



**BOARD OF DIRECTORS  
QUARTERLY MEETING /  
ANNUAL MEETING**

**JULY 21, 2025**



Chairman	David Persse, MD
Vice Chairman Hospital Services	Tom Flanagan
Vice Chairman Pre-Hospital Services	James Campbell
Secretary	Walter Morrow, RN, CFRN, EMT-P
Treasurer	Lon Squyres
Officer-at-Large	Brent Kaziny, MD MA
Chief Executive Officer	Lori Upton

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

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

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### SETRAC BOARD OF DIRECTORS QUARTERLY MEETING / ANNUAL MEETING

**July 21, 2025 – 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./  
Walter Morrow, RN, CFRN, EMT-P**

**2) WELCOME**

**David Persse, M.D.**

**3) NOMINATIONS COMMITTEE**

- a. Nominations for board of director positions with expiring terms
- b. Nominations for board of director positions with vacancies

**Tom Flanagan**

**4) OFFICER REPORTS**

**A. Chairman**

**David Persse, MD**

**B. Vice Chair Hospital Services**

**Tom Flanagan**

- a. Update on ad hoc dues committee

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

**James Campbell**

**D. Secretary**

**Walter Morrow, RN, CFRN, EMT-P**

**E. Member At Large**

**Brent Kaziny, MD**

- a. Update stakeholder engagement/attendance

**F. Treasurer**

**Lon Squyres**

- a. Financial reports

**5) EXECUTIVE REPORT – Chief Executive Officer**

**Lori Upton, RN, BSN, MS**

- a. Preparedness and Response report
- b. Emergency Healthcare Systems (EHS) report

**Lisa Spivey/Troy Erbentraut  
Suzanne Curran/Melanie Aluotto/  
Clayton Ehrlich**

- i. RAC PI Transfer Project

**Sheila Lopez**

***(Agenda continued on next page)***

***Meeting Agenda (continued)***

**6) REMAINING ACTION ITEMS/BOARD CONSIDERATION**

**David Persse, MD**

- A. Approval of Prior Meeting Minutes**
- B. Approval of Reports** (Financial, Executive)
- C. Resolutions/Other Action Items**
  - a. Approval of RAC self-assessment
  - b. Approval of proposed dues changes
  - c. Approval of recommending the SETRAC Foundation research the purchase of the property of the current SETRAC warehouse location
  - d. Vote for open board officer positions

**7) GENERAL/OPEN DISCUSSION**

**David Persse, MD**

**8) ADJOURNMENT**

**David Persse, MD**

**Next Meeting:**   October 20, 2025 – 6:30pm  
                          SETRAC Conference Center  
                          1111 N. Loop West, Suite 160  
                          Houston, TX 77008



Chairman	David Persse, MD
Vice Chair-Hospital Services	Tom Flanagan
Vice Chair-PreHospital Services	James Campbell
Secretary	Walter Morrow, RN, CFRN, EMT-P
Treasurer	Lon Squyres
Officer-at-Large	Brent Kaziny, MD, MA
Chief Executive Officer	Lori Upton

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

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

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### Board Meeting Minutes

**April 21, 2025**

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

Dr. David Persse, Chairman, called the meeting to order at 6:30 pm. The meeting was held in-person at the SETRAC Conference Center. Walter Morrow, Secretary, called roll and a quorum was established.

#### 2. **WELCOME**

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

It was announced that Memorial Hermann is making a change to their representative on the SETRAC board. Due to this change, there will be a vacancy in the Vice Chairman of Hospital Services role as Tom Flanagan will no longer be serving as a board member.

#### 3. **NOMINATIONS COMMITTEE**

Mr. Flanagan reported that the following individuals have been nominated to serve on the SETRAC Board of Directors. The board will vote at this meeting to approve the nominations.

- Dr. Samuel Prater has been nominated by Erin Asprec to replace Mr. Flanagan as the representative for Memorial Hermann.
- Sterling Taylor has been nominated by Dr. Marc Boom to replace Wayne Voss as the representative for Houston Methodist.

The nominations period for the following officer positions were opened at the meeting and will remain open for 30 days. Voting on these positions will take place at the July 2025 board meeting. Nominations are to be sent to [nominations@setrac.org](mailto:nominations@setrac.org).

- Chairman
- Vice Chairman of Hospital Services
- Officer-at-Large

The following board member terms will expire in July 2025. These representatives may be renominated to a new three-year term. Nominations are open through Friday, May 23<sup>rd</sup>.

- CHI St. Luke's Health
- City of Houston EMS (HFD)
- Colorado County

- HCA Houston Healthcare
- Matagorda County
- Regional Hospital Preparedness Coalition (RHPC) – to be selected by the RHPC board
- Waller County

#### **4. OFFICER REPORTS**

##### **A. Chairman**

Dr. Persse reported that the SETRAC employees received an employee survey via BentEar Solutions. The survey is due on April 25<sup>th</sup>. A similar survey will be sent to stakeholders following the conclusion of the staff survey.

While the Greater Houston area has a high immunization rate against measles, there could be some travelers/immigrants from other countries that could see a larger rate of infection due to not being immunized.

The World Cup could bring half a million people to Houston during the 39-day event. Healthcare facilities are asked to prepare for a larger influx of people.

##### **B. Vice Chair Hospital Services**

Mr. Flanagan reported that the real-time bed reporting pilot is being put on hold due to the activity taking place at the federal level.

The ad hoc dues committee is reviewing cuts that could be made at the federal and state level to help determine what the changes in dues may look like. The information will be presented at the July meeting.

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

James Campbell reported that the challenges of getting a rotational regional program are being worked through for the whole blood project.

The no-notice regional MCI plan has been reviewed.

There is a bill currently in legislation that could potentially fund blood products and there is talk about possibly continuing Senate Bill 8 in some fashion.

The EMS leadership listserv is being used on a regular basis and has been very useful.

##### **D. Secretary**

Mr. Morrow had no items to report.

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

Dr. Kaziny reminded hospitals and prehospital services to recognize or identify individuals that may have measles so appropriate precautions can be implemented when transferring the patient.

Dr. Kaziny also reminded everyone that this is a good time to prepare for hurricane season.

##### **F. Treasurer Report**

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

- All grant accounts are on track with spending.
- The Amegy Bank operating account has a large balance; however, Amegy Bank is able to spread the money among multiple accounts in order to ensure the money is insured.
- Unrestricted asset growth shows a total fund balance of \$983,957.99. Approximately \$350,000 from the general fund is taken to support current operations to support shortfalls in state and federal funding.

Clarification was provided by Mr. Flanagan and Mr. Squyres on how the purchase of a new warehouse/office space would be funded. The SETRAC Foundation would purchase the new location while SETRAC would lease the space from the SETRAC Foundation. SETRAC is not able to purchase a building using grant funds from the state. A suggestion was made to emphasize that the SETRAC Foundation and SETRAC are two different entities and that it is the Foundation that would be purchasing the building.

Mr. Squyres shared that Maestro will be dissolved due to the lack of requests and resources. The funds will be deposited into the SETRAC account.

## **5. EXECUTIVE REPORT**

Lori Upton provided the board members with an orientation book that includes an overview of SETRAC finances, governing structure, affiliated organizations, and bylaws.

Ms. Upton thanked Dr. David Weisoly, Dr. Elizabeth Eason, Dr. Nichole Davis, and Dr. Eugene Toy for their assistance with developing protocols for babies and pregnant mothers in regard to measles exposure that was disseminated through our listservs.

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

- SETRAC has been awarded the HFD Base Station contract for an additional five years. SETRAC will employ a full-time base station manager.
- SETRAC was also awarded the HPP contract with the New Mexico Department of Health to be a fiduciary agent.
- Maestro currently has approximately \$92,000 in its account and is losing money each year due to lack of resources. A request will be made to the Maestro board to dissolve the organization and to roll the money over to SETRAC.
- SETRAC will once again be participating in the NASCAR Day Giveathon, a 27-hour national fundraising campaign. Ms. Upton challenged the board members to match her donation of \$200. The fundraising event will have opportunities to have donations matched.
- A blood drive will be held at SETRAC on May 22<sup>nd</sup> as part of EMS week and to support the whole blood program.
- Registration, call for speakers, and hotel reservations are now open for the RHPC Symposium. DSHS will give \$100,000 to support the symposium by adding a track for emerging diseases.
- A written budget has been created for the clinical department so directors can view their spending.
- The SETRAC Foundation has its own website at [www.setracfoundation.org](http://www.setracfoundation.org).
- The IT department has completed the requirements and attestations for PCI DSS compliance. This allows SETRAC to collect credit card information securely.
- **Preparedness and Response** – A written report was provided to the board prior to the meeting. Lisa Spivey and Troy Erbentraut provided the following update:
  - Ms. Spivey reported that the training and exercise team have been working with stakeholders in preparation for the World Cup.
  - An MCI triage training will be held at the end of the month, targeting EMS and ED partners.
  - The Special Populations Coordinator is developing a boot camp for elected officials, targeting the difference between 55+ apartments and nursing homes.
  - A big exercise simulating an aircraft crash will be held at Jack Brooks Airport. Over 100 volunteers will be assisting with the event and media will be present.

- A mandatory daily bed report in regard to the measles outbreak has been created in EMResource. There is currently no end date for the reporting. The reporting period is from 8am to 1pm on weekdays only.
- A webpage is being built which will be dedicated to World Cup information, resources, and upcoming trainings.
- Ms. Spivey thanked our partners at CenterPoint Energy for assisting with getting answers to hospitals during power outages.
- A meeting is taking place with Galveston officials with the upcoming Topless Weekend to determine what assets may be needed from SETRAC.
- All four of the regional ambulances were present for a training. A photo of all the ambulances together has been posted to our website.
- SETRAC has developed a cache of O<sub>2</sub> through a partnership with the Houston Health Department and the Houston Fire Department for use during a disaster.
- EMFT had IDRU training at Cy-Fair on February 6<sup>th</sup>-7<sup>th</sup>.
- Ms. Spivey reminded everyone that training is available for any organization that needs it and to keep the night and weekend staff in mind concerning training needs.
- **Emergency Healthcare Systems** – A written report was provided to the board prior to the meeting. Suzanne Curran and Melanie Aluotto provided the following updates as well as Dr. Nichole Davis (Pediatric Committee Chair):
  - One of the Level III trauma designated facilities will be going in active pursuit of a Level II designation.
  - The state is holding regular meetings to review the new trauma rules.
  - The Trauma Registry Workshop was held in February and was very successful. Next year's workshop is being planned and may include invitations to RAC H and RAC R.
  - Mechanisms of mortality is now being reviewed by the Trauma Committee to see if education is being delivered appropriately. For the first time, gun injuries has substantially decreased.
  - The Injury Prevention Committee will once again participate in the Katy Area Safety Fest to provide education to the community.
  - In the month of April, just under 1,000 employees from both airports were trained in Stop the Bleed. The last training will be April 30<sup>th</sup>.
  - Crosby EMS have set up a program to help the elderly in the community that will be presented at the EMS committee.
  - Dr. Davis shared that the Pediatric Committee has a goal of liaising with the other committees so the pediatric population stays in the forefront and not an afterthought. The committee will continue to support the regional PECCs. Many RACs have 100% utilization of the PECCs while SETRAC is not taking advantage of the resources. A survey to determine the barriers of use will be sent out to hospitals soon. Sample cases will be presented at future meetings.
  - The Pediatric Committee will be developing a checklist for EMS and complex care clinics that they can distribute to parents so they are prepared so children with special needs will have the necessary items when sheltering at the hospital. Dr. Davis will also be liaising with shelters in hopes of making them aware of how restrictive shelters can be for children with special needs.
  - Texas Children's and SETRAC will be putting on the annual exercise for the G7. The Pediatric Preparedness for the Healthcare Professional will be taking place in San Antonio in August.
  - Ms. Upton reported that the National Pediatric Readiness Quality Initiative just released their latest newsletter. Texas is the national leader in pediatric readiness and in providing high quality care during emergencies. In 2024, GETAC endorsed the NPRQI as the method to ensure best outcomes for pediatric patients; however, to date no hospitals in SETRAC region have signed onto this initiative.

Ms. Upton suggested the Pediatric Committee have a goal of having 5 trauma centers actively engaged by this time next year.

- Stroke workgroups have been formed to review extended window strokes and stroke rehabilitation.
- About 40% of strokes and 50% of STEMIs are arriving via POV. The committees are working on a social media campaign to increase the use of 911.
- According to data shared at GETAC, SETRAC is outperforming the state in door-to-needle times.
- SETRAC is working with Dr. Sean Savitz at UTHealth to develop education for nurses, physicians, and medics.
- SETRAC is partnering with RAC R to help align stroke plans since both RACs share hospital systems.
- The Heart of the Matter program recently held a session at Dulles High School in Sugar Land. To date, 504 participants have received hands-only CPR training. A future event will take place at Houston Christian University.
- The cardiac data dictionary is being reviewed and updated to be inline with the NCDR Chest Pain MI Registry.
- A new cardiac workgroup will be developing a DIDO toolkit to help reduce STEMI transfer times in the region. Freestanding ERs will be targeted with this education.
- The American Heart Association will present their current bystander CPR initiatives at the next Cardiac Care Committee meeting.
- The TCHMB initiatives launching this summer will include safe sleep, congenital syphilis, and breastfeeding.
- There have been three NRP classes this year to date and more are being planned.
- Antibiotic timeliness has improved while breastmilk at discharge has slightly dropped from previous years.
- The Maternal Subcommittee is finalizing data points to track to begin tracking primary C-section rates.
- The Syphilis Task Force is working with health departments and will begin looking at data to complete a PI project.
- The ED Committee is looking at wall times. The NCTTRAC region is currently tracking wall times and will provide a presentation on their program.
- The ED Committee is reviewing what data will need to be collected to determine how to transfer behavioral patients out.

