in Fort Worth. Their next scheduled meeting is April 20-21, 2009, in Dallas. Details of location and time will be available on their website.

## **General Public Comment**

The procedural rules were opened for discussion, and the idea of setting term limitations on committee members to two consecutive terms was expressed. The idea had support from some members and was not supported by others. The topic would be added to all committee agendas for the next scheduled meetings for further debate. The suggestion to start committee applications in September as opposed to November was also expressed in public comment. This would allow more time for stakeholders to apply and provide ample time for committee chairs to review applications. It would also allow the chair to make earlier announcements to the newly appointed and reappointed members, which would enable them to plan trips accordingly and be fully prepared to begin their active terms in February. The issue of excessive absences should be addressed in all committees; and the idea of having an orientation for new members was also brought up for discussion. Stakeholders expressed the importance of having RACs in Texas and the need to strengthen TETAF. The group also agreed on the newly set meeting times and would like to continue this process. The last items discussed were the dates for GETAC meetings in 2010. The group considered and agreed on the following dates: February 24-26; May 19-21; August 18-20; and November 20-22, in conjunction with the EMS Conference.

## **Action Items**

*A motion was made by Randy Loflin, MD, and seconded by Vance Riley to endorse the Medical Directors Committee proposal that DSHS develop a registration form for medical directors. The proposed form would include the following data: acknowledgement, specialty training courses, contact information and the Texas Trauma Service Area (TSA) he or she is responsible for. The motion passed unanimously.*

*A motion made by Randy Loflin, MD, and seconded by Luis Fernandez, MD, that GETAC endorse the Medical Directors Committee position statement on prehospital drug-assisted intubation. The motion passed unanimously.*

*A motion was made by Ronald Stewart, MD, and seconded by Luis Fernandez, MD, to ask GETAC to officially support the continued funding of the trauma and EMS system, and to support disbursement off the money in the Driver Responsibility Account (Fund 5111). The motion passed unanimously.*

**Meeting dates in 2009:** May 13-15 and August 19-21 in Austin, and November 21-23, in conjunction with the EMS Conference being held in Fort Worth, Texas.

**Adjournment:** The meeting was adjourned at 12:36 p.m.