

East Texas Gulf Coast Regional Trauma Advisory Council (RAC) Annual Report

An Annual Report is to be submitted to DSHS, Office of EMS/Trauma Systems no later than **October 15, 2025**. The annual report will cover the past fiscal year (September 1, 2024 thru August 31, 2025), as stipulated in the RAC Systems Development portion of your FY20 Contract. Additional information may also be entered or submitted as an attachment to this report.

RAC	East Texas Gulf Coast Regional Trauma Advisory Council	
Report Period	FROM: 09/01/2024	TO: 08/31/2025

1. On 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	EMS/Hospitals	Annual EMS and Hospital Needs Assessment were completed by each entity as part of their annual membership packet. Educational needs continue to be a high priority for our membership. Education and training were provided by employees and volunteers of member agencies to specifically address trauma/stroke/maternal/neonatal care and related issues in the region. A list of trauma related courses has been pre-approved by the Board of Directors and each course that is hosted or provided by RAC members is promoted throughout the region. Tuition Reimbursement is provided upon completion of the course. Courses included TCAR, TOPIC, Data

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		Management, Trauma Program Manager Course, ICD10, AAAM, ENA Conference, Texas Collaborative Healthy Mothers and Babies, EMS Conference to include preconference topics such as Cadaver Lab, EMS Advanced Skills Cadaver Lab, Emergency Management Conference, Advanced AOR, ABLIS, Tactical Casualty Care Course and FTEP course.
Equipment	EMS/Hospitals	A regional project was instituted to assist hospitals/EMS providers in management of hypothermic patients and patients with ongoing blood loss. To accomplish this endeavor, Qin Flow Warrior blood and fluid warmers with extra battery, Qin Flow tubing, Life Flow Plus rapid blood/fluid infuser sets were purchased and distributed. In addition, following presentation of several case studies, hypothermia in trauma patients with severe shock identified the need for additional equipment for EMS. This included purchase of oral/rectal thermometers and Sure Temp Ready Heat Blankets. Lastly, as some EMS services begin their prehospital whole blood administration, Credo equipment was purchased and will be distributed once received. Lastly, several EMS agencies opted out of their portion of the EMS County Funds and applied those funds to purchase Texas Wristbands.
Other		

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?

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- 1) *Personal phone calls by committee chairs and reminder emails are sent to the general assembly encouraging their attendance to the General Assembly meetings. In addition, information is provided on the RAC website for organizations to gain additional information with offerings through the RAC such as injury prevention, disaster management, pediatric readiness and trauma care.*
 - 2) *With the submission of the annual membership packets, the RAC administrative office updates the membership list including voting member and alternate member. The RAC office compiles the information and creates distribution lists for EMS, Trauma, Perinatal, Acute Care, Corridor Chairs and Others. These lists are utilized to send out meeting reminders, distribution of important updates from DSHS, options for training outside of the region and other necessary information.*
 - 3) *Located on the website, the RAC calendar is updated with all General Assembly and Committee meeting dates.*
- b. Summarize the need for and outcomes of specially called RAC meetings.
- 1) *The need to call for an unplanned RAC meeting consists of the need for emergent communication related to a regional issue in which Board Members were required to make an immediate decision related to an unexpected issue. During September 1, 2024, through August 31, 2025, the RAC had no specially called meetings.*
- c. Report any projected realignments of counties in trauma service area
- 1) *None*
- 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.
- 1) *The RAC provides centers seeking designation or re-designation with letters of support and of membership in good standing to every hospital in advance of and during DSHS Trauma Survey's. A RAC-R Board member attends trauma surveys. During the quarterly RAC Trauma Committee meeting, facilities with upcoming surveys are discussed along with survey results that would provide helpful information to all facilities for a successful survey. The RAC Trauma Committee pairs experienced members with newer and/or smaller facilities to provide guidance and mentorship during their journey toward designation/re-designation. An open*

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forum is available to answer questions on survey's, registry and any other issues.

The committee reviews and discusses proposed changes to the trauma rules and openly considers the impact to their program. Members are encouraged to actively participate at the state level to voice their concerns regarding proposed changes to the rules.

- 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.)**
 - 1) *The region has worked to increase the number of STB courses. The purchased numerous STB training mannequins in FY24 and set up a QR code that would enable the hospital/EMS agency to log the courses taught. While 3363 individuals were trained, we likely have not captured all courses taught. In FY26, we will continue to reinforce documentation of courses and total trained to ensure the decision to purchase mannequins was prudent.*
 - 2) *The ENA W.H.A.L.E (We Have a Little Emergency) program was presented to General Assembly during the December 2024 meeting. This Injury Prevention Project is focused on identifying children when their parents are incapacitated following an accident. Stickers are placed on the car, the car seat, and information packets with a area for pictures are placed underneath the care seat. These stickers can be requested through the Texas ENA.*
- 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?**
 - 1) *During the trauma committee meeting, discussions ensued regarding critical trauma patients arriving hypothermic. This led to a presentation on Hypothermia in trauma which included three recent case studies. Following the discussion, surveys were sent to our EMS partners to identify if they are able to obtain a temperature, what methods they have available to warm patients and lastly, if they have protocols in place addressing obtaining temperatures and documentation. These results were analyzed which then led to the purchase of thermometers with oral and rectal probes, and Ready-Heat blankets. These items will be distributed to EMS. Moving forward, our trauma centers have agreed to monitor temperatures in the field for major trauma patients and report the data during General Assembly.*

