

Regional Advisory Council
(RAC)
Annual Report
Report Form

*An annual report is to be submitted to DSHS, Office of EMS/Trauma Systems no later than **October 15, 2020**. The annual report will cover the past fiscal year (September 1, 2019 thru August 31, 2020), as stipulated in the Tobacco RAC Contract. Additional information may also be entered or submitted as an attachment to this report.*

RAC	Central Texas RAC	
Report Period	FROM: 09.01.19	TO: 08.31.20

1. On a separate form (Attachment A) provide current information for RAC Officers and Executive Committee/Board as of September 1st.
2. Needs Assessments (*Provide a narrative paragraph describing how needs were identified. Give details outlining the decision-making strategy the RAC used to meet identified needs and identify patterns of regional resource distribution. For example, what kind of equipment was allocated to whom, and for what purpose? What were the number topics and attendees of education/training events? How were they evaluated? Using a table like the one shown below may assist in this process.*)

Example table:

Identified Need	Targeted Beneficiary (EMS/Hospital)	How Were These Needs Met?
Education/Training	Hospitals	AIS15 Course for trauma programs
Equipment	Both EMS	Training supplies for Stop the Bleed Thermometers for all EMS units
Other	Both	Were able to fill several members wants from their 2020 Needs Assessment

3. Administrative/Operational & Clinical:
 - a. How has the RAC identified all healthcare organizations in the region that might be involved in trauma, injury prevention, emergency healthcare, rehabilitation, and disaster management? What efforts did the RAC make to **maximize inclusion** of its constituents into the RAC to continue to develop an integrated trauma system? **The Central Texas RAC contacts new organizations in the region as we become aware of them. This includes organizations that were previously engaged with the RAC. No new organizations were identified during this period.**
 - b. Summarize the need for and outcomes of specially called RAC meetings. **The CTRAC Board of Directors did not call any specials meetings during this period.**

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- c. Report any projected realignments of counties in trauma service area. *There is no projected realignment of counties in this trauma service area.*
- d. Describe the RAC's role with facilities within the trauma service area prior to or during trauma center designations/re-designations that occurred within past twelve months. You may also describe the RAC's role with facilities outside the trauma service area, if applicable. *The RAC participates, as requested, in each facility's designation. This includes insight and support before application, ahead of survey, as well as attending the actual survey, if requested. Technical assistance is provided as needed.*
- e. Describe how the RAC administratively and operationally contributed to and participated in Injury Prevention initiatives within past twelve months. *(Please provide a brief summary of all injury prevention activities describing the RAC's level of involvement.) The RAC serves as the conduit through which all Stop the Bleed activities flow in the region. This includes scheduling, assigning instructors, and delivering the training in some cases. The RAC facilitates checking out training equipment as needed. There is continual engagement with our members and community partners.*
- f. Describe the most significant findings of the RAC's SQI/Performance Improvement Committee within past twelve months. **What changed as a result of that/those findings?** *After the Medical Advisory Committee determined that pediatric indicators were necessary, a prehospital temperature project materialized that required deliberation on how to best deploy a systematic approach to achieve acceptable data to include, what type of device to use, how to obtain a good reading, etc. The project is in-progress.*
- g. To what degree were physicians in the trauma service area involved in the resolution of adverse patient care findings identified by the RAC's SQI/Performance Improvement Committee. *Physicians are intimately involved in performance improvement in the region through the Medical Advisory Committee as well as real-time reporting and study on time-sensitive matters. Cases that are not time-sensitive are reviewed at the quarterly Medical Advisory Committee meetings.*
- h. Describe activities the RAC was involved in that assisted or encouraged EMS and FRO participation in the RAC within past fiscal year (e.g. teleconferencing, video/conference calls, etc.). *There is continual engagement with EMS and FROs to increase participation. We allow for teleconferencing for all meetings and have streamlined the meeting calendar to allow for great participation.*

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- i. Identify problems or areas of concern identified in past twelve months adversely impacting RAC operations. The majority of 2020 has seen RAC operations largely shift to COVID-19 response activities. There was a great deal of discrepancy in the communications from the State in terms of what the role of the RACs were versus the HPP contractors. As a result, there were parallel, duplicative efforts taking place at the outset and then confusing reporting structure that made it more difficult to manage stakeholder requests.
4. Is the information identified on Texas Secretary of State/Comptroller of Public Accounts (<https://ourcpa.cpa.state.tx.us/coa/Index.html>) website current? If not, what actions have been taken to ensure Certification of Franchise Tax Account Status (Registered Agent/Office) is current with the Texas Secretary of State/Comptroller of Public Accounts? Yes.
5. Summarize any issues/concerns that occurred in past twelve months that required technical assistance from the Office of EMS/Trauma System Coordination Group. Central Texas RAC has not requested any specific technical assistance apart from normal contract questions.
6. What method will the RAC utilize to ensure member organizations receive a copy of this Annual Report? The Central Texas RAC provides the Report via email; post to the centraltexasrac.org, and it will be made available at the Q4 General Assembly meeting.