## **6. 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. *Vote to approve nominations for open board positions***

The board approved the nominations of Dr. Prater and Sterling Taylor to fill the Memorial Hermann and Houston Methodist positions respectively. There were no objections or abstentions. Tom Flanagan will roll off of the Vice Chair of Hospital Services position at the July meeting.

## **7. GENERAL / OPEN DISCUSSION**



## **Legislation**

The RAC is currently watching the following legislative items:

- A bill has been introduced regarding the use of cold cots in hospitals. There are funds attached to the bill and it is not decided how the funds will be distributed. This could possibly be distributed through RACs.
- The whole blood program may be funded with \$10 million statewide.
- The state insurance plans where EMS will be reimbursed at their published rates is scheduled to sunset in September 2025. A bill to extend the plans is moving forward without difficulty.
- A bill setting aside money for rural county EMS ambulances and equipment was introduced.
- SB 672 has a hearing scheduled for Wednesday. The bill states that hospitals need plans for diversion in the instance of cyber-attack or electrical outage and the plan needs to be submitted to DSHS. This may be rewritten before the hearing.
- HB 1656 has not yet been scheduled for a hearing. The bill gives the authority to medical directors and paramedics to write emergency detention orders for psychiatric emergencies in the absence of law enforcement.

## **Whole Blood Program**

The GETAC Whole Blood Task Force is looking at how to redistribute blood that hasn't been used. This includes possibly moving to a 21-day rotation.

## **Cyber Security**

Nation-state actors are using AI to search hospital and EMS websites for names of staff and using the information as a data source to hack into systems. Access points are mobile devices that are logged into. Dual authentication is highly recommended.

## **Disposal of Insulin Syringes**

A question was raised if there was a program where diabetic persons could dispose of the syringes that are used by that individual. As long as the syringe is fully encapsulated (gallon jug, Plaster of Paris, etc.) they can be disposed of in the garbage.

## **ADJOURNMENT**

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

*SETRAC Board - Secretary:* \_\_\_\_\_

## SETRAC - June 30, 2025 YTD Expenditure Report FY25

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

	Grant	YTD Expenditures	Approved Budget	Variance	% Remaining	Month of Fiscal Year
*1	ASPR 25 - TSA Q	\$ 2,183,892	\$ 2,183,912	\$ 20	0.0%	12/12
*2	ASPR 25 - TSA R	\$ 431,918	\$ 469,004	\$ 37,086	7.9%	12/12
*3	ASPR 25 - TSA H	\$ 152,013	\$ 164,669	\$ 12,656	7.7%	12/12
*4	ASPR 25 - EMTF 6	\$ 121,158	\$ 131,736	\$ 10,578	8.0%	12/12
*5	ASPR 25 - EMTF 6 GR	\$ 196,164	\$ 236,111	\$ 39,947	16.9%	10/12
*6	RAC/EMS 2025	\$ 387,010	\$ 459,969	\$ 72,959	15.9%	10/12
*7	RAC Systems Development 2025	\$ 219,637	\$ 219,637	\$ -	0.0%	8/12
*8	RAC/EMS EI Funds	\$ 94,102	\$ 150,000	\$ 55,898	37.3%	8/12
*9	County Pass Thru 2025	\$ 213,161	\$ 370,035	\$ 156,874	42.4%	8/12
*10	G7 Baylor Pediatric Disaster Care	\$ 146,841	\$ 279,211	\$ 132,370	47.4%	7/12
*11	HFD Base Station	\$ 879,239	\$ 2,260,581	\$ 1,381,343	61.1%	7/12
	<b>Total</b>	<b>\$ 5,025,136</b>	<b>\$ 6,924,865</b>	<b>\$ 1,899,729</b>	<b>27.4%</b>	

\*1-4 ASPR Contracts for FY25 are expending in accordance with budget.

\*5 ASPR EMTF 6 GR FY25 are expending in accordance with budget.

\*6 FY 25 RAC EMS funds are expending in accordance with budget.

\*7 FY25 RAC Development funds are expending in accordance with budget.

\*8 FY25 RAC EI funds are expending in accordance with budget.

\*9 FY 25 County Pass Thru funds for eligible EMS agencies has no allowable carryforward from FY24

\*11 Houston Fire Department Base Station - Reimbursement for actual payroll expenses incurred. Net Revenue is listed on Page 2.

## Financial Status

30-Jun-25		
Frost Bank Checking	\$ 16,342.93	-This account an operational account.
PNC Bank Checking	\$ 26,166.92	-This account is our primary depository account for grant funds.
Amegy 8781 - Operating Account	\$ 4,187,277.66	-This account is the main operational account.
Amegy 8815 - General Fund Account	\$ 927,003.46	-This account is General Fund account
Amegy 8807 - Payroll Account	\$ -	-This account is payroll account
Amegy 7211 - EMS/RAC Restricted Funds Acc	\$ -	-This account supports EMS RAC business
Chase 3936 - EMS/RAC	\$ 11,423.16	-This account supports EMS RAC business
Chase 1676 - Revenue	\$ 31,634.30	-This account supports general fund business
Amegy 8831 - Foundation Checking	\$ 1,415,391.52	-This account supports Foundation business
Maestro Svcs. Checking Acct.	\$ 88,622.86	-This account supports Maestro Svcs operations

### SETRAC General Fund FY25 YTD

Revenue (non-grant)	FY25
General Revenue	\$ 130,921
FY 2025 Dues	\$ 2,850
HAM Cram	\$ 240
HAM Radio	\$ 165
RHPC Symposium Revenue	\$ 171,780
STB Kits	\$ 18,930
TEEX Income	\$ 52,104
HFD Base Station	\$ 152,065

Total Revenue \$ 529,055

Expenses (non-grant)	
Contract Services	\$ 310
Business Expenses	\$ 180
Operational Supplies	\$ 3,458
Other	\$ 109,429
Personnel	\$ 12,923
Travel	\$ 2,829
Indirect Expenses	\$ (13,443)
HAM Cram Expense	\$ 22
HAM Radio Expense	\$ 22
RHPC Symposium Expenses	\$ 206,955
STB Kits Expense	\$ 15,339
TEEX Expense	\$ 4,952
HFD Base Station Expense	\$ 38,539

Total Expenses \$ 342,978

Net Revenue \$ 186,077

## Financial Summary - Categorical Budget Detail

	YTD	Budget	Variance
ASPR 25 - TSA Q			
Contract Services	\$ -	\$ -	\$ -
Equipment	\$ -	\$ -	\$ -
Operational Supplies	\$ 305,423	\$ 305,423	\$ -
Other	\$ 443,298	\$ 443,298	\$ -
Personnel	\$ 1,169,299	\$ 1,169,299	\$ -
Travel	\$ 47,481	\$ 47,501	\$ 20
Indirect Costs	\$ 218,391	\$ 218,391	\$ -
<b>Total</b>	<b>\$ 2,183,892</b>	<b>\$ 2,183,912</b>	<b>\$ 20</b>
ASPR 25 - TSA R			
Contract Services	\$ -	\$ -	\$ -
Equipment	\$ -	\$ -	\$ -
Operational Supplies	\$ 14,545	\$ 14,545	\$ -
Other	\$ 72,338	\$ 72,338	\$ -
Personnel	\$ 307,131	\$ 327,896	\$ 20,765
Travel	\$ 6,864	\$ 7,325	\$ 460
Indirect Costs	\$ 31,040	\$ 46,900	\$ 15,860
<b>Total</b>	<b>\$ 431,918</b>	<b>\$ 469,004</b>	<b>\$ 37,086</b>
ASPR 25 - TSA H			
Contract Services	\$ -	\$ -	\$ -
Equipment	\$ -	\$ -	\$ -
Operational Supplies	\$ 45	\$ 200	\$ 155
Other	\$ 11,013	\$ 11,013	\$ -
Personnel	\$ 136,431	\$ 136,431	\$ -
Travel	\$ 558	\$ 558	\$ -
Indirect Costs	\$ 3,966	\$ 16,467	\$ 12,500.92
<b>Total</b>	<b>\$ 152,013</b>	<b>\$ 164,669</b>	<b>\$ 12,656</b>
ASPR 25 - EMTF 6			
Contract Services	\$ -	\$ -	\$ -
Equipment	\$ -	\$ -	\$ -
Operational Supplies	\$ 450	\$ 450	\$ -
Other	\$ -	\$ -	\$ -
Personnel	\$ 115,991	\$ 115,991	\$ -
Travel	\$ 2,121	\$ 2,121	\$ -
Indirect Costs	\$ 2,596	\$ 13,174	\$ 10,578
<b>Total</b>	<b>\$ 121,158</b>	<b>\$ 131,736</b>	<b>\$ 10,578</b>
ASPR 25 - EMTF 6 GR			
Operational Supplies	\$ 80	\$ 178	\$ 98
Other	\$ 184,583	\$ 217,656	\$ 33,073
Personnel	\$ 9,219	\$ 9,219	\$ -
Travel	\$ 2,283	\$ 9,058	\$ 6,775
Contract Services	\$ -	\$ -	\$ -
<b>Total</b>	<b>\$ 196,164</b>	<b>\$ 236,111</b>	<b>\$ 39,947</b>

## Financial Summary - Categorical Budget Detail

	YTD	Budget	Variance
RAC/EMS FY 25			
Operational Supplies	\$ 3,694	\$ 4,097	\$ 403
Other	\$ 43,570	\$ 117,022	\$ 73,453
Personnel	\$ 248,273	\$ 117,170	\$ (131,103)
Indirect Costs*	\$ 86,432	\$ 186,346	\$ 99,914
Travel	\$ 5,042	\$ 35,334	\$ 30,292
Total	\$ 387,010	\$ 459,969	\$ 72,959
<i>*Budget amount includes \$43,632.83 carry forward funds</i>			
RAC Development Funds FY25			
Operational Supplies	\$ 1,903	\$ 1,903	\$ -
Other	\$ 23,857	\$ 23,857	\$ -
Personnel	\$ 163,271	\$ 163,271	\$ -
Indirect Costs*	\$ 26,654	\$ 26,654	\$ -
Travel	\$ 3,951	\$ 3,951	\$ -
Total	\$ 219,637	\$ 219,637	\$ -
County Funds FY25			
Contract Services	\$ 213,161	\$ 370,035	\$ 156,874
EI Funds FY25			
Other	\$ 94,102	\$ 150,000	\$ 55,898.0
HFD Base Station			
Personnel and Other	\$ 879,239	\$ 2,260,581	\$ 1,381,343

## Unrestricted Assets Growth

	GenFY15	Gen FY16	Gen FY17	Gen FY18	Gen FY19	Gen FY20	Gen FY 21	Gen FY 22	Gen FY 23	Gen FY 24	Gen FY 25	TOTAL
Revenue (Unrestricted)	114,868.11	122,415.57	112,130.48	458,767.59	357,970.13	828,743.55	495,286.00	787,368.00	115,462.00	604,940.02	529,054.54	4,884,965.41
Expense (Grant Offsets)	110,196.24	88,944.99	190,844.81	334,373.01	469,327.17	569,818.67	176,453.00	806,477.00	83,154.00	424,460.59	342,977.68	3,839,070.67
Unrestricted Net Asset	4,671.87	33,470.58	(78,714.33)	124,394.58	(111,357.04)	258,924.88	318,833.00	(19,109.00)	32,308.00	180,479.43	186,076.86	1,045,894.74
Total Fund Balance												1,045,894.74

Notes:



## Executive Reports

# Preparedness and Response July 2025

### Lisa Spivey – Director of Regional 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

The SETRAC Preparedness team has been hard at work this past quarter, guiding our region through both major initiatives—like preparations for the upcoming 2026 World Cup—and real-world emergencies. Their commitment to providing timely training, support, and resources continues to keep our community ready for whatever comes next.

