

Brazos Valley Regional Advisory Council  
(BVRAC)  
Annual Report  
September 1, 2017-August 31, 2018

*An Annual Report is to be submitted to DSHS, Office of EMS/Trauma Systems no later than **October 1, 2018**. The annual report will cover the past fiscal year (September 1, 2017 thru August 31, 2018), as stipulated in the Tobacco RAC portion of your FY18 Contract. Additional information may also be entered or submitted as an attachment to this report.*

<b>RAC</b>	Brazos Valley Regional Advisory Council
<b>Report Period</b>	FROM: September 1, 2017      TO: August 31, 2018

1. On Attachment A provide current information for RAC Officers and Executive Committee/Board as of September 1<sup>st</sup>.
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.*)

The Brazos Valley Regional Advisory Council (BVRAC) identifies and assesses regional needs through three functional methods; The Board of Directors, Committees, and the General Membership. Those needs are prioritized to meet BVRAC's goals then approved in accordance with the BVRAC by-laws. Education and training continue to be the primary goal which enables a greater use of funds and makes the greatest impact in support of the region. These dedicated funds cover agency/organizational members to attend conferences, provide specialty skills training, and attend meetings for collaboration at jurisdictional, regional, and state levels. The RAC partially and fully funds educational opportunities for members to maximize the limited available funding. Those trained personnel are then able to easily share the best practices and lessons learned with the RAC membership and staff in their facilities along with utilizing the new information to achieve better patient outcomes. Injury Prevention and Stroke programs are also considered paramount in priority in order to provide safety information to the public for reducing the frequency of accidental injuries and increase stroke awareness response times. BVRAC is unique in that all committees share identified needs in an approach to initiate joint efforts to solutions, build common goals, and obtain valued input from different subject matter expert perspectives.

*Example table:*

<b>Identified Need</b>	<b>Targeted Beneficiary (EMS/Hospital)</b>	<b>How Were These Needs Met?</b>
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Brazos Valley Regional Advisory Council  
(BVRAC)  
Annual Report  
September 1, 2017-August 31, 2018

Education/Training	EMS/Hospital	Stroke Symposium-Hosted annually, this symposium promotes stroke education throughout the continuum of care. Over 160 people attended.
Education/Training	EMS/ Hospital	GETAC Meetings-These meetings are designed to promote, develop, and maintain a comprehensive EMS/Trauma System Plan.
Equipment/Training	EMS/ISDs/Law Enforcement	Basic Hemorrhage Control Kits (“Stop the Bleed”) including tourniquets, roll gauze, trauma shears, gloves-Hospital joint partnerships teach the school districts on Bleed Control to students, faculty, and teachers. Partnership with the Criminal Justice Advisory Council and BVRAC identified a need for Law Enforcement to have the ability to control bleeding as a part of the B-Con initiative.
Education/Training	EMS	Eagles Conference-A member attended the Eagles Conference. EMS directors share information on a variety of topics and issues relevant to the EMS field.
Equipment/Training	EMS/Hospitals	Rescue Pumps-BVRAC purchased 25 Rescue Pumps to support Pre-Hospital initiative. ZOLL provided a Rescue Pod and Therapy System overview to show how to increase the survival rate.
Education/Training	EMS/Hospital	PHTLS Provider Course-Training/Skills enhancement certification and cards by NAEMT-PHTLS. The RAC sponsors continual ACLS and PALS courses for member entities staff and non-members for recertification in these skill sets.
Education/Training	EMS	Air Medical Transport Conference- Air Medical Transport Conference presents educational information about leadership, critical care techniques, updates and clinical procedures for optimal patient care.
Education/Training	EMS	Neonatal Resuscitation (NRP) Class- The Perinatal Committee provided (4) free three hour Pre-Hospital NRP classes.

