

**General Membership Committee Meeting**  
Wednesday, July 9, 2025, 2025 @ 1000 hours  
Via Zoom

<https://borderrac-org.zoom.us/j/88945677057?pwd=A3LEoVG6iq7qMZFGKbbhK9QBXPbSx0.1>

Meeting ID: 889 4567 7057

Passcode: 261213

**THOSE IN ATTENDANCE**

Ana Acosta – UMC of El Paso  
Kardha Alvarado – Las Palmas Medical Center  
Virginia Armendariz – UMC of El Paso  
Rosalia Arzate – Fort Hancock EMS  
Marylou Astorga - Bienivivir  
Tony Baird - Dominion Ambulance  
Vanessa Banderas – BorderRAC  
Debra Barba-Ornelas – UMC of El Paso  
Trahana Benbow – Del Sol Medical Center  
Donald Berger – UMC/EPCH  
Erica Bergeron - UMC of El Paso  
Carlos Bravo – Kindred Hospital  
Darcie Camacho – Las Palmas Medical Center  
Lydia Camacho – UMC of El Paso  
Sadhana Chheda – TTUHSC – El Paso  
Jayson Connally - Culberson Hospital  
Roxann Contreras – UMC of El Paso  
Erin Delagarza - WBAMC  
Michelle Diaz - THOP Memorial Campus  
Monica Diaz - WBAMC  
Martin Dominguez – Ysleta del Sur Pueblo Tribal FD  
Carla Escobar – UMC of El Paso  
Yvette Felix – THOP: East Campus  
Chassi Fernandez – THOP:-East Campus  
Cristina Fore – THOP: East Campus  
Xochitl Gamboa - UMC of El Paso  
Jesus Gamez - DSMC  
Rafael Garcia – BorderRAC  
Amanda Gary – Culberson Hospital  
Patricia Gelinas – THOP: Memorial  
Camille Gerdes – El Paso Children’s Hospital  
Cristal Gonzales - NHC EMS  
Roy Gonzales - HCA Healthcare  
Bianca Gonzalez – THOP: East Campus  
Claudia Gonzalez - Del Sol Medical Center  
Jamicka Harrigan – Del Sol Medical Center  
Todd Haugen – Memorial Medical Center, New Mexico  
Wanda Helgesen – BorderRAC  
Afa Hoeft – THOP: Sierra Campus  
Peggy Jaime – BorderRAC

Don Janes – UMC of El Paso  
Carolina Juarez – UMC of El Paso  
Frances Killenbec – THOP: East Campus  
Tiffany Lasky - TTUHSC  
Oscar Lira Loera - UMC of El Paso  
Irasema Lopez – Las Palmas Medical Center  
Benjamin Mares - NHC EMS  
Ricardo Marin – THOP: East Campus  
Erica Marquez – UMC of El Paso  
Laura Martin – THOP: East Campus  
Miriam Mendoza – THOP: Memorial Campus  
Leticia Mireles – UMC of El Paso  
Manny Munoz – THOP: East Campus  
Tony Muro – THOP: TM Campus  
Valerie Nunez - UMC El Paso  
John O’Hargan - WBAMC  
Jennifer Olivas – THOP: East Campus  
Bryan Olson - BorderRAC  
Mario Ontiveros - OEM  
Jose Ortiz - EPFD  
Anne Pacheco - UMC of El Paso  
Daniella Parada – Del Sol Medical Center  
Adrian Payan – Las Palmas Medical Center  
Graciela Denisse Perez – THOP: East Campus  
Carla Quintana – Emergent Air  
Molly Ramirez - WBAMC  
Verenice Ramirez - Las Palmas Medical Center  
Elen Rodriguez – THOP: East Campus  
Cissy Romo – THOP: East Campus  
SANDRA SALAS - ENDOSCOPY CENTER OF EL PASO  
Susan Sharp – BorderRAC  
Ricardo Silvera – EP Dept. of Public Health  
David Solem - St. Giles Nursing & Rehabilitation  
Sergio Soto – UMC of El Paso  
Alexa Timbrook - UMC of El Paso  
Alan Tyroch - TTUHSC el Paso  
Anthony Venegas – THOP: Memorial / Sierra Campus  
Alonzo Zambrano - EPFD  
Gabriel Zubia - UMC / EPCH