- Actively involving partners and reaching out to new stakeholders to attend corridor meetings.
- Sustaining relationships with hospitals, EMS, Fire, Police, Public Health, and City/County EMCs to cultivate robust partnerships.
- Meeting with jurisdictional and regional partners to provide program updates.
- T&E Coordinator is also working with the Pediatric G-7 project.
- Continue to work on updating regional plans
- T&E Team completed the TTX series AAR, and the Functional Exercise AAR; uploaded to the website
- T&E Coordinator is working on the Crystal Beach AAR
- T&E Team working on revamping CMOC 101
- T&E Team successfully obtained two MGT-439 Pediatric Disaster Response courses for our region.
- T&E Coordinator working on obtaining a CHEMPrep workshop for the region
- The Special Population Coordinator completed another successful Boot Camp in the West Corridor, attendees included peers from Piney Woods RAC. On-going efforts to have additional boot camps in DT, East and South Corridor.
- The Special Population Coordinator also coordinated with the City of Houston to host a meeting with elected officials to educate on Emergency Preparedness education. Attendees included State Representative Wesley Hunt's office, Councilwoman Peck, and others.
- TSA-H Coordinator completed Decon Training in Sabine County
- Coordinated Active Attack Training for Tyler County Hospital
- Currently working on an Active Shooter Tabletop exercise for Nacogdoches Memorial Hospital.
- TSA-Q Coordinator is obtaining submitted data for HVA and Cybersecurity Assessment
- Working on a new participation report for corridors.
- Continuing to collaborate with local EMS to expand the EMS Dashboard
- Coordinating with our peers in Dallas (NCTTRAC) to collaborate regarding World Cup.
- Updating CMOC Basic Plan



## Executive Reports – Preparedness and Response (continued)

### Community Events/Exercises:

- T&E and TSA-R Coordinators collaborated with Liberty County EMC with a Tabletop Exercise.
- Technology training EMResource/WebEOC classes have been conducted across the region.
- TSA-R Coordinator coordinated a full-scale exercise with Jack Brooks Airport, 27 agencies, and over 200 participants.
- Trained over 300 in STB and Situational Awareness
- Invited to participate as a judge for Humana Institute University of Houston 2025 Shark Tank Competition.
- Invited to participate in EM Impact sponsored by Harris County Office of Homeland Security and Emergency Management.
- Participated in City of Houston meeting for Elected Officials
- Participated in Houston BioWatch Tabletop Exercise
- Invited as a committee member of the Behavioral Threat Assessment Team alongside FBI, DPS, HCSO, HPD and others.

### Real World Events:

- Daily mandatory PH Emergency Event Reporting
- MCI: Bridgeland Pool Incident May 2025
- In April, three healthcare facilities declared Internal Disaster status, with a cumulative duration of 5.79hours. The reasons were Utility Failure & Communications.
- In May, four healthcare facilities declared Internal Disaster status, with a cumulative duration of 12.27 hours. The reasons were Utility Failure or Communications.
- In June, two healthcare facilities declared Internal Disaster status, with a cumulative duration of 2.39 hours. The reason was Utility Failure.





## Executive Reports – Preparedness and Response (continued)

### Troy Erbentraut – Director of Response

EMTF 6 Coordinator – Grant Kelley

Regional Logistics and Inventory Coordinator – Philip Cutler

Mobile Assets Coordinator – Jarad Moreno

### Overview

- **Organizational Updates**

We regret to announce that Jarad Moreno, a valued member of our team, has left the organization to pursue new professional opportunities. Jarad's contributions to our operations have been significant, and we wish him the best in his future endeavors. The leadership team is actively working to ensure a smooth transition, with plans not to fill the vacancy.

- **Logistics and Inventory Management**

Our logistics team is making significant progress in transitioning our inventory to the Operative IQ platform. This cloud-based system is designed to enhance the tracking, management, and deployment of resources across the region. By adopting Operative IQ, we aim to streamline operational workflows, provide real-time inventory updates, and improve coordination during critical operations. The transition is on track, with full implementation expected by the end of the next quarter, ensuring minimal disruption to current processes.

- **Asset Readiness**

Regional assets continue to be maintained in a state of full readiness, ensuring they are operational and prepared for rapid deployment. Our maintenance teams conduct regular inspections and updates to guarantee resource availability for emergency response operations. This ongoing commitment to preparedness ensures that our organization remains equipped to respond effectively to any regional needs.

### Operational Activities (EMTF-6)

- **State Activations:** Activated for July 4<sup>th</sup> Flooding. We currently have the following in theater: 5 ambulances, 1 ambus, 5 MIST, 1 ASTL, 1 TFL, 2 morgue trailers with 1 driver, 1 IMT, and 2 ambulance staging managers.
- **Go Topless Weekend Event:** Coordinated a regional response for GCESD2's annual Go Topless Weekend on May 16-17, ensuring effective emergency medical support.
- **Inventory Management:** MMU Cache has been fully integrated into the Operative IQ platform, enhancing efficiency and accuracy in tracking and managing resources.
- **Equipment Maintenance:** EMTF durable medical equipment has been biomedically inspected and certified, maintaining operational readiness.

### Training and Capacity Building (EMTF-6)

- **MEDL Course (May 20-21):** Successfully trained 7 new Medical Team Leaders (MEDLs), strengthening the region's CADRE for sustained activations during Wildland Fire Service (WLFS) incidents.
- **MIST Course (June 11-12):** Trained 6 new Medical Incident Support Team (MIST) members, all confirmed deployable to any All-Hazards incident, enhancing regional response capabilities.



## Executive Reports – Preparedness and Response (continued)

### Real World Incidents:

EVENT	LOCATION	TYPE	DATE	ASSIGNED RESOURCES
Pride festival	1125 Brazos St, Houston, TX 77002	Mass Gathering	Jun 28, 2025	860&Generator
Off the Grid Drill	Warehouse	HPP Deliverable	Jun 13, 2025	RCVQ
Matagorda County Hurricane Expo	201 7th Street, Bay City, TX	Event	May 10, 2025	UTV
Tactical Medic Course	10410 Airline Dr, Houston, TX 77037	Training	May 07, 2025	860&Generator
FBC Touch a Truck	Fort Bend County Fairgrounds	Event	May 03, 2025	860&Generator
MS 150	1076 Hwy 159 E, Bellville, TX 77418	Event	Apr 26, 2025	RCVQ
Ironman Texas	Ironman Main Medical - 14 Waterway Ave, Spring, TX 77380	Event	Apr 24, 2025	Beds/Wheelchairs/IV Poles
Crime Stoppers Car Show and Emergency Vehicles	962 US 290 Business, Hempstead, TX.	Event	Apr 12, 2025	AMBUS
Beer Bike	6100 Main Street	Event	Apr 05, 2025	MCC-604
IRONMAN 70.3: Texas	Moody Gardens, Galveston, TX	Event	Apr 05, 2025	Radio Cache
July 4 <sup>th</sup> Flooding	Hill Country	Flooding	July 4 - ongoing	5 ambulances, 1 ambus, 5 MIST, 1 ASTL, 1 TFL, 2 morgue trailers with 1 driver, 1 IMT, and 2 ambulance staging managers.



## Executive Report

# Information Technology Services July 2025

**Jeremiah Williamson – Director of Information Technology Services**

IT Systems Analyst – Jason Nolin

### Overview

The Technology Services team has made significant progress this quarter, improving our organization's technological capabilities, operational efficiency, and security posture. Key accomplishments include:

- **Donations and Upgrades:**
  - Secured a valuable donation from Microsoft's Non-profit program, bolstering our website resources.
  - Completed a major upgrade of the Partner Management database application using Microsoft Power Apps and Power BI, improving ease of access, management, and reporting of partner data for all staff members.
- **Policy and Hardware Enhancements:**
  - Modernized and integrated the Acceptable Use Policy and Identity Protection Guidelines into SETRAC's Employee Handbook, with Data Classification Guidelines slated for next quarter.
  - Finalized the upscaling of office hardware for staff, with mobile technology upgrades planned next.
- **Support and Service Delivery:**
  - Resolved 254 tech support requests last quarter, with top categories being Website (19%), User Assistance (16%), and Services (15%).
  - Launched 24/7 on-call IT support with a dedicated phone line and rotation shifts aligned with the Duty Officer schedule.
- **Incident Command and Communications:**
  - Established communications incident command at the CERT Rodeo in Atascocita and provided support for the MS150 event at the Austin County Fair Grounds in Bellville.
  - Conducted Net Control for an amateur radio check-in drill, with 159 agencies/facilities participating via HAM Radio (35), Digital Check-in, and Texting Platforms (154).
  - Supported Symposium planning and preparations.
- **Security and Engagement:**
  - Maintained a strong security posture, monitoring and mitigating the low-level attacks on four staff domain accounts (see Information Security section for details).
  - Boosted participation in amateur radio communications, assisting Encompass Health System and others in joining the Houston Area Hospital EmComm Net, enhancing emergency preparedness. Supported entities include Texas Children's Hospital, Memorial Hermann, HCA, UTMB Health, MD Anderson, Encompass Health System, TEXSAR, Fort Bend EOC, RACES D16C, and Huntsville Memorial Hospital (in progress).

### Infrastructure Development:

- Migrated to a new cloud-based infrastructure, enhancing scalability and reducing maintenance costs.
- Deployed a network monitoring system to proactively address potential issues, ensuring reliable performance.



## **Executive Report – Information Technology Services (continued)**

### **Service Continuity:**

- Developed a comprehensive disaster recovery plan to ensure business continuity during disruptions.
- Implemented redundant systems for critical services, minimizing downtime and data loss risks.

### **Training:**

- Developed a comprehensive disaster recovery plan to ensure business continuity during disruptions.
- Implemented redundant systems for critical services, minimizing downtime and data loss risks.

### **Information Security:**

- Conducted a security audit to identify and address vulnerabilities, strengthening our defenses utilizing Microsoft Defender and Entra ID.
- Updated IT acceptable use and security policies to align with modern industry best practices.



## Executive Reports

# Regional Healthcare Preparedness Coalition (RHPC) Board Report July 2025 (Taken from meeting minutes for May 2, 2025)

### New Business

- **UTMB Presentation**

Dr. Carri Lavine (UTMB) presented on the HHS Region 6 RESPTC/University of Texas Medical Branch to give the coalition members an awareness of who they are and what they do (*presentation filed with RHPC Board minutes binder*).

- **Cyber Assessment**

Lisa Spivey reported SETRAC has been working with the state, other RACs across the state, and cybersecurity experts at the federal level on a cyber assessment tool for hospitals that will be sent out soon along with the HVA. The first is like a document your will read through, and the second one is an HVA for cybersecurity to assist in identifying our threats.

- **RHPC Nominations**

Ms. Spivey announced the RHPC Board and corridor chairs/co-chairs are up for nomination. She will send out the nominations next week and there will be a two-week period after nominations are received for the voting process.

### Healthcare Preparedness Capabilities

#### **Long Term Care Update (C102)**

Fidel Calvillo reported on the following Special Populations issues:

- Planning with local jurisdictions for upcoming Emergency Preparedness Bootcamps in our Region. June 24<sup>th</sup> in Montgomery County for West Corridor. In the works for an additional bootcamp in Brazoria Co for South Corridor.
- Continue to work with local jurisdiction on emergency preparedness workshop for elected officials. On hold for now.
- Training dialysis clinics on the use of EMResource has been conducted.
- SETRAC participated with dialysis's Corporate Office in Emergency Preparedness Hurricane Trainings.
- Continue to work with new facilities to be part of RHPC and provide emergency preparedness guidance.
- Special Populations virtual Regional Exercise May 13<sup>th</sup>. Last day to register May 2<sup>nd</sup>. This year's exercise will include facilities simulating an evacuation.
- SETRAC Special Populations presentation at the TALA Conference in April - RACs overview and disaster preparedness.
- Reached out to the TDEM STEAR Rep to discuss the new STEAR online registration for LTCS and home health/hospice providers.

#### **Training and Exercise Update (C104)**

Timothy Chapman reviewed the Training and Exercise Schedule distributed to the coalition members highlighting the upcoming regional exercise on May 8<sup>th</sup>. A Pulsara training course with EMS is coming soon, CMOC 101 trainings continue, and there will be an off-the-grid drill in June. (*T&E schedule filed with RHPC Board minutes binder*).

### **EMTF Update (C104)**

Grant Kelley submitted his EMTF report as follows:

#### Recent Responses and Preparedness

- Bay City Ammonia Release: EMTF swiftly deployed a robust no-notice response, including 1 Heavy Strike Team, 5 ambulances, and 1 AMBUS, ensuring effective incident management.
- Severe Weather Standby: EMTF-6 has been activated 9 times for severe weather preparedness, showcasing our commitment to regional safety and rapid response readiness.

#### Training and Curriculum Development

- MIST Curriculum Advancement: Our coordinators are hard at work developing the new MIST curriculum. The first class, a refresher, is tentatively scheduled for mid-to-late summer 2025, with a new MIST course planned for mid-to-late fall 2025.
- NWCG MEDL Course: EMTF, in collaboration with the Texas Forest Service, will host the NWCG MEDL Course in San Antonio from May 20-22, 2025, enhancing our medical leadership capabilities.

#### Crystal Beach Go Topless Weekend 2025

- Proactive Planning: We're actively coordinating a comprehensive mutual aid response for this high-demand event, including a Type 3 MMU, two ambulance strike teams, and overhead coordination during peak hours.
- Community Support: We've secured significant donations of assets and equipment, bolstering our operational capacity.

#### Current Needs

- Urgent Request: We urgently need 10 I-Stat 1 CG4+ cartridges. Any assistance in securing these critical supplies would be greatly appreciated—please reach out if you can help!

#### Upcoming Events and Opportunities

- TDEM Conference Workgroups: The next EMTF workgroups will convene at the TDEM Conference in Fort Worth, fostering collaboration and strategic planning.
- Call for Volunteers: We're seeking enthusiastic volunteers to set up, tear down, and staff the EMTF display at the TDEM Conference. If interested, please let us know, and we'll add you to the list.

He thanked the coalition members for their continued support as we strengthen our region's emergency medical response capabilities.