Brazos Valley Regional Advisory Council  
(BVRAC)  
Annual Report  
September 1, 2017-August 31, 2018

Education/Training	EMS	Regional Sepsis Initiative- Research was conducted by Washington County EMS and Baylor Scott & White Brenham regarding Sepsis. The results were pre-hospital sepsis deduction of 11% and an increase of recognition rate by 80%.
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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 Brazos Valley Regional Council (BVRAC) is unique in its demographic and political boundaries which maintains a small number of providers and mirrors the boundaries of the Brazos Valley Council of Governments (BVCOG). This region contains six rural counties surrounding one urban county. This alignment allows for redundancy in information sharing about new healthcare organizations. New providers are approached at multiple levels for insertion into RAC through the direct contact approach with the Chair and Board, RAC staff and members, and with CATRAC as the HPP contractor. The RAC staff and Board regularly attend regional emergency preparedness, injury, prevention, HSAC, CJAC, VOAD, CERT, and other meetings to network with emergency services professionals and to encourage wider participation in the RAC. Freestanding ER's, non-designated hospitals and EMS agencies have increased in BVRAC membership over the past reporting period.

- b. Summarize the need for and outcomes of specially called RAC meetings.

No specially called RAC meetings during the period.

- c. Report any projected realignments of counties in trauma service area

No projected realignments.

- 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.

Brazos Valley Regional Advisory Council  
(BVRAC)  
Annual Report  
September 1, 2017-August 31, 2018

BVRAC will support facilities in designations or re-designations in addition to provide support as needed. This includes, but is not limited to attending trauma surveys, providing written documentation of attendance at RAC meetings, and supporting members with potential deficiencies through networking and other trauma resources. The newest assistance is providing support to hospitals seeking perinatal designations. BVRAC does not have a role within any trauma centers outside of the service area.

- 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.)***

Over the past year the Injury Prevention Committee has facilitated the distribution of Hemorrhage Control Kits and training that aligns with the “Stop the Bleed” initiative. This is a nationwide campaign that gives valuable resources and training to bystanders to help save lives before emergency personnel can get there. The hospitals and EMS providers jointly plan and teach ISDs basic bleed control methods and provide Hemorrhage Control Kits to augment first aid supplies and or keep with the AEDs. The schools in region have been given top priority but the committee has expanded to include courthouses and will soon include other government agencies as well. BVRAC recently purchased two BCON training kits will help in providing the training services to the region.

- 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?**

The SQI/Performance Improvement Committee focused on the extraction times in rural counties. A total of 23 cases in January, 12 cases in February, and 14 cases in March were captured for study. Out of the region transfers included: (12) pediatric, (1) plastics, (2) stroke, (3) orthomology, (5) burn patients, (3) aortic injuries, (5) VA insurance or inmate, (3) patient request or insurance, (1) trauma patient with mental health needs, and (3) Hands transfers. Due to holes and gaps in the data the committee was unable to do a proper analysis. Other data collected over the last year from Washington County EMS shows Sepsis recognition increase from 11% to 85%.

- 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.

Brazos Valley Regional Advisory Council  
(BVRAC)  
Annual Report  
September 1, 2017-August 31, 2018

The SQI/Performance Improvement committee is chaired by physicians who meet regularly with peers. Physicians collaborate outside of RAC meetings to identify trends and improve standards of care. Once analysis has been complete led, findings are presented to General Assembly.

- 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.).

Physical attendance is highly encouraged for each RAC member although video/conference calling and teleconferencing capabilities are available to RAC members who may be unable to physically attend a meeting. An up-to-date participation roster is included in each monthly meeting packet to keep members abreast of their attendance record. Reminders to RAC members are sent through electronic transmission twice before each meeting to encourage participation. Also, local trainings, conferences, drills, and other events are promoted or sponsored by the RAC are advertised electronically through media and by sharing information through criminal justice, homeland security, emergency management, injury prevention, etc. to encourage participation. Special events are promoted and advertised throughout the region on the RAC website. The areas which draw the most participation are the educational opportunities provided by the RAC. The RAC promotes and sponsors events throughout the year to encourage member participation and grow membership through word of mouth.