**\*Failed to sign in via BorderRAC website**

\*luisana.bernal  
\*Sylvia.luera  
\*Bositta Brown Thomas  
\*Andy Shay  
\*Darcie Camacho  
\*michelle.arroyos  
\*David  
\*Aflores994  
\*Walter Kuykendall (Guest)  
\*alejandra3.garcia  
\*Amber Ozaeta  
\*hg1022676

\*Ahily Barrera  
\*Fedra Toy  
\*do1021302  
\*Cynthu  
\*erika menier  
\*ashley.dorchester  
\*RHSNM/ACHSNM LUIS ROMAN DFM  
\*bravoc00  
\*LeosJD  
\*mcgrailn  
\*Angie Serna - Security Director  
\*Frank Gonzalez FBFD

2

*All members and invited meeting participants agree to protect the privacy and security of confidential information at all times, both during and after association with BorderRAC has terminated. It is understood that any breach of confidentiality may be grounds for immediate termination of membership and occlusion of future meeting attendance; as well as any appropriate legal action.*

**CALL MEETING TO ORDER**

Mr. Celaya called the meeting to order at 1001 hours.

**REVIEW OF PREVIOUS MEETING MINUTES**

The October minutes were reviewed. Mr. Haugen motioned, Ms. Diaz seconded and the motion carried to accept the minutes as presented.

**FINANCIAL REPORT**

Ms. Helgesen prefaced the current financial review by reporting that notification received by the state informed the HPP RACs of a 33 % reduction in the ASPR preparedness grant funding starting July 1, 2025. This is requiring budget resubmissions. Because of need to revise budgets, the ASPR 23 reports are preliminary, pending possible re-allocation of some expenses to other funding sources.

Mr. Garcia presented a quarterly snapshot as of June 30, 2025:

## Grant Status Report-Quarterly Report

As of: June 30, 2025 \*PRE-CLOSING FINANCIALS\*

START: 7/1/2024  
END: 6/30/2025

### ASPR23 Quarterly Report

Cost Category	Budget	July - Sept	Oct - Dec	Jan - March	April - June	YTD
		1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	
Personnel	\$363,475.00	\$96,825.23	\$96,357.18	\$97,250.50	\$76,448.50	\$366,881.41
Fringe Benefits	\$109,043.00	\$27,289.79	\$26,602.13	\$29,984.04	\$24,709.04	\$108,585.00
Travel	\$31,904.00	\$5,287.71	\$6,821.46	\$4,641.67	\$7,569.05	\$24,319.89
Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Supplies	\$3,220.00	\$495.59	\$593.79	\$514.94	\$932.03	\$2,536.35
Contractual	\$23,300.00	\$3,420.00	\$3,792.00	\$2,232.00	\$3,066.00	\$12,510.00
Other	\$121,621.00	\$60,096.54	\$22,896.16	\$12,290.34	\$34,483.64	\$129,766.68
Indirect	\$159,695.00	\$32,440.95	\$35,252.37	\$39,355.92	\$49,825.07	\$156,874.31
	<b>\$812,258.00</b>	<b>\$225,855.81</b>	<b>\$192,315.09</b>	<b>\$186,269.41</b>	<b>\$197,033.33</b>	<b>\$801,473.64</b>

Q4 grant end date was 6/30/25. This grant encompasses expenditures through TSA I, J, and K. Q4 expenditures totaled \$197,033.33.