### **EMS Update (C104)**

Troy Erbentraut reported the MCI Plan has been reviewed and final adjustments have been sent to the SETRAC Board for approval. The next EMS meeting is scheduled for May 21<sup>st</sup> along with SETRAC hosting a blood drive the SETRAC office on May 22<sup>nd</sup> at the SETRAC office for those that would like to come out to donate.

### **Inventory Update (C104)**

*Deferred*

### **World Cup Update**

Mr. Erbentraut gave a brief overview on what to expect as the World Cup comes to Houston. He reported there is a page dedicated to the World Cup on the SETRAC website to help provide information and it will be updated as information is shared. Ms. Spivey added she has reached out to the Houston Airport System and Public Health for information to share, and Metro will probably be sharing information closer to time as rail schedules are identified.



## Executive Reports - RHPC Board

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Dr. Schulz stated base camps, games, teams, etc. will probably be determined after the first of the year and all that information will be updated on the SETRAC website once information becomes available. Toni Sloan encouraged the hospitals to have all their frontline personnel signup for Pulsara and MCI training as soon as possible to be prepared for this event.

### **Sub-Committee Updates**

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

Ms. Sloan reported the 2025 award applications are on the SETRAC website, and she encouraged the coalition members to continue working on their submissions for the 2024/2025 year as the submission due date is August 31, 2025. She requested the Award of Excellence be added to all upcoming corridor meetings for her to attend and present.

#### **Symposium Planning (C101)**

Ms. Spivey reported symposium planning, and "Call for Speakers" continue. She encouraged the coalition members to send in their speaker packets or send any recommendations to her. The San Luis Resort is sold out, but there is still room at the Hilton. She reminded the coalition members to save the date for the upcoming 2025 Preparedness Coalition Symposium scheduled for October 15<sup>th</sup>-17<sup>th</sup> at the San Luis Convention Center in Galveston, Texas.

#### **Clinical Advisory Committee (C101)**

*Deferred*

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

**Downtown Corridor** – Michael Olivier reported the last Downtown Corridor meeting was held on April 4<sup>th</sup> and was dedicated to the tabletop exercise which was well attended. There was EMS representation providing good perspective from their end. Their next meeting is scheduled for June 6<sup>th</sup> at SETRAC.

**South Corridor** – Mike Nixon reported their last meeting was dedicated to the World Cup tabletop exercise as well. The sub-medical director (Lars Thestrup) is the World Cup Medical Director which some background information which helps the county gearing up for the event. The next corridor meeting is May 23<sup>rd</sup> at Fort Bend County OEM in Richmond.

**East Corridor** – Lydia Worthen reported their last meeting was March 14<sup>th</sup> at Jack Brooks Airport with good participation in the World Cup tabletop exercise. The next corridor meeting is scheduled for May 9<sup>th</sup> at Chambers County Health Services Building. She also reported the corridor members, along with other federal and state agencies, participated in a full-scale exercise on April 22<sup>nd</sup> at Jack Brooks Airport. The exercise involved an airplane fire with fifty patients consisting of mass casualty and mass fatality injuries, and the patients were played by volunteers. Assets from SETRAC, multiple fire departments, and other agencies were there to assist.

**West Corridor** – Andrew Fisk reported the last West Corridor meeting was held on April 25<sup>th</sup> at HCA Houston Healthcare Northwest dedicated to the tabletop exercise with excellent participation from a diverse group of agencies and hospitals. The next corridor meeting is scheduled for June 27<sup>th</sup> at the newly opened Houston Methodist Cypress Hospital.

**North Corridor** – Janay Yancey reported the North Corridor last met on March 12<sup>th</sup> and the meeting was dedicated to the tabletop exercise with good participation. The next meeting is scheduled for May 14<sup>th</sup> at Woodland Heights with a Pulsara representative scheduled to present.

### **Partner Updates (C101)**

#### **Harris County Public Health**

Trey Frankovich reported they are continuing their measles vaccine plans and the locations can be found on their website. They are conducting internal planning for FIFA and in the beginning stages of their FAC exercise planning.

#### **Montgomery County OEM**

Montgomery County OEM is prepping for their June 5<sup>th</sup> exercise, the DSHS exercise scheduled for May 19<sup>th</sup>, and the upcoming Hurricane Expo. Justin Zimmer reported they are taking their trailer to Jeep Weekend to assist law enforcement. They also have supplies stocked and ready for FIFA.

#### **Harris County OEM**

Mark Sloan reported the tornado warning for Harris County has expired and moved into Liberty County. They are seeing rain counts of four to six inches per hour within these cells and they are expecting street flooding through 3:00 am period as the front is moving from North Texas through South Texas. They are also currently seeing high winds and hail to the west of us.

Hurricane season is beginning and planning is underway especially with the unknow of what the federal declaration may look like as the adjustments in Washington DC continue to unfold. Mr. Sloan stated he would not be surprised if we see a named storm within the next three weeks in the Atlantic.

There continues to be a major internet outage across the region in Harris County. Comcast, Infinity, and AT&T have three areas being investigated for cuts to the system and network. They are looking at rerouting internet capabilities and has impacted some government activities and some businesses regarding credit card transactions now being cash only. Mr. Sloan is not sure if it has impacted the hospital systems, but some has been restored but it is an ongoing investigation.

#### **Houston Fire Department**

Dr. Schulz reported the Tri-Annual FFA Exercise at Bush Intercontinental Airport is scheduled for tomorrow morning (Saturday, May 6<sup>th</sup>) which will be an event in EMResource.

Dr. Schulz thanked all the partners that assisted at last week's Memorial Hermann Ironman Race where there were more than 500 patients treated.

### **Other Partners**

#### **Harris Health (Ben Taub)**

Ashley Thurman announced Ben Taub will be conducting a huge drill in preparation for the World Cup in April 2026. The planning committee will begin in July 2025 with the Houston Zoo and FBI as confirmed participants. She invited any hospitals and/or agencies interested in participating to contact her.

#### **Michael E. DeBakey VA Hospital**

Danny Shine reported they are conducting an NDMS tabletop exercise on June 11<sup>th</sup>.





## Executive Reports - RHPC Board

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### **Open Discussion/Other**

#### **SETRAC**

Lori Upton gave the coalition members an overview of the recent letter regarding the possible defunding of the Hospital Preparedness Program (HPP) which means the hospitals will not be funded. This would mean all the advantages funded through HPP (CMOC, EMTF assets, SETRAC assistance, etc.) will no longer be available. She stated, for any coalition members that find value in the benefits of the coalition to contact their representatives and congressmen to bring attention all the to everything that has been built over the last generation to ensure the funding is secured. The Governor's EMS and Trauma Advisory Council (GETAC) has reached out to the US House of Representatives and are working on our behalf.

#### **2025-2026 RHPC Board Meeting Schedule**

Dr. Schulz reviewed the 2025-2026 dates with the coalition members. Mrs. Sloan made a motion to approve the schedule as written, Mr. Sloan seconded the motion, and the coalition members unanimously approved. The 2025-2026 RHPC Board meeting scheduled was approved.

#### **RHPC Board Nominations**

Dr. Schulz reminded the coalition members that nominations for the RHPC Board chair and co-chair are open and should be sent to Lisa Spivey at [lisa.spivey@setrac.org](mailto:lisa.spivey@setrac.org).

## Emergency Healthcare Systems (EHS) Stroke Committee

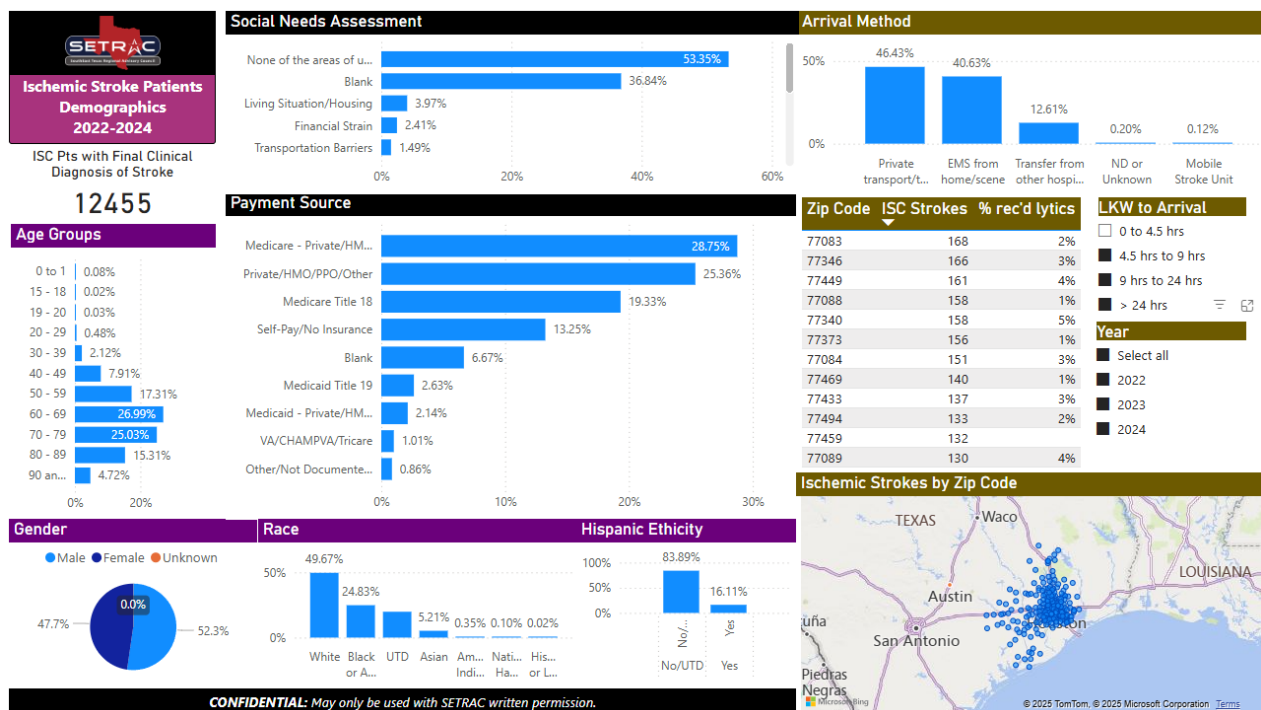
Stroke Committee – Medical Director: Dr. Sean Savitz

Chair: Dr. Haris Kamal

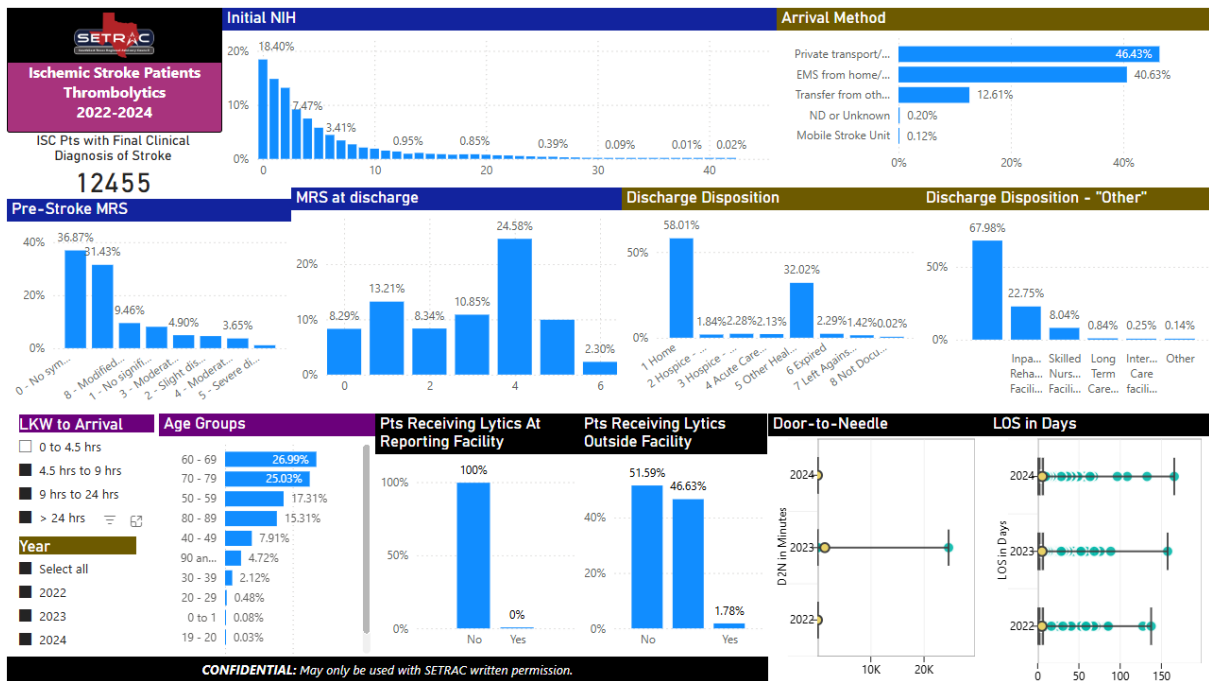
Vice Chair: Tonia Shelton, Stephen Autrey

The focus of the committee includes:

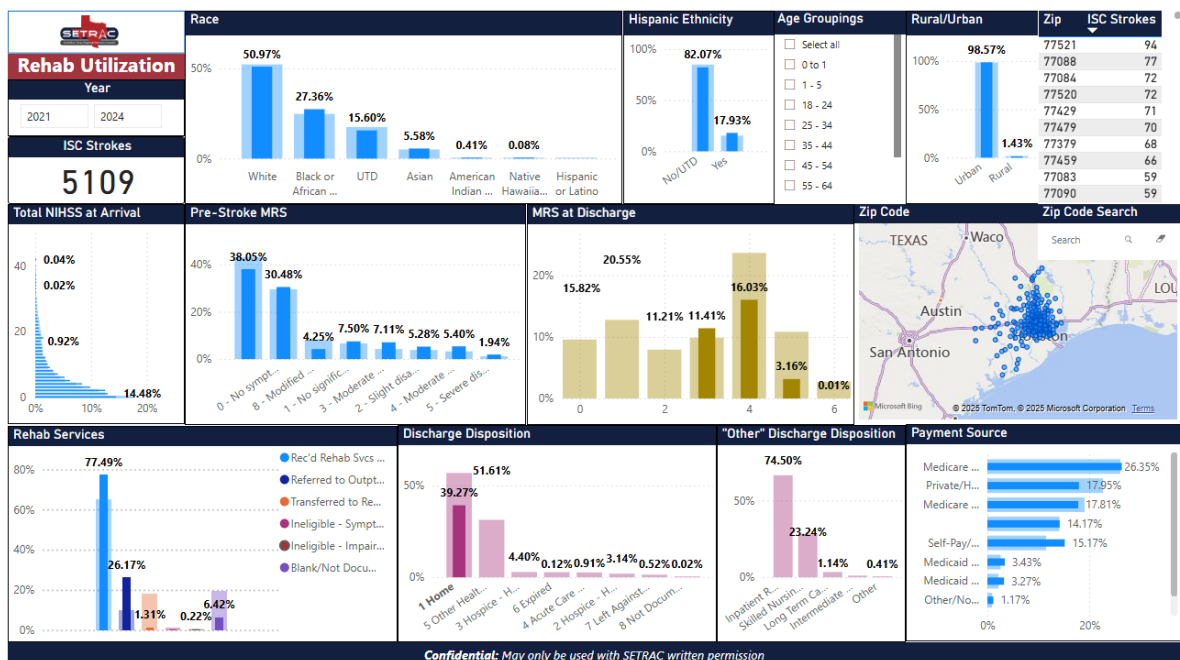
- Extended Window Strokes
  - The committee has identified a trend of 70% of patients arriving to a designated stroke facility outside of the 4.5-hour window. Parameters for Extended Window Strokes have been identified as Last Known Well from 4.5 hours – 24 hours. A heatmap was developed to focus regional efforts in areas of high stroke incidence.
  - The Extended Window Workgroup developed a PI Project to reduce the incidence of patients presenting outside of the 0-3.5 hour window.
  - Targeted education is being provided through Heart of the Matter Program to zip codes with the highest incidence of extended window strokes. Social Media campaigns are also aimed at stroke recognition and calling 911.
- Highlighted findings are:
  - Almost 50% came in via private vehicle
  - 77083, 77346, 77449 were the zip codes with the highest number of extended window strokes and lowest lytic administration
  - Ages 50-79 was the highest group for extended window strokes



## Executive Report – Emergency Healthcare Systems (continued)

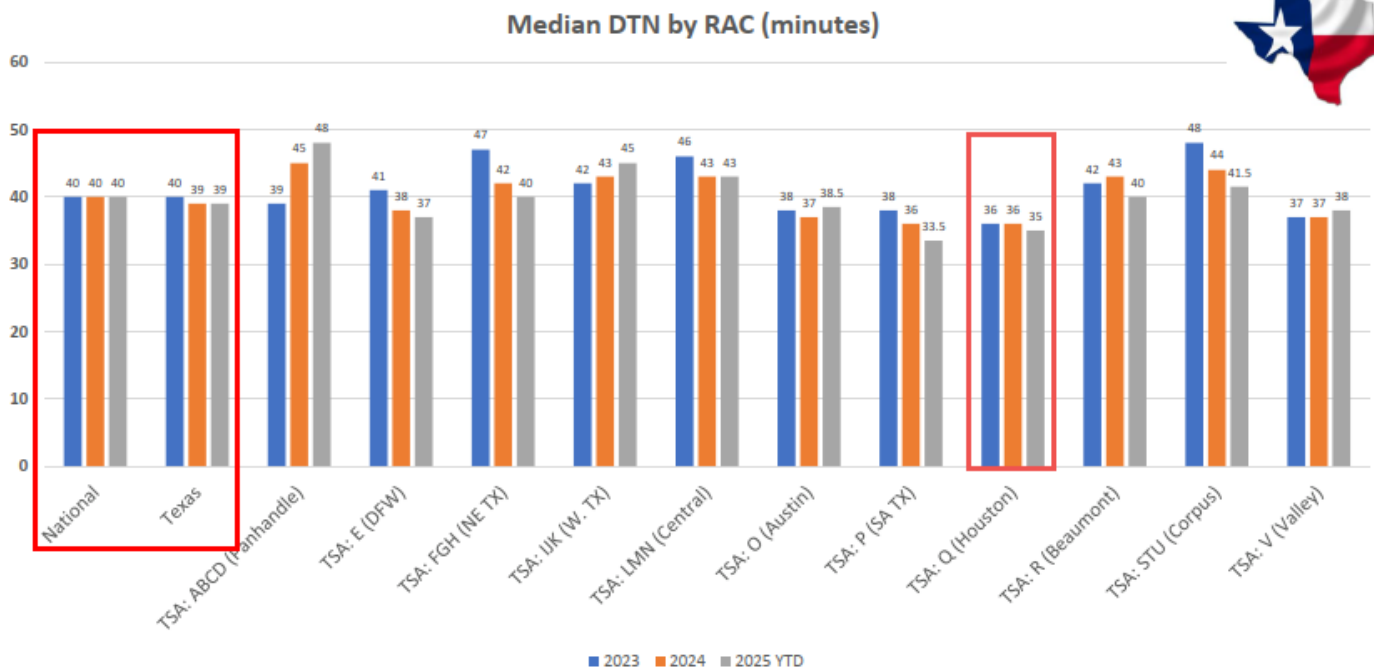


- Rehab Utilization
  - The committee aims to identify socio-economic indicators, to include rural vs urban, insured vs uninsured, ethnicity, etc. regarding rehab utilization. A Dashboard is published for the subcommittee to use in analyzing the data for a PI project.
  - A Workgroup is developing a PI Project to improve outpatient rehab referral.
  - Highlighted findings are:
    - Patients receiving outpatient referral is about 26% with the filters:
      - Discharged home
      - MRS on discharge 3-5
  - Additional dashboards will be created to view year-over-year changes in this rate.
  - The current rate of referral is in line with national rates.



## Executive Report – Emergency Healthcare Systems (continued)

- Research
  - Abstracts will be developed on Rehab and Extended Window Strokes based on the PI projects. Anticipated start date will be at the end of the year after we have a few quarters of data post-intervention.
- Education
  - Posterior stroke CE developed by stroke committee, offers 0.5 contact hours, and is hosted on SETRAC's LMS, targeting recognition upon presentation. **59 participants** have completed education.
  - Stroke Education is being developed for CEs for 2025 in conjunction with Dr. Savitz and UT Health to include nurses, Physicians, and paramedics.
- GETAC Updates
  - The committee reviewed the proposed EMS Acute Stroke Routing documents that were approved from the GETAC stroke committee.
  - Below is the GETAC report for DTN by RAC.



Disclaimer: Get with The Guideline reports are generated from a live registry. All data is subject to change. Report generated on 5/21/25.

### Cardiac Committee

**Medical Director: Dr. Kevin Schulz**

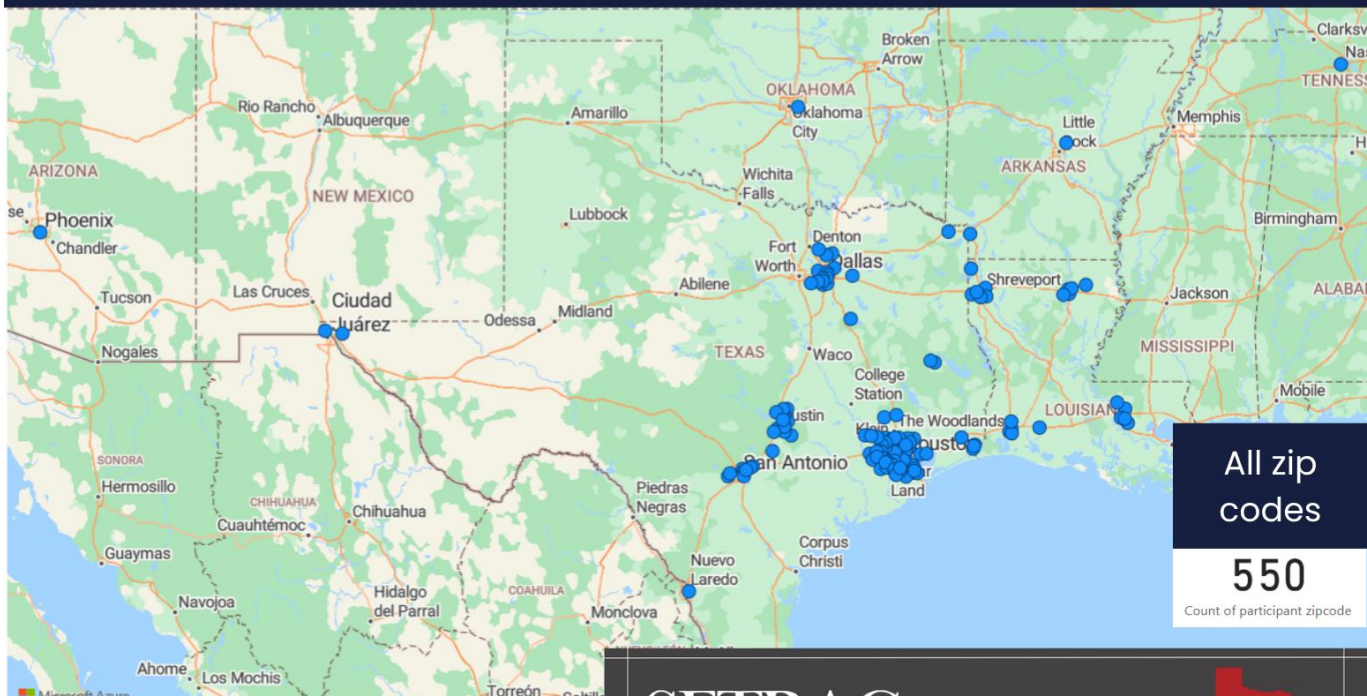
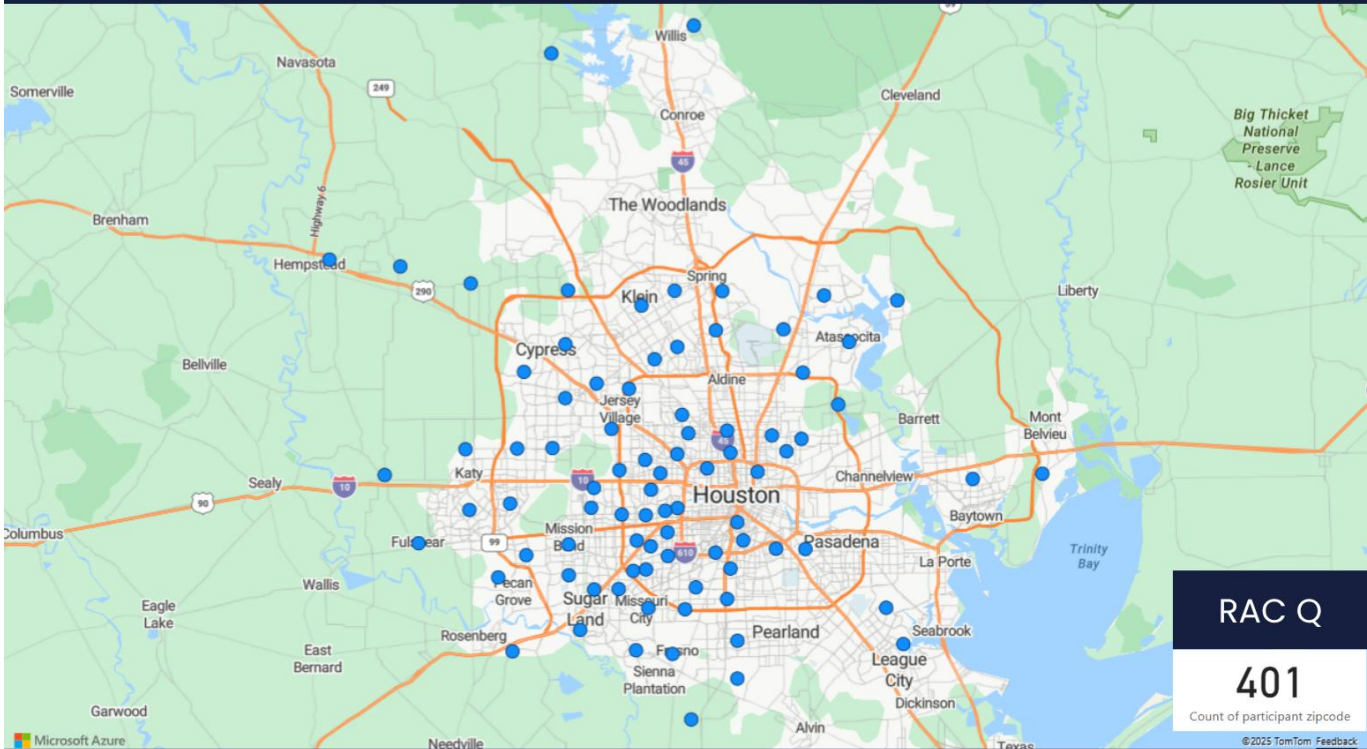
**Chair: Cathy Williamson**

