

Air Medical and Specialty Care Transport Committee Meeting Minutes
Governor’s EMS and Trauma Advisory Council (GETAC)
****Virtual Meeting – Due to COVID-19 Pandemic****
October 27, 2020 10:00am – 11:30pm

Speaker(s):	Discussion:	Action/Follow Up:
Lynn Lail: Call to Order/ Roll Call/ Quorum		
	Meeting called to order	
	Reading of the GETAC Vision and Mission Statements	
	Review and approval of February 2020 minutes Motion – Justin Second – Stacy Approved with mentioned changes	
Alan Tyroch, MD, GETAC Chair comments:		
Dr. Alan Tyroch, MD	Not able to join the meeting today.	
Lynn Lail: Discussion and possible action on the following items:		
1. Reports from Air Medical & Specialty Care Transport Committee (AM&SCTC) members assigned to attend other committee meetings in November. Assigned members to a committees that weren’t covered		
	Disaster & Emergency Preparedness – Jim Speier – Meeting pending Pedi – Stacy Putman – No items to report Injury Prevention – same time as TAAMS – Cherish Brodbeck - No items to report Stroke – Michael Farris – (not present) No items to report EMS Education – Josh – TIMS – virtual clinical rotations, probation paramedic proposal – No items to report EMS – Martha Headrick – No items to report EMS MD – Lynn Lail – Meeting pending Trauma Systems – Michael Farris (not present) - No items to report Cardiac – Lynn Lail – Meeting pending	
2. Report on GETAC Council Retreat		
	GETAC RETREAT October 23, 2020 Dr. Tyroch is the current GETAC chair and conducted the meetings on that day Planned GETAC Dates: February 19, 2021 Virtually June 25, 2021 Virtually September – we hope to be back to in person meetings November – we hope to be back to in person meetings and this will be along with Texas EMS Conference	

147 applicants for various committee appointments – sets a new record

- Selection process will take place in the first week of November
- Second week of November the appointed committee members will be announced

Next GETAC Council meeting is November 20, 2020 10:00am Virtually

Received various reports from the Consumer Protection group

Jorie reported on EMS and Trauma Systems

- DSHS staff will be participating in various RAC meetings virtually to evaluate processes and to offer assistance and build collaboration

Joe Schmider reported on EMS Systems

- Structure of DSHS with regards to EMS – starts out with Associate Commissioner of Health > Consumer Protection Division > then to 3 different arms: EMS Compliance, Licensing, 4 EMS & Trauma System offices and how they all work together to make up the Texas Trauma Systems
- Governor’s COVID 19 waiver does remain active and in place and there is no discussion to cancel at this time
- PPE acquiring by the state has gone very well
- We continue to worry about the Mental Health of our Responders during this prolonged pandemic
- Budgets will be the next disaster across the state
- DSHS will have a 5% budget cut and we will continue to see financial pressures applied to providers throughout the state
- Virtual inspections have been ongoing - 150 since March 2020
- EMS Rules will begin review in Fall of 2021

Elizabeth Stevens Designation update

- 291 Trauma Facilities
- 173 Stroke
- 230 Neonatal
- 14 Maternal

Indra Trauma Systems Funding

- \$1M – Extraordinary Emergency Fund
- \$25,000 - ECA Training
- \$8M – Uncompensated Trauma Care
- \$4.2M - EMS Allotment
- \$2.4M – RAC Allotment
- \$2.4M – RAC System Development

Injury Prevention topic – they gave a proposal for safe storage of firearms. This led to a lengthy discussion. It was decided by the council not to establish a Task Force at this time and table it until next meeting on November 4th

