

BorderRAC Annual Report

An annual report is to be submitted to DSHS, Office of EMS/Trauma Systems no later than October 15, 2024. The annual report will cover the past fiscal year (September 1, 2023 thru August 31, 2024), as stipulated in the RAC System Development portion of your FY20 Contract. Additional information may also be entered or submitted as an attachment to this report.

RAC	BorderRAC TSA I
Report Period	FROM: September 1, 2023 TO: August 31, 2024

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.*)

Members identify needs through committee discussions. Some topics may represent a change of thought on a national or state level, but regional members may not see it as a need in this region. If there is a determination that a need exists, discussion ensues as to why does the need exist, what steps are needed to positively impact the issue, what, if any resources are need to accomplish this, and if so, how can we go about obtaining those resources? Items may originate in a single committee, be the result of a referral from one committee to another, or may be an issue collectively addressed by multiple committees. This may result in a change in the regional guideline.

BorderRAC is an approved provider for continuing professional education activities for physicians, nurses, EMS, licensed professional counselors, social workers, dieticians and community health educators. This allows us to provide interprofessional education further integrating all members of the health care team.

Identified Need	Targeted Beneficiary (EMS/Hospital)	How Were These Needs Met?
Education/Training Member desire to initiate discussions regarding a prehospital whole blood program.	Patients, EMS, Hospitals	A group of 21 physicians, trauma coordinators, EMS (ground and air), laboratory staff and BorderRAC traveled to San Antonio for a Whole Blood Summit.

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<p>Educational events were planned at the request of individual committees or at the direction of the Education Committee.</p> <p>There is always a need to provide education opportunities for rural areas but who struggle with the ability to attend.</p> <p>Providing virtual education opportunities has assisted not only TSA I but surrounding RACs.</p>	MD, RN, EMS	<ul style="list-style-type: none"> • Emergency Preparedness for Radiation
	MD, RN	<ul style="list-style-type: none"> • Treating and Curing Gastroparesis
	MD, RN, EMS	<ul style="list-style-type: none"> • Active Attack: Training and Lessons Learned
	MD, RN, EMS	<ul style="list-style-type: none"> • Cyber Threats and Best Practices
	MD, RN, EMS	<ul style="list-style-type: none"> • Little ADHS: Big Problems. Why ADHS Matters from Pre-school to Adulthood
	MD, RN, EMS	<ul style="list-style-type: none"> • Rio Grande Trauma Conference
	MD	<ul style="list-style-type: none"> • Border Health Caucus – Cyber Threats
	MD, RN, EMS	<ul style="list-style-type: none"> • Putting Out the Fire: Unlocking a New Set of Tools to Mitigate and Prevent Burnout
	MD, RN, EMS	<ul style="list-style-type: none"> • Reversal of Anticoagulation
	MD, RN, EMS	<ul style="list-style-type: none"> • Colorectal Cancer: Epidemiology, Risk Factors and Prevention in 2024
	MD, RN, EMS	<ul style="list-style-type: none"> • Water and Public Health
	MD, RN, EMS	<ul style="list-style-type: none"> • Autism Boot Camp for Physicians
	MD, RN	<ul style="list-style-type: none"> • Texas Perinatal Association Conference
	MD, RN, EMS	<ul style="list-style-type: none"> • Managing Medical Records
	MD, RN, EMS	<ul style="list-style-type: none"> • Food is Medicine
	MD, RN, EMS	<ul style="list-style-type: none"> • Human Trafficking
	MD, RN, EMS	<ul style="list-style-type: none"> • Pediatric Strokes
	MD, RN, EMS	<ul style="list-style-type: none"> • Pediatric Trauma
	MD, RN, EMS	<ul style="list-style-type: none"> • The Latest in Atrial Fibrillation Diagnosis, Treatment and Guidelines
	Hospital EMS, RN, EMS	<ul style="list-style-type: none"> • Hospital Emergency Response Team
	MD, RN, EMS	<ul style="list-style-type: none"> • Congenital Syphilis