DocuSigned by:

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RAC Chair

9/22/2020

Date Submitted

Complete and attach to the Annual Report the following:
Attachment A – Officers/Board Members
Attachment B – Annual Bylaws Affidavit
Attachment C – Annual Regional Trauma System Plan Affidavit

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**Attachment A
Officers/Board Members**

Name	Office/Board Position	Term	Affiliation	Telephone	Email
Angela Gentry	Chair	12/21	BSW Temple	254-724-9926	Angela.gentry@bswhealth.org
Elizabeth Hicks	Vice Chair	12/21	Acadian Ambulance	512-556-0064	Elizabeth.hicks@acadian.com
Crissie Richardson	Treasurer	12/20	Premier ER	254-228-1200	Crissie.richardson@premier.care
Wesley Gilbreath	Secretary	12/21	Belton Fire	254-933-5884	wgilbreath@belontexas.gov
Dr. Taylor Ratcliff	Immediate Past Chair		BSW Temple	806-777-2539	Taylor.ratcliff@bswhealth.org
Jacob Creel	EMS Ops Committee Rep	12/21	PHI Med 1-5	337-660-8790	jcreel@phiarmedical.com
Jennifer Henager	HCC Rep	12/20	Bell County OEM	254-933-5587	Jennifer.henager@bellcounty.texas.gov
Laura Metcalf	Hospital Care Committee Rep	12/21	AdventHealth Rollins Brook	512-556-6865	Laura.metcalf@adventhealth.com
Stacy Sepeda	Injury Prevention Committee Rep	12/20	Seton Medical Center Harker Heights	254-618-4359	Stacy.sepeda@smchh.org
Dr. Tim Rudolph	Medical Advisory Committee Rep	12/21	Hamilton General Hospital	325-648-2850	trudolph@hamiltonhospital.org
Heidi Cantrell	Perinatal Committee Rep	12/20	Seton Medical Center Harker Heights	254-680-6336	Heidi.cantrell@smchh.org
Heidi Lavka	Trauma Program Rep	12/31	Carl R Darnall Army Medical Center	254-288-8150	Heidi.b.lavka.civ@mail.mil
Cassie Campbell	Lead Pediatric Facility Rep	12/20	McLane Children's Medical Center	254-935-4059	Cassandra.campbell@bswhealth.org
Dr. Vanessa Sieg	Military Facility Rep	12/21	Carl R Darnall Army Medical Center	540-840-3201	Vanessa.c.sieg.mil@mail.mil
Daniel Lay	Rural Area At-large	12/20	Coryell Health EMS	254-534-2967	Daniel.lay@coryhealth.org
Dr. Scott Sagraves	Physician At-large	12/21	BSW Central Division	254-724-4681	Scott.sagraves@bswhealth.org
Ashley Voss-Liebig	Community Member At-large	12/21		512-854-3701	ashleyliebig@gmail.com

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ANNUAL BYLAWS AFFIDAVIT
Attachment B

The RAC shall document an annual review of its bylaws. (§ Rule 157.123: Essential Criteria Defined. A.12)

RAC NAME: Central Texas Regional Advisory Council has completed an annual review and/or revision of the RAC's Bylaws with a documented date of and ratified by member organizations on 12/19/19.

Is a current copy of the RAC's bylaws available for review on the RAC's web site?

YES [] NO

If NO, is a copy is attached to this report?

[] YES [] NO

A page summarizing revisions/additions made to the bylaws this contract reporting year is attached to this report.

YES [] NO At end of this document.

DocuSigned by:
Angie Gentry
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Chair

9/22/2020
Date

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ANNUAL REGIONAL TRAUMA SYSTEM PLAN AFFIDAVIT
Attachment C

The RAC shall document an annual review of regional EMS/trauma system plan. (§ Rule 157.123: Essential Criteria Defined. A.12)

RAC NAME: Central Texas Regional Advisory Council has completed an annual review and/or revision of the RAC's regional trauma system plan with a documented date of and ratified by approval from member organizations on 12/19/2019.

Each essential component of the plan has a revision date of:

COMPONENT	DATE
Access to the System	<u>12/2019</u>
Communication	<u>12/2019</u>
Medical Oversight	<u>12/2019</u>
Pre-hospital Triage Criteria	<u>12/2019</u>
Diversion Policies	<u>12/2019</u>
Bypass Protocols	<u>12/2019</u>
Regional Medical Control	<u>12/2019</u>
Facility Triage Criteria	<u>12/2019</u>
Inter-hospital Transfers	<u>12/2019</u>
Designation of Trauma Facilities, Planning for Performance Improvement	<u>12/2019</u>
Regional Trauma Treatment Protocols	<u>12/2019</u>
Regional Helicopter Activation Protocols	<u>12/2019</u>
Injury Prevention	<u>12/2019</u>

Is a current copy of the RAC's regional trauma system plan available for review on the RAC's web site?

YES [] NO

If NO, has one has been attached with this report?

[] YES [] NO

A page summarizing revisions/additions made to the regional trauma system plan this contract reporting year is attached to this report.

[] YES [] NO

DocuSigned by:

07EC9B690AB54CA...
Chair

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CTRAC Proposed Changes to Bylaws

- Globally corrected capitalization, punctuation, and numbering mistakes.
- Article VI, Section 5 – change references to certain months to the appropriate quarter instead.
- Article IV, Section 5 – delete “and will not be employed by a facility in the Central Texas Region” from the definition for Physician At-large.
- Article IV, Section 5 – change Secretary to elected for even years and Treasurer for odd years. (Secretary & Vice Chair at the same time not Secretary & Treasurer at the same time).
- Article IV, Section 8 (a numbering change) – delete “Copies of such policy...General Assembly Meeting” since we do not practice that way and could be moved to a policy instead if wanted to keep.
- Article VII, Section 1 – change references to certain months to the appropriate quarter instead.
- Article X, Section 2 – remove 2316.

Contact RAC Staff for any clarification or a copy of the bylaws with tracked changes on.