### ASPR23 TSA-I Quarterly Report

7/1/2024 6/30/2025

Cost Category	Budget	July - Sept	Oct - Dec	Jan - March	April - June	YTD
		1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	
Personnel	\$114,160.00	\$30,068.36	\$30,025.38	\$32,539.33	\$25,354.26	\$117,987.33
Fringe Benefits	\$34,248.00	\$8,805.74	\$8,283.65	\$11,198.95	\$8,064.23	\$36,352.57
Travel	\$14,937.00	\$1,941.23	\$1,366.16	\$1,678.92	\$3,677.46	\$8,663.77
Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Supplies	\$2,100.00	\$456.50	\$282.83	(\$62.99)	\$332.05	\$1,008.39
Contractual	\$20,800.00	\$3,420.00	\$3,792.00	\$2,232.00	\$3,066.00	\$12,510.00
Other	\$70,706.00	\$27,301.81	\$10,888.23	\$6,302.11	\$15,442.84	\$59,934.99
Indirect	\$63,058.00	\$12,671.86	\$13,520.73	\$13,222.28	\$19,467.86	\$58,882.73
	<b>\$320,009.00</b>	<b>\$84,665.50</b>	<b>\$68,158.98</b>	<b>\$67,110.60</b>	<b>\$75,404.70</b>	<b>\$295,339.78</b>

This is the TSA I only portion of the ASPR 23 grant. Q4 expenditures equaled \$75,404.70. The remaining funds are \$24,704.11. After reviewing expenditures and completing all closing entries, Mr. Garcia is confident the grant will be 100% expended.

### FY25 EMTF Rider Quarterly Report

9/1/2024 8/31/2025

Cost Category	Budget	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	5th Qtr	YTD
Personnel	\$15,341.00	\$0.00	\$0.00	\$0.00	\$15,022.12	\$0.00	\$15,022.12
Fringe Benefits	\$4,602.00	\$0.00	\$0.00	\$0.00	\$2,302.49	\$0.00	\$2,302.49
Travel	\$19,798.00	\$2,423.42	\$4,052.31	\$7,607.05	\$3,840.08	\$0.00	\$17,922.86
Equipment	\$13,250.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Supplies	\$6,000.00	\$1,072.89	\$3,919.11	\$4,427.43	\$1,456.20	\$0.00	\$10,875.63
Contractual	\$4,800.00	\$0.00	\$0.00	\$690.00	\$0.00	\$0.00	\$690.00
Other	\$172,320.00	\$9,234.79	\$34,006.16	\$46,279.27	\$39,971.66	\$0.00	\$129,491.88
Indirect	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	<b>\$236,111.00</b>	<b>\$12,731.10</b>	<b>\$41,977.58</b>	<b>\$59,003.75</b>	<b>\$62,592.55</b>	<b>\$0.00</b>	<b>\$176,304.98</b>

Q4 Incurred \$62,592.55 in expenditures. Rent was the major expense. Actual expenses were under the amount budgeted in Q4 and the variance is at 8.6%, under the 10% threshold. As ASPR grant expenditures are reviewed and possibly revised, there may also be journal entries in EMTF increasing that total.

FY25 Systems Development Quarterly Report					9/1/2024	8/31/2025
Cost Category	Budget	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	YTD
Personnel	\$31,470.00	\$0.00	\$7,333.62	(\$5,303.33)	\$25,287.48	\$27,317.77
Fringe Benefits	\$9,297.00	\$0.00	\$696.67	(\$696.67)	\$11,559.99	\$11,559.99
Travel	\$3,225.00	\$0.00	\$0.00	\$0.00	\$277.48	\$277.48
Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Supplies	\$1,166.00	\$0.00	\$2,065.43	\$0.00	\$667.95	\$2,733.38
Contractual	\$6,945.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other	\$12,872.00	\$55.98	\$5,820.39	\$5,626.58	\$11,046.14	\$22,549.09
Indirect	\$12,779.00	\$0.00	\$348.96	\$825.21	\$1,077.89	\$2,252.06
	<b>\$77,754.00</b>	<b>\$55.98</b>	<b>\$16,265.07</b>	<b>\$451.79</b>	<b>\$49,916.93</b>	<b>\$66,689.77</b>

Q4 incurred \$49,916.93, a substantial increase from Q3 expenditures, which was in accordance with our budget plan. We are in accordance to insure all funds are utilized by August 31, 2025. Remaining funds will be utilized to prepare for upcoming community education fairs.

