

# BOARD OF DIRECTORS QUARTERLY MEETING

APRIL 15, 2024



Chairman Vice Chairman Hospital Services Vice Chairman Pre-Hospital Services Secretary

> Treasurer Officer-at-Large Chief Executive Officer

Tom Flanagan James Campbell Walter Morrow, RN, CFRN, EMT-P Lon Squyres Brent Kaziny, MD MA Lori Upton

David Persse, MD

Walter Morrow, RN, CFRN, EMT-P

#### SouthEast Texas Regional Advisory Council (Trauma Service Area Q)

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

## SETRAC BOARD OF DIRECTORS QUARTERLY MEETING April 15, 2024 – 6:30pm

LOCATION - SETRAC Conference Center - 1111 N. Loop West, Suite 160, Houston, TX 77008

1) CALL TO ORDER / ROLL CALL David Persse, M.D./

2) WELCOME David Persse, M.D.

3) OFFICER REPORTS

A. Chairman David Persse, M.D.

B. Vice Chair Hospital Services Tom Flanagan, BSN, MA, LP

C. Vice Chair Pre-Hospital Services James Campbell

D. Secretary Walter Morrow, RN, CFRN, EMT-P

E. Member At Large Brent Kaziny, M.D.

F. Treasurer Lon Squyres

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4) EXECUTIVE REPORT – Chief Executive Officer

a. Prenaredness and Response Report

Lisa Spivey/Troy Erbentraut

a. Preparedness and Response Report Lisa Spivey/Troy Erbentraut

b. Emergency Healthcare Systems (EHS) Report Suzanne Curran/Melanie Aluotto/
Clayton Ehrlich

5) REMAINING ACTION ITEMS/BOARD CONSIDERATION David Persse, M.D.

A. Approval of Prior Meeting Minutes

**B.** Approval of Reports (Financial, Executive)

C. Resolutions/Other Action Items

a. Financial Reports

a. Approval of new committee leaders

b. Approval of Pulsara as regional patient tracking system

6) GENERAL/OPEN DISCUSSION David Persse, M.D.

7) ADJOURNMENT David Persse, M.D



Chairman Vice Chair-Hospital Services Vice Chair-PreHospital Services

> Secretary Treasurer

James Campbell Walter Morrow, RN, CFRN, EMT-P Lon Sauvres Brent Kaziny, MD, MA Lori Upton

David Persse, MD

Tom Flanagan

Officer-at-Large

Chief Executive Officer

#### SouthEast Texas Regional Advisory Council (Trauma Service Area Q)

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

#### **Board Meeting Minutes** January 22, 2024

#### 1. CALL TO ORDER / ROLL CALL

Dr. David Persse, Chairman, called the meeting to order at 6:30pm. The meeting was held in-person at the SETRAC Conference Center. Walter Morrow, Secretary, 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. No special guests were in attendance for this meeting.

Dr. Persse shared that Mr. David Rives recently passed away. Mr. Rives was one of the original founders of SETRAC and the first Executive Director for SETRAC from 2000-2008 and retired from SETRAC in June 2013. Prior to his work at SETRAC, he was an EMS surveyor for the state's EMS program. Mr. Rives was remembered for his hard work and passion. Information about funeral services was shared with those in attendance. SETRAC will support his family as best as we can and everyone is encouraged to attend the memorial service if available.

A round of applause was given to Lori Upton, who is celebrating her one-year anniversary as CEO at SETRAC.

#### **OFFICER REPORTS**

#### A. Chairman

Dr. Persse reported that HFD and HPD trialed a way to help distribute acute psychiatric/behavioral health patients more evenly across hospitals. The plan is for officers to contact the base station when they have an EDO patient and the base station will advise the officers on where the last EDO patient went (within 24 hours) and which facilities may not have had an EDO patient in a while. Some hospitals feel the process is working well; however, officers did not feel that NPC was providing the base station with an accurate status report. Also, officers reported that hospital staff are telling them they are unable to take the psychiatric patient. In this instance, HPD command will be telling the officers to stay at the hospital. A reminder was given that EDO patients fall under EMTALA according to CMS. The goal is to have this initiative be replicated across the region with additional hospitals and law enforcement partners. Lori Upton reminded hospitals to provide daily reports on how the patients arrived at their facility.

The City of Houston opened warming centers for a couple of days during the recent cold snap and saw about 1,000 patrons. Hospitals are reminded that patients should not be discharged to warming centers as there is no medical infrastructure to care for the patients. The SETRAC staff was thanked for their assistance with pushing through announcements during the event.

The trauma, EMS, and RAC rules are available for commenting. There are some dramatic changes that can have an effect on trauma hospitals and EMS agencies in the region. Everyone is encouraged to read the draft changes to the rules.

#### B. <u>Vice Chair Hospital Services</u>

Tom Flanagan reported that the Bylaws Committee was convened to discuss the section of the bylaws concerning committee and subcommittee attendance. The committee determined that because SETRAC is a public agency, anyone should be able to attend any meeting they would like to attend and therefore no changes will be made to the bylaws at this time.

The Bylaws Committee believes that for each committee's charter, the chairs and co-chairs designate the number of voting members and who those voting members are for each hospital and EMS agency to ensure that voting is balanced. The Bylaws Committee will meet with the committee leaders regarding the voting requirements.

Mr. Flanagan has requested the Bylaws Committee to review the bylaws in totality (section by section) as the organization has grown and become more complex over the years. The review is expected to begin in February with a goal of presenting any changes (if needed) at the annual meeting in July. The board will be kept apprised of any suggested revisions regarding the current bylaws. Those interested in assisting with the review or becoming a member of the Bylaws Committee can get in touch with Mr. Flanagan.

#### C. Vice Chair Pre-Hospital Services

James Campbell reported that the EMS Committee meetings are going well with active discussions and are well attended. Meaningful work is occurring in the subcommittees and around the region.

#### D. Secretary

Mr. Morrow had no items to report.

#### E. Officer-at-Large Report

Dr. Brent Kaziny gave appreciation to the SETRAC staff for their work with the Baylor College of Medicine grants team with the Pediatric Disaster Network. Dr. Kaziny reiterated the need for everyone to review the changes to the trauma, EMS, and RAC rules.

#### F. Treasurer Report

Lon Squyres reported on the SETRAC financials which was provided to the board. Highlights include:

- Each SETRAC grant falls into one of three budget years.
- All grant accounts are being spent as scheduled and as expected.
- The general fund is almost at \$1 million.
- SETRAC is financially stable.