	<p>American College of Surgeons Trauma System Consultation Survey – we did this several years ago – unsure of funding at this time and did not move forward with this</p> <p>Strategic Plan reviewed and revised. No major changes</p> <p>Public Comments: 3 public comments – 1 Gun Ownership Group and 2 Physicians – all three supported the council NOT approving or taking a position on the Injury Prevention proposal regarding safe storage of firearms.</p> <p>Louisiana is now the 21st state to the compact – still needs to be signed by the Governor</p>	
<p>3. Update on the Critical Care Transport Capability Matrix</p>		
	<p>Any progress from RACs? RAC A – any progress in the RAC. Taken to General Membership and working on language. Standing agenda item. Involved with COVID at this time. RAC G – on the back burner, but not forgotten. RAC E – Final Version ready to push out to EMResource and with IT. Will we have the ability to monitor the Matrix and access? Answer: Can monitor how often they are updated but not how often they are viewed. The only way we could get an idea if this was used would be for each dispatch to ask the caller. This would not be a feasible ask of the dispatchers.</p>	
<p>4. Progress report from the AM&SCTC Safety Task Force</p>		
	<p>Task Force – no meeting since February due to COVID. Presentation from San Antonio is postponed until an in person meeting. Brandon Leasure – surges of COVID and expectation of further surges have a need to fly patients out of his area and outside assets brought in from other companies. It would be good to go ahead and meet virtually. We will see an increase of activity in a small timeframe. The COVID response from air medical providers will increase and it will be good timing to discuss safety.</p> <p>Task Force to continue work between meetings: Michael Farris – CareFlite; Mike Mock – Memorial Hermann; Don Wade-PHI, Scotti Edgar-Children’s, Chad Solomon – Flight for Life, Pete Wolf – Air Evac Lifeteam, Randy Wideman - MedTrans</p>	<p>Brandon to bring a group together and discuss needs.</p>
<p>5. Discuss COVID-19 Related Response & Transport Issues</p>		
	<p>Items discussed in prior meeting: PPE availability Decontamination of an aircraft Prone Positioning Parents accompanying children on transports</p> <p>Michael Mock - Found a manufacturer in Houston that makes NVG Curtains for a much more reasonable price. Aircraft Interior Services of Texas</p>	

	<p>Patient transports – spouse or family would like to ride along with them. The fixed wing allows a rider, but the receiving facility may not allow family or visitors in the facilities. Be mindful of the receiving facility’s visiting policy.</p> <p>Family members being transported with patient refused to wear a mask and said that was their right. Governor’s rule is that they are to wear a mask.</p>	
<p>6. Progress report from AM&SCTC members assigned to the “Buckle It Up” Campaign</p>		
	<p>Met in late January – campaign planned to work along with in-person gatherings such as EMS Conference. Decision is to wait for an in person event. Task Force to continue work between meetings: Brandon Leasure, Lead; Justin Boyd; Jim Speier; Dudley Wait; Lucille Maes; Mike Farris; Joe Schmider available and offered his support</p>	
<p>7. Discussion on how to maximize High Risk OB and Pediatric/ Neonatal resources during a disaster response</p>		
	<p>Cherish Brodbeck - Can we co-bed neonatal patients during a disaster response? Neonatal – Pediatric Committee said YES it is appropriate, if infants were unrelated there is no evidence of infectious disease, able to monitor both of them, and be able to safely secure both infants. Suggested we reach out to TETAF and Peri-Natal advisory committee. Twins/ Siblings – YES CAMTS addresses – can co-bed in a disaster, each patient must be monitored appropriately. Each Isolette is different and we need to check with manufacturers to make sure the isolette can be used in this manner.</p> <p>Position Statement: “It is the position of the GETAC Air Medical and Specialty Care Transport Committee to support the transport of multiple neonates in a single isolette by specialty care transport teams, in the event of a disaster declaration, providing that no evidence of any infectious disease process is present, appropriate monitoring of all infants will be continued simultaneously, infants can be secured sufficiently, and all safety mechanisms remains. Adequate access to the patients must be maintained throughout transport. The guidance and limitations of the utilized isolette will be respected, per the manufacturer’s guidelines.”</p> <p>Suggestions: Remove ‘Air Medical and Specialty Care Transport Committee’ and change to ‘GETAC Council’ Last sentence – manufacturer’s guidelines may not address double loading the isolette Comment – keep it general so that it can be used and be beneficial to the state. It is needed.</p> <p>Any public comment regarding this statement: No comments Motion to Approve with suggested revision: Stacy Second: Trey</p>	<p>Request to be placed on the agenda to co-bed neonates</p>