FY25 EMS RAC Quarterly Report					9/1/2024	8/31/2025
Cost Category	Budget	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	YTD
Personnel	\$85,000.00	\$10,805.39	\$30,301.42	\$43,014.59	\$15,875.09	\$99,996.49
Fringe Benefits	\$27,500.00	\$3,539.72	\$10,669.75	\$13,890.11	\$1,235.46	\$29,335.04
Travel	\$760.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Supplies	\$13,469.00	\$1,462.51	\$762.99	\$0.00	\$9.99	\$2,235.49
Contractual	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other	\$83,700.00	\$5,708.27	\$8,679.58	\$7,096.96	\$258.06	\$21,742.87
Indirect	\$36,414.00	\$2,849.97	\$10,851.90	\$11,069.13	\$21,146.13	\$45,917.13
	<b>\$246,843.00</b>	<b>\$24,365.86</b>	<b>\$61,265.64</b>	<b>\$75,070.79</b>	<b>\$38,524.73</b>	<b>\$199,227.02</b>

Q4 incurred \$38,524.73 in expenses. We are on target to fully expend the funds by the grant closure date. Remaining funds will help cover expenses for upcoming professional education and community education activities.

FY25 EMS County Quarterly Report					9/1/2024	8/31/2025
Cost Category	Budget	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	YTD
Contractual	\$167,503.00	\$0.00	\$9,291.31	\$12,086.00	\$60,058.42	\$81,435.73
	<b>\$167,503.00</b>	<b>\$0.00</b>	<b>\$9,291.31</b>	<b>\$12,086.00</b>	<b>\$60,058.42</b>	<b>\$81,435.73</b>

Q4 expenditures totaled \$60,058.42. Remaining funds total \$81,435.73. There are 3 more submissions in review, which should take a large amount of the remaining funds.

*Action Taken:* Lydia Camacho motioned to approve the financial report, Carla Escobar seconded, and the motion carried to accept the Financial Report as presented.

## COMMITTEE REPORTS

### Acute Care Committees

*To advance the Far West Texas / Southern New Mexico trauma and emergency healthcare system through prevention, education, preparedness, and response.*

### *Cardiac Subcommittee*

Ms. Armendariz reported RDC continues to work on Cardiac NCDR manual form and RDC abstraction with dashboard development. She presented Q4 2024 regional STEMI data showing trends in patient arrivals, ECG and device times, activation outcomes and over/under calls for emergency medical services and hospital arrivals.

The following highlights areas that have improved:

- Pts with First Medical Contact (FMC) to pre-hospital ECG  $\leq$  10 Min
- Pts with hospital arrival to ECG  $\leq$  10 Min

Ms. Armendariz reported that the time of symptom onset to arrival has improved although we are still shy of our benchmark.

5

The following are areas of existing opportunity:

- Patient arrivals via EMS ( is greater than those arriving POV, but still short of our benchmark)
- Median Time (min) FMC to device
- Hospital arrival to device time  $\leq$  90 minutes
- Median time door-in door-out transfer

The following was reviewed concerning education:

### Professional Education

- *ACS 2025 Guideline for the management of patients with Acute Coronary Syndrome:*  
Dr. Chanwit Roongstritong -May 22, 2025

Additionally, the committee continues with *Case Presentations* focusing on STEMIs that offer both best practices and opportunity.

### Community Education

- Aging to Perfection – August 20, 2025

### *Stroke Subcommittee*

Mr. Munoz reported feedback regarding the EMResource changes. The committee is focused on avoiding multiple transfers and how to best support our EMS crews in transport facility decisions.

The committee had inquired about assessing the recently validated VAN Stroke Scale for pediatric strokes to replace the LAPPS assessment and the LAMS severity score. A referral was sent to the EMS committee. The EMS consensus was not to change, but continue use of the current tool to remain consistent across the board.

RDC continues work on development of the Pediatric Stroke Dashboard to capture pediatric patients for which we have identified opportunities; such as, appropriate facility for pediatric stroke treatment and available services.