#### 4. EXECUTIVE REPORT

A written report was provided to the board and Ms. Upton provided the following highlights:

- EMTF executives met in Dallas and discussed the need for governance on how EMTF will be moving forward in the state.
- Revisions to the EMS, RAC, and trauma rules:
  - EMS rules revisions include changes to the requirements for agencies and RACs to receive the passthrough funding, including passing the RAC assessments.
  - Revisions to the trauma rules will be very onerous to the Level III and IV designated facilities which could make it difficult for them to retain their designations. A meeting will be held at SETRAC for hospitals and EMS agencies to review and discuss the trauma rule revisions. Public comment opened on January 19<sup>th</sup> for comment and closes on February 19<sup>th</sup>. Ms. Upton's recommendation is to send public comments prior to February 17<sup>th</sup> as that is when the GETAC executive committee will meet to discuss/approve the rule revisions. Requests for public hearings should also be submitted along with the public comments. The board discussed additional concerns regarding the changes including the possibility of having sicker patients arriving at the hospitals and overcrowding at the Level I and II trauma facilities.
  - Contractual requirements for the RACs are being written into the RAC rules, including assessments needing to be performed by specific years. Assessments include who is required to sit on the RAC boards, what is included in bylaws, what the financials need to look like, what needs to be included on the public website, and more.
- Chris Collier and Carrie Cox are no longer with SETRAC. Grant Kelley is the new EMTF-6 Coordinator and Jarrod Moreno is the new Mobile Asset Coordinator.
- Starlink will be added to SETRAC mobile assets.
- The SETRAC Foundation had 2 CDs that have been cashed in and all accounts will be moved to Amegy Bank. A meeting will take place with Amegy bank later in the week.
- Funds are still available for scholarships funded through SB 8. The last day for scholarships to be awarded is December 31, 2024.
- A state fiscal audit was recently held. There were a couple of payroll issues which are easily corrected as well as six items that were paid late during the transitional time in the finance department. Two inventory items were not located a radio provided to the hospital and a duplicator that was disposed due to end-of-life without paperwork. Other items include missing tags on trays in the DPMU, incorrect serial numbers, and GC-11 items approved for removal after being listed for 1 year, of which there is contradiction from federal guidance.
- **Preparedness and Response** Lisa Spivey and Troy Erbentraut provided the following update:
  - Coordinators have been actively engaging with stakeholders to ensure trainings are being conducted.
  - The training and exercise team is working on the 2024 spring exercise.
  - Fidel Calvillo, Special Populations Coordinator, continues to work with long-term facilities. A monthly collaboration discussing best practices will include Mr. Calvillo and representatives from Nevada, South Carolina, and California.
  - End-of-year surveys were sent to special population facilities and hospitals in the region. About 95
    hospitals in the region completed the survey. The survey will assist with determining future training.
  - The warehouse is once again fully staffed.
  - SETRAC was staffed at the EOC for the college football championship game and the Houston Marathon.
  - o Interviews will be taking place for a new training and exercise coordinator to replace Ms. Cox.
- **Emergency Healthcare Systems** Suzanne Curran, Melanie Aluotto, and Clayton Ehrlich provided the following update:

- o "Trauma Days" have been successfully established so all trauma meetings will take place on the same day.
- The Trauma Committee continues to look at goals for the next year, including reviewing how feedback gets from trauma centers to EMS efficiently.
- ICS 300 is being required for trauma managers according to the new trauma rules. Currently, this
  class is scheduled for the first two weeks of May and will be advertised once confirmation is received
  from TEEX.
- Trauma program managers will be reviewing deficiencies stated by Jorie Klein so education can be rolled out in the region.
- The Trauma Data Workshop had to close registration due to a high number of enrollments.
- o Falls remain the number one mechanism of injury. Education continues in the region, including attendance at a health fair held in November.
- The Pediatric Committee has seen a large increase in attendance. New initiatives will be reviewed, including working with school nurses to see how the committee can assist with Stop-The-Bleed and other education.
- A 2-day stroke bootcamp was recently held, mainly to assist stroke coordinators with less than 2 years of experience in their roles. Emergency neuro education was included as well.
- A dashboard for rehab utilization has been created for the Stroke Coordinators Subcommittee to review data.
- Dr. Rao has submitted an abstract for the International Stroke Conference on behalf of the Stroke Committee regarding the evolution of stroke care. The abstract was accepted and will be presented at the ISC conference in February.
- The Heart of the Matter program has been developed as a collaboration between SETRAC's stroke, cardiac, and perinatal service lines. High-risk communities are being targeted by zip codes for education on hands only CPR, and risk factors on stroke, cardiac, and maternal care. Blood pressure monitors to be handed out to the public have been donated to SETRAC by HEB. Grants have been applied for as well.
- A partnership is being developed between the cardiac and EMS committees to develop a safe transfer guideline for balloon pump patients.
- o The placenta accreta spectrum disorder online education has been taken by 500 learners.
- Initial discussions have begun to collaborate with the March of Dimes on the implementation on a maternal and infant mobile health clinic. The deadline to submit proposals ended last week.
- NRP classes for EMS are being planned for 2024.
- The EMS Committee has recently formed the Blood Products Subcommittee which has a goal to implement the regionalization process by the end of the year.
- HB 624 documents have been posted to the SETRAC website and is available for fire departments to use.

#### 5. ACTION ITEMS

#### A. Prior Meeting Minutes

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

#### B. Reports (Officer, Finance, and Executive)

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

#### C. Resolutions and/or Other Action Items

a. Approval of the EMS/RAC & EMS/RAC Systems Development Narrative Report.

Copies of the reports were provided to the board prior to the meeting. There being no objections, the board approved the reports.

A suggestion was made to look at EMS wall times in the region as a future goal.

b. Approval of elected Medical Director for Prehospital/EMS Committee.

There being no objections, the board approved the EMS Committees election as Dr. Shane Jenks as the new medical director for the EMS Committee.

#### 6. GENERAL / OPEN DISCUSSION

Purchase of SETRAC warehouse and property.

Christy Gonzales asked for an update regarding the purchase of the property where the SETRAC warehouse currently resides. Ms. Upton reported that the current property may be outgrown for SETRAC's use. SETRAC is working with the real estate agent who previously assisting with renegotiating our current lease to look at other properties that may be available to assist with SETRAC's future needs.

#### 7. ADJOURNMENT

Dr. Persse adjourned the general board meeting at 7:50 pn	Dr.	Persse	adjourned	the	general	board	meeting	at 7:50	pm
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#### SETRAC - February 29, 2024 YTD Expenditure Report (FY24)

(See Grant Summaries on Page 3 & 4 for Categorical breakdown of the grants)

	Grant	Ex	YTD penditures	Approved Budget	Variance	% Remaining	Month of Fiscal Year
*1	ASPR 24 - TSA Q	\$	1,175,235	\$ 2,183,912	\$ 1,008,677	46.2%	8/12
*2	ASPR 24 - TSA R	\$	287,827	\$ 469,004	\$ 181,177	38.6%	8/12
*3	ASPR 24 - TSA H	\$	103,223	\$ 164,668	\$ 61,445	37.3%	8/12
*4	ASPR 24 - EMTF 6	\$	99,780	\$ 131,736	\$ 31,956	24.3%	8/12
*5	ASPR 24 - EMTF 6 (State funds)	\$	135,094	\$ 236,111	\$ 101,017	42.8%	8/12
*6	RAC/EMS 2024	\$	206,440	\$ 503,239	\$ 296,799	59.0%	6/12
*7	RAC Systems Development 2024	\$	186,954	\$ 219,637	\$ 32,683	14.9%	6/12
*8	RAC/EMS EI Funds	\$	28,490	\$ 150,000	\$ 121,510	81.0%	6/12
*9	County Pass Thru 2024	\$	-	\$ 412,655	\$ 412,655	100.0%	6/12
*10	G7 Baylor Pediatric Disaster Care	\$	91,765	\$ 236,684	\$ 144,919	61.2%	5/12
*11	HFD Base Station	\$	582,233	\$ 1,843,106	\$ 1,260,873	68.4%	5/12
	Total	\$	2,897,042	\$ 6,550,752	\$ 3,653,710	55.8%	

<sup>\*1-4</sup> ASPR Contracts for FY24 are expending in accordance with budget.

<sup>\*5</sup> ASPR EMTF 6 (State funds) are expending in accordance with budget.