	Any other High Risk OB and Pediatric/ Neonatal issues?	
8. Update from DSHS		
	<ul style="list-style-type: none"> • COVID is going up across the state - El Paso and Panhandle increasing cases • Need to keep everyone engaged, wear PPE, take care of mental health, get your flu shot • Moving people 5-6 hrs to get them to the destination hospitals • State vaccination plan – EMS is in the plan – there will be a vaccination for everyone! • If you are interested in giving the vaccine to your community – go sign up. enrolltexasizdshstexas.gov Need to sign up ahead of time or you won't get it. Still determining how you will get paid, if you get paid, for giving vaccinations. • EMS Conference is up and running, all virtual this year. It will happen at the regular time frame. Once signed up you will get access to all programs until the end of April. • EMS Rules are still being developed in house. • Trauma Rules following EMS • Look at the Air Rules, if there are any changes we would like to have we need to bring them to the rules process change in the fall of next year. It takes 6-9 months. • Bills can be introduced starting on November 9th and Session will begin in January <p>Jorie Klein – visitors – family ride alongs may be turned away at the hospitals. Call the hospitals, the CNO makes that decision for each facility. The families are no longer allowed to wait in the lobbies. They will be turned away. She thanked everyone for their service.</p>	
9. Standardizing Response Time Language for Air Medical Scene Responses		
	<p>ETE vs. ETA (clock time) Accepted and approved by the Council - Placed on the Council Agenda for the November meeting. The following questions being clarified at that time: What do we do with it now? Where does it live? Will it move forward and be made into a 157 rule? Don't have these answers. Possibly place this in the GETAC Department rules</p>	Forward to EMS Medical Directors, GETAC Council, and GETAC Chairs
10. Update on a Statement of Purpose for the Air Medical and Specialty Care Transport Committee		
	<p>Accepted and approved by the Council on August 21st Will be placed on the GETAC Council Agenda for November meeting Initially thought these would go into Strategic Plan, but it doesn't fit in that manner. We will use them and will work on where to place position statements.</p>	
11. Review of National Legislation & Its Potential Impact on Air Medical & Specialty Care Transport in Texas.		
Chris Hall	Congress is in recess right now. Most recent activity last night, the Senate did confirm Justice Amy Barrett to the Supreme	

	<p>Court.</p> <p>COVID relief bill – not interested in bringing up COVID relief bill in the Senate, especially with the amount of money being discussed. There will not be a decision until after the election.</p> <p>Congress may have to come up with funding for Government and COVID relief during the lame duck period.</p> <p>1 week away from the election – polling. They say that Biden has the lead and they have made up for the over reporting that took place during the last election. There may be under reporting for Trump supporters because they don't want to be harassed or don't answer the phone.</p> <p>Senate is up for grabs. The 2 Georgia could go to run offs after the election in January. If there is a Democratic sweep of the election, during the lame duck period they may hold off doing any big issues until 2021. If Republicans remain, they may go ahead and move forward.</p> <p>Continuing resolution that they passed to fund the Government will expire December 11th. Need to pass spending for the Defense Department. This could be a vehicle for what others want passed.</p> <p>Bills being moved through the process during the lame duck period could include surprise medical billing – 6 different legislative bills (3 Senate and 3 House). In February 2020 the House Education and Labor hearings, Democrats lecturing Republicans about fiscal restraint and the heavy hand of government and Republicans lecturing Democrats about the need for the government to step in and do something about Surprise Medical Billing. No consensus – still controversial.</p> <p>Most of the conversations about Surprise Medical Billing are focused on Air Medical Billing. Growing attention directed to Ground Ambulances and it will be next.</p> <p>Department of Health and Human Services – Phase 3 relief fund - \$20B. Application process is open right now. If in Phase 1 and/or Phase 2 you did not receive funds near 2% of overall revenues, Phase 3 will be used to pay up to 2% revenue mark. After that is done for the providers that have applied, the remaining amount of \$\$ will calculate a third allocation for providers. hhs.gov</p>	
12.	Discussion, review, and recommendations for initiatives that instill a culture of safety for responders, caregivers, and the public with a focus on operation and safe driving.	
	We have already discussed this earlier in this meeting.	
13.	Review the GETAC Strategic Plan for the Texas Emergency Healthcare System and determine if any additions, deletions, or corrections are in order.	

14. Initiatives, programs, and potential research that might improve air medical and specialty care transport service provision in Texas.		
General Public Comment		
	Debbie Boudreaux – sign up for AMTC next week!!	
Summary of action items for GETAC meeting report		
	Position Statement and Purpose Statement – further action dependent on Council. Request to be placed on the agenda to co-bed neonates.	
Announcements		
	Committee Elections – Nov 4 th – 13 applicants for our committee and 5 expiring in 2020. Joe thanked leadership and stated that it has made a difference. AMTC is next week – please sign up!!	
Review and list agenda items for next meeting		
	Adding review of the 157 rules. Go through those and bring comments.	
Next meeting TBD – (February)		
Motion to Adjourn – Justin Boyd Second – Jim Speier Meeting Adjourned		