- i. Identify problems or areas of concern identified in past twelve months adversely impacting RAC operations.

Area of concern was the reduction of available funding which was remedied later in the grant cycle. BVRAC is grateful for those efforts to increase the funding to normal levels. The greatest current concern is the possibility of losing future funding even though administrative requirement costs continue to rise.

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?

The address listed for Brazos Valley Regional Advisory Council (BVRAC) needs to be updated. The registered agent for BVRAC will complete form 408 with the Texas Secretary of State through SOSDirect to change the registered address.  
[https://www.sos.state.tx.us/corp/forms\\_boc.shtml](https://www.sos.state.tx.us/corp/forms_boc.shtml)

Brazos Valley Regional Advisory Council  
(BVRAC)  
Annual Report  
September 1, 2017-August 31, 2018

5. Summarize any issues/concerns that occurred in past twelve months that required technical assistance from the Office of EMS/Trauma System Coordination Group.

None identified.

6. What method will the RAC utilize to ensure member organizations receive a copy of this Annual Report?

The annual report is made available to members either electronically or in hard copy by request. The BVRAC Board reviews the Annual Report and highlights are discussed during General Assembly meetings.



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RAC Chair

Oct 4, 2018

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Date Submitted

Brazos Valley Regional Advisory Council  
(BVRAC)  
Annual Report  
September 1, 2017-August 31, 2018

*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*

Brazos Valley Regional Advisory Council  
(BVRAC)  
Annual Report  
September 1, 2017-August 31, 2018

**ATTACHMENT A**  
**OFFICERS / EXECUTIVE BOARD MEMBERS**

Name	Office/Board Position	Term	Affiliation	Telephone	Email
Billy Rice	Chair	3 <sup>rd</sup>	CHI St. Joseph EMS	979-774-2119	<a href="mailto:billyr@st-joseph.org">billyr@st-joseph.org</a>
Amanda Lugar	Vice Chair	2 <sup>nd</sup>	CAPROCK	979-314-2323	<a href="mailto:alugarrn@hotmail.com">alugarrn@hotmail.com</a>
Sherry Jennings	Secretary	3 <sup>rd</sup>	CHI St. Joseph Regional	979-776-4917	<a href="mailto:sjennings@st-joseph.org">sjennings@st-joseph.org</a>
Amy Ponzio	Treasurer	4 <sup>th</sup>	CHI St. Joseph EMS	979-774-2119	<a href="mailto:aponzio@st-joseph.org">aponzio@st-joseph.org</a>
Brandy LaPaglia	Hospital & Acute Care	3 <sup>rd</sup>	CHI St. Joseph Regional	979-776-4904	<a href="mailto:blapaglia@st-joseph.org">blapaglia@st-joseph.org</a>
Ashley Johse	Injury Prevention	3 <sup>rd</sup>	College Station Medical Center	979-764-5162	<a href="mailto:ashley.johse@csmedcenter.com">ashley.johse@csmedcenter.com</a>
Rebecca Hickman	Stroke	1 <sup>st</sup>	CHI St. Joseph Regional	979-776-4971	<a href="mailto:rhickman@st-joseph.org">rhickman@st-joseph.org</a>
Dr. Vincent Ohaju	Physicians/Systems QI	2 <sup>nd</sup>	CHI St. Joseph Regional	979-776-4917	<a href="mailto:vincent.ohaju@st-joseph.org">vincent.ohaju@st-joseph.org</a>
Patti Parks	Education	1 <sup>st</sup>	Baylor Scott & White-Brenham	979-337-5200	<a href="mailto:patti.parks@bswhealth.org">patti.parks@bswhealth.org</a>
Kevin Deramus	Pre-Hospital	1 <sup>st</sup>	Washington County EMS	979-277-6267	<a href="mailto:kderamus@wacounty.com">kderamus@wacounty.com</a>
Cory Mathews	DEPC/BVHCC	3 <sup>rd</sup>	Bryan Fire Dept.	979-209-5989	<a href="mailto:cmathews@bryantx.gov">cmathews@bryantx.gov</a>
Bryan Ruemke	EMC At Large	2 <sup>nd</sup>	Washington County OEM	979-353-7683	<a href="mailto:bruemke@wacounty.com">bruemke@wacounty.com</a>
Dr. Gwynn Geddie	Perinatal	2 <sup>nd</sup>	CHI St. Joseph Regional	979-776-4917	<a href="mailto:ggeddie7522@aol.com">ggeddie7522@aol.com</a>



Brazos Valley Regional Advisory Council  
(BVRAC)  
Annual Report  
September 1, 2017-August 31, 2018

**ATTACHMENT B**  
**ANNUAL BYLAWS AFFIDAVIT**

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

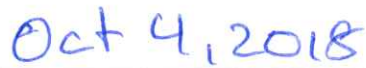
RAC NAME: Brazos Valley Regional Advisory Council has completed an annual review and/or revision of the RAC's Bylaws with a documented date of and ratified by member organizations on August 11, 2017.

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

  
\_\_\_\_\_  
RAC Chair

  
\_\_\_\_\_  
Date Submitted

Brazos Valley Regional Advisory Council  
(BVRAC)  
Annual Report  
September 1, 2017-August 31, 2018

**ATTACHMENT C**  
**ANNUAL REGIONAL TRAUMA SYSTEM PLAN AFFIDAVIT**

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

RAC NAME: Brazos Valley 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 August 11, 2017.

Each essential component of the Plan has a revision date of: August 2, 2018  
The General Assembly reviewed and approved the plan on August 2, 2018. However, due to an absence of a quorum the plan will go to action at the General Assembly meeting on Oct. 4, 2018.

COMPONENT	DATE
Access to the System	October 4, 2018
Communication	October 4, 2018
Medical Oversight	October 4, 2018
Pre-hospital Triage Criteria	October 4, 2018
Diversion Policies	October 4, 2018
Bypass Protocols	October 4, 2018
Regional Medical Control	October 4, 2018
Facility Triage Criteria	October 4, 2018
Inter-hospital Transfers	October 4, 2018
Designation of Trauma Facilities, Planning for	October 4, 2018
Performance Improvement	October 4, 2018
Regional Trauma Treatment Protocols	October 4, 2018
Regional Helicopter Activation Protocols	October 4, 2018
Injury Prevention	October 4, 2018

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



RAC Chair

Oct 4, 2018

Date Submitted



## ATTACHMENT E

### ANNUAL PARTICIPATION REPORT

[illegible]

Date Submitted

## ATTACHMENT F

### ANNUAL PARTICIPATION REPORT

[illegible]

Date Submitted

## ATTACHMENT G

### ANNUAL PARTICIPATION REPORT

[illegible]

Oct 4, 2018

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Date Submitted



Brazos Valley Regional Advisory Council  
(BVRAC)  
Annual Report  
September 1, 2017-August 31, 2018

**ATTACHMENT H**  
**ANNUAL PARTICIPATION REPORT**

Stakeholders that would include at a minimum participation on regional/local committees for the development/maturation of the regional systems.

Baylor Scott & White College Station
Baylor Scott & white Brenham
College Station medical Center
CAPROCK
CHI St. Joseph Regional Bryan
CHI St. Joseph Burleson
CHI St. Joseph Grimes
CHI St. Joseph Madison
Encompass Health
The Physicians Centre
Bryan Fire Department
College Station Fire Department
Hilltop Lakes VFD
Jewett EMS
PHI
Robertson County EMS
CHI St. Joseph EMS
Texas A&M University EMS
Allegiance Mobile Health
City Ambulance
Midwest Medical EMS
Washington County EMS
Washington County First Responders
Washington County Office of Emergency Management
Blinn College EMS



RAC Chair

Oct 4, 2018

Date Submitted