<sup>\*6</sup> FY 24 RAC EMS funds are expending in accordance with budget. 01/24 Indirect Cost is captured in March 2024

<sup>\*7</sup> FY24 RAC Development funds are expending in accordance with budget. 01/24 Indirect Cost is captured in March 2024

<sup>\*8</sup> FY 24 County Pass Thru funds for eligible EMS agencies has no allowable carryforward from FY23

<sup>\*9</sup> Houston Fire Department Base Station - Reimbursement for actual payroll expenses incurred. Net Revenue is listed on Page 2.

#### **Financial Status**

Frost Bank Checking	\$	3,433,313.59	-This account is the main operational account.
PNC Bank Checking	\$	673,444.23	-This account is our primary depositary account for grant funds.
PayPal Account	\$	-	-Funds transferred to Chase revenue account
Investment Account #1			Liquidated at \$454,564.99
Investment Account #2	\$	-	Liquidated at \$1,569,668.88
Investment Account #3			Liquidated at \$505,066.19
Investment Account #4	\$	-	Liquidated at \$1,569,686.86
Investment Account #5	\$	523,083.00	-Monies invested in 13 week maturity, FDIC insured certificates of deposit
Investment Account #6			
Chase Bank-EMS/RAC	\$	818,021.91	This account supports SB8 and EMS RAC business
Chase Bank-Revenue	\$	216,321.66	This account supports general fund business
Cash Status: February 29, 2024			
SETRAC Foundation Checking	\$	304,942.16	-This account supports Foundation business
SETRAC Foundation Inv. Acct.	\$	1,053,899.45	-Monies invested in 13 week maturity, FDIC insured certificates of deposit
Maestro Svcs. Checking Acct.	Ś	94,424.96	-This account supports Maestro Svcs operations

#### SETRAC Operating Fund FY24 YTD

Revenue (non-grant)		FY 24
General Revenue	\$	3,617
FY 2024 Dues	\$	38,730
	\$	291,098
RHPC Sympsosium Revenue		•
STB Kits	\$	15,289
TEEX Income	\$	68,990
HFD Base Station	\$	141,819
Total Revenue	\$	559,543
Expenses (non-grant)		
Contract Services	\$	160
<b>Business Expenses</b>	\$	1,622
RHPC Symposium Expenses	\$	238,250
Operational Supplies	\$	3,449
Other	\$	29,527
Personnel	\$	15,372
Base Station Expenses	\$	49,505
Travel	\$	(1,460)
	\$	3,108
Indirect Expenses	<del>-</del>	3,106
Total Expenses	\$	339,535
Net Revenue	\$	220,008

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## **Financial Summary - Categorical Budget Detail**

		YTD		Budget	,	Variance
ASPR 24 - TSA Q						
Contract Services			\$	-	\$	-
Equipment			\$ \$	-	\$ \$	-
Operational Supplies	\$	4,569	\$	12,576	\$	8,007
Other	\$	392,292	\$	745,736	\$	353,444
Personnel		646,022	\$	1,165,356	\$	519,334
Travel	\$ \$	13,213	\$	41,853	\$	28,640
Indirect Costs	\$	119,139	\$	218,391	\$	99,252
Total	\$ :	1,175,235	\$	2,183,912	\$	1,008,677
ASPR 24 - TSA R						
Contract Services			\$		ć	
Equipment			۶ \$	=	\$ ¢	-
Operational Supplies	Ļ	664	\$ \$	1,374	\$ \$	- 710
Other	\$ \$	41,983	\$ \$	72,180	\$	30,197
	۶ \$	216,497	\$ \$	72,180 344,857	\$ \$	128,360
Personnel Travel	Ş	210,497	\$ \$		\$ \$	=
Indirect Costs	Ļ	28,683	\$ \$	3,693	\$ \$	3,693
	\$ <b>\$</b>		, \$	46,900	۶ \$	18,217
Total	<b>&gt;</b>	287,827	<b>&gt;</b>	469,004	<b>&gt;</b>	181,177
ASPR 24 - TSA H						
Contract Services			\$	-	\$	-
Equipment			\$	-	\$	-
<b>Operational Supplies</b>	\$	219	\$	200	\$	(19)
Other	\$	2,390	\$	1,271	\$	(1,119)
Personnel	\$	89,989	\$	146,248	\$	56,259
Travel			\$	484	\$	484
Indirect Costs	\$	10,625	\$	16,466	\$	5,841
Total	\$	103,223	\$	164,669	\$	61,446
ASPR 24 - EMTF 6						
Contract Services			\$	-	\$	-
Equipment			\$	-	\$	-
<b>Operational Supplies</b>			\$ \$ \$	200	\$ \$ \$	200
Other	\$	28,194	\$	16,290	\$	(11,904)
Personnel	\$	60,205	\$	95,768	\$	35,563
Travel	\$	2,176	\$	6,305		4,129
Indirect Costs	\$ \$ \$	9,206	\$	13,173	\$ \$	3,967
Total	\$	99,780	\$	131,736	\$	31,956
ASPR 24 - EMTF 6 (State Gene	ıral Po	venue)				
Other	\$	135,094	\$	236,111	\$	101,017
Total	\$	135,094	\$	236,111	\$	101,017
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## Financial Summary - Categorical Budget Detail

	YTD	Budget	١	/ariance
RAC/EMS FY 24				
<b>Operational Supplies</b>	\$ 434	\$ 1,760	\$	1,326
Other	\$ (982)	\$ 135,839	\$	136,821
Personnel	\$ 169,468	\$ 231,246	\$	61,778
Indirect Costs*	\$ 37,002	\$ 127,194	\$	90,192
Travel	\$ 518	\$ 7,200	\$	6,682
Total	\$ 206,440	\$ 503,239	\$	296,799
RAC Development Funds FY24				
Operational Supplies	\$ 762	\$ 880	\$	118
Other	\$ 45,263	\$ 54,292	\$	9,029
Personnel	\$ 99,988	\$ 98,468	\$	(1,520)
Indirect Costs	\$ 38,202	\$ 63,597	\$	25,396
Travel	\$ 2,739	\$ 2,400	\$	(339)
Total	\$ 186,954	\$ 219,637	\$	32,683
County Funds FY24				
Contract Services		\$ 412,655	\$	412,655
El Funds FY24				
Other	\$ 28,490	\$ 150,000	\$	121,510
HFD Base Station				
Personnel and Other	\$ 582,233	\$ 1,843,106	\$ :	1,260,873

## **Unrestricted Assets Growth**

	Gen FY18	Gen FY19	Gen FY20	Gen FY 21	Gen FY 22	Gen FY 23	Gen FY 24	TOTAL
Revenue (Unrestricted)	458,767.59	357,970.13	828,743.55	495,286.00	787,368.00	115,462.00	559,542.69	4,310,513.54
<b>Expense (Grant Offsets)</b>	334,373.01	469,327.17	569,818.67	176,453.00	806,477.00	83,154.00	339,534.80	3,411,167.20
Unrestricted Net Asset	124,394.58	(111,357.04)	258,924.88	318,833.00	(19,109.00)	32,308.00	220,007.89	899,346.34
Total Fund Balance								899,346.34

**Notes:** 

#### **Preparedness and Response**



### Preparedness and Response

#### **Lisa Spivey-Director of Preparedness**

TSA Q-West Corridor - Kat Samuel

TSA H-Gary Litton

TSA R- Jeremy Way

Training & Exercise – James Meaux & Timothy Chapman

Special Populations - Fidel Calvillo

#### Overview:

This quarter, our team has endured significant personnel changes with the departure of two outstanding Training and Exercise Coordinators. Despite these transitions, we are fortunate to have onboarded two enthusiastic new team members who are eager to contribute. Undeterred, our team has worked tirelessly to ensure our stakeholders are well-prepared for any potential disaster in the region. Comprehensive training initiatives, spanning decontamination exercises to active attack drills, have been a key focus. We are committed to offering our expertise and supporting our stakeholders' preparedness and resilience initiatives.

