

SETTRAC
Special Meeting of the Board
2:00p.m. December 1, 2008

=== MINUTES ===

I. CALL TO ORDER

Allen Johnson called the meeting to order and explained the reason for the meeting.

II. ROLL CALL

Reneé Griffith called roll and established quorum.

III. UTMB

Allen Johnson introduced Dr. Holcombe (Memorial Hermann) and updated the board on UTMB. John Sealy Hospital lost the blood bank, kitchen, steam, a/c, and phones. The Burns Unit is scheduled to open on Dec 9th. We are not sure when the Shriner's Burn Center will open – since another company owns the building.

Dr. Holcombe explained the trauma diversion numbers since IKE. Jeff Webster, Robin Garza, Dr. Mattox, and Dr. Scott reported on the affect upon Ben Taub General Hospital. Sterling Taylor reported the numbers from the HCA facilities. Dr. Persse and Adrian Trevino reported on the numbers for the Houston Fire Department. Discussion followed.

Wayne Morris stated that RAC-R would like to work with Rac-Q in any disaster situation.

The following are a list of recommendations:

HFD take patients to the appropriate facility. Example: Take a patient to SE even if they ask to go to MH. The staff must be able to talk to patients about the reason why they were taken to a particular facility. This information must be clearly communicated downward to the staff.

The Level I's should be emptied out after the major injuries taken care of – let the other hospitals take care of the minor injuries

Discussion followed.

A motion was made to remove the term “High Level of Suspicion” from the by-pass guidelines for pre-hospital providers (Dr. Persse will work with SETTRAC to remove the term from the appropriate areas). This will allow a seasoned paramedic, who has a gut feeling that something is wrong, to take the patient to Level I instead of forced to take to Level III. This motion was seconded.

Discussion followed. We need to post this change on the web-site and list servers to let people know about the change. A long term goal will be to re-write the protocol instead of piecemeal changes.

Amend the motion that this is action now and committees will work on re-write later. The amendment was seconded. The motion with the amendment passed unanimously.

Find funds for hospitals to deal with patients (Medicaid funds or trauma funds). Draft it to un-compensated / under compensated care – start with Trauma and look for another funding source for non-trauma patients.

We need better utilization of the Level III facilities.

We used to have three Level I facilities, now we have two, and we should have four Level I. Need funding for a facility to become a Level II.

Discussion followed.

A motion was made that this RAC will support at least two additional Level II or Level I Trauma Facilities. This motion was seconded. Discussion followed. We need to drive the analysis with the data – how many do we need and where should they be located. The motion passed unanimously.

We need to balance the load between Ben Taub and Hermann. Dr. Scott suggested an increase of trauma patient volume brought into Ben Taub by the Houston Fire Department from 60% to 80%.

Discussion followed about how to educate the community and where the Level IV facilities fit in.

A motion was made to work with Ike recovery task force/state to support funding and better utilization of Level III facilities (uncompensated funding and better utilization of Level III / IV facilities – education). The motion was seconded.

Discussion followed. Hospital conference call – plan and also target Level III facilities and other hospitals. Provide resource information – not lobbying. Question about Helipad. Discussion followed.

The motion passed unanimously.

IV. CONTRACTS

David Rives announced that contracts have been signed.

VI. ANNOUNCEMENTS

Allen Johnson announced that the next quarterly meeting is scheduled for January 26, 2009 at Memorial Hermann TMC