**Vice Chairs: Dr. Waleed Kayani / Jake Varner**

- Committee Goal: **Develop community education, including a regional hands-only CPR event.**
  - “Heart of the Matter” community education program in collaboration with the stroke committee.
  - Program offers hands-only CPR, Stroke, cardiac and education related to blood pressure management, and BE-FAST.
  - High risk zip codes identified through data are target audience.
  - HEB donated 100 blood pressure cuffs. We currently have about 12 left.
  - To date, **550** community members have been trained.
  - 1/11/25 American Legion Houston, TX
  - 3/10/25 HLSR Houston, TX
  - 4/3/25 Dulles High School Sugarland, TX
  - 4/23/25 Houston Christian University Houston, TX
  - 6/25/25 Second Baptist Church Houston, TX
  - 7/10/25 CompassRN Camp at TMC Innovation Center
- NCDR Chest Pain-MI Registry:
  - To date, **16 hospitals/ 35 (45%)** have signed agreements.
  - Patient level data, not to include PHI, will be available.
  - Data will be used to meet the data requirements of the RAC self-assessment tool, as well as assist in formulating data driven goals and PI projects.
- NCDR work group is reviewing the cardiac data dictionary and has begun developing a way for data to be pulled from NCDR for SETRAC regional reporting. Anticipated completion October 2025.
- Committee created a **workgroup that is developing a DIDO Toolkit** to reduce STEMI transfer times in the region. The workgroup discussed scope and targeted audience of the project and Dr. Kayani shared Harris Health’s criteria and process for transfers. The group will incorporate this into the tool kit.
- Research
  - Development of PI project will occur when NCDR Data is obtained.



as of July 2025

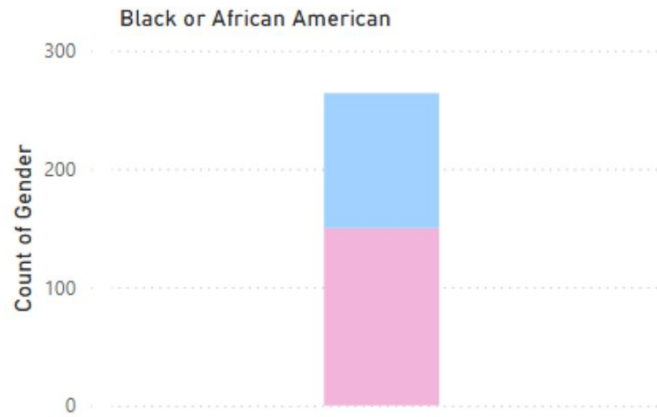


## SETRAC Hands-Only CPR

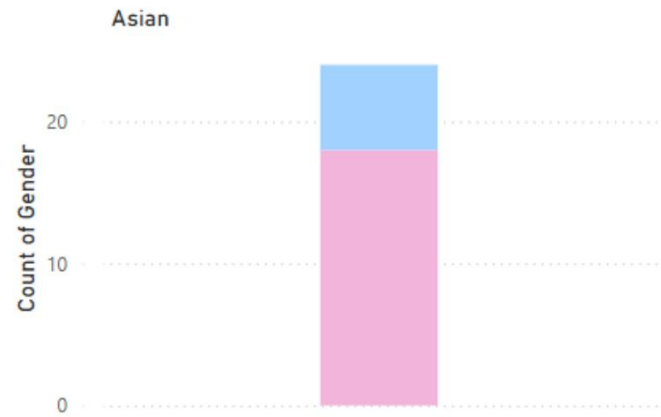


as of July 2025

Gender ● Female ● Male



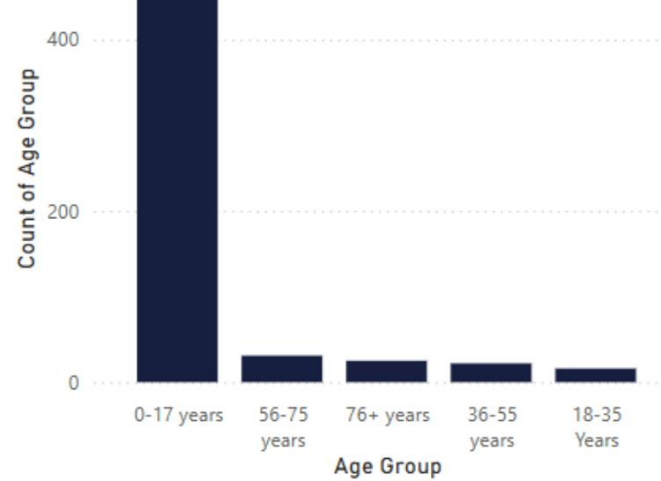
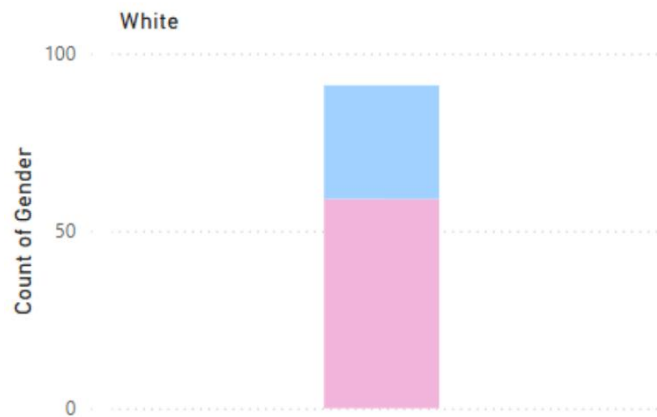
Gender ● Female ● Male



Hands-Only CPR Participant by Gender and Race

Hands-Only CPR Participant by Age Group

Gender ● Female ● Male



550

Count of participant zipcode

SETRAC  
Hands-Only CPR



## Perinatal Committee

**Neonatal Medical Director:** Dr. David Weisoly  
**Maternal Medical Director:** Dr. Leslie Rafanan  
**Committee Chair:** Dr. Elizabeth Eason  
**Vice Chairs:** Kate Drone / Zach Ward

- 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%
  - New initiatives to launch mid-year:

Texas Congenital Syphilis Toolkit Pilot Initiative for Maternity Care Clinics

Breastfeeding and Safe Sleep Initiative for Hospitals

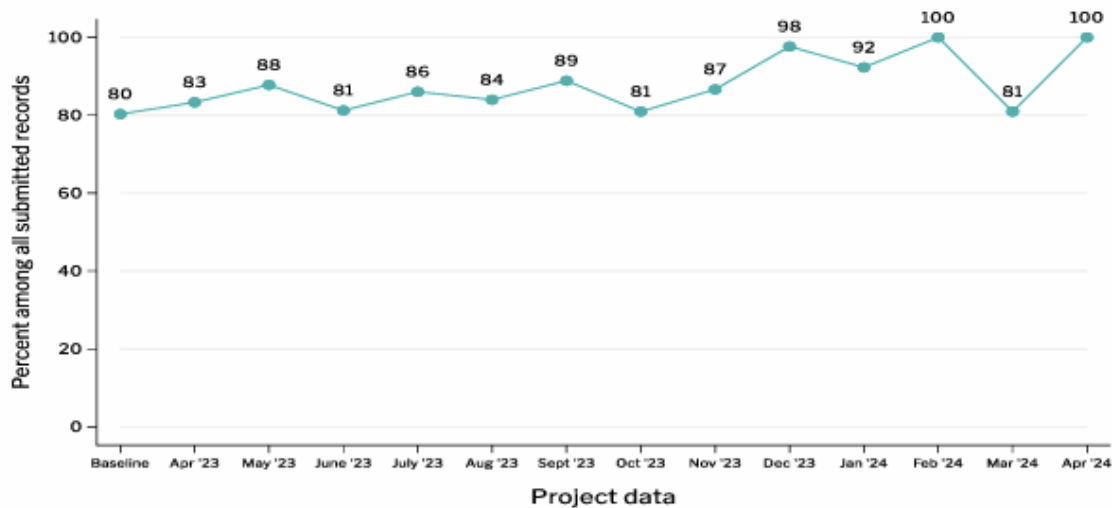


Figure 12: Percent of Submitted Patients Screened for Postpartum Status on ED Arrival.



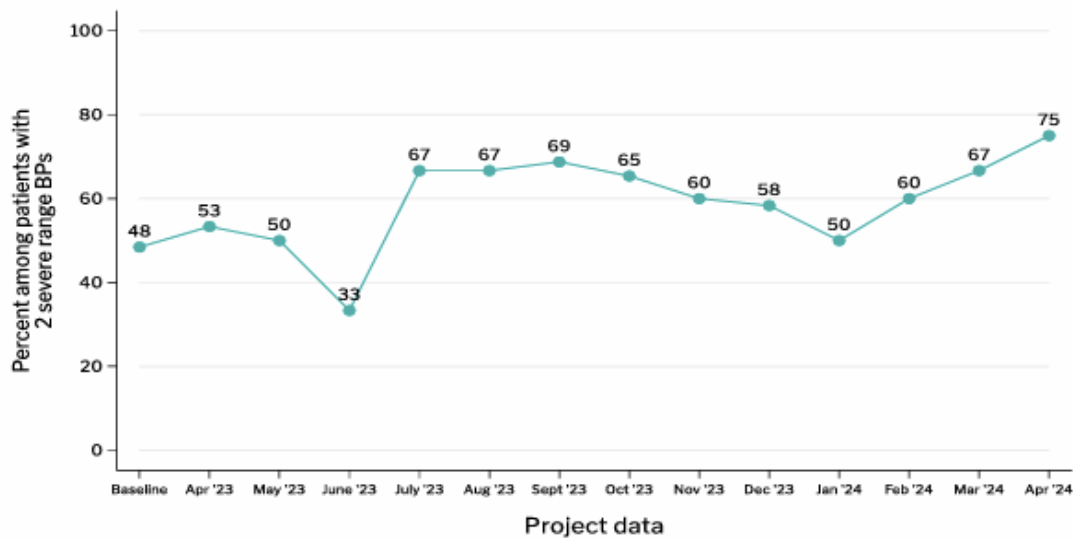


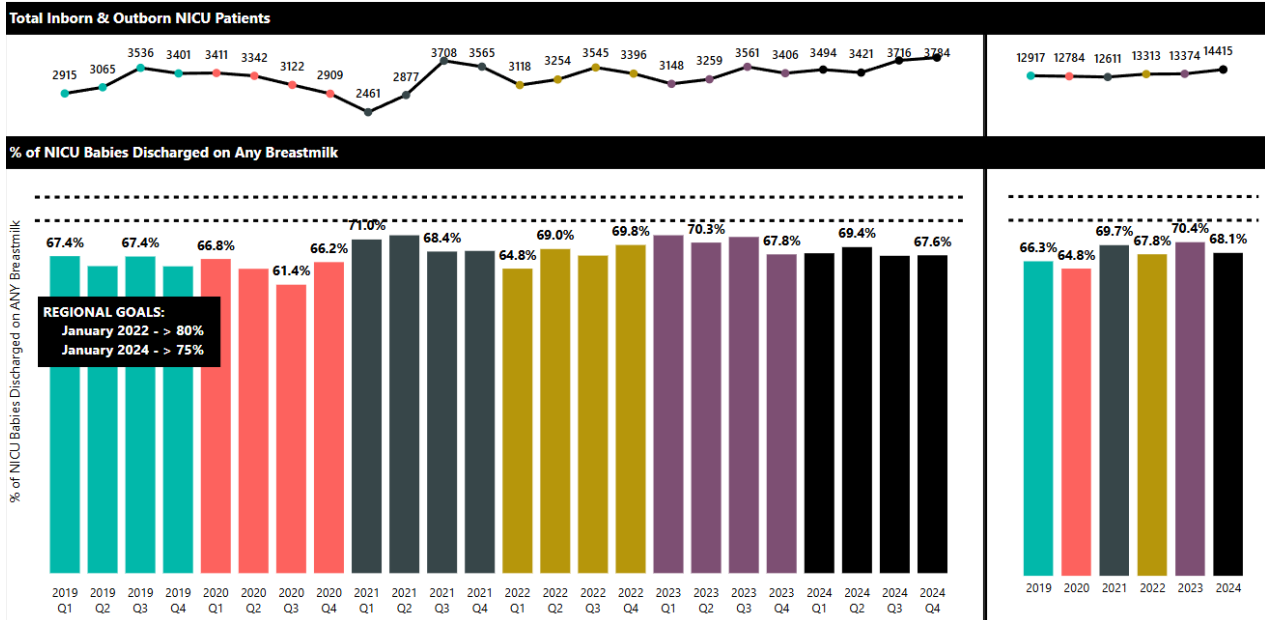
Figure 13: Percent of Patients with 2 Severe Range BPs Treated with an Antihypertensive within 1 Hour of 1st Severe Range BP.

