



Chairman	Kenneth Mattox, M.D.
Chief Executive Officer	Darrell Pile
Vice Chair-Hospital Services	Tom Flanagan
Vice Chair-PreHospital Services	Lon Squyres
Secretary	John Kowalik
Treasurer	Amanda Campos
Member at Large	David Persse, M.D.

SouthEast Texas Regional Advisory Council (Trauma Service Area Q)

Austin, Colorado, Fort Bend, Harris, Matagorda, Montgomery, Walker, Waller and Wharton Counties

Board Meeting Minutes December 4, 2017

CALL TO ORDER

Dr. Kenneth Mattox, Chairman, called the meeting to order at 6:30 pm. The meeting was held at the Harris County Office of Homeland Security and Emergency Management at the TranStar facility in Houston, Texas.

ROLL CALL

John Kowalik, Secretary, called roll and a quorum was established.

WELCOME/OPENING REMARKS

Dr. Mattox welcomed the Board members and stakeholders to the meeting and shared that SETRAC, CMOC, and disaster preparedness received a lot of respect from DSHS and ASPR in regard to Hurricane Harvey.

Lisa Spivey was recognized for her 10 years of service at SETRAC.

Catherine Bissell will be leaving SETRAC and was thanked for her time of service.

Toni Carnie was introduced as the new chairperson of the Regional Healthcare Preparedness Coalition (RHPC) and will be its representative on the SETRAC Board.

OFFICER REPORTS

A. Chairman's Report

Dr. Mattox reported the Texas EMS Trauma and Acute Care Foundation (TETAF) recently met with an outside consultant that recommended the election of a new board. A meeting will be held on December 14th to discuss the new board and elect the board of directors. Meeting attendees will include each Regional Advisory Council (RAC) chair and an additional person from each RAC.

The Executive Committee recently met and discussed a number of topics including opportunities for SETRAC to diversify by charging for certain new services on a statewide or national basis in order to affect declining grant funding.

Dr. Mattox reminded attendees that some of the funding once available to the RACs (tobacco fund, red light camera funds, stroke funding) has ended, is in jeopardy of ending, or could be drastically reduced. There is a need to examine all costs and functions to be sure we operate wisely.

B. Vice Chair Hospital Services

Tom Flanagan reported the Bylaws Committee has 13 items to resolve, which includes:

- Board representation – ensure the entire market is captured.
- Member-at-large positions - consider emerging needs and merits of expanding qualifications.
- Attendance requirements for non-board members – determine if these should be relaxed.
- Committee chairs - formalize qualifications, terms, and election process.
- Model bylaws – obtain and review bylaws from other organizations to use as a model.
- General membership – voting rights, process, and rules.
- Telephonic and video enabled board meetings – determine the feasibility.
- Mission statement – review the statement as membership continues to grow.
- Committee vs. coalition – determine which term is more appropriate.
- Overall bylaw review – review the language for ongoing applicability or modification.

The committee will meet after the beginning of the year and will provide a report at the April meeting.

C. Vice Chair Pre-Hospital Services

No report.

D. Secretary Report

No report.

E. Member-at-Large Report

No report.

F. Treasurer's Report/Financial Update

Donald Morrison reported on behalf of Amanda Campos. The financial reports were provided to the meeting attendees. All grants are being spent according to plan. The following are items of note:

- The ASPR grant now spans a five-year period and has been broken down into 4 contracts: RAC Q, RAC R, RAC H, and EMTF6.
- Tobacco funding will not exist next fiscal year. This will result in a reduction of \$232,000.
- The EMS Committee approved the county pass through fund distribution. SETRAC is in the process of changing the forms from paper to an electronic spreadsheet that can be submitted electronically.
- \$1.3 million has been reimbursed to stakeholders for Hurricane Harvey response with an additional \$1.3 to \$2 million expected.
- Shortfalls of more than \$62,000 (2015) and \$82,000 (2017) occurred due to trauma runs not being reported in accordance with DSHS expectations and has resulted in this year's general fund showing a negative balance (used to cover costs that the grant had covered); however, previously held special events have produced a strong fund balance to cover situations like this.

G. Leadership Report

Darrell Pile directed the Board members to his report in the Board binders. An emphasis was placed on the need to focus on initiatives and committee activities that bring value to stakeholders.