### Professional Education

The committee continues with case presentations identifying areas of opportunity, as well as best practices.

### Community Education

*To advance the Far West Texas / Southern New Mexico trauma and emergency healthcare system through prevention, education, preparedness, and response.*

- Bingo education at Senior Citizen Center-The committee continues working to re-schedule the event
- Aging-To-Perfection – Volunteers are still needed for the 2<sup>nd</sup> shift 11-3 p.m.

Q4 2024 stroke data reports were reviewed. Data indicates the majority of strokes were Ischemic. Q4 showed a downward trend in stroke patients. Hypertension remains the highest risk factor for stroke patients. Mr. Munoz also noted 29% of stroke patients are in the 45-65 age range. Data indicated the most stroke related calls were in the 79936 zip code.

Ms. Helgesen reported those analyses are very helpful when we are reviewing areas to target for stroke education. Additionally, one of the challenges is long term compliance regarding health and blood pressure management, as the data indicated 25% of the individuals suffering a stroke in Q4 had a prior stroke.

Mr. Munoz reported that the committee changed the data reporting schedule to match with GWTG submission deadlines and Q1 2025 data was due the end of June.

#### Trauma Committee

##### ED OPS Taskforce

The taskforce was developed due to identification of a communication gap between all the committee initiatives and the ED. The taskforce of ED leadership meets every other month to obtain their feedback on initiatives and data tracking.

##### Shattered Dreams Program

The school that requested a fall Shattered Dreams event is postponing until fall of 2026. Ms. Helgesen reported there will be no fall program, as there is not enough time to identify another school and complete all the planning necessary to execute the program.

##### Aging To Perfection

Ms. Camacho shared updates on the "Aging to Perfection" event, reporting the Trauma/Prevention committees will be participating by providing Fall Prevention assessments.

##### Q1 2025 Trauma Data Review

The demographic data indicates more male than female patients and the majority were direct admission from scene and discharged alive. The number one place of injury was private residence. The number one cause of injury, at 1,034, was *Falls*. Ms. Camacho noted this is one reason the community education offered at *Aging to Perfection* is so important.

There were 2 patients with an ISS of 75 that were reviewed and both were transported to appropriate facilities: one to a level one and the other to a level two facility.

#### Pediatric Subcommittee

Ms. Rodriguez introduced the new regional Pediatric Emergency Care Coordinator (PECC), Ms. Verline Steptoe. Ms. Steptoe specializes in assisting hospitals have to assess the needed equipment and resources to care for pediatric patients in an emergency setting. She will contact facility PECCs to support varied pediatric simulations to include trauma and medical. .

#### Community Education

The committee participated in a Child Abuse Awareness Fair April 25, 2025 and presented burn safety, shaken baby,

*To advance the Far West Texas / Southern New Mexico trauma and emergency healthcare system through prevention, education, preparedness, and response.*



and safe sleeping information and education.

#### Statewide Exercise – Pulsara patient entry, tracking and reunification

This item will be discussed in detail during the EPR Committee report.

#### Pediatric Readiness Q4 2024 Data

The reviews include the randomly chosen patients (both medical and trauma patients) to determine compliance with vital sign assessment and reassessment. The starting reassessment benchmark compliance is 80% for all categories. Data indicated *Heart Rate* first assessment compliance was 99.6% with 83% reassessment. *Respiratory* first assessment compliance was 99.3% and 74.8% upon reassessment (offering opportunity). There is discussion regarding when a reassessment is needed, such as when the initial temperature is afebrile.

7

#### EMS Committee

##### Pulsara comparison to 911 calls

Ms. Helgesen reported the committee compared the March number of 911 calls to the number of Pulsara calls to ascertain if most of the 911 calls are being entered into Pulsara. The numbers were close, indicating EMS is doing a good job entering their calls into Pulsara.

##### Lights and Sirens Statement

The committee continues the reassessment of lights and sirens utilization. Industry-wide, the use of lights and sirens is considered to be a safety issue, suggesting a decrease of operating with lights and sirens is appropriate. However, it is complicated because in some cases their contracts with counties actually have information in there that they must respond to a scene within X amount of time. The System PI committee requested BorderRAC and the EMS Committee consider a safety statement regarding lights and sirens that can be added to EMS agencies' policies and protocols. They are collecting data to support the statement.

