



Chairman	David Persse, MD
Vice Chair-Hospital Services	Tom Flanagan
Vice Chair-PreHospital Services	John Kowalik
Secretary	Graig Temple
Treasurer	Lon Squyres
Officer-at-Large	Brent Kaziny, MD, MA
Chief Executive Officer	Darrell Pile

SouthEast Texas Regional Advisory Council (Trauma Service Area Q)

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

Board Meeting Minutes April 19, 2021

1. **CALL TO ORDER / ROLL CALL**

Dr. David Persse, Chairman, called the meeting to order at 6:30 pm. The meeting was held virtually via GoToMeeting. Graig Temple called roll and a quorum was established.

2. **WELCOME AND INTRODUCTION OF SPECIAL GUESTS**

Dr. Persse welcomed the board members and the stakeholders in attendance.

A. **Special Award Presentation**

Brian Murray, on behalf of the Emergency Management Association of Texas (EMAT), recently presented SETRAC with the Excellence in Emergency Management Award for 2021. The award was given based on SETRAC's major accomplishment of distributing highly demanded PPE to healthcare providers in its 25-county hospital preparedness program (HPP) region during the COVID-19 pandemic.

B. **James Grotta, MD – Mobile Stroke Unit Update**

The Mobile Stroke Unit (MSU), in collaboration with regional health systems and local EMS agencies, recently completed an 8-year multi-center evaluation. The study found more patients received tPA within the first hour of symptom onset when managed by the MSU versus standard management. In addition, the study showed more than half of the patients treated with tPA end up normal if treated in the first hour of symptom onset. The study has been submitted for publication in a high-profile journal.

3. **OFFICER REPORTS**

A. **Chairman**

Dr. Persse commended SETRAC on the receipt of the Excellence in Emergency Management award and service during the COVID-19 pandemic. Dr. Persse also gave appreciation to the entire healthcare community for their service during the winter freeze event that took place in February. Law enforcement and other public safety agencies are on high alert for the verdict of the Derek Chauvin trial and SETRAC will be called upon if a large-scale response is needed.

B. **Vice Chair Hospital Services**

Tom Flanagan reported on the board positions that will be expiring in July 2021 (listing included in April 2021 board materials.) All interested parties can submit nominations for vacant positions to nominations@setrac.org. Nominations will be open for the next 30 days. Lon Squyres will be leading the nominations committee. Voting will take place during the July 2021 meeting and will be ratified at that time.

The results of the clinical committee elections were presented to the board (listing included in April 2021 board materials.) Mr. Flanagan congratulated the members who were elected and recognized the members who are coming off their committee leadership roles. The EMS position in the Pediatric

Committee and the hospital representative position in the Stroke Committee is currently vacant. Information on filling these positions will be posted on the SETRAC website next week.

C. Vice Chair Pre-Hospital Services

John Kowalik was granted an excused absence by the chair.

D. Secretary

Mr. Temple had no items to report.

E. Officer-at-Large Report

Dr. Brent Kaziny praised SETRAC's non-publicized work in mobilizing physicians to assist in the medical screening of children staying in a temporary shelter in the Houston area.

F. Treasurer Report

Lon Squyres reported that an audit of the financial statements and an audit on the accounting of federal grant money were completed. Both audits demonstrated SETRAC's compliance with generally accepted accounting principles and provided guidance for the organization to record financial entries in a manner that facilitates auditing and facilitates record keeping now that SETRAC has become a more complex organization. Mr. Squyres commended the financial department for the extra work involved in maintaining finances during the pandemic.

Donald Morrison, SETRAC Controller, provided an overview of the written financial reports that were distributed to the board. Currently there are no controversies or any issues or concerns that require attention.

- Grant monies are being used according to plan with nothing over budget or out of variance.
- ASPR grants will show a surplus for fiscal year 2021 due to FEMA covering salary costs for SETRAC staff members assisting with PPE distribution during the pandemic.
- Funds in the HPP Supplemental Funds A account were used to purchase a CAPR cache. The money in this fund has been expended as planned.
- An amendment has been submitted to the Department of State Health Services (DSHS) to use the excess funds in the HPP Supplemental Funds B account to purchase a mobile infusion trailer.
- All grants that affect SETRAC's clinical initiatives will have a start date of September 1st, which coincides with the state's fiscal year. There are extra funds in the budget for this fiscal year to be used for clinical committees.
- EMS partners are reminded to submit their county pass through funding packages to receive reimbursement.
- Senate Bill 500 has all but been expended. Funds were used to pay for a public service campaign in the fall of 2020 on the appropriate use of 911, participate in the Texas EMS wristband project, and the purchase and licensing of four tow vehicles.
- SETRAC was required to submit a draft budget in February for fiscal year 2022. The submitted budget was based on the same budget approved for fiscal year 2021. Approval for the budget submission for the fiscal year 2022 ASPR grants was requested of the board during this meeting. The budgets will be amended once the amounts are confirmed by DSHS. Any changes will be presented at the SETRAC board meeting in July.