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	MD, RN	<ul style="list-style-type: none"> Border Health Caucus - Opioids
<p>Equipment</p> <p>Replacement repeater for EMS communication to hospitals.</p> <p>BorderRAC radios to communicate with hospital incident command was at end of life and needed replacement.</p>	<p>EMS, Hospitals</p> <p>Hospitals/RMOC</p>	<p>The City of El Paso opted not to replace a failing repeater on the mountain. BorderRAC purchased a replacement repeater to allow private services to communicate with hospitals.</p> <p>A replacement APX radio was purchased for communication to Hospital Command Centers.</p>
Supplies	Region-wide	EMS Wristbands continue to be available to EMS services through the BorderRAC.
Public Education	Region-wide	BorderRAC and our members have conducted numerous Stop the Bleed, Hands-only CPR and Narcan administration courses and have provided community education on senior falls (including conducting functional assessments of 144 individuals), heart attacks and stroke. In addition, we completed bicycle safety surveys and fit and provided helmets. Gun safety information was provided in conjunction with a law enforcement safety event.

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?

BorderRAC continues to seek ways to increase diversity within the organization on many layers. At the Board level, we continue to have clinical representation from all areas of the BorderRAC mission. In addition, community-at-large members represent the community

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perspective of view in BorderRAC activities. The Board tries to identify community members who bring additional skill sets to the organization.

New workgroups and Task Forces address specific needs, such as the Prehospital Whole Blood Initiative workgroup, sepsis workgroup and the ED Operations Task Force. The number of agencies that participate in various committees has increased.

New partners are often obtained through our Educational outreach. BorderRAC is very proud to be an approved provider for professional continuing education for CME (Accreditation with Commendation), CNE, and EMS. The Professional Education Committee is committed to inter-professional education, and as such, has members from these disciplines on the committee. Joint sponsorship opportunities has increased our community contacts, especially with the El Paso County Medical Society.

The Physician Advisory Group (PAG) continues to meet to provide peer review for selected cases. Routine scheduling has aided in participation. Case reviews have expanded outside trauma cases.

The Executive Director is a member of the Southwest Organization of Nurse Executives.

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

There have been no specially called RAC meetings.

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

There have been no specially called RAC meetings.

- 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.

The RAC provides information/assistance as requested by individual facilities preparing for survey. The Executive Director generally participates in the trauma center, chest pain, stroke, NICU and maternal survey opening conferences. Committee meetings provide opportunities to review/discuss lessons learned through designation processes.

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- 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.)*

BorderRAC is committed to identifying opportunities to educate on prevention of injury or illness. Whether the topic is determined by data from the regional registry or other sources, as an example, by the Child Fatality Review Team; the needs are reviewed and a plan devised. The Prevention Committee oversees the community activities of the individual committees. The BOD reviews these to assure funding is adequate to achieve the desired result. This does not mean we can do everything we want, or certainly not to the extent we want, but prevention remains a fundamental goal.

The BorderRAC website and social media have monthly focus.

- Sept 2023: Preparedness, Senior Falls, Safe Sleeping, Shaken Baby
- Oct 2023: Cybersecurity, Pregnancy Loss, Halloween Safety
- Nov 2023: National Injury Prevention Day, Diabetes and Hypertension Awareness, Thanksgiving Safety
- Dec 2023: Holiday Safety (Holiday Decorations and Fire Safety, Christmas Trees and Holiday Gifts Safety, Holiday Parties), Suicide Prevention, Holiday Stress
- Jan 2024: Winter Safety (Sports, Special Populations) and Human Trafficking
- Feb 2024: Heart Knowledge (Facts vs Myths, Signs and Symptoms, What do Do), Hands-Only CPR
- Mar 2024: Spring Sport Injuries, Poisonings
- Apr 2024: Child Abuse Prevention; Sexual Assault Awareness, Distracted Driving Awareness
- May 2024: Heat Safety, Kids in Hot Cars, Stop the Bleed, Stroke Awareness
- June 2024: Water Safety, Firearm Safety Rules, Gun Safety and Facts, Rattlesnake Safety
- July 2024: Fireworks Safety, Lawn Mowing Injuries, Trampoline and ATV Safety, Lightning Safety
- Aug 2024 Pedestrian Safety, Bicycle Safety, Driver Safety

