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Vice Chair-Hospital Services
Vice Chair-PreHospital Services
Secretary
Treasurer
Member at Large

Kenneth Mattox, M.D. Darrell Pile Tom Flanagan Lon Squyres John Kowalik Amanda Campos 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 March 22, 2018

### **CALL TO ORDER**

Tom Flanagan. Vice Chair – Hospital Services, called the meeting to order at 6:38 pm. The meeting was held at the Harris County Office of Homeland Security and Emergency Management at the Houston TranStar facility in Houston, Texas.

### **ROLL CALL**

Christy Gonzales, who attended on behalf of John Kowalik, Secretary, called roll and a quorum was established.

#### WELCOME/OPENING REMARKS

Mr\_Flanagan welcomed all in attendance and gave a brief history of SETRAC and discussed how its growth has led to the need to revise the organizations bylaws.

#### OFFICER REPORTS

# A. Chairman's Report

The report provided by Mr. Flanagan also serves as the Chairman's report for this meeting. (See "Vice Chair Hospital Services" report.)

### B. Vice Chair Hospital Services

Mr. Flanagan reported the Bylaws Committee is reviewing the current structure of SETRAC and how to incorporate its recent and continuous growth of service lines.

The committee will present its recommendation of a new structure to the executive committee in July. The proposal will then be presented at the July board meeting and be open for comments and feedback from board members and stakeholders for a 90-day period. Voting for ratification of the new structure would then take place during the October board meeting.

The Trauma Committee has been without a true chair for some time. The current bylaws do not define a process for appointment of committee chairs. A recommendation was made for the committee chair to be a representative of a level I trauma center. The committee would have two co-chairs: one from a level II trauma center (to be rotated amongst facilities) and one from a pediatric trauma center (to be rotated amongst facilities.)

Dr. Kenneth Mattox, Chairman, reported that a majority of the executive committee members were contacted prior to the board meeting and were unanimous in recommending S. Robb Todd, M.D. as chair of the Trauma Committee for the next two years.

A discussion took place regarding the process and recommendation of having a committee chair be a representative from a level I trauma center.

Taking into account concerns voiced by members of the Trauma Committee, Dr. Mattox made a motion to appoint Dr. Todd to serve as chair until the Bylaws Committee defines the term-limits and process of appointing committee chairs, at which time the chair position will be readdressed and applied to all service line committees. The board voted 11 to 1 in favor of the motion with no abstentions. Allen Sims voiced an objection to the motion, stating that the Trauma Committee's input was not sufficiently addressed in the board's recommendation for the chair position.

The RHPC board currently has a charter with term limits and will be excluded from the recommendation of the Bylaws Committee.

Mr. Flanagan recommended stakeholders to be a part of the Bylaws Committee if they wish to be a part of the SETRAC structure process.

## C. Vice Chair Pre-Hospital Services

No report.

## D. Secretary Report

No report.

## E. Member-at-Large Report

Dr. Mattox reported that Dr. David Persse will be receiving an honorary degree from Baylor College of Medicine in recognition of his services during Harvey.

Dr. Persse discussed how the increase in level II trauma centers may be leading to a lower volume of neurosurgical trauma patients being seen at level I facilities, which could impact their grants for research.

## F. Treasurer's Report/Financial Update

Donald Morrison reported on behalf of Amanda Campos. The terms of some board members will expire in July. These board members will be receiving their letters for appropriate signatures in April.

The financial reports were provided to the meeting attendees. The following are items of note:

- The UASI CPE replacement grant has been spent for this fiscal year.
- The tobacco grant has been replenished with \$228,000 in funds.
- Due to the underreported number of trauma runs in the previous fiscal year, the RAC/EMS grant funds are expected to be spent in April. However, the hard work of EMS agencies in our region to ensure accurate data is submitted has yielded an additional 186,000 runs. Affidavits have been handed out at the most recent EMS meeting.
- Deadline for EMS to submit reimbursement packets for county funds is July 31st.
- The audit report for the internal audit for year ending August 31, 2017, was provided to the board. The current audit and previous audit show no findings.

## G. Leadership Report

Darrell Pile directed the board members to his report in the board binders.

The SETRAC Awards Banquet will take place on April 17<sup>th</sup>. Mr. Pile encouraged stakeholders to attend and bring a team from hospitals and EMS agencies.

The financial outlook is strong, due in part to the reestablishment of funding from the state after receiving feedback from state legislators. SETRAC will continue to reduce expenses and find ways to produce new revenue.

SETRAC is celebrating its 25<sup>th</sup> anniversary this year. The organization began without funding and without much of a plan. Today, the organization is gaining national and international recognition for uniting hospitals and EMS agencies.

The focuses for SETRAC in 2018 are:

- Build on current achievements with a goal to be among the finest coalitions in the nation.
- Support community based activities.
- · Actively work with area legislators to demonstrate the return on investment for funding RACs.
- Continue to gain recognition for clinical achievements made by EMS and hospital providers uniting
   — and serve as a national model for our disaster preparedness initiatives.
   — (An article published in the December 2017 issue of the *Disaster Medicine and Public Health Preparedness* journal, an independent study completed by Northeastern University, and blogs from the ASPR website were provided in the board documents that shows examples of how SETRAC
  - serves as a model for other communities.)
    Have SETRAC staff and/or stakeholders participate in state and national meetings.
- Add a clinician to the SETRAC workforce to work with clinical data and identify gaps.
- · Work more closely with media.
- Demonstrate the value made possible by providers uniting to meet emergency healthcare needs "for you, your family, and your business."

#### H. Preparedness Report

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

- SETRAC staff has been invited by several states to talk about work being done in our coalition.
- Initial funding has been received to replace PAPRs. SETRAC has contracted with the state to provide
  the avenue to purchase PAPRs for the remainder of the state. SETRAC will also be the purchasing
  agent for pink vests, which are used during evacuations for identifying nursing home patients.
- Physical inventory of items purchased with HPP funds over the past 15 years are almost complete. Reports are due to the state next month.
- Preparedness boot camps for facilities that are now included under the new CMS rules for emergency
  preparedness continue to be held. Today's event in Huntsville trained 50 people. In all, over 450
  facilities have been trained through the boot camps.

- A subcommittee for special populations will be added to the RHPC. The subcommittee will focus on patients that are pediatric, require dialysis, and are technology dependent.
- Ms. Upton and Mr. Morrison recently completed a response to a CDC "Request For Answers" for a \$3 million grant.
- The annual Preparedness Symposium had 364 attendees which included attendees from Thailand.
- Chris Collier has been appointed to the Texas Department of Public Safety Communications Strategic Advisory Group.
- The strategic priorities for RHPC are posted on the SETRAC website.
- The functional exercise for the region, "Operation Crazy Train" is scheduled for May 1<sup>st</sup>. The exercise
  will test cyber security as well as mass casualty incident plans. Each corridor held a table-top in
  regard to hospital cyber attacks.
- Tranquil Terminus, a federal level transport exercise involving the transfer of ebola patients to ebola treatment centers, will take place in April.
- Alabama Coushatta will hold an MCI exercise in June.
- From January 2018 to March 2018, 17 classes were conducted with 302 students trained (mostly decontamination classes.)
- A workgroup for the Identity, Credentialing, and Access Management (ICAM) program has been formed and will begin developing their RFP to develop a concept for operations plan for a regional identification card
- Most of the assets that were deployed during Harvey have been serviced and are in operational status. One vehicle, the GMC truck, is now 12 years old and will be replaced due to the associated costs of maintaining it. This is a SETRAC owned asset that can be traded in (not purchased with HPP funds.)
- The new website is now live. The IT department will begin work on the SETRAC Foundation website.
- The symposium will be held October 24th-26th. Dr. Robert Kadlec, ASPR, will be the keynote speaker.

#### **COMMITTEE REPORTS**

- A. Regional Healthcare Preparedness Coalition (RHPC) Corridor meetings continue to take place bimonthly and the RHPC strategic plan was recently approved. Speakers for the symposium are still needed.
- B. **Pre-Hospital Committee** Written report was provided to the board. No additional items were reported.
- C. Pediatric Committee Written report was provided to the board. No additional items were reported.
- D. **Trauma Committee** Written report was provided to the board. Discussion took place about the selection of a chair for the Trauma Committee (see Vice Chair Hospital Services Report.) Dr. Mattox directed the board to the "Stop the Bleed" article included in the board documents as an informational piece for reading.

- E. **Injury Prevention Committee** Written report was provided to the board. No additional items were reported.
- F. **Perinatal Committee** Dr. David Weisoly was selected as the chair for the committee. The committee will be focusing on neonatal data this year, which will be followed by maternal data next year. Collaborative quality improvement discussions have begun and will rely on the data collection, which is expected to begin with July 2018 data.
- G. Cardiac Committee Written report was provided to the board. No additional items were reported.
- H. Stroke Committee Written report was provided to the board. No additional items were reported.

## **ACTION ITEMS**

- A. Prior Meeting Minutes Approval There being no concerns or issues, the December board minutes stand approved as circulated.
- B. Financial Report (including proposed budgets) There being no concerns or issues, the Financial Report and proposed budgets stand approved as circulated.
- C. CEO Report There being no concerns or issues, the CEO Report stands approved as circulated.
- D. Resolutions and/or Other Action Items -
  - Bylaws revision (Bylaws Committee proposal) There being no concerns or issues, the proposal of the Bylaws Committee stands approved as presented.
  - April meeting / Banquet...Monday, July 16, 2018 There being no concerns or issues, the SETRAC Awards Banquet will serve as a replacement for the April 2018 board meeting. All stakeholders present at the banquet will receive credit for board attendance.

# **GENERAL DISCUSSION/AUDIENCE Q&A**

There were no items for discussion or Q&A.

## **ADJOURN**

Dr. Mattox adjourned the meeting at 8:20 pm.

John Kowalik, Secretary