##### EMS Interfacility Transfer Workgroup

The workgroup met each month in Q2 to ascertain how to best optimize the use of EMS regarding discharge of patients, covering hospital to hospital and hospital to rehab or nursing home. The request rush times appears to be 2 pm-8 pm. Therefore, they are researching the causes for delays in transfers and means to resolve or decrease the delays. Some challenges identified are availability of DME for patient at time of discharge and facility discharge paperwork completed and signed prior to arrival of the transport units.

##### Whole Blood Consortium

The Whole Blood Consortium met in April. We are pending updates from statewide meetings. The consortium is reviewing local protocols and criteria being developed for the use of pre-hospital whole blood. Additionally, we are investigating how much whole blood has been used regionally in a six month period to assist in the decision making process regarding the appropriate number of units to place in the field.

##### Sepsis Workgroup

The Sepsis workgroup has yet to reconvene. One of the challenges identified by the coordinators was EMS documentation of the start and stop times of their IV fluids and the total fluid that infused. BorderRAC is working to schedule the next meeting.

##### Stroke Data

EMS is pending review of edits of the pre-hospital pediatric stroke triage algorithm and guideline.

There have been reports that DSHS is seeking to quantify the number of stroke screens and severity scores assessed

and documented in the field. The data presented by DSHS that was gathered from the EMS NEMSIS registry does not equal the report that our hospital coordinators submit to BorderRAC. We are reviewing ways to pull the data to provide to EMS.

#### Perinatal Data

Ms. Helgesen reported the EMS committee was queried on 6/2/25 and there have been no responses yet to the Perinatal Committee data query.

BorderRAC has recirculated the MOM Band education slide to the committee.

The Perinatal Committee also inquired about the status of the OB GYN recommendations to EMS protocols. EMS has approved, adopted and are working on training of the crews.

8

#### Trauma Data

The Trauma Committee continues tracking the compliance of EMS wristbands applied for 911 patient transports. Ms. Helgesen thanked EPFD and Life Ambulance for participating in most of our *Shattered Dreams* events.

#### EPR participation

EPFD and Northern Hudspeth County participated in the May 20, 2025 Statewide Exercise and Pulsara Drills.

#### Cardiac Data

The STEMI data, including triage pre-hospital was reviewed. Areas meeting or exceeding benchmarks were as follows:

- Median time (min) FMC to pre-hospital ECG – 4.5 minutes
- Median time (min) symptom onset to FMC – 108 minutes
- EMS arrival meeting STEMI criteria 55%

Opportunity exists in the following areas:

- Arrival via EMS (55%)
- Patients with pre-hospital ECG - 60% ( an improvement over Q3)
- Median time (min) FMC to device - 111 minutes
- EMS Measure: Total Ischemia Time – Median time (min) symptoms to EMS dispatch – 99 minutes (a substantial increase from Q1, Q2, Q3)
- Number that were pre-hospital Code Heart Activations - 29% (a decrease from Q1, Q2, Q3)

EMS over/under triage calls data indicated EMS under calls at 32% and overcalls at 20 percent. We are pending clarification regarding when pre-hospital activates Code Heart.

#### *Emergency Preparedness and Response Committee*

Mr. Muro reported the Statewide World Cup Exercise-May 20, 2025. Trauma Service Areas I, J, and K participated in a virtual tabletop exercise. The goals were hospital entry of patients in Pulsara and patient tracking across all 3 regions. BorderRAC had 2 Pulsara drill sessions prior to the actual statewide tabletop for EMS and hospitals.

Ms. Helgesen reported across the three regions on exercise day approximately 530 patients were entered into Pulsara. The Regional Medical Operation Cell (RMOC) in the EOC was activated and “received” requests of family members searching for a patient. We were able to search Pulsara, for the patient, and relay patient location information as to region and hospital. These were the first steps of us being able to utilize Pulsara for patient tracking and reunification.