- Maternal Morbidity & Mortality Workgroup Focus:
  - 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 **800 learners** to date. The education offers nursing and paramedic continuing education credits. Links to education available on the SETRAC website, email reminders, and in the quarterly newsletter.
  - The workgroup developed a maternal program best practice education that offers free CEs via the SETRAC LMS. To date, **30 people** have taken the course. Links to education available on the SETRAC website, email reminders, and in the quarterly newsletter.
  - 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 aid in positively changing the racial and ethnic disparities that lead to increased mortality rate. At each meeting, Dr. Toy presents education highlighting maternal near misses and the group discusses barriers and solutions.
- 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. **17 classes were held with 192 participants**. The goal is to reduce infant mortality through education and skills in the prehospital setting.
  - This group will begin focusing on creating templates for best practices in NICU and Maternal disaster plans.
- Breastmilk at Discharge Workgroup:
  - Project Aim: By January 1, 2026, 75% of all NICU babies will discharge on mother's own milk. According to the Q1-Q4 2024 data, the region is currently at 68.1%.

## Executive Report – Emergency Healthcare Systems (continued)



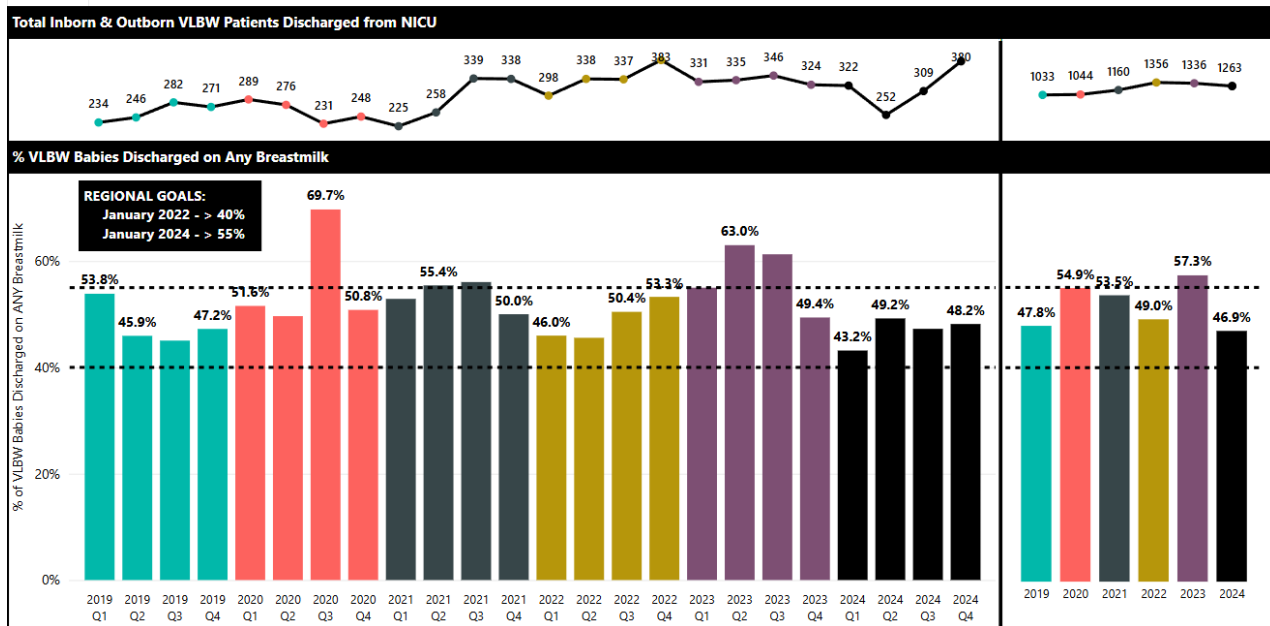
### Neonatal Data - Q1 2019 - Q4 2024 - NICU Babies Discharged on Any Breastmilk



- Project Aim: By January 1, 2026, 55% of all VLBW babies will discharge on mother's own milk. According to the Q1-Q4 2024 data, the region is currently at 46.9%.
- Neonatal designated facilities share their best practices at each meeting.



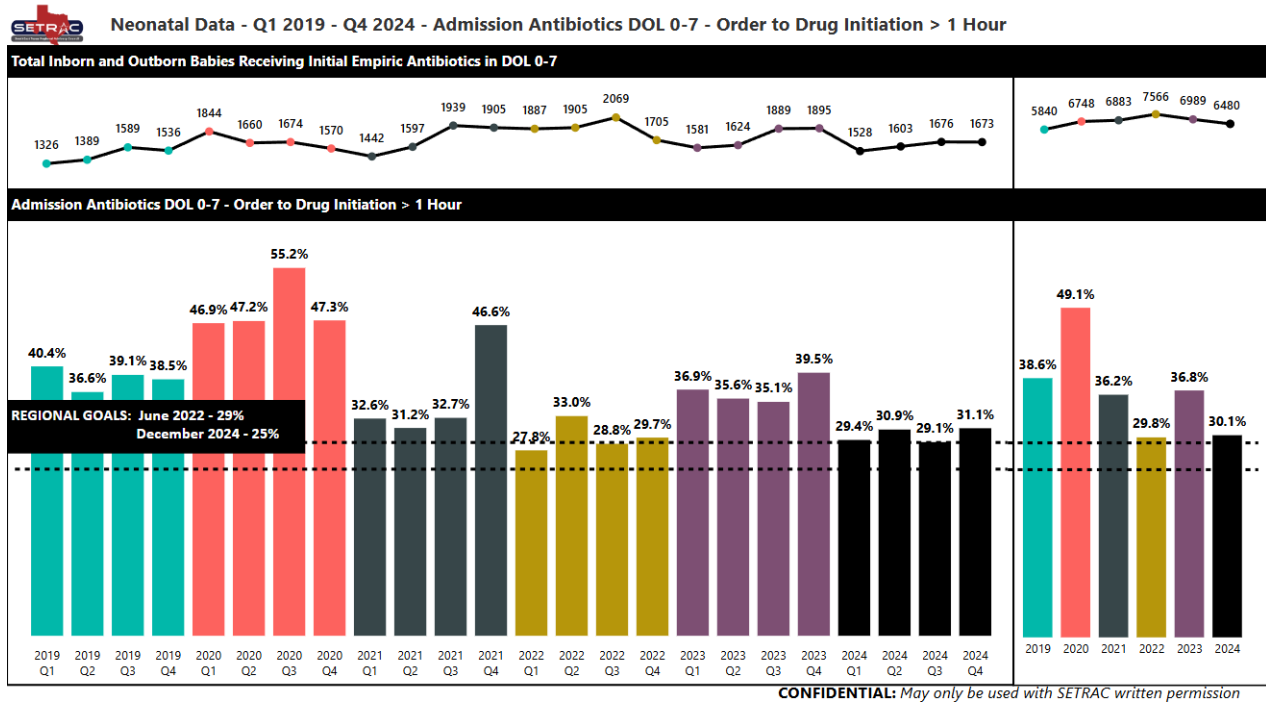
### Neonatal Data - Q1 2019 - Q4 2024 - VLBW Babies Discharged on Any Breastmilk



- Antibiotic Timeliness Workgroup:
  - Project Aim: By January 1, 2026, ≤25% of babies receiving antibiotics were administered more than one hour after order or birth. According to the Q1-Q4 2024 data, the region is currently at 30.1%.

## Executive Report – Emergency Healthcare Systems (continued)

- 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. Baseline data prior to implementation showed the region at 40.4%



- 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. The subcommittee developed an education request process so that facilities can meet designation requirements and support needs of programs throughout the region.
- Maternal Subcommittee:
  - Focus of this subcommittee is to address disparities in health and improve morbidity and mortality for the maternal population. The subcommittee is working on primary C-section reduction and discussing data needs to address this regional issue. Required data points are being developed to be submitted to the committee for approval. The group is finalizing the data request before submitting to the committee for approval.
- Syphilis Taskforce:
  - Working with the various health departments to strengthen communication of resources and process. Taskforce to determine PI project for region. The meetings are well attended by the health department. Goal is to educate providers in the region and include the ED setting. Required data points are being developed to be submitted to the committee for approval. Dr. Roberts presented the project at the ED committee meeting where resources were provided on the process for reporting cases to the Health Department. Data points were approved by the perinatal committee on June 11.



### Emergency Services Committee

**Committee Chair: Dr. Michael Gonzalez**

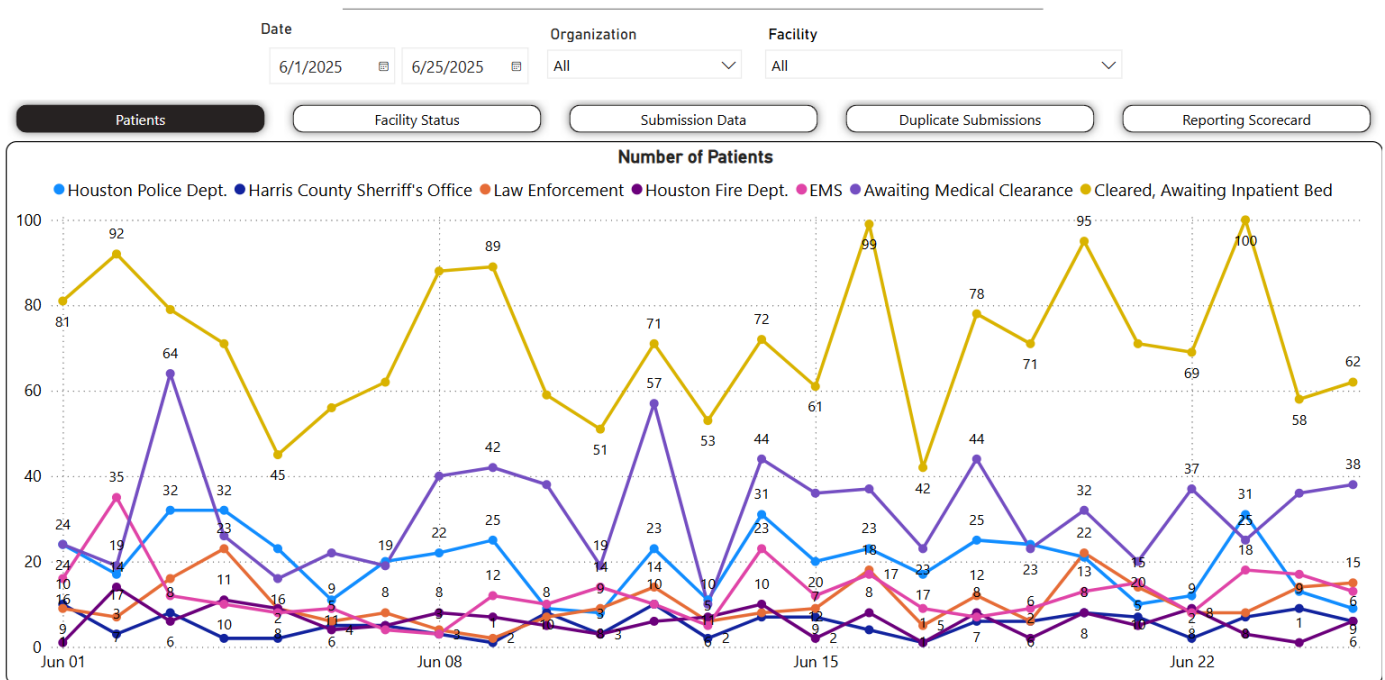
**Vice Chairs: Candace Aguilera- Mitchell, Lisa Martinez**

The committee held a meeting May 15<sup>th</sup>, 2025. Next meeting will be held July 17<sup>th</sup>, 2025.

- **EMS Wall Times workgroup** was developed and are looking at how to collect data points to assist with this project. Dr. Fagan from NCTRAC presented at the meeting on May 15, discussing how this project was conducted in North Texas. Chief Wait conducted a survey to determine which EMS agencies in the region are currently tracking off-load time and how they are documenting the time. The results showed that this time is inconsistently tracked through the region utilizing different points in the offload process. The workgroup will determine the definition of offload time for data collection.
- **Behavioral Health LOS in EDs workgroup** met and reviewed current data being submitted. The workgroup discussed that the current county project on behavioral health would address the front end while this group addressed the backend of BH patient throughput. A survey was sent to the area ED leaders to identify the top three barriers to departing BH patients from the ED. Based on this survey, the group will focus on those top three concerns and determine any additional data points for the BH database.
- Top concerns identified to date are:
  - Delays in LEO transfer
  - Placing non-resourced patients
  - Obtaining inpatient BH bed

### Behavioral Health Patients

*Patients Presenting with EDO*





### Trauma Committee

**Medical Director: Dr Michelle McNutt**

**Chair: Dr Shiree Berry**

**Vice Chair: Rebecca Crocker and Adam Fitzhenry**

The next committee meeting will be held on 09/04/2025.