In-person activities in which BorderRAC participated:

- Regional Health Fairs – participated in a number of community health fairs to provide information on injury prevention, cardiac and stroke awareness and bicycle safety.

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- Safety Safari at the Zoo – gun safety, CPR, heat safety
- Aging to Perfection – senior fair: senior falls, stroke, cardiac
- Fire Fest – community fair: bicycle helmets, Halloween safety, CPR
- Stop the Bleed – conducted 25 Stop the Bleed classes, generally paired with Hands-Only CPR and Narcan administration, to the local community including open community classes, schools, universities, religious locations, businesses, and law enforcement.
- Shattered Dreams – coordinated a Shattered Dreams program at two local high schools.
- Baby Safety – we have reinstituted the prenatal education on safe sleeping and abusive head trauma.

We continue to review activities using the following questions:

- How was the need identified? Generally identified by committees, but is this based on a sentinel event, case reviews, literature, etc.
 - Is a professional education component involved? If we don't know what we're talking about, we will not be able to determine program goals.
 - What activity will be performed to meet the goal? Is there a community education component? Do we need to create public information documents? As an example, we created patient knowledge tests (bicycle safety, cardiac, stroke, falls, gun safety) administered by member volunteers. Incorrect answers serve as a teaching moment to correct lack of knowledge or misunderstandings.
 - How will we monitor achievement? Collated results of the knowledge tests are shared with the respective committees to aid in the development of community education strategies.
- 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 System Performance Improvement Committee meets seven times per year and the Physician Advisory Group (PAG) meets in its timeslot four times per year. The PAG provides peer review for cases referred to BorderRAC.

Sending a group of 21 physicians, trauma coordinators, EMS leaders and hospital blood bank personnel (the local blood services declined) for a Whole Blood Academy led to the creation of the Prehospital Whole Blood Initiative workgroup. They have devised a survey of hospitals to identify

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availability, use and wastage as well as potential use for other patients in the trauma registry. We are pending those results.

Other developments through the System Performance Improvement Committee include approval of a Regional Replant Guideline, Regional Best Practice Guideline for Pelvic Fractures, Emergency Department Postpartum Preeclampsia Checklist, approval of the regional Stroke component of the Emergency Healthcare Plan, and approval of changes to the regional SANE guidelines.

- 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.

Physicians participate in the System Performance Improvement Committee. It is with the guidance of this committee that guidelines are approved, sent back to committees with recommendations, etc.

Individual case reviews are completed at the quarterly Physician Advisory Group with presentation of cases by the involved EMS and hospital representatives. An issue we continue to struggle with is the limitations of pediatric surgeons. This was identified in the review of double (or triple) transfers of NICU babies. We continue to seek a regional solution to the multiple transfer of these infants.

- 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.).

The BorderRAC meetings have video-conferencing capability making it available to all members. We have increased the participation of FROs and new EMS agencies.

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

As a small organization, balancing the needs and increasing desires of members and committees is challenging. Every committee needs data, which must come from members. If members do not meet reporting deadlines, we must scramble to have reports ready for committees and that does not always allow us to create the quality presentation we desire. Timeliness of member data submissions is now being included on participation letters.

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We are anxious to investigate new data analytic solutions to assist us in managing the increasing data demands.

Time is always a challenge. Our committees are anxious to collectively participate in community education activities which generally rely on the RAC for organization. The sheer manual labor in producing the materials, packing tables, chairs, canopies, devices, etc. and transporting them to the site, and then deconstructing everything into a system for deployment is challenging.