The SETRAC awards banquet will be held on January 17th. Information about the banquet was distributed to meeting attendees. The award application deadline has been extended to December 16th at noon. Because the 2016 banquet helped provide credibility to SETRAC and built relationships with legislators who helped promote RACs during the 2017 legislative session, everyone was asked to encourage judges, city council members, and legislators to attend and sit at their tables.

SETRAC has recently gained national attention through not only the Hurricane Harvey response, but through works of the committees and stakeholders as well. Examples of these works are provided in the CEO report.

Mr. Pile provided the board with a special report that provides ways for SETRAC to be less grant dependent considering the reductions in funding. The potential revenue actions that were presented to the board include:

- ensuring EMS runs are accurately submitted to the Department of State Health Services
- receiving dues from non-911 EMS agencies
- creation of a new foundation focused on supporting SETRAC initiatives
- providing intellectual services from a SETRAC subject matter expert
- expanding county membership
- providing EMS infection control officer coverage
- providing a pool of SANE nurses for when needed
- receiving philanthropic grants
- expanding the current SETRAC database
- reviewing operational activities to ensure the organization is "working smart".

Currently, \$54,000 is spent each year for database services for trauma data and to maintain a database that is used by SETRAC to collect stroke and cardiac information. SETRAC has interviewed a local IT company (Improving) to create a new database that will be owned by SETRAC with the ability for stakeholders to upload data without including PHI. The new database would save the organization yearly fees, enable future studies and legislative efforts, and be a source of revenue by marketing the service to other hospitals/systems for a fee. Stroke, cardiac, EMS, and perinatal service lines will be the initial focus followed by trauma after current vendor services are assessed from a value and cost perspective.

Members of the board agreed that the CEO should proceed with database actions provided that they do not exceed budgeted costs and do not disrupt existing achievements.

H. Preparedness Report

Lori Upton directed the Board members to the Preparedness report in the board binders and provided the following highlights:

- SETRAC welcomes Mr. John Wingate as an additional Regional Training and Exercise Coordinator.
- The annual Preparedness Symposium had 364 attendees which included attendees from Thailand.
- Chris Collier was invited to Washington D.C. to be a part of the Department of Homeland Security Next Generation First Responder Apex program. The Harris County region was selected to be a pilot site to determine better interagency/interdisciplinary response and information sharing using new technology.

- SETRAC has been working with the National Center for Disaster Medicine and Public Health on script that is currently in peer review for publication. SETRAC has also met with officials from the Global Resiliency Initiative in Washington about best practices and lessons to share that others can incorporate into their practice.
- The IT department is currently working on a new website for the organization.
- CMOC was activated for 17 days during the Hurricane Harvey event. Over this time, 3 ground staging locations and 2 air hubs were supported by CMOC. Included in the 754 completed missions were the movement of nearly 1,500 patients. The number of nursing homes and hospitals evacuated compared to previous hurricanes have decreased due to the emergency preparedness education provided to these facilities. Dr. Kadlec, the Assistant Secretary for Preparedness and Response in Washington, D.C. visited the area during the activation and continues to express the need to have a "SETRAC" across the nation. All assets were deployed during the activation and have since received post deployment service and are response ready at this time.
- EMTF-6 was in operation for 58 days and included the activation of 22 agencies and 39 individual team members. As a part of EMTF-6, Atascocita Fire Department deployed the Medical Unit Rehab Crew (MUR-C) to provide medical services to teams that were deployed during Harvey.
- From July 2017 to December 2017, 56 classes were conducted with 589 students trained and 11 exercises were held.