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- 2) *The Trauma Committee has been reviewing transfer data and discussing how to decrease long ED transfer times. They continue to delve into the data to identify the issues that are impacting transfer delays.*
- 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.
At this time, there has been no formal meeting. This was identified as a weakness in our Self-Assessment, and a SMART goal has been formulated to address this issue which includes recruitment of a medical director for the PI Committee.
- 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.).
 - 1) *EMS members of the RAC Board have personally reached out to non-RAC providers for education and participation. We continue to see growth in EMS and FRO participation.*
- i. Identify problems or areas of concern identified in past twelve months adversely impacting RAC operations.
 - 1) *Lack of data*
 - 2) *Lack of training on completing required forms*
 - 3) *Increase in burden of requirements, placed on the volunteer Board and RAC committees for improving trauma services in the region*
 - 4) *Challenges presented by the structure and medical care when provided by physicians in private practice and when under contract to a hospital and/or emergency department.*
 - 5) *Increase in workload of hospital and EMS personnel who participate in RAC. This makes it difficult to find additional time for committee meetings and the associated committee work.*
 - 6) *Historically, physician participation in the RAC has been a challenge. In this past year, physician participation has improved with the addition of a medical director committee meeting held via Microsoft Teams.*
 - 7) *The diversity of needs related to the geographical size of the RAC.*
4. Is the information identified on Texas Secretary of State/Comptroller of Public Accounts (<https://mycpa.cpa.state.tx.us/coa/search.do>) 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?

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5. Summarize any issues/concerns that occurred in past twelve months that required technical assistance from the Office of EMS/Trauma System Coordination Group.
The RAC received a SB8 remittance form for a large amount of money which did not coincide with our records. After performing a thorough review of the SB8 reports submitted to DSHS and comparing the report with Quick Books, we identified multiple errors in the submitted SB8 report. The report was corrected and resubmitted to DSHS. A new remittance form was provided to the RAC for repayment of SB8 funds.
6. What method will the RAC utilize to ensure member organizations receive a copy of this Annual Report?
- a. *The report will be posted on the RAC website and will be summarized during the December RAC General Assembly meeting.*



RAC Chair

10-7-25

Date Signed

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Complete and include with the Annual Report the following:

Attachment A – Officers/Board Members

Attachment B – Annual Bylaws Affidavit

Attachment C – Annual Regional Trauma System Plan Affidavit

Annual Participation Report

Attachment D – Designated Hospitals

Attachment E – Hospitals Seeking Designation

Attachment F – EMS Providers

Attachment G - First Responder Organizations

ATTACHMENT A
OFFICERS / EXECUTIVE BOARD MEMBERS

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ATTACHMENT B
ANNUAL BYLAWS AFFIDAVIT

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

RAC NAME: East Texas Gulf Coast Regional Trauma Advisory Council has completed an annual review and/or revision of the RAC's Bylaws with a documented date and ratified by member organizations on June 10, 2025.

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

Alyson Dicks-Smith
RAC Chair

10-7-25
Date Signed

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ATTACHMENT C
ANNUAL REGIONAL TRAUMA SYSTEM PLAN AFFIDAVIT

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

RAC NAME: East Texas Gulf Coast Regional Trauma 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 April 17, 2025.

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

COMPONENT	DATE
Access to the System	Under review for regional plan 10/7/25
Communication	Under review for regional plan 10/7/25
Medical Oversight	Under review for regional plan 10/7/25
Pre-hospital Triage Criteria	Under review for regional plan 10/7/25
Diversion Policies	4/17/25
Bypass Protocols	4/17/25
Regional Medical Control	Under review for regional plan 10/7/25
Facility Triage Criteria	4/17/25
Inter-hospital Transfers	4/17/25
Designation of Trauma Facilities, Planning for	4/17/25
Performance Improvement	4/17/25
Regional Trauma Treatment Protocols	Under review for regional plan 10/7/25
Regional Helicopter Activation Protocols	Under review for regional plan 10/7/25
Injury Prevention	4/17/25

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

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

[x] YES [] NO

Alyson Nick-Smidt
RAC Chair

10.7.25
Date Signed

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ATTACHMENT F
ANNUAL PARTICIPATION REPORT

EMS PROVIDERS

Acadian Ambulance Service
Allegiance / Lone Star
Alvin EMS
Angleton Area Emergency Medical Corp
Baytown Fire Department
Brazoria County ESD 3
Central EMS
City of Beaumont Fire and Rescue
Clear Lake EMS
Clute EMS
Danbury EMS
Dickinson EMS
Freeport Fire / EMS
Friendswood EMS
Galveston Area Ambulance Authority
Galveston County ESD 2
HCA Air Life
La Marque Fire Department
Lake Jackson EMS
League City EMS
Lumberton Fire
Memorial Hermann Life Flight
Mont Belvieu EMS
Pearland Fire Department
PHI Air Medical
Santa Fe Fire & Rescue
Southeast Texas Air Rescue- Beaumont
Southeast Texas Air Rescue- Jasper
Surfside Beach EMS
Sweeny Hospital District EMS
Texas City Fire Department
Windsor EMS
Winnie Stowell Volunteer EMS



RAC Chair

10.7.25

Date Signed

ATTACHMENT H

ANNUAL PARTICIPATION REPORT

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10.7.25
Date Signed