

EMSC Advisory Committee Minutes, Tuesday, 11/30/2021, 2:30 pm – 4:00 pm CST, conducted virtually via Zoom platform

Core Members Present: Sam Vance, Sally Snow, Roy Hunter, Joe Schmider, Mark Sparkman, Kate Remick

Others Present: Mattie Mendoza, Annabel Cramer, Christi Thornhill, Carmin Gideon, Charles Jacquith, Robert Reeves, Ron MICak,

Desired Outcomes:

- Review the 2022 EMS Assessment
- Review the Val Verde Regional Medical Center VPRP Final Report and make recommendation
- Review and revise the EAC By-Laws
- Review and discuss the goals for 2022
- Determine meeting date/month for virtual workshop

November 30, 2021 2:30 PM – 4:00 PM			
What	How	Who	Time
Introductions	Welcome and Roll Call	All Dr. Kathryn Kothari	5 minutes 2:30 – 2:35
2022 EMS Assessment	Review the timeline and contact plan for the 2022 EMS Survey	Sam Vance	15 minutes 2:35 – 2:50
Val Verde Regional Medical Center Final Report	Review the VPRP Final Report and make a recommendation regarding their recognition	All	20 minutes 2:50 – 3:10
EAC By-Laws	Review and revise the EAC by-laws as necessary	ALL	30 minutes 3:10 – 3:40
2022 Goals	Review and discuss the goals for 2022	Sam Vance/All	15 minutes 3:40 – 3:55
Meeting Wrap UP	Review of meeting and questions from the group	Sam Vance/All	5 minutes 3:55 – 4:00

Highlighted areas are ACTION ITEMS.

Introductions

- Texas EMSC Program Manager, Sam Vance provided a welcome and conducted a roll call of the eight core members. He also provided housekeeping instructions for online meetings, as well as a review of the meeting agenda.

2022 EMS Assessment

- The 2022 EMSC EMS Survey begins January 5, 2022, and will close March 3, 2022
- Will again be assessing EMSC Performance Measures 02 – presence of a PECC and 03 – having a process in place to evaluate the competency of EMS personnel clinical skills with pediatric specific equipment.
- The survey will be conducted online and should not take more than 5 – 10 minutes to complete.
- Due to staffing shortages at the National EMSC Data Analysis Resource Center (NEDARC), they will not be helping with sending survey invitations, reminders, or phone calls. The State Partnership Program Managers will be responsible for these items.

- We will be surveying 557 ground EMS agencies that respond to 911 calls only.
 - This list has been cleaned using information found on the DSHS website.
 - Email addresses have been confirmed through NEDARC.
 - Air medical services are not included in the survey.
 - FROs are not being surveyed, as the list of agencies used for the past two years has not included all first responder organizations (FROs) and has also included numerous services that do not respond to 911 calls.
 - Sam has cleaned the current list and is confident in its accuracy.
- Email notification regarding the survey has been sent to EMS agencies, with at least two more being sent through the month of December.
- Sam Vance has also spoken about the upcoming survey at the November 20 – 22 GETAC meetings to the Pediatric, Education, Injury Prevention, EMS, Medical Directors, and the Council.
- Sam Vance does not have a good email list for EMS medical directors. As such, he will send notification of the survey to medical directors via United States Postal Service mailings.
- Discussion was held regarding survey fatigue amongst EMS providers.
 - Low response rate to recent DSHS survey.
 - Numerous surveys that are being conducted at the same time.
 - Providers are tired of taking surveys and do not have the time to continuously complete surveys.
 - Sam Vance was asked to take this feedback to the HRSA EMSC Program. Dr. Remick, who is also Co-Director of the EMSC Innovation and Improvement Center (EIIC) was also made aware.
- Joe Schmider suggested providing a prize as incentive to participate in the survey. Examples of the prize could be a Broselow Bag or Pedi Mate.
 - The names of participating agencies that participate would be entered into a random drawing. One agency would be selected as the winner of the prize.
 - Sam Vance will research costs of potential prizes and whether we are allowed to do this under the grant guidance.
- The question was posed as to who else should be involved with marketing the EMS survey. Suggestions were:
 - Texas NAEMSP
 - Texas College of Emergency Physicians
 - Regional Advisory Councils (RACs)
 - Pediatric Emergency Care Coordinators (PECCs) identified in the 2021 survey and the PECC Workforce Development Collaborative (PWDC)
 - Sam Vance will contact these agencies/individuals to request their assistance.
- During the September EAC meeting Dr. Sparkmann inquired about surveying the FROs.
 - It is Dr. Sparkmann's and Sam Vance's theory that the FROs do not carry recommended pediatric equipment or have access to pediatric medical control.
 - Sam Vance has obtained permission from NEDARC to use the paper survey from 2014 to that asks questions regarding these prior performance measures.
 - Concern was raised by Roy Hunter that this would place more of a burden on the EMS agency the FRO is affiliated with.
 - Concern was also raised that most FROs are BLS and do not carry all the recommend equipment, as most are non-transporting fire departments.
 - The suggestion was made to review the list of the 623 registered FROs to determine their response level (BLS vs. ALS) and potentially develop a list of equipment specific to FROs.

- Sam Vance will work on this list and will add this to the agenda of the February EAC meeting.