#### Planning:

- Sustaining successful collaborations with hospitals, EMS, Fire, Police, Public Health, and City/County EMCs to cultivate robust partnerships.
- Completed Chemical Surge Plan as required by ASPR
- Engaging school districts Emergency Management in Region 4, socializing EMTrack
- Working with local partners in the planning process with the ExxonMobile MCI Exercise
- Working with Walker County and the local hospital on a full-scale exercise
- Collaborating with Houston Methodist to facilitate a system wide functional exercise in conjunction with the regional exercise
- Our Special Populations Coordinator continues to engage long term, home health, rehab, and FSEDs into the coalition by meeting with local OEM's, holding training sessions with this population to gain better understanding of EMResource, and will be presenting at HHSC Provider Meetings
- Collaborating with hospital leadership within the area of transport of the Houston Fire Department to increase participation of the new Regional Psychiatric Process and engaging other law enforcement to gain participation into the new program.
- Meeting with Nacogdoches EMC to provide program updates and participate in county Mass Casualty response plan development.
- Meeting with DETCOG leadership and participated in initial planning meeting for a homeland security MCI TTX exercise.
- Collaborating with UTMB and CATRAC to exercise their evacuation process, in conjunction with our regional exercise.

## SETRAC SouthEast Texas Regional Advisory Council

#### **Preparedness and Response**

#### **Training and Exercise:**

- Since January 2024 Facilitated 8 STB classes with a total of 237 trained
- Providing on-site training sessions on EMResource, EMTrack, and WebEOC for hospital staff.
- Trained 135 in DECON
- Planning meetings for the Brazoria County "West of the Brazos" MCI FSX
- T&E team are working on 2024 Spring Exercise hurricane evacuation.
- Our Regional Training Exercise Coordinator is participating in the G7 pediatric Exercise.

#### **Community Events/Exercises:**

- Participated in the DSHS 6/5 FAC planning meeting.
- Attended the Waller ISD Response and Reunification Staff and Student Training
- Attended the Strategic Planning for Workplace Safety: Addressing Active Shooter Scenarios
- Attended multiple Emergency management and School Safety Leadership Meetings to discuss ways to collaborate.

#### **Preparedness and Response**



#### **Troy Erbentraut – Director of Emergency Services & Response**

EMTF 6 Coordinator – Grant Kelley

Regional Logistics Manager - Philip Cutler

Mobile Assets Coordinator – Jarad Moreno

#### Overview:

Our response assets remain at a level of preparedness as we continue pre-coordination response efforts across the SETRAC region. An assertive effort is underway to develop and maintain communications channels with local and state agencies to ensure an integrated response. Efforts continue to optimize our workflows and set measurable objectives with the goal of increasing abilities and responsiveness.

#### **Logistics and Mobile Assets:**

- SETRAC DPMU (Disaster Portable Morgue Unit) has been restocked, reorganized, inventoried, and prepared for deployment.
- RST-1 (Resource Staging Trailer) project has been completed. Equipment is inventoried and prepared to deploy.
- BLT-1 (Billeting Trailer) was cleaned and test, the CO2 and Propane detectors were replaced, and trailer is safe for deployment.
- Asset request form has been modified to include cost statement, replacement statement along with dropoff and pick-up forms to assist with accuracy.
- Work continues on GC-11 and total inventory for accuracy and compliancy.

#### **EMTF:**

- Participated in Reveille Peak Ranch Training opportunity where EMTF Wildland Fire Resources come together for training and qualifications.
- Attend bi-monthly workgroup meetings in San Antonio
- Planning TMORT (Texas Mass Fatality Operations Response Team) training and DPMU orientation at Harris County ME Office for all ME's in the state along with EMTF members.
- Development of mass notification messages (OnSolve) for EMTF deployments and specifically severe weather standbys.
- Meet & Greets for EMTF-6 to reaffirm and build relationships.
  - Lumberton FD
  - Acadian Ambulance Service
  - o Christus St Elizabeth
  - Sugarland FD
  - o Fort Bend EMS
  - Cy-Fair
  - Houston Methodist Hospital
  - Atascocita FD
  - o Humble Fire and Rescue

- o Hermann Memorial Life Flight
- o MD Anderson
- Texas Forestry Service
- o TDEM
- Montgomery County OEM
- Harris Co OEM
- Houston OEM
- Houston FD



#### **Trainings:**

DDEOC	Regional	Training	02/20/2024	DDEOC-16 exercise and
				overview
Reveille Peak Ranch	State	Training	02/27-	EMTF-6 Coordinator &
			29/2024	Humble Fire
TEEX Disaster Day	State	Training	02/29 –	3 – MIST personal
			03/02/2024	
Operation Steer	Regional	Training	03/02/2024	MPV6-01

#### **Real World Incidents:**

EVENT	LOCATION	TYPE	DATE	ASSIGNED RESOURCES
CFP Championship	Regional	<b>Major Event</b>	08/08/2024	CMOC, EOC Support
Game				
<b>Houston Marathon</b>	Regional	<b>Major Event</b>	01/14/2024	CMOC, EOC Support,
				Medical Equipment
Forensic Anthropology	Local	Research	01/18-	DPMU-2
Center at Texas State			30/2024	
Flooding	Regional	SWX	01/25/2024	MPV6-01 standby in
				Mongomery Co
Severe Weather	State	SWX	Jan 2024	EMT-6 on 4 weather
Package				standbys (Ambus, AST, AST
				Leader & TF Leader)
Houston Rodeo BBQ	Local	<b>Major Event</b>	02/22-	Billeting Trailer for HFD
Cookoff			25/2024	
Smokehouse Creek	State	Wildfire	03/01/2024	WLFS Package for 7 days
Fire				(Humble Fire and Fort
				Bend)



#### **RHPC Board**

Dr. Kevin Schulz - RHPC Board Chair

Toni Carnie - RHPC Co-Chair

#### **New Business**

#### **Drill Policy**

Carrie Cox (SETRAC) reviewed the drill policy. After review, the coalition members unanimously agreed to approve the policy (copy of the policy filed in the RHPC Board minutes binder). The policy will go into effect January 2024.

#### End of Year Survey

Lisa Spivey (SETRAC) announced the End of Year survey will be sent out on December 4<sup>th</sup> with a month to complete (due January 6<sup>th</sup>).

#### New HFD Rotation

Ms. Upton announced a new initiative involving an Emergency Detention Order (EDO) is set to begin on November 13th, because of a collaboration between SETRAC, the Houston Fire Department, and the Houston Police Department. The process is initiated when the Houston Police Department issues an EDO and contacts the Neuropsychiatric Center (NPC). If the NPC is at capacity, the police will then contact the Houston Fire Department's telemetry unit, asking for the closest acute care facility to transport the patient.

At the telemetry unit, both an EMS and a police officer will work together to ensure no single facility is overwhelmed with EDOs. Initially, this initiative will only cover areas within the Houston Fire Department's transport jurisdiction, with plans to expand the program in the future.