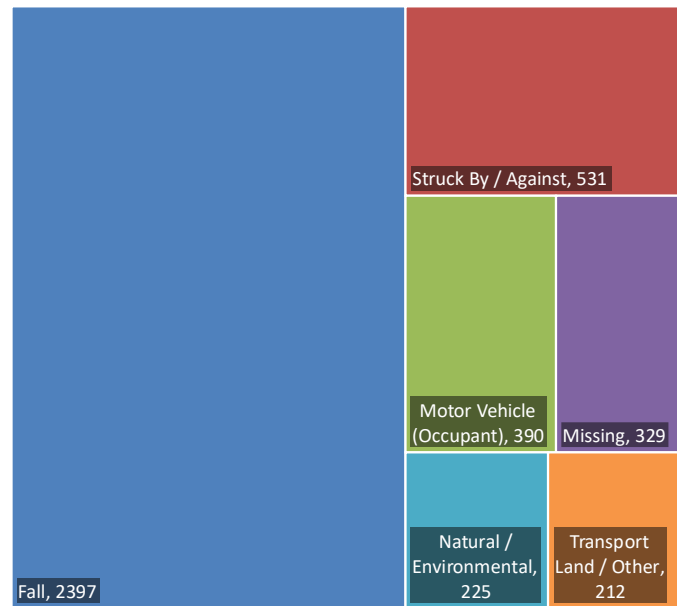
The focus of the committee includes:

- Trauma Rules, Trauma Surveys and the ACS
  - Since the last time we met the following facilities have been redesignated:  
HCA Houston Healthcare Tomball – Comprehensive Level III  
HCA Houston Healthcare West – Basic Level IV  
Oak Bend Medical Center – Basic Level IV
  - The new trauma rules go into effect on September 1<sup>st</sup>, 2025, and facilities will be held to the new rule standards from the same date.
  - The American College of Surgeons (ACS) recently released a few changes to the standards for Levels I, II and III. The ACS Level IV rules and standards have not been updated yet.
  - We currently have 2 of our Level III facilities that are In Active Pursuit of Level II designation. This means we will have 7 Level II facilities across our region.
  - The common deficiencies at survey as reported at GETAC are
    1. Identification of all variances
    2. Evidence of loop closure
    3. Nursing documentation
    4. Evidence of actions taken
    5. TMD participation in PI – Secondary Review
    6. Special audit, trauma deaths and complications
    7. Continuous PI.
- Trauma Registry / Trauma Data
  - We are in the process of transitioning to the ESO registry. Grace and I are now able to access the data in our repository. This change will mean that we will have immediate access to our data.
  - During 2024, we had 33,649 adult records and 4,904 pediatric records in our registry (pediatric is defined as ages 15 and younger)
  - Falls remain our number one mechanism of injury across both pediatric and adult trauma patients.

### Top Mechanisms of Injury - Pedi



Primary Mechanism	Total	Percent
FALL	2397	48.9%
STRUCK BY AGAINST (ASSAULTS, UNINTENTIONAL, INTENTIONAL)	531	10.8%
MOTOR VEHICLE (Occupant)	390	8.0%
MISSING	329	6.7%
NATURAL / ENVIRONMENTAL	225	4.6%
TRANSPORT LAND / OTHER	212	4.3%



### Top Mechanisms of Mortality (Pedi)

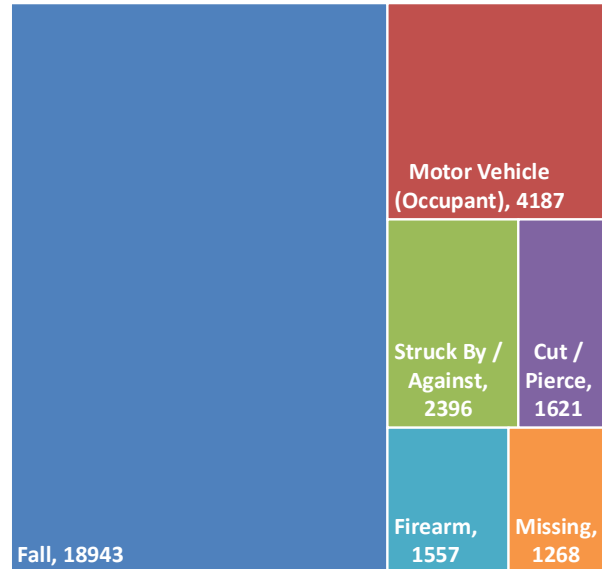


Primary Mechanism	Total	Percent	%Mort	Deaths
Missing	329	6.7%	3.343%	11
Motor Vehicle (Occupant)	390	8.0%	2.564%	10
Motor Vehicle (Pedestrian)	96	2.0%	7.292%	7
Firearm	111	2.3%	5.405%	6
Fall	2397	48.9%	0.083%	2
Struck By/Against	531	10.8%	0.377%	2
Pedestrian (Other)	25	0.5%	4.000%	1
Transport (Land/Other)	212	4.3%	0.472%	1
Natural/Environmental	225	4.6%	0.000%	0
Cut/Pierce	193	3.9%	0.000%	0

## Top Mechanisms of Injury (Adults)



Primary Mechanism	Total	Percent
<b>FALL</b>	18943	56.3%
<b>MOTOR VEHICLE</b> (Occupant)	4187	12.4%
<b>STRUCK BY AGAINST</b> (Assaults, Unintentional, Intentional)	2396	7.1%
<b>CUT PIERCE – STABBINGS/CUTS</b> (Assaults, Unintentional, Legal Intervention, Self-Inflicted, Undetermined)	1621	4.8%
<b>FIREARM</b>	1557	4.6%
<b>MISSING</b>	1268	3.8%



## Top Mechanisms of Mortality (Adults) 2024

Total Records = 33,649



Primary Mechanism	Total	Percent (All Records)	% Mortality (Mechanism Only)	Deaths
Fall	18962	56.3%	2.030%	385
Firearm	1558	4.6%	12.067%	188
Motor Vehicle (Occupant)	4191	12.4%	3.460%	145
Motor Vehicle (Pedestrian)	761	2.3%	7.753%	59
Missing	1270	3.8%	3.701%	47
Cut/Pierce	1626	4.8%	0.800%	13
Fire/Flame	42	0.1%	21.429%	9
Struck By/Against	2399	7.1%	0.375%	9
Motor Vehicle (Pedal Cyclist)	174	0.5%	4.598%	8
Transport Land/Other	493	1.5%	1.623%	8

- The GETAC Trauma Committee continues to look at the transfer times for the sickest trauma patients. Within our region, we have a small workgroup with representation from each level of facility looking at our data. Sheila Lopez is with us tonight to share a little more about our findings to date and what we hope to achieve from this performance improvement project.



### Injury Prevention Committee

**Medical Director: Dr. Shiree Berry, MD; FACS**

**Chair: Dr Mary Lytwyn**

**Vice Chair: Blake Milnes and Alyssa Badillo**

The next committee meeting will be held on 09/04/2025.

The focus of the committee includes:

- Community education – we will be attending the 2025 Lonestar Safety Fest in September along with our hospital and EMS partners.
- Stop the Bleed Train the Trainer classes have been well attended. At our May training we walked through the new slide deck that was released by the American College of Surgeons. Across the region we will now be teaching from the version 3 powerpoint.
- Our Stop the Bleed classes remain in high demand with several classes being taught each week. To keep up with this demand, we partner with our hospitals and EMS agencies to bring this important education across our region. In the last quarter we have taught STB to 1055 individuals.
- Injury Preventionists and Transtar are working together and on July 29<sup>th</sup>, they will be hosting education about heatstroke. Specifically, they will be talking about the dangers of leaving children and animals in cars during the summer months.

### Pediatric Committee

**The Medical Director: Dr. Brent Kaziny**

**Committee Chair: Dr. Nichole Davis**

**Vice Chairs: Jessica Yell and Rebecca Williams**

The next committee meeting will be held on 9/04/2025.

The focus of the committee includes:

- Our Regional Pediatric Emergency Care Coordinator (PECC) have had a name change to PRISM – Pediatric Readiness Improvement and Simulation Mentors. They are available to help Emergency Departments with their Pediatric Readiness Surveys and also with bringing education to the ER staff. This education is in the form of several pre-approved simulations ranging from falls, non-accidental trauma, croup, head injury, and abdominal pain.
- We encourage all of our Emergency Rooms to participate in the National Pediatric Readiness Quality Initiative (NPRQI) with a goal to improving pediatric readiness across our region and the State. The ER's will then be able to benchmark their performance against other like facilities and to identify pain points so they can focus on areas that need improvement. Below you can see an example of the reports that an Emergency Room Director is sent.



# NPRQI Dashboard

Performance Report:  
Dates: 2023 Q1 to 2024 Q1 | Clinical Measures Group: All Patients (Core Measures)

Measures with fewer than 10 records will not be displayed  
\*Cohort performance represents the average of site performances for sites within the same patient volume category (displayed with minimum of 5 sites)  
\*\*National performance represents the average of site performances across all participating sites (displayed with a minimum of 5 sites)

[Back to Landing](#)

Bundle	# of Records	Quality Measure	Your Performance	National Performance **	Cohort Performance *	
ASSESSMENT	150	% of pediatric patients with weight documented in kilograms only	96.7 %	63.9 %	63.7 %	ⓘ
		% of pediatric patients with pain assessed	54.0 %	79.3 %	78.4 %	ⓘ
		Median ED length of stay	49.5 minutes	183.9 minutes	147.5 minutes	ⓘ
ABNORMAL VITAL SIGNS	58	% of high acuity pediatric patients with vital signs re-assessed	56.9 %	82.5 %	78.1 %	ⓘ
	32	Median time from triage to first intervention	34.0 minutes	56.3 minutes	53.0 minutes	ⓘ
TRANSFER OF PATIENTS	6	% of transferred pediatric patients who met site-specific transfer criteria	--	96.6 %	97.0 %	ⓘ
		Median time from triage to transport	--	376.4 minutes	349.7 minutes	ⓘ
	0	% of transferred pediatric patients who were discharged from the receiving ED	--	--	--	ⓘ

- The new trauma rules for all trauma facilities require semiannual pediatric simulations, pediatric competencies for staff, pediatric equipment and supplies and an annual NPRP assessment. There is also a requirement for serial vital signs, GCS and pain assessments in the pediatric patient along with evidence of adhering to pediatric imaging guidelines.
- The G7 Grant will be starting the exercises across the different states starting with Texas on July 29<sup>th</sup>. The other exercises are scheduled for August and Louisiana in September.

# Pre-Hospital/EMS

## July 2025

**Committee Medical Director:** Dr. Lars Thestrup  
**Committee Chair(s):** Jason Gander, Joshua Taylor, Dr. Joseph Gill  
**SETRAC EMS Coordinator:** Clayton Ehrlich

<b><u>Meeting Schedule:</u></b>	<b>Past:</b>	January 15, 2025
		March 19, 2025
		May 21, 2025
	<b>Upcoming:</b>	July 16, 2025
		September 17, 2025
		November 19, 2025

**Committee Highlights:**

- **Texas EMS Wristband Program:**

The Texas EMS Wristband Program is actively implemented across the SETRAC region. SETRAC encourages all EMS and hospital partners to integrate wristbands into their daily operations and should utilize them during disasters for patient tracking purposes. The Texas Department of State Health Services (DSHS) has integrated the wristband data variable into the EMS and trauma datasets, facilitating the electronic linkage of prehospital and hospital patient records. This integration enhances patient accountability during disaster-related incidents, mass casualties, and evacuations. Additional information about the wristband program is now available on the SETRAC website homepage.

- **SETRAC Blood Products Committee:**

The EMS Blood Products Committee remains committed to advancing the prehospital use of whole blood across the SETRAC region. The committee continues to collaborate with the GETAC Whole Blood Task Force, the Pre-Hospital Blood Transfusion Initiative Coalition, and other key stakeholders to support program development, implementation, and standardization.

During the most recent Texas legislative session, a significant funding amount of 10 million dollars to be budgeted over the biennium was allocated to support the expansion of whole blood availability statewide for prehospital deployment. This investment reflects growing legislative recognition of the lifesaving potential of low-titer O whole blood (LTOWB) in trauma care, particularly in rural and high-risk settings. It is unsure how this funding will be distributed and SETRAC is working closely with regional EMS agencies and healthcare partners to assess how this funding can be leveraged locally to expand access, build infrastructure, and support training and education.

- **Regional Mass Casualty Incident Guideline Review:**

SETRAC has completed a comprehensive review of the Regional Mass Casualty Incident (MCI) Guideline to ensure alignment with current best practices, national standards, and regional operational capabilities. The review process included input from key stakeholders across EMS, hospitals, emergency management, and public health partners within the region.



## Executive Report – Emergency Healthcare Systems (continued)

The updated guidelines are on the SETRAC website. SETRAC will coordinate rollout efforts, including stakeholder education and integration into future regional drills and exercises.

We appreciate the collaboration and feedback from all partners involved in the review process and look forward to continued efforts in strengthening our regional preparedness and response framework.

- **EMS County/Pass Through Funds:**

SETRAC has distributed the required documentation to EMS partners for the FY25 EMS County Funds allocation. These documents are essential for verifying eligibility and ensuring compliance with funding guidelines.

Once all completed documents are received and reviewed, SETRAC will proceed with disbursing funding allotments to eligible EMS providers across the region. We appreciate our partners' timely attention to this process and remain available to assist with any questions or support needed during the submission period.

- **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.).