4. LEADERSHIP REPORT

Chief Executive Officer - A written report was provided by Darrell Pile to the board. Highlights include:

- Financial Status – SETRAC's financial standing is strong, and we will have approximately \$200,000 available for unique clinical initiatives by August 15, 2021. The excess is largely the result of some budgeted salary costs not being incurred as some staff temporarily performed disaster related duties compensated by other sources. SETRAC members and committees are encouraged to submit ideas for the use of those funds.
- GETAC Update – Dr. Alan Tyrock has been appointed by Governor Abbott as the chair for the Council and Mike Clements of the Cy-Fair Fire Department was selected by the governor to serve on the Council. SETRAC representatives serve on several of the GETAC committees.
- Legislative Update – SETRAC is working with multiple organizations to stay on top of legislation that may be of interest to SETRAC members or that should trigger a call to action.
 - The senate budget committee met and considered a bill that gives money to RACs and EMS to offset the gap opened by a decrease in DSHS funding. The house will provide their funding bill this week. The two will merge as a joint conference committee and it is envisioned that RACs will be level funded by use of general revenues to supplement funds provided by DSHS.
 - There is optimism that funding will be available to sustain the EMTF program with federal funds.
 - A few bills are being merged that each regard gathering data. SB984 expands the role of RACs to gather data; however, funding was not requested in the bill. Funding has been requested.
- Updates from each of the clinical committees were provided to the board (documents included in April 2021 board materials.) Mr. Pile commended Tonya Carter on her work as our point person for each of the clinical committees. The seven SETRAC committees are addressing an array of important topics.
- Nursing home leaders are meeting with other members of SETRAC to discuss methods to help ensure Advance Directives always accompany patients when transferred for emergency care in hospitals EDs.
- A subpoena was sent to SETRAC by a local emergency services district. A law firm was retained to reply to the subpoena. A reply has not been received.
- SETRAC continues to receive numerous attempts to breach its IT firewalls. These breaches have not been successful, and safeguards have been enhanced.
- A rigid "work from home" policy is being developed for employees that qualify. The policy would enable employees to work fewer days in the office while completing the remainder of the work week remotely from home.
- The merits of requiring all employees to receive the COVID-19 vaccination is under consideration but a firm position has not been taken at this time.
- SETRAC leadership will adopt a policy and continuously self-assess to ensure the organization remains properly equitable, supports diversity, and fosters inclusiveness.
- The frequency of hospitals declaring "saturation" and its effects on patients and EMS agencies will be addressed with hospital system CEOs.
- *The FUSION* is SETRAC's new bulletin that highlights for our members and the public the results made possible by SETRAC uniting of the finest medical minds in the region. This publication is currently set to be produced monthly.

Vice President Preparedness and Response - A written report was provided and highlighted by Lori Upton. Key points included:

- COVID-19 Data collection and analysis – all three TSAs are under the GA-32 15% rule. The number of infected patients continues to decline.

- Warehouse operations – PPE distribution is ongoing. Over 22 million masks, 2.4 million gowns, 47.5 million surgical masks, and 19.7 million sets of gloves have been distributed. Hospitals were the largest discipline to receive PPE followed by first responders, LTACs, and jurisdictions.
- Surge capacity initiatives are coming to a close. The medical resort located in The Woodlands will close and resume normal operations on April 30th. All other medical resorts have already closed and resumed normal operations.
- From December 24th through March 1st, the SETRAC Duty Officer has facilitated 491 calls for assistance for emergency transfers. Most calls received were from freestanding Eds or rural hospitals needing to transfer patients to a higher level of acute care.
- Crisis staffing – Final demobilization date will be May 15th. When the written report was submitted to the board members, there were 746 crisis nurses remaining on-duty.
- The COVID-19 response has been activated for 415 days as of this meeting. HPP staff is transitioning to more normal operations. All deliverables have been met and were submitted.
- The coordinators for special populations have established a workgroup to discuss regional plans for treating dialysis patients during disasters. Educational programs for both hospital-based facilities and dialysis centers will be developed to ensure their plans are in place and their patients are kept informed of what actions need to be taken during disasters.
- The IT department have been working with partners to develop real-time tracking of ambulances in EMResources to assist with hospital saturation issues.
- Annual inventory management will take place soon. In-person, hands-on inventory will take place at each of the hospitals in the 25-county HPP region.
- The Stop the Bleed workgroup established goals for 2021 which include increase the number of active trainers and participation in the region. The demand for trainings decreased with pandemic, however, requests are beginning to pick back up (mostly in-person.)
- The Training and Exercise staff completed 20 exercises over the past year with over 1300 participating agencies and facilities. Plans for burn surge and pediatric evacuation and mass surge (PEMS) were developed. The 2021 functional exercise has been cancelled at the request of the RHPC members due to previous real-world responses over the past year; however, 5 tabletop exercises will continue to be conducted in May.
- SETRAC has been approved as a continuing education provider through the Louisiana State Nurses Association under the American College of Credentialing Center.
- The Preparedness Symposium is scheduled for October 20th-22nd. Registration opened on April 1st and there is presently a call for speakers.
- A mobile infusion center is being built using COVID-19 supplemental funding. The primary function of the mobile center will be to provide infusion of monoclonal antibodies if necessary. The 53-foot trailer will accommodate 8 infusion chairs. The mobile center will also have plumbing installed so that it may be used for other reasons including for dialysis needs during a disaster. This will be the only mobile infusion/dialysis center in the nation and the first in the state of Texas.