Hospitals in the area are required to fill out a status form at midnight daily, which can be found in EMResource. Additionally, an update status for psychiatric facilities has been added to the EMResource homepage. These facilities are asked to update their status daily or as needed.

#### **Healthcare Preparedness Capabilities**

#### Long Term Care Update (C102)

Fidel Calvillo highlighted some of the items in the Special Populations update as listed below (filed with RHPC Board minutes binder).

Emergency Preparedness Bootcamps have been completed for all Corridors meeting grant requirement 6 in total; Continue to on board new facilities into the Coalition;

Providing guidance and SETRAC training to new facility administrators;

Presented at the HHSC Annual Provider meetings in October and upcoming in early November;

End of the Year Survey created for the Special Populations and to be distribute to Special Populations Stakeholders in December. This will collect the latest information from our stakeholders and assist with planning for this year's initiatives.

An LTC speaker presented lessons learned during a hurricane evacuation at our upcoming Symposium this year. There was an increase in attendance for Special Populations.

#### Training and Exercise Update (C104)

Ms. Cox reviewed the July Training and Exercise Schedule distributed to the coalition members (copy filed with RHPC Board minutes binder), and highlighted some of the classes as follows:

PER-211 Medical Management of Chemical, Biological, Radiological/Nuclear, and Explosive Events classes facilitated by TEEX scheduled for December 5<sup>th</sup>-6<sup>th</sup> and December 11<sup>th</sup>-12<sup>th</sup> at SETRAC.

The 2024 Regional Exercise (Operation Solar Storm) planning is underway. Ms. Cox gave the coalition members a brief overview of how the exercise will play-out and stated more details are to come. Registration emails will be forthcoming.

HAM Radio 101 is scheduled for November 8<sup>th</sup> and HAM-in-a-Day is scheduled for November 15<sup>th</sup> at SETRAC. The Off-the-Grid exercise is scheduled for December 19<sup>th</sup>.

EMResource training continues to be held online; however, special classes can be scheduled by emailing requests to <a href="mailto:exercise@setrac.org">exercise@setrac.org</a>.

#### EMTF Update (C104)

Troy Erbentraut introduced himself as the new Director of Response. He reported Mikal Orr (SETRAC EMTF-6 Coordinator) took another position with the Texas Forest Service so this position is open should anyone know of someone interested; the position is posted on the SETRAC website for them to submit their resume.

#### Inventory Update (C104)

Philip Cutler introduced himself as the new Logistics Manager replacing Kyle Ericksen. Going forward, should anyone have questions regarding inventory and assets, please email him at <a href="mailto:philip.cutler@setrac.org">philip.cutler@setrac.org</a>. Ms. Upton announced Jarrad Moreno will be starting next week to fill Mr. Cutler's position as the Mobile Asset Coordinator.

#### **Sub-Committee Updates**

#### RHPC Award of Excellence Committee (C101)

The small facility award went to CHI St. Luke's Livingston, the medium facility award went to Christus St. Elizabeth/Beaumont, and the large facility award went to Memorial Hermann TMC.

#### Symposium Planning (C101)

The coalition members took some time to share some symposium feedback with SETRAC. Ms. Upton advised anyone interested in serving on the Planning Committee should email Ms. Spivey at <a href="mailto:lisa.spivey@setrac.org">lisa.spivey@setrac.org</a>.

#### Clinical Advisory Committee (C101)

Ms. Cox reported the committee members are currently working on the Chemical Response Plan.

#### **Corridor Updates** (C101)

#### Downtown Corridor

Michael Olivier reported the Downtown Corridor met on August 4<sup>th</sup> at the City of Houston OEM where the corridor members learned more about their operations. The Houston Fusion Center gave a presentation and Texas Children's Hospital also gave a presentation regarding their decontamination event in July. The Downtown Corridor radio check was conducted this morning with increased participation and the corridor members continue to work on their participation. The next meeting is scheduled for December 1<sup>st</sup> at SETRAC.

#### South Corridor

Michael Nixon reported the next South Corridor met on September 8<sup>th</sup> at Houston Methodist Clear Lake where they discussed the SNP full-scale exercise held a few weeks ago. Christy Gonzalez (Wharton EMS) was announced as the South Corridor co-chair. The next meeting is scheduled for November 10<sup>th</sup> at the HCA Southeast.

#### East Corridor

Lydia Worthen reported the East Corridor met on September 15<sup>th</sup> at Chambers County Public Health with good discussion regarding upcoming events, lessons learned, and best practices. They are working to pull a group together to go to the FEMA training in Anniston, Alabama. The next meeting is scheduled for December 8<sup>th</sup>.

#### North Corridor

Stephen Bennett reported the North Corridor met for an in-person meeting on September 13<sup>th</sup> at the Pitser Garrison Civic Center in Lufkin. Jon Clingaman (TDEM) gave an overview of the County Liaison Officers Program and the new regional changes The next meeting is scheduled for November 8<sup>th</sup> at Nacogdoches Memorial Hospital.

#### West Corridor

Dena Daniel reported the West Corridor met on September 22<sup>nd</sup> at Memorial Hermann where Waller ISD was present to give a presentation on emergency management through the eyes of education. The next meeting is scheduled for Friday (December 15<sup>th</sup>) at Texas Children's Hospital West Campus. Ms. Daniel announced the West Corridor will be adjusting the 2024 meeting schedule to be scheduled the fourth Friday of every even month (February, April, June, August, October/Symposium, and December) versus odd months as in the past.

#### Partner Updates (C101)

#### **Public Health**

• DSHS 6/5 South – Ms. Spivey gave Justin Woodard's report in his absence as follows:

DSHS is experiencing a 'Red Tide' bloom in our waters last month, poisoning some shellfish in the Gulf and causing respiratory problems. We released alerts and fact sheets, but I am happy to report that the waters are now cleared and as "clean" as normal.

RSV numbers are on the rise statewide and within our region. As of 10/21, the positivity rate for PCR tests for RSV was 14.05% in Texas and 23.39% in Region 6. CDC released a HAN due to the limited availability of nirsevimab (the new monoclonal antibody for RSV to be given to infants during their first RSV season to protect against the infections) in the United States. CDC recommends prioritizing available nirsevimab 100mg doses for infants at the highest risk for severe RSV disease: young infants (age <6 months) and infants with underlying conditions that place them at highest risk for severe RSV disease.

There is a nationwide outbreak of *Salmonella* (strain *Salmonella Thompson*): Gills Onions is voluntarily recalling Gills Onions branded fresh diced onions products because they have the potential to be contaminated with *Salmonella*. Recalled onions were sold in select stores and were also sent to restaurants and institutions nationwide and in Canada. There have been 73 associated illness and 15 hospitalizations in 22 states (including 1 case in Texas).

COVID numbers are also increasing. COVID case numbers are up 3.5% for last week (10/22-10/28) compared to the previous week in Texas. In Houston the COVID wastewater has been increasing since the report for 10/9. The latest report on the website from 10/23 shows 124% of the baseline compared to 98% the previous week.

#### **OEM**

• City of Houston OEM – Tom Munoz reported they are preparing the Veteran's Day Parade.

• Harris County OEM – Mark Sloan reported they are working with the state on the College Football Championship scheduled for Monday (January 8<sup>th</sup>), the marathon in January, and monitoring the current protests. He reminded the hospitals to closely pay attention to the cyber activity that continues to be very high for the healthcare systems.

