MEETING MINUTES

Governor=s EMS and Trauma Advisory Council (GETAC) Sunday, November 23, 2003, 5:40 p.m. – 8:20 p.m.

<u>Call To Order:</u> Chair Ed Racht, MD, called the meeting to order at 5:40 p.m. Members present included: Ed Racht, MD; Marti VanRavenswaay; Joan E. Shook, MD; F. E. Shaheen III, EMT-P; Pete Wolf, EMT-P; Maxie Bishop Jr., LP; Ronny Stewart, MD; John L. Simms; Mario Segura, RN; Gary D. Cheek, RN, EMT; Rebecca Campuzano-Salcido; Shirley Scholz, RN, CCRN, EMT-P, CMTE; and Kris J. Gillespie. Members absent include: Fred Hagedorn, MD and Raymond P. Holloway.

Approval of Minutes: A motion was made by John Simms and seconded by Ronny Stewart, MD to approve meeting minutes from August 29, 2003 with the additional motion that Governor's EMS and Trauma Advisory Council (GETAC) communicate to Commissioner Eduardo Sanchez that, while GETAC agrees with the concept of maximizing state health care funds, any proposal to do so should not be at the expense of the availability of uncompensated trauma care funds that was left off the minutes. All council members were in favor; the motion passed.

Chair Report: Dr. Ed Racht welcomed everyone to the meeting. Dr. Racht then appointed F E Shaheen and Wayne Morris to be co-chairs of the Task Force that will address issues of non-emergency transfer/transport and announced the members of the Task Force; asked Ernie Rodriguez, leader of a workgroup for implementation of SB-1409 (EMS Resource Center Pilot), to explore what the challenges are in implementing it; discussed ideas regarding committee membership/terms and asked the council to discuss the issue later on the agenda; requested that at a future meeting (May 2004) that the council meet for two days to review progress on the implementation of the Strategic Plan; announced the 2004 meeting date (February 12th & 13th, May 6th & 7th, August 12th & 13th, and November 20th & 21st in conjunction with the 2004 Texas EMS Conference). Dr. Racht introduced Jerry Overton, President of the American Ambulance Association who addressed the council briefly about national EMS issues.

<u>Texas Department of Health (TDH) Staff Reports:</u> Richard Bays, Associate Commissioner for Consumer Health Protection, stated that "every day is an adventure". Mr. Bays, reported on the HB 2292 consolidation of agencies under the Health and Human Services Commission and discussed the areas that have already begun such as purchasing, budgeting, contracting, and Human Resources and that full consolidation will be in 4-6 years or sooner. He stated that "EMS is still here" and that GETAC's role will not change, but who they will report to will.

Kathryn Perkins, Chief, Bureau of Emergency Management (BEM), reported on the changes in regulatory processes such as centralization of individual certification/licensure application receipt and processing and changes that will being in near future are centralization of provider licensing application receipt and processing, centralized test scheduling, transfer to Texas On-Line for web-based re-certification/re-licensure; status of rule revisions; update regarding implementation of National Registry (NR) testing and staff findings about basic testing.

Ernest Oertli, Chief, Bureau of Epidemiology, reported on staff changes in that Bureau; the status of the TRAC-IT project implementation and training; planned target date for 2003 database closure is April 4, 2004; and plans for an EMS/Trauma Registry Workgroup meeting in mid-January 2004.

Standing Committee/Task Force Reports:

EMS Committee – Mr. Pete Wolf reported that the committee discussed the First Responder Organizations rule specifically non-registered Advanced Life Support first responders. The committee would like to see more regulatory authority in this and BEM staff agreed to work with the TDH legal department to see what opportunities are available under current law and will report at the next meeting. The committee also discussed the committee makeup and terms; they recommend three year terms for appointees, however, the prevailing opinion on makeup appeared to be that regional interests are more important than specific entity perspective such as government, private, hospital, fire-based, etc.

Education Committee – Mr. Maxie Bishop reported that the committee discussed the current situation regarding basic exam locations, including the high "no show" rates; publication of EMS Education program statistics related to National Registry for Emergency Medical Technicians (NREMT) exam results and the committee is considering a recommendation to BEM to publish statistics for basic programs some time in the next 18-24 months, but would like the Data, Informatics, and Research Task Force (DIRTF) to identify factors beyond pass rates alone that should be included; terms and makeup of the committee; and a potential future NREMT requirement for EMS education programs to be nationally accredited.

Injury Prevention - Mr. Mario Segura reported that the committee has completed the Injury Prevention Plan for Texas and it was sent out for public comment which no changes were recommended. The committee recommended for GETAC to vote and approve the plan. The committee discussed the DIRTF and decided that they should meet jointly at the next meeting. The committee also discussed recognizing successful injury prevention programs starting in 2004.

Pediatric Committee – Dr. Joan Shook reported that the committee discussed recommendations for pediatric specific guidelines to be utilized by the Regional Advisory Councils. The committee also discussed various definitions of "age specific" for pediatric patients, as well as the necessity for pediatric specific education and equipment for EMS providers. The committee requested to have a joint meeting with Trauma Systems Committee to discuss some of these issues at the next scheduled meeting.

Medical Directors Committee – Dr. Steve Ellerbe, in the absence of Dr. Fred Hagedorn, reported on the Medical Director's course, which is expected to be available electronically so that it can be accessible statewide. Dr. Ellerbe also reported that the committee had recommended that the Comprehensive Clinical Management Program (CCMP) move on to a full pilot test if funding is available and that associated FRO's could be covered under a provider's CCMP if the FRO had the resources and support of the medical director.

Trauma Systems – Dr. Ronny Stewart apologized for missing the committee meeting and reported that Jorie Klein presided in his absence. Dr. Stewart reported that David Wright of the Centers of Medicare and Medicaid Services gave a briefing on the new Emergency Medical Treatment and Labor Act (EMTALA) regulations that went into effect this month. The committee discussed the definitions of "bad debt" and "charity care" in Draft rule §157.131 Designation Trauma Fund and Emergency Medical Account. Dr. Stewart proposed to have a two day meeting in January to further discuss Draft Rule §157.131 as well as Draft Rule §157.125 Requirements for Trauma Facility Designation, and to have a joint meeting with the Pediatric Committee at the next schedule meeting to discuss mutual interest.

Rural Task Force– Mr. Pete Wolf reported that the task force continued work on the development of an elected officials' guide which will include illustrations, chapters addressing such things as history, problems, current legislation, and future of EMS. The Task Force is looking for ideas for public service announcements regarding the appropriate utilization of EMS. Mr. Wolf requested that the DIRTF have a joint meeting at a future meeting.

Air Medical Task Force– Mrs. Shirley Scholtz reported that the task force met for approximately fifteen minutes and determined that it had completed its original charge. The Task Force is now requesting GETAC "standing committee" status so that other state-wide aero-medical issues can be addressed by the Task Force.

Data, Information, and Research Task Force – Dr. Folden reported that the task force discussed the following: structure of the Task Force and what types of studies are the most effective and reflect true data; the need for "collaboration and funding" to do research; the "charge" of the Task Force.

Emergency Medical Dispatch Resource Center Pilot Workgroup – Ernie Rodriguez reported that the workgroup reviewed the enacting legislation as well as the previous request for proposals (RFP) that was never funded. The workgroup will be providing BEM staff with recommendations for revisions to the RFP before publication.

<u>Discussion of Reports/Public Comment on Action Items:</u> GETAC members discussed the staff, Committee, and Task Force reports. Public comment was heard on the above issues.

Action Items:

A motion was made by John Simms, and seconded by Ronny Stewart, MD that GETAC Standing Committees should have no less than ten and no greater then twenty members, that each committee should have a generic profile as to its purpose, that interested individuals must apply to be appointed to a committee, and that appointments to committees are made jointly by the GETAC Chair and the Committee chair. The motion passed unanimously.

A motion was made by John Simms, and seconded by Mario Segura that that the GETAC Standing Committee members should have terms with expiration dates, however, when committee member's term expires, that individual may be re-appointed. One third of the Committee members should expire each year. The motion passed unanimously.

A motion was made by Ronny Stewart, MD, and seconded by Shirley Scholtz that the Air Medical Task Force be established as a GETAC standing committee. The motion failed on a vote of two for and ten against.

A motion was made by Shirley Scholtz, and seconded by John Simms that the charge of the Air Medical Task Force is broadened to include identifying all air medical issues in Texas and that the Task Force may bring issues to GETAC. The motion passed unanimously.

A motion was made by Ed Racht, MD, and seconded by F E Shaheen to charge the Air Medical Task Force to evaluate issues related to impact on clinical care and systems issues with increasing liability insurance requirements for helicopter landings at the hospitals. The motion passed unanimously.

A motion was made by Mario Segura, and seconded by Ronny Stewart, MD that GETAC accept the Injury Prevention plan for Texas. The motion passed unanimously.

General Public Comment: Public comment was heard on a number of issues.

Announcement made: Williamson County EMS was awarded the EMS of the Year Award for Texas.

<u>Dr. Racht asked that someone from the Bioterrisorim Disaster Program to speak at the February meeting.</u>

Meeting Date for 2004, February 12th & 13th, May 6th & 7th, August 12th & 13th, and November 20th & 21st in conjunction with the 2004 Texas EMS Conference were announced.

Adjournment: The meeting adjourned at 8:20 p.m.