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 information is correct.

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

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

Available by request in the RAC office.

Julia Perez
RAC Chair

10/14/2024
Date Submitted

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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

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Attachment A
Officers/Board Members
Available on Website September 1, 2023 – August 31, 2024

Name	Office/Board Position	Term	Affiliation	Telephone	Email

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ANNUAL BYLAWS AFFIDAVIT

Attachment B

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

RAC NAME: The Far West Texas & Southern New Mexico Trauma Regional Advisory Council dba BorderRAC has completed an annual review and/or revision of the RAC's Bylaws with a documented date of and ratified by member organizations. The last date of changes was 10/2015.

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 **None made**

Julia Perez
Chair

10/14/2024
Date

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ANNUAL REGIONAL TRAUMA SYSTEM PLAN AFFIDAVIT Attachment C

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

RAC NAME: BorderRAC 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. Last review dates are listed. **The entire system plan in under revision.**

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

COMPONENT	DATE
Access to the System	10/8/2023
Communication	10/8/2023
Medical Oversight	10/8/2023
Pre-hospital Triage Criteria	5/15/2023
Diversion Policies	10/8/2023
Bypass Protocols	10/8/2023
Regional Medical Control	5/15/2023
Facility Triage Criteria	3/15/2018
Inter-hospital Transfers	8/31/2016
Designation of Trauma Facilities, Planning for	1/10/2024
Performance Improvement	6/7/2024
Regional Trauma Treatment Protocols	2/1/2024
Regional Helicopter Activation Protocols	8/31/2016
Injury Prevention	1/19/2024
Stroke Plan	4/10/2024
Cardiac Plan	Under review

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

Julia Perez

RAC Chair

10/14/2024

Date Submitted

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ATTACHMENT E
ANNUAL PARTICIPATION REPORT

HOSPITALS SEEKING DESIGNATION

[illegible]

Julía Perez

RAC Chair

10/14/2024

Date Submitted

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ATTACHMENT F ANNUAL PARTICIPATION REPORT

EMS PROVIDERS

Culberson County Hospital EMS
Northern Hudspeth County EMS
Dell Valley EMS
Fort Hancock EMS
Life Ambulance
El Paso Fire Department
Elite Medical Transport
Dominion Ambulance
Desert Haven EMS
Revive EMS – closed as of September 2024

Julia Perez

RAC Chair

10/14/2024

Date Submitted

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ATTACHMENT G ANNUAL PARTICIPATION REPORT

RECOGNIZED FIRST RESPONDER ORGANIZATIONS

El Paso ESD 1
• Horizon Fire Department
El Paso ESD 2
• Clint Fire Department
• Fabens Fire and Rescue
• Montana Vista Fire and Rescue
• San Elizario Fire and Rescue
• Socorro Fire and Rescue
• West Valley Fire Department
Texas Rescue Patrol
ProAction
Revive Medical – closed as of September 2024

Julia Perez

RAC Chair

10/14/2024

Date Submitted

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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. **This is not an exhaustive list**

American Medical Response – Las Cruces
El Paso Specialty Hospital
Emergence Health Network
El Paso Psychiatric Center
Texas Tech University Health Center
Air Methods
Revive Home Care
El Paso Children’s Hospital
La Mariposa Hospice
Bienvivir
El Paso Department of Public Health
Grainger
Advanced Care Rehabilitation Hospital – Las Cruces
Quantum Home Health
Franklin Heights Nursing Home
Envision Healthcare
Project Vida
CIMA Hospice
El Paso VA
Horizon City Fire Department
Kindred LTAC
Vitalant Blood Services
Ysleta del Sur Pueblo Fire Department (tribal)
Fresenius Dialysis
Good Samaritan White Acres Senior Living
Grandview Home Health

Julia Perez

RAC Chair

10/14/2024

Date Submitted