#### **EMS**

- Wharton EMS Christy Gonzales reported they will be conducting a free radio 101 training with Harris County in
  December open to other agencies. Life Flight is hosting a pediatric course and advance cardiac life support training.
  Reach out to Ms. Gonzales for more details.
- **SETRAC** No current update.

#### **Other Partners**

- **UTMB** Mike Mastrangelo reported UTMB participated in an Arkansas-based hemorrhagic fever exercise. Working with Maritime Industries to develop an infectious diseases exercise. Also working with Texas City ISD on a hydrofluoric acid release plan and working with Port of Galveston on a phosphite release incident plan. In May, they will conduct a chemical symposium and exercise.
- **Harris Health System** Santonio Hoke reported he is no longer the Emergency Manager for LBJ, and they are currently interviewing for this position.

#### **Open Discussion/Other**

#### Proposed 2024 RHPC Board Meeting Schedule

Ms. Upton requested review and approval of the 2024 RHPC Board meeting schedule (copy filed with RHPC Board minutes binder). Toni Carnie suggested the July meeting be rescheduled for July 12<sup>th</sup> to avoid the July 4<sup>th</sup> holiday week. The coalition members agreed and approved the schedule with the July meeting change.

#### **Bariatric Patients**

There was discussion regarding the availability for bariatric patient equipment. Anyone with more information regarding this matter, please forward it to Ms. Spivey at lisa.spivey@setrac.org.

#### Whole Blood Workgroup

Clayton Ehrlich reported the EMS Committee has a new subcommittee called the EMS Blood Products Subcommittee. This subcommittee is looking to regionalize the processes of prehospital blood administration to ensure that we as a region are being good stewards and reducing waste of blood. The subcommittee had its second meeting recently where we created two workgroups of the subcommittee were established; they are the EMS Blood Products Clinical Workgroup and the EMS Blood Products Operations & Logistics Workgroup. Gulf Coast Blood Bank was also in attendance at the meeting to get the regionalization process implemented with them as a partner. More to come on this initiative and we are excited to get this regional process in place.

## Information Technology

## **Information Technology**

#### Jeremiah Williamson - Director

System Analyst - Jason Nolin

#### **Infrastructure Development:**

- Asset technology workups
  - o MCC 604 Technology Buildout Initial planning phase nearing completion
  - o MCC 603 Nearing completion
  - RCVQ Undergoing final upgrade adjustments. Nearing completion.
- The beginning stages of what will eventually become SETRAC's CEO Portal have rolled out. This initial phase involves access to the Behavioral Health Daily Reports, which graphically present behavioral health-related data SETRAC began collecting on 13 November 2023. The following phases will include: evolving to managed user accounts capable of providing increased security and access functions, embedded apps for data collection and reporting, responsive rendering for easy access with handheld devices, security and compliance.

#### **Service Continuity:**

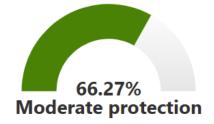
• SETRAC has partnered with a local broadband wireless connectivity company, Infrastructure Networks (iNet). Through iNet, SETRAC now has Starlink services for its communication assets

#### **Training:**

• Jeremiah has begun training in development and management of Microsoft's Power Platform which will soon be utilized in the development of a CEO Portal to share sensitive information and data securely.

#### **Information Security Summary:**

SETRAC's overall cybersecurity secure score is 66.27%, improving by 1.1% from last month. It is 17.98% higher than other organizations of a similar size. A higher number indicates that more recommended actions have been taken, which minimizes our risk from attacks.



Your score	66.27 / 100
Organizations of a similar size	<b>48.29</b> / 100



#### **Information Technology**

SETRAC's threat protection status shows a gentle decrease in phishing emails since the beginning of the year, with occasional incidents of attempts to push malware through. This status report provides information about threats found prior to email delivery to SETRAC, covering relevant detection technologies, policy types, and delivery actions.





#### Trauma Committee

**Medical Director: Dr Michelle McNutt** 

**Chair: Dr Chad Wilson** 

Vice Chair: LeAnne Young and Adam Fitzhenry

The committee met in person on 01/4/2024. We cancelled the March Trauma Day due to Spring Break and GETAC. The next committee meeting will be held on 05/02/2024.

The focus of the committee includes:

- Our 2024 goals
  - 1. Understand the scope and distribution of patients.
  - 2. The SETRAC Blood Product workgroup having an operational program by the end of 2024.
  - 3. Support smaller Level III and IV Trauma Facilities with standardized polices, guidelines and mentoring.
  - 4. Assist the EMS Committee with the development of the Pre-Hospital Registry.
  - 5. Standardize the "Follow Up" process for our Region.

#### Trauma Rules

- There were almost 3900 public comments made regarding the proposed rules. 264 for definitions, 206 for the Rac rules, 3382 regarding the trauma rules and 25 about funding. The comments were made by 157 commenters. There was a special GETAC Council called on March 20<sup>th</sup> where we were able to get a better idea of the changes that had been made following the public comment period. For example, a lot of the disaster rules for the Trauma Program Manager and Trauma Medical Director had been removed. However, we remain cautious as the rules will be sent to the Texas Register on May 2<sup>nd</sup> for a May 17<sup>th</sup> release date. At this time, we are being told that we will have to meet the new requirements from January 1<sup>st</sup>, 2025. To help facilitate the anticipated changes, we will be holding an in-person meeting on June 4<sup>th</sup>, 2024 to discuss the changes and what they mean for each facility.
- At the last Board meeting we discussed the delay in designation post survey for many of our trauma facilities.
   The State reported at the GETAC meetings that they are completely caught up and moving forward those delays should be minimized and with the additional new rules, they should no longer be making extra requests from the Trauma Programs.
- The common themes for Contingencies and Focused Reviews remain the same:
  - 1. Nursing documentation
  - 2. Identification of all deviations
  - 3. Actions taken to address deviations
  - 4. "Loop closure" resolution
  - 5. TMD credentialing and program participation
  - 6. Continuous PI for the 3-year cycle
  - 7. TMD participation in PI
  - 8. Specialty physician credentialing and education.

#### Trauma Registry

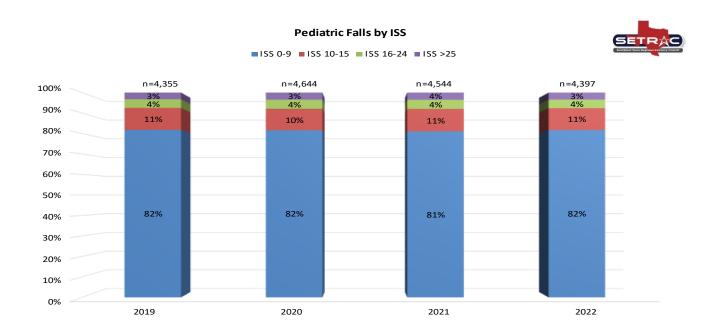
 We are planning a fall Trauma Registry Workshop that will concentrate on IRR -Inter Rater Reliability following the evaluations form are class in February. Our current overall accuracy is at 60%. We would hope to see an increase to at least 80% after the workshop education.