COMMITTEE REPORTS

- Regional Healthcare Preparedness Coalition (RHPC)** – Due to the recent selection of Toni Carnie as the new RHPC chair, a report is not available for this meeting. Billy Ted Smith has been selected as the co-chair. All open positions of the RHPC board have been filled.
- Pre-Hospital Committee** – In addition to the provided report, Mr. Kowalik reported the committee is looking at ways to keep everyone working together, including non-911 transport service providers. Since many non-911 providers are new to SETRAC membership, a strategic meeting to formulate their mission under SETRAC will occur after they have been acclimated to the committee.
- Pediatric Committee** – Tammi Culp stated there were no items to report.
- Trauma Committee** – Ms. Bissell provided the report on behalf of Eric Bank. In addition to the written report provided, the following topics were presented:
 - The Woman's Hospital of Texas and West Houston Medical Center are in active pursuit of Level IV trauma designation.
 - Bay Area Regional Medical Center, Memorial Hermann Cypress Hospital, and Tomball Regional Medical Center are in active pursuit of Level III trauma designation.
 - Cypress Fairbanks Medical Center and Memorial Hermann Southwest Hospital are in active pursuit of Level II trauma designation.
 - Memorial Hermann The Woodlands Hospital recently had a successful Level II survey.
 - SETRAC trauma data analysis using a regional coalition approach was the focus of a poster presentation at the TQIP national conference. We appear to be setting a national example that supports multi-hospital collaboration and adoption of best practices.

Dr. Mattox suggested the committee may need to look at how the closing of East Houston Regional Medical Center will affect trauma patients needing medical attention in that area.

E. **Injury Prevention Committee** – In addition to the items in the written report, Robin Garza reported the following:

- Falls continue to be main focus of the committee as it is still the #1 mechanism.
- The committee is working with Dr. Stacy Drake on a study looking at the potential preventability of death by trauma. This study will be submitted for publication.
- A push is being made for all facilities to use the tourniquet form on the SETRAC website, as the data abstracted from the forms cannot be accurately analyzed due to its current underutilization.

F. **Perinatal Committee** – Dr. David Weisoly, reporting on behalf of Dr. Eugene Toy, directed the Board members to the Perinatal Committee report in the board binder. The year 2018 will be the year of the database. There are many hospitals in the region and throughout Texas that need to have their NICU survey.

G. **Cardiac Committee** – Ms. Bissell reported on behalf of Todd Caliva. In addition to the provided written report, the following items were reported:

- For the first time, 100% of PCI centers in the region reported data for Quarter 2 2017.
- There have been no negative comments received by SETRAC regarding the unblinding of data.

H. **Stroke Committee** – Ms. Bissell reported on behalf of Dr. Sean Savitz. In addition to the provided written report, the following items were reported:

- 100% of designated stroke centers in the region reported data for Quarter 2 2017.
- There have been no negative comments received by SETRAC regarding the unblinding of data.
- The number of patients receiving tPA within 60 minutes has risen from 51% (Quarter 2 2014) to 72% (Quarter 2 2017). The constant feedback received every quarter has made a difference.
- Based on the poster that was presented by SETRAC during the International Stroke Conference in February 2017, a study was conducted to determine the economic impact from the higher rate of tPA administration in the region. Findings from the study determined the cost savings to the region were \$3.4 million.

Based on discussion that took place at the July 26th physicians meeting, the regional EMS stroke bypass guideline was revised and presented to the board for approval. On behalf of Dr. David Persse, Mr. Pile requested the board wait a quarter to approve the guideline to allow for continued discussion among EMS agencies.

ACTION ITEMS

- A. Prior Meeting Minutes Approval - There being no concerns or issues, the July board minutes stand approved as circulated.
- B. Financial Report – There being no concerns or issues, the Financial Report stands approved as circulated.
- C. CEO Report; CEO Data Authorization Request – There being no concerns or issues, the CEO Report stands approved as circulated. The CEO data authorization request was approved as presented and discussed.
- D. Resolutions and/or Other Action Items – There being no concerns or issues, the Injury Prevention Committee mission statement was approved as circulated.

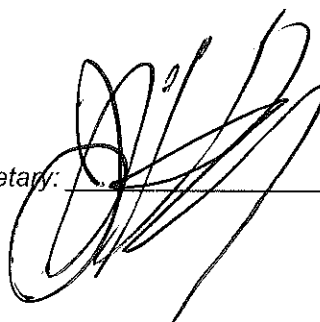
GENERAL DISCUSSION/AUDIENCE Q&A

Dr. Mattox shared his excitement, yet apprehension, of the revenue building initiatives presented earlier in the meeting, noting that careful budgeting needs to be exercised.

ADJOURN

Dr. Mattox adjourned the meeting at 8:28 pm.

John Kowalik, Secretary:

A handwritten signature in black ink, appearing to be 'John Kowalik', written over a horizontal line. The signature is stylized and somewhat cursive.