Val Verde Regional Medical Center VPRP Final Report

- The Val Verde Regional Medical Center VPRP assessment was conducted August 27, 2021.
- The final report was submitted to the EAC core members via email for review October 25, 2021.
- Core members present reported they had reviewed the report.
- Sally Snow provided a summary of the final report.
- The Final Facilitator Team Recommendation: Two critical deficiencies were identified, and many important opportunities for improvement exist. Additionally, the director of the emergency department resigned within days after the assessment. As such, the Facilitator Team recommends Val Verde Regional Medical Center schedule a follow up visit for re-evaluation in 6-months. Val Verde Regional Medical Center will need to obtain and/or implement all items listed in “Opportunities for Improvement” and make significant progress to address the recommendations of this report. Every effort will be made by the EMSC program to assist Val Verde Regional Medical Center in meeting these requirements. At the end of the 6-month period, a focused assessment will be conducted to assess the facility’s progress. Val Verde Regional Medical Center will need to demonstrate significant improvements to their Quality Improvement and Performance Improvement plans.
 - Discussion was held regarding the 6-month time frame not being long enough to address the concerns raised by the facilitators.
 - The recommended time frame is 12-months to correct any deficiencies.
 - Discussion was held regarding the involvement of the EMSC program in helping facilities that are deficient to obtain or achieve the recommendations.
 - The decision was made that since the EMSC program does not have the resources or time to devote to every facility that has issues, they will provide a list of resources for the facility but will not be available to provide consultative services or direct involvement in aiding a facility to obtain or achieve recommendations made by the facilitator team. It is the recommendation of the EAC that facilities are responsible for obtaining or achieving the recommendations made by the facilitator team on their own, as they would have to do for trauma, stroke, or STEMI verification.
 - Motion was made and amended by Dr. Remick and seconded by Joe Schmider to amend the VPRP Applicant Manual to read, “If an application is denied or deficiencies are found during the assessment, reapplication cannot be submitted for 12-months following denial.”
 - No further discussion was held. Motion passed.
 - Sam Vance will amend the VPRP Applicant Manual.
 - Motion was made by Joe Schmider and seconded by Dr. Remick to deny the recognition of Val Verde Regional Medical Center and give them 12-months to correct deficiencies.
 - No further discussion was held. Motion passed.
 - Sam Vance will contact David Bank, M.D. Pediatric Medical Director, Victoria Emergency Associates (VEA), Brian Johnson, M.D., Medical Director, Emergency Services and Physician Pediatric Emergency Care Coordinator, Val Verde Regional Medical Center to advise them of the EAC’s decision.

EAC Bylaws

- The EAC bylaws have not been reviewed/revised since 2014.
- Bylaws should be reviewed every 3-5 years to ensure we are complying with any state regulations, statutes, and/or national EMSC guidelines.
 - To remove any outdated bylaws or update them.

- To educate the EAC about its roles and responsibilities.
- To guide the EAC in meeting its roles and responsibilities.
- The EAC received a copy of the bylaws with suggested revisions October 25, 2021.
- Major revisions to the bylaws include, but not limited to:
 - Clarification that an EMT OR Paramedic may fulfill the role of one of the eight core members.
 - Add a rural hospital representative to the list of potential ad hoc members.
 - Add a member of GETAC to the list of potential ad hoc members.
 - Sam Vance will ask GETAC to appoint a member at the February 2022 meeting.
 - The addition of two physicians who are either a Pediatric Emergency Medicine Fellow or an Emergency Medical Services Fellow.
 - The addition of a secretary position. This role can be fulfilled by a core member or and ad hoc member.
 - Discussion was held regarding recording the meetings and investigating if Baylor College of Medicine has transcript services available.
 - The Vice Chair position will be fulfilled by the EMSC Program Director.
- A motion was made by Sally Snow to adopt the bylaws revisions as amended and seconded by Joe Schmider.
 - No further discussion held. Motion passed.
- Sam Vance will complete the revisions to the bylaws and disseminate to the EAC and post to the EMSC website.

2022 Goals

- Sam Vance shared his goals for the EMSC State Partnership for calendar year 2022.
 - Complete revision of the EMS Recognition Program
 - Complete revision of the Voluntary Pediatric Recognition Program
 - Develop a Texas PECC Community of Practice
 - Reengage with organizational partners
 - Increase EMSC presence throughout the state
 - Review/Revise EAC bylaws
 - Achieve 80% response rate on the EMS Survey
 - Obtain Governor's proclamation for EMSC Day
 - In-person EAC meetings
 - Enlist a volunteer to help with social media posts
 - Speakers and workshops for the Texas EMS Conference
 - Discussion was held regarding the possibility of having an EMSC sponsored pediatric track at the 2022 conference.
 - Joe Schmider stated he contacted Kelly Harrell with the EMS conference to inquire about the possibility and will let us know her response.
 - Help develop pediatric committees in RACs that do not have them
 - Enlist EAC help with writing the EMSC grant submission
 - Research and develop alternative sustainable funding sources

Meeting Wrap Up

- The 2022 GETAC meeting dates are:
 - February 9 - 11
 - May 24 - 26
 - August 17 - 19
 - November 19 – 21

- Prior to COVID travel restrictions, EAC meetings were held in conjunction with the GETAC meetings, typically during the Stroke Committee time slot. As in-person GETAC meetings have resumed, discussion was held as to whether we wanted to resume with that format.
 - As GETAC meetings are now being held at the DSHS Central Campus, Joe Schmider stated there is meeting space there that is potentially available.
 - Sam Vance will contact Joe with specific dates and times so he can check availability.
 - Dr. Remick offered the use of Dell's Research Institute to host the meetings if DSHS is unavailable.

Meeting Adjourned

- 4:10 PM CST

NEXT MEETING: February 2022. Date, time, and place TBD.