#### **Emergency Healthcare Systems-Trauma, Pediatrics, Injury Prevention Division**

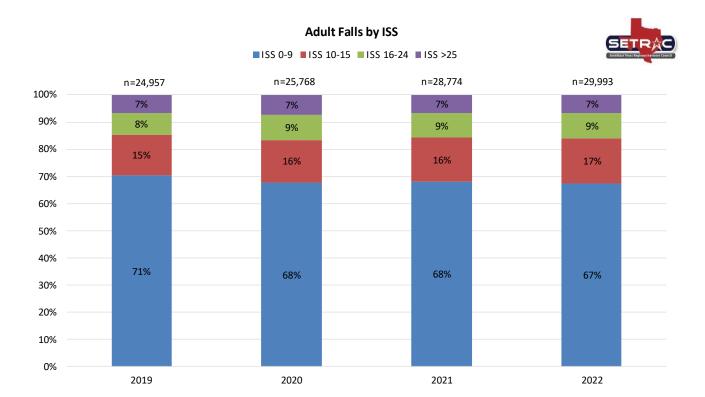
- Our goal is to produce a poster presentation for TQIP on IRR at the RAC level. As far as we know we are the only RAC that is doing this currently.
- We are forming a small workgroup to work on a PI initiative from the State we will be looking specifically at transfer out to HLOC times in the adult population with criteria specified by GETAC.

#### Trauma Data

- o Falls remains our number one mechanism of injury across all ages.
- We are expecting to receive the 4<sup>th</sup> quarter of 2023 in the next week. Hopefully we will be able to present all of 2023 at the next Board Meeting.



#### **Emergency Healthcare Systems- Trauma, Pediatrics, Injury Prevention Division**



### **Injury Prevention Committee**

Medical Director: Dr. Shiree Berry, MD; FACS

Chair: Kristen Beckworth, MPH, CHES, CPST-1 Texas Children's Hospital

Vice Chair: Blake Milnes HCESD 5

The committee met in person on 01/04/2024. The next committee meeting will be held on 05/02/2024.

The focus of the committee includes:

- Community Education
  - We will be attending the Fort Bend County Health Fair on April 27<sup>th</sup>. Our outreach education will be concentrated on swimming pool safety and car seat safety in both the pediatric and senior populations.
- Continued collaboration with injury prevention for firearm safety in the pediatric population.
- With the new rules coming into effect this year, we will be spending time putting together some tools that our smaller facilities can use during survey. Over the past 18 months, we have seen an uptick in the questions being asked about a hospitals Injury Prevention program.

#### **Pediatric Committee**

The Medical Director: Dr. Brent Kaziny Committee Chair: Dr. Nichole Davis Vice Chairs: Andre Ruby and Eric Parmley

The committee met in person on 01/04/2024. We had 58 stakeholders attend our first Trauma Day Pediatric Committee. This is the largest number ever in attendance at the Pediatric Committee.

The next committee meeting will be on 05/02/2024.

The focus of the committee includes:

- Continued collaboration with injury prevention for firearm safety in the pediatric population
- Education on Inflicted Injuries and pediatric mental health that can be shared both with hospital providers and
  within our community. Suicides within the pediatric population is growing every month and there is very little
  education on mental health awareness within this special population.
- We have 1 Nurse from TCH that has completed her training as a Regional PECC (Pediatric Emergency Care Coordinator) She will be bringing education to different Emergency Rooms in the area and helping them prepare for the Pediatric Readiness Survey. Readiness.



#### **Emergency Healthcare Systems- Stroke/Cardiac/Perinatal Division**

#### Stroke Committee

Medical Director: Dr. Sean Savitz Chair: Dr. Chethan Venkatasubba Rao

Vice Chair: Christy Gonzales and Dr. Bryan Kharbanda

The committee met in person on 3/27/24. The next committee meeting will be held on 5/22/24. The focus of the committee includes:

#### Extended Window Strokes

The committee has identified a trend of 70% of patients arriving to a designated stroke facility outside of the 4.5-hour window. Parameters for Extended Window Strokes have been identified as Last Known Well from 4.5 hours – 24 hours. Developing a heatmap to focus regional efforts in areas of high stroke incidence.

#### • Rehab Utilization

• The committee aims to identify socio-economic indicators, to include rural vs urban, insured vs uninsured, ethnicity, etc. regarding rehab utilization. A Dashboard is published for the subcommittee to use in a PI project.

#### Pre-Hospital Metrics for Stroke

- Stakeholders have identified EMS metrics that would aide in achieving the committee goals. The metrics have been presented to the EMS Committee and are being evaluated through the EMS data workgroup.
- The committee leaders are aware that Stroke CEO reports will be provided to EMS Medical Directors to improve care from all aspects.
- International Stroke Conference (ISC)
  - Dr. Rao submitted an abstract to ISC with a goal to present on the "Evolution of Stroke Care" within our region at the 2024 ISC. This will highlight gaps to increase transparency and performance improvement. The abstract was accepted January 2024 and published on their website.

#### Education

- o 2-day stroke bootcamp event with 30 participants was held January 9-10, 2024, providing 12.75 CEs.
- The bootcamp day 1 provided emergency neuro education to stakeholders. Day 2 was formulated for data abstractors and stroke coordinators to enhance knowledge and provide program support.
- o Dr. Kharbanda and the stroke committee are working on a posterior stroke education, offering CEs through our online Learning Management site.

### **Cardiac Committee**

Medical Director: Dr. James McCarthy

**Chair: Dr. Kevin Schulz** 

Vice Chairs: David Bernard / Dr. Sanket Borgaonkar

This committee meets quarterly and met on 1/26/24. The next Committee meeting will be held on 4/26/24. The committee requests the board to approve Dr Sanket Borgaonkar to the physician representative co-chair position. The focus of the committee includes:

- Committee Goal: Develop community education, including a regional hands-only CPR event.
  - "Heart of the Matter" community education program in development in collaboration with the stroke and perinatal committees.
  - Program will offer hands-only CPR, Stroke, cardiac and maternal education related to blood pressure management, and BE-FAST.
  - o High risk zip codes identified through data will be target audience.
  - HEB has donated 100 blood pressure cuffs.
  - Hands-only CPR offering on 4/5/24 at Top Ladies and Teens of Distinction event. The event will be held at the Westin Galleria and have approximately 300 in attendance.
- Committee Goal: Unified social media presence related to STEMI regional education.
  - o February Heart Health Month featured unified social media messaging.
- Committee Goal: Develop Regional Cardiac Plan
  - The Regional Cardiac Plan was approved by stakeholders on 4/28/23 obtaining Board approval 7/17/23. The Regional Cardiac Plan includes:
    - Data submission and meeting participation requirements to remain a member in good standing and maintain PCI status on EMResource and SETRAC's Cardiac webpage.
    - Requirement to provide case feedback to EMS.
    - · Responsibilities of the Medical Director position
  - o NCDR Chest Pain-MI Registry: Pending revised agreements.
    - Patient level data, not to include PHI, will be available once access is obtained.
    - Data will be used to meet the data requirements of the RAC self-assessment tool, as well as assist in formulating data driven goals.
- Partnering with EMS committee to develop a safe transfer guideline for balloon pump patients. This project and workgroup came out of a request by stakeholders.

