



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

October 21, 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

Dr. Persse welcomed the board members and the stakeholders in attendance. He expressed that our thoughts are with those affected by the two recent hurricanes. A comms and law enforcement task force from the region was deployed to assist in those areas.

Dr. Persse also mentioned the helicopter crash that occurred the night before not far from downtown Houston. Dr. Kevin Schulz was on scene to assist.

Board members were reminded that hurricane season is not yet over and to remain prepared.

#### 3. NOMINATIONS COMMITTEE

Tom Flanagan announced that Dr. Syed Raza submitted his resignation as the representative for CHI St. Luke's Health and Mr. Donnie McLaughlin has been appointed representative to fill the vacancy.

- Bylaws Committee Update – the bylaws have been reviewed and it was noted that the medical director position in the clinical committees was created with no term limits. In lieu of having a separate meeting to discuss initiating a term limit, the board approved of having a discussion and setting a term limit during this meeting. The board members felt a three-year term for medical directors would be appropriate in order to sustain continuity in the committee should other committee leaders roll-off. The role would be limited to two terms. The change will be effective immediately and the bylaws will be revised to reflect the new term limits.

#### 4. OFFICER REPORTS

##### A. Chairman

Dr. Persse reported that a letter was sent from SETRAC to hospital CEOs with the intent of a potential dues increase.

Dr. Persse reported that there is a presence of the Marburg virus in some densely populated urban areas in Africa. A large percentage of those infected are healthcare workers who contracted the illness from caring from infected patients.

A soccer meeting was held in preparation for the World Cup in 2026.

Dr. Persse stressed the importance of attending and interacting at meetings. The board discussed striking a balance of attending meetings in-person versus attending virtually for stakeholders who reside a long distance from SETRAC. The board discussed possibly having board meetings with a Zoom option for the general membership with guidelines, including having cameras on and a lack of distractions, and having a separate debriefing for the general membership. Dr. Brent Kaziny was appointed by Dr. Persse to chair a group to discuss how to get the general membership engaged in informing their organizations of topics addressed at SETRAC board meetings.

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

Mr. Flanagan distributed copies of the letter sent to the hospital CEOs regarding the proposed dues increase. Positive feedback has been received as well as some concern raised from the hospital's perspective on the large increase. The board discussed the letter and how to show the value of SETRAC including developing a value proposition slide that can be shared at CEO council, sharing the SETRAC annual report with CEOs, approaching lobbyists regarding state funding structure, and improving the SETRAC branding. The communication should be more brief and better show what SETRAC is about and the value provided to hospitals. Consideration should also be given to consider agencies that have budget constraints and a suggestion to create a strategic plan.

Mr. Flanagan will be in touch within the next week with Wayne Voss, Todd Caliva, Dr. Brent Kaziny, Dr. Steven Brass, and Dudley Wait to form an ad hoc committee to help discuss this topic. Anyone else interested in being a part of this committee, including EMS, can notify Mr. Flanagan.

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

James Campbell congratulated the SETRAC team on a job well done with Senate Bill 8 (SB 8). The program will soon be coming to an end.

Dr. Kevin Schulz shared changes to Texas Code Chapter 197 (medical direction of EMS and all the delegate practice pieces that go into that) will be opened for comment. Several physician practice delegation rules are being consolidated under one chapter (Chapter 169).

#### **D. Secretary**

Mr. Morrow reported that all the conflict of interest and attestation forms beginning new terms have been received as required in the SETRAC bylaws. Board members were reminded that 75% attendance at board meetings is required.

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

Dr. Kaziny commended the SETRAC team in developing and facilitating exercises in the G7 areas.

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

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

- All grant accounts are being expensed out as expected. RAC/EMS funds had a positive variance due to the changes in staffing. The funds for that grant can be rolled over to the next fiscal year. All others have to be used in the year they are given. There was a slight variance in the HFD Base Station funds, over which SETRAC does not have control.
- Several investment accounts were liquidated and consolidated into one account through Amegy Bank. The FDIC requirements for protection are in place.
- The operating fund for the RAC has done well this year.
- Unrestricted asset growth shows a total fund balance of \$912,370.73.
- The decrease in funding discussed previously in the meeting will affect the RAC/EMS funding next year. Revenue for dues would go into the unrestricted funds and would be used to offset projected future RAC grants that are underfunded.

## 5. EXECUTIVE REPORT

Dr. Persse congratulated Ms. Upton and her team on the recent RHPC symposium in Galveston.

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

- The ESO trauma registry is expiring on December 31<sup>st</sup>. Trauma hospitals will need to decide which registry they will use in the future. The new agreement for SETRAC to access the new ESO trauma registry includes a fee schedule as follows:
  - Year 1 - \$47,300
  - Year 2 - \$47,400
  - Year 3 - \$47,400
  - Year 4 - \$48,600
  - Year 5 - \$50,000

The agreement allows for cancellation if SETRAC is not able to budget the amount due to a decrease in funding. Access to the trauma registry is necessary due to more timely access and need for non-aggregated numbers and additional information not available through the state's trauma data collection. The board discussed if other solutions were available, including other registries available, the service provided by ESO, and which registry the healthcare systems in the region were going to use.