ASPR tasked the RACs with providing a *Cyber Security Risk Assessment*. The committee met with BorderRAC to develop a preliminary regional assessment identifying our vulnerabilities and possible impact in the following areas: human, property, business, preparedness, internal and external response and risk level (Low, Medium or High). This assessment will be forwarded to each facility to utilize as a base template for assessments.

Ms. Helgesen relayed that a new law passed in the last legislative session requiring hospitals to submit to HHS an ED diversion plan specifically for electrical failures and cyberattacks. The committee is working on a template.

Coldplay performed outside at the Sun Bowl June 13-14. There were assets inside the Sun Bowl (Proaction providing on-scene care and Life Ambulance transporting) and outside the Sun Bowl (EPFD) with UTVs driving around to help if needed, to distribute water and transporting any arriving outside the stadium. The temperature on Friday was 105 degrees. 122 encounters occurred. 10 patient transports via Life Ambulance (6) and EPFD (4). Saturday the temperature was 107 degrees. There were 213 encounters with 11 patient transports via Life Ambulance (5) and EPFD (6).

9

#### EMTF

The EMTF response to recent flooding in Kerrville and Marble Falls was discussed. EMTF deployed 42 ambulances and 6 ambulance strike teams since July 4, with 158 people currently on the ground. Pulsara is being used to track 1,662 encounters, including transports, facility-to-facility transfers, first responder care, as well as missing people. Mr. Zate deployed as did members from (TSA) J and K in the EMTF 9 response. There were no members from TSA I. The process for deploying resources across state lines (Emergency Management Assistance Compact-EMAC) was explained. If there is any interest in future EMTF deployments, please do not hesitate to contact Mr. Zate.

#### Perinatal Committee

Ms. Helgesen reported recently BorderRAC provided Neonatal professional education regarding Biliary Atresia.

The committee has requested a professional education program on cardiomyopathy in the pregnant woman and BorderRAC is working to set one up.

For community outreach, BorderRAC is working on first of 4 segments for on the KVIA *Be Mindful* television spot. The first topic we chose was *Shaken Baby*. The other community outreach we participate in monthly is the El Paso Health Baby Shower. We will expand this to include postpartum depression information as well as cardiac and stroke symptom awareness.

The committee has started having case presentations alternating between neonatal and maternal cases.

Q4 2024 Maternal data was reviewed. There were 3395 deliveries and 4% of those moms had a hemorrhage situation. Approximately the same number of moms had hypertensive episodes. Of those, 9 were readmitted within a six week period for hypertension. Of those nine patients that were readmitted for postpartum hypertension, all of them were wearing the mom bands, which our perinatal areas are providing to those mothers. The bands let EMS and the hospitals ED's know the mom had a hypertensive episode during their delivery and that should be considered and they should loop in their OBs.

Q3 and Q4 NICU 2024 data indicated the majority of the Q3 and Q4 NICU temperatures were normothermic, with a small percentage being hyperthermic. The data indicated in Q3/Q4 there were 2 patients transferred out of El Paso to a higher level of care.

### Prevention Committee

Ms. Acosta reviewed upcoming community fair participation:

- Aging to Perfection - 8/20/2025 – BorderRAC will provide Senior Fall Prevention, Cardiac, and Stroke Assessments and education.
- *Northeast Neighborhood Fair* – 9/27/2025 – The National Neighborhood Association reached out for BorderRAC to participate, asking us to provide helmet fitting and giveaway.
- *Fire Fest* – 10/11/2025 – EPFD requested interactive booths so BorderRAC will offer burn safety, safe sleeping, and shaken baby education as well as Kids in Hot Cars and Hands Only CPR.
- ATV Safety- Date to be determined

10

BorderRAC and the committee are in the development stages for the *Senior Fall Conference* November 14, 2025.

Ms. Acosta reviewed Q2 2025 prevention focus on the BorderRAC website and on social media:

#### *April 2025*

- Child Abuse Prevention Month – facts and awareness
- Sexual Assault Awareness
- Distracted Driving Awareness

#### *May 2025*

- Heat Related Death Prevention (Kids in Hot Cars and Heat Safety)
- *Stop The Bleed* Awareness Month (abbreviated instruction guide)
- Stroke Awareness

Ms. Helgesen reported every year, in collaboration with EPPD, BorderRAC supports the Underage Anti-Drinking initiative contest. In the past we judged teen submitted posters and the top winners received awards from BorderRAC. This year, the teens submitted short videos and we provided gift cards to the winners.

#### *June 2025*

- Firearm Safety, Responsibility and Rules
- Burn Safety
- Gun Safety
- Water Safety
- Rattlesnake Safety

Please remember to follow us on Social Media.

### System Improvement

Dr. Tyroch reported the committee continues to work to refine the BorderRAC Performance Improvement plan and its use for tracking regional referrals and when reviewing cases in Physician Advisory Group (PAG). The next PAG meeting is Monday, July 21, 2025 at 1045 hours. The next System Performance Improvement committee meeting will be August 18, 2025 at 1045 hours.

### *Whole Blood Task Force*

*To advance the Far West Texas / Southern New Mexico trauma and emergency healthcare system through prevention, education, preparedness, and response.*

The Texas Legislature awarded \$10 M over the biennium to develop the prehospital whole blood program. The task force is working through details of how to best use those dollars. The identification of rotation sites remains a key component of the program development. In an effort to strengthen collaboration with Vitalant, EPFD has offered to utilize fire stations on a rotating basis for general blood donation. Hopefully this will also increase whole blood donation throughout our region.

#### *GETAC updates*

The next GETAC meetings are August 19-22, 2025. The new trauma rules go into effect September 1, 2025.

The L4 trauma center meeting is today at 1300 hours and the L1, L2 trauma centers meeting begins at 1415 hours. Please attend if possible.

There is also a new statewide *Burn Task Force* due to an identified gap found during trauma surveys. L3 and 4 trauma centers are not comfortable providing care to burn patients. Further education is needed as well as identification of the number of burn beds available. The new TTUHSC Burn Medical Director, Dr. Phil Fiddler, will join the team August 18, 2025.

The System Collaborative Outcomes Review (SCOR) currently is working to assist the RACs on reducing transfer times, particularly for critical patients.

#### *Professional Education*

Ms. Jaime presented the Q2 2025 BorderRAC Professional Education Committee report. Recent Educational offerings included:

- 4/4/2025 17<sup>th</sup> Annual Diabetes Conference: *Faces of Diabetes*  
BorderRAC provided in-person professional education credit – CME, CNE, CHES, EMS, LSW and assisted in CDR. There were 125 attendees.
- 4/10/25 *Firefighters Under Fire: The Tucson Experience*
- 4/17/2025 with EPCMS *Colorectal Cancer Awareness 2025*
- 4/25/2025 *TPA Conference* – 4/25/2025 Texas Perinatal Association
- 5/15/2025 with EPCMS *-Thinking Beyond the Prescription: Exploring Comprehensive Treatment Strategies for Obesity in Your Already Busy Clinic*
- 5/22/2025 *What's new with the 2025 ACS Guideline for the Management of Patients With Acute Coronary Syndrome*
- 6/19/2025 with EPCMS *Work up of Surgical Endocrinopathies*
- 6/20/2025 *Biliary Atresia*

BorderRAC continues quarterly New Mexico Nurses Association meeting participation and is beginning preparation for CNE Providership renewal.

#### **ROUND TABLE DISCUSSION**

Ms. Jaime mentioned the link for nominations for all BorderRAC committee chairs, as well as BOD Chair-Elect and Secretary have been sent. Nomination submission deadline is Friday, August 18, 2025. Subsequently we will move forward with nomination acceptance and facility/agency voter identification and will send the voting link. New chairs introduction to occur in September.

Everyone that participated in the RAC Assessment Survey (a new rule requirement) was thanked.

*To advance the Far West Texas / Southern New Mexico trauma and emergency healthcare system through