#### **Perinatal Committee**

**Neonatal Medical Director: Dr. David Weisoly** 

Maternal Medical Director: OPEN Committee Chair: Dr. Elizabeth Eason Vice Chairs: Kendra Folh/ Zach Ward

The last meeting was held on 4/3/24. The next meeting will be held on 6/5/24. The committee requests the board to approve Zach Ward to the EMS representative co-chair position The Maternal Medical Director position is open for nominations. The focus of the committee includes:

- The Texas Collaborative for Healthy Mothers and Babies (TCHMB)
  - This group is focusing on recognition and response to postpartum preeclampsia in the Emergency Department (PPED). Eight hospitals from our region have enrolled in the project. The goal is to obtain baseline data and increase the treatment of patients by 50%
  - This group also focuses on improving newborn admission temperatures. RAC Q has strong participation in this project with 76% of our hospitals enrolled.
- Maternal Morbidity & Mortality Workgroup Focus:
  - The new Maternal Rules and House Bill 1164 Placenta Accreta Spectrum Disorder are in effect. Dr. Toy developed an educational video on Placenta Accreta Spectrum to assist hospitals to comply with HB 1164, maternal designation, and preparation for PASD. The video is hosted on the SETRAC Learning Management System and has more than 600 learners. The education offers nursing and paramedic continuing education credits.
  - This group is encouraging all hospitals and clinics to look at the overall treatment of patients to see if we are
    identifying and diagnosing the conditions as early as possible. This can aide in positively changing the racial and
    ethnic disparities that lead to increased mortality rate.
- Infant Morbidity & Mortality Workgroup Focus:
  - A list of QAPI triggers is being developed that all hospitals will be encouraged to follow as a way of quality improvement and tracking. Current practices are being reviewed to ensure regional best practices are utilized.
- Perinatal Planning Workgroup Focus:
  - Neonatal Resuscitation Program (NRP): Training for EMS
    - NRP instructors throughout the region have volunteered their time to teach our EMS partners. Nine classes
      have been held with 162 participants. Classes for 2024 are in planning. The goal is to reduce infant mortality
      through education and skills in the prehospital setting.
  - This group will begin focusing on best practices in disaster preparedness for the NICU and maternal populations.
- Breastmilk at Discharge Workgroup:
  - Project Aim: By January 1, 2024, 75% of all NICU babies will discharge on mother's own milk. According to the Q1-Q4 2022 data, the region is currently at 68.4%.
  - Project Aim: By January 1, 2024, 55% of all VLBW babies will discharge on mother's own milk. According to the Q1-Q4 2022 data, the region is currently at 52.03%.
  - Neonatal designated facilities share their best practices at each meeting.

#### **Emergency Healthcare Systems- Stroke/Cardiac/Perinatal Division**

- An abstract was submitted at Pediatric Academic Societies (PAS) conference titled: Improving Delivery of Breastmilk to VLBW Infants at Time of NICU Discharge Through Collaborative Quality Improvement in a Large Perinatal Care Region in Texas.
- Antibiotic Timeliness Workgroup:
  - The initial project goal was to achieve ≤31% of babies receiving antibiotics more than one hour after order or birth. The latest data reflects the region is down to 26.8%. The goal for Jan 2024 is now 20%.
  - The "Beat the Clock" initiative was adopted to decrease the percent of NICU infants receiving antibiotics in the first week of life more than 1 hour after order/birth.
  - A poster presentation was submitted to PAS titled Improving Neonatal Antibiotic Administration Timeliness in a Large Regional Quality Improvement Collaborative.
- Neonatal and Maternal Program Manager Subcommittee:
  - This group ensures regional neonatal and maternal program managers and medical directors are abreast of the Texas Administrative Code and support through designation surveys.
  - Review and discussion of new DSHS designation rules occurred at last meeting. Feedback is being captured to share with DSHS.
- Maternal Subcommittee:
  - This is a new subcommittee focused on maternal data, QI/PI
  - o Co-leaders are Dr. Kelli Burroughs and Dr. Aaron Roberts
  - o First meeting will be April 23, 2024

## SETRAC SouthEast Texas Regional Advisory Council

#### PRE-HOSPITAL / EMS COMMITTEE REPORT

## **Pre-Hospital/EMS**

#### Clayton Ehrlich – SETRAC EMS Coordinator

**Committee Medical Director:** Dr. Shane Jenks **Committee Chair:** Jason Gander

**Committee Vice Chair:** Kevin Leverence and Dr. Joseph Gill

#### **Committee Highlights:**

#### EMS Committee Meeting Schedule Change:

The EMS Committee has voted to change the structure and dates of the committee meetings moving forward. It has been expressed that having the EMS Committee, EMS Subcommittees, and the EMS Workgroups on the same day would increase participation and collaboration on regional projects. In the March EMS Committee, "Pre-Hospital Day" was voted on and approved by the committee. The next meeting is on May 15, 2024.

#### • EMS Workforce Development Initiative (Senate Bill 8):

The link/webpage on the SETRAC website for more information regarding the SB8/DSHS scholarship remains active and continues to gain attraction. Since its live date we have received over 1200 inquiries regarding the scholarship. To date SETRAC has distributed 170 scholarships. Expenditures for the SB8 Initiative total \$1,088,336.65 and unexpended funds total \$483,448.79.

#### • Texas EMS Wristband Program:

The Texas EMS Wristband Program is currently in process to roll out in the SETRAC region. EMS agencies who are our pilot partners for this program are working with their local hospital systems for hospitals to be able to record these wristbands in a designated field. Selected EMS agencies are beginning to place wristbands on every patient transported by EMS to a hospital system. Regional implementation will follow when feedback from pilot partners is obtained for the establishment of best practices for the wristband program. SETRAC intends to post information on the SETRAC website for stakeholders to familiarize themselves with the processes of the program.

#### SETRAC EMS Blood Products Subcommittee:

The EMS Committees newly formed EMS Blood Products Subcommittee, met on March 15<sup>th</sup> after the EMS Committee meeting. This subcommittee was established to regionalize a blood program that focuses on the clinical and logistical facets of administering blood or blood products to patients in the prehospital setting. This is performed through establishing regional best practices for implementation, administration, and a logistical blood rotational process in the SETRAC region. The subcommittee is now on the schedule of the Pre-Hospital Day meeting schedule and will meet as assigned. Currently working with the local blood banks is a primary focus amongst the committee. The subcommittee and workgroups are working diligently to maintain a goal of establishing the regionalization process by the end of 2024.

## SETRAC SouthEast Texas Regional Advisory Council

#### PRE-HOSPITAL / EMS COMMITTEE REPORT

#### • EMS Data:

SETRAC is attempting to find the best possible process in collecting this data. At the first EMS Data meeting the EMS members agreed for SETRAC to receive the NEMSIS data. This data would provide a significant resource and value to the region. We are working to continue to find a process that would allow SETRAC to receive the data that EMS submits to be able to make data driven decisions for regional performance.

#### Regional Quality of Care:

The EMS committee has encouraged members to attend other SETRAC committee meetings and have encouraged members of other clinical committees to attend the pre-hospital meetings (stroke, trauma, inj. prev., cardiac, etc.).

EMS Committee Goals for 2023/2024						
Goals	Actions					
Reengaging the EMS Whole Blood     Program	<ul> <li>Develop a list of providers using pre-hospital blood and creating best practices on being good stewards of whole blood.</li> </ul>					
EMS Data	<ul> <li>Begin to collect data from EMS partners to make accurate data driven decision on best practices and regional guidelines.</li> </ul>					
Regional MCI Workgroup	To engage a group of agencies to determine/ establish common MCI nomenclature and terminology for guidelines to establish best practices for the region.					
Engage stakeholders	<ul> <li>To distribute an engagement survey for quality purposes, and to ensure the pre-hospital committee is remaining relevant to its stakeholders.</li> </ul>					