5. COMMITTEE REPORTS

A. SPECIAL PRESENTATION – PERINATAL COMMITTEE

Dr. David Weisoly, the current chair of the Perinatal Committee presented data collected by the committees as well as the work and achievements the committees have made over the past year.

The committee will be developing blinded CEO reports, similar to other clinical service lines, that will focus on components of perinatal care. Each of the committee's four workgroups have developed

individual projects that impact care for mothers and babies in the region. A maternal focused best practice meeting regarding the COVID-19 pandemic has been taking place monthly.

The SETRAC Perinatal Committee is recognized as the most active, organized, and participatory perinatal care committee in the state. Several members of the committee also serve on state-wide committees. It is the mission of the SETRAC Perinatal Committee to train its members to allow them to take the reins of leadership in the committee workgroups and state initiatives.

All facilities have received their initial neonatal designations, and several have received or are in the process of receiving their redesignation. Level I facilities are self-designated and are not required to submit data. This committee is ahead of others in the state with a full two-years of participation in data submissions. The regional data has been presented on a state level. Maternal benchmark measures will begin to be collected in the 3rd quarter of 2021.

Two projects that the committee is focusing on is improving the time from when antibiotics are ordered to drug initiation for NICU babies 0 to 7 days old as well as improving the number of late pre-term and very low birthweight babies that are discharged on breastmilk.

B. REGIONAL HOSPITAL PREPAREDNESS COALITION

This report was submitted to the board prior to the meeting for review and was approved.

C. PRE-HOSPITAL COMMITTEE

This report was submitted to the board prior to the meeting for review and was approved.

D. TRAUMA COMMITTEE

This report was submitted to the board prior to the meeting for review and was approved.

E. INJURY PREVENTION COMMITTEE

This report was submitted to the board prior to the meeting for review and was approved.

F. PEDIATRIC COMMITTEE

This report was submitted to the board prior to the meeting for review and was approved.

G. PERINATAL COMMITTEE

This report was submitted to the board prior to the meeting for review and was approved.

H. CARDIAC COMMITTEE

This report was submitted to the board prior to the meeting for review and was approved.

I. STROKE COMMITTEE

This report was submitted to the board prior to the meeting for review and was approved.

6. ACTION ITEMS

A. Prior Meeting Minutes

There being no further discussion or objections, the board approved the minutes as presented.

B. Officer Reports

There being no further discussion or objections, the board approved the officer reports as presented.

C. Financial Report – Performance FY'21; Budget estimates/planning FY'22

There being no further discussion or objections, the board approved the financial reports as presented.

There being no further discussion or objections, the board approved the estimated budget for FY'22 as presented.

D. CEO Report

There being no further discussion or objections, the board approved the CEO and Vice President Preparedness and Response reports as presented.

E. Resolutions and/or Other Action Items - Vote to affirm committee election results

There being no further discussion or objections, the board affirmed the committee election results as presented by Tom Flanagan.

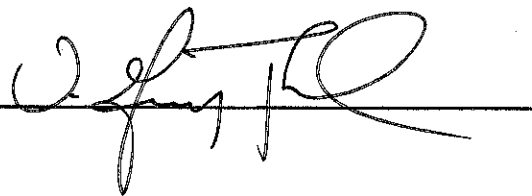
7. GENERAL DISCUSSION/AUDIENCE Q&A

A question was raised about the resumption of in-person board meetings. This item will be added to the next executive committee meeting for discussion.

8. ADJOURNMENT

Dr. Persse adjourned the meeting at 7:48pm.

SETRAC Board - Secretary:

A handwritten signature in black ink, appearing to be "J. Persse", written over a horizontal line.