

EXECUTIVE DIRECTOR'S REPORT

JULY 16, 2007

Houston-Galveston Area Council (H-GAC) Emergency/Trauma Care Council

There has not been a meeting since our last meeting. The next regular meeting of the council is Friday, July 27th at 1:00 p.m. in Conference Room A on the second floor of the H-GAC building at 3555 Timmons Lane.

Texas EMS, Trauma and Acute Care Foundation (TETAF)

The foundation met in Austin on May 22nd and all divisions reported significant activity. The most significant is that of the Trauma committee. As you may know the state is getting out of the business of doing surveys for Level III and IV trauma facilities. The Trauma committee has developed a tool and a process and is going to be pilot testing, hoping to have it ready to go by September 1st.

HRSA Grant

We did submit a bid for the HRSA grant for the next 5 years. On June 4th we were announced as a tentative awardee and then began a period of negotiations. I had 3 calls with the Department of State Health Services, the 1st two to ask for modifications and additions and the 3rd to advise that we had made the necessary modifications and additions. This past Friday we were named as the awardee of the contract for this trauma service area (TSA). The amount of the contract for the next year has not been announced but the total for distribution to the TSA's is down approximately 9%. However, there was a statewide reduction last year and this TSA received a 10% increase. The next step is to submit letters of collaboration to the state. We requested those approximately weeks ago and, as of this morning, we have received letters from 45 of the 93 facilities that are presently participating. Also, the name of the program will change with the next year and will be called ASPR, for the Office of the Assistant Secretary of Preparedness and Response.

Diversion Letters

At the last meeting I was directed to send letters to all of the acute care hospitals requesting their preference about releasing diversion data. I sent certified letters to 48 hospitals and received 22 "Yes" and 8 "No" responses. The letter stated that if a response was not received it would be considered as a "Yes". One thing that I was not clear on, and did not explain, in the letter, was whether this information was to be released to everyone or only to the Medical Audit Committee since that committee made the request. I would like guidance on that issue.

I have heard that some hospital administrators, upon receipt of the letter, advised their personnel to not put their facility on "Divert" on EMSsystem even though it might be justified. I received that information from some EMS personnel that have gone to facilities that were listed as "Open" only to be told the ED was full. Some of the ED personnel confided to the EMS crews that they had been instructed to not show "Divert" on EMSsystem as much.