- A regional public health discussion was held earlier in the day. The Marburg virus has returned and has been very well contained; however, members were reminded to be ready to care for a patient with infectious diseases. SETRAC has PPE available if necessary for caring for these types of patients.
- Planning is taking place for the FIFA World Cup in 2026. Hospitals will need to have surge, decontamination, and other plans in place. For 45 to 60 days during this event, there could be 100,000 to 120,000 extra people in Houston, many who may not speak English or have the capability to receive emergency messages on their phones. It is not known yet which countries will be represented in the matches at this time; however, Houston will be the host city for several of the countries. The 4<sup>th</sup> of July (250<sup>th</sup> anniversary) will take place during the World Cup. SETRAC is participating in the planning, representing the regional healthcare system.
- SETRAC will need to resubmit an RFP for the Houston Fire Department Base Station on November 7th.
- A subsidiary of the Oregon Hospital Association is currently piloting a system in seven states that provides real-time bed reporting, the number of unassigned patients to physicians, and CMS required submissions. Federal funding for the program is requiring the inclusion of a hurricane zone be included in the pilot. Ms. Upton met with representatives from some of the hospital representatives currently using the system and received positive feedback. The pilot would be free for SETRAC for the first year, after which hospitals would need to pay for continued participation. Dr. Persse tasked Mr. Flanagan with discussing this pilot with the other hospital representatives when meeting regarding the dues increase. A motion will be made at the January board meeting after feedback is received from the hospitals. Should the organization need a response prior to the January board meeting, the board stated they would be good with the Executive Committee engaging with the organization on their behalf as stated in the SETRAC bylaws. The hospitals will be asked if they are ok with moving forward and having a demonstration or if they would like a demonstration prior to making the decision.
- **Preparedness and Response** – A written report was provided to the board prior to the meeting.
- **Emergency Healthcare Systems** – A written report was provided to the board prior to the meeting. Jason Gander, chair of the EMS Committee, provided the following update:
  - Committee member engagement and interest in initiatives has increased.
  - EMS committee members were thanked for their hard work and involvement in clinical service lines and disaster preparedness.
  - The EMS Committee will continue to work with the Blood Products Ad Hoc Committee.

- EMS wall times continue to be discussed at committee meetings, as it is an ongoing issue. A request has been made for SETRAC and its members to develop a regional process to address extended wall times.
- The EMS Committee is eager to work with the newly formed ED Committee to assist in any way possible.
- SETRAC provided wristbands to EMS agencies at the last meeting. Most agencies plan to use the wristbands daily and during disasters to help with patient tracking. More education has been requested for better collaboration with hospitals on capturing data.
- A few initiatives the committee is working on include:
  - Developing regional guidelines for EMS body cameras, ensuring best practices.
  - Providing guidance on the safe inter-facility transfer of balloon-pump patients.
  - Receiving thrombolytics (in collaboration with the SETRAC stroke and cardiac committees.)
  - Review current no-notice MCI plan (request received from the RHPC Board.)
  - GETAC Airmedical Inter-Operability Radio List to assist with communication between air medical and ground contacts during large scale events or disasters (request received from GETAC.)
- The next meeting will be at Cy-Fair on November 20<sup>th</sup>.

## 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. *Acceptance of Dr. Syed Raza's resignation as the representative for CHI St. Luke's Health System*

The board approved Dr. Raza's resignation with no objections or abstentions.

#### b. *Approval of Donnie McLaughlin as the new representative for CHI St. Luke's Health System.*

The board approved Mr. McLaughlin's nomination with no objections or abstentions.

#### c. *Approval of use of funds for the new ESO trauma registry.*

See discussion under the agenda item "Executive Report". The board approved moving forward with the ESO agreement with the amount presented for Year 1. There were no objections or abstentions.

#### d. *Approval of submitting an RFP for the Houston Fire Department Base Station.*

The board approved the submission of the RFP for the base station. There were no objections and Dr. Persse abstained from the vote due to a conflict of interest.

## 7. GENERAL / OPEN DISCUSSION

Mr. Sloan announced the drought index is currently at 722. At 725 the move will be made to Level II. Fires in the region will increase if rain is not received.

Mr. Sloan thanked SETRAC and CMOC. An article written for the Domestic Preparedness Journal recognizing SETRAC and its partnerships will be published in January. CMOC and other partners assisted during this year's derechos by contacting those registered in the Emergency Assistance Registry for wellness checks who were not initially reached by first responder contacts. Ms. Suzanne Curran, who was in the Harris County EOC at the time, was recognized at the meeting for her assistance, specifically with an individual with severely limited resources who was concerned about not being able to contact her daughter.

Mr. Wait thanked the board for agreeing to make the Whole Blood Work Group an ad hoc committee. Mr. Wait shared that an EMS agency (near the SETRAC region) wanting to do whole blood was notified by the regional blood supplier that they would need to use blood components. A notification that a blood drive was being held to support the first responders in that county, which was not well-received by the blood supplier. Ms. Upton added that a blood drive was held at the symposium. Fifty-seven units were received, which was more than their goal of fifty units. The blood drive will be held at the symposium again next year.

## 8. ADJOURNMENT

Dr. Persse adjourned the general board meeting at 8:53 pm. An executive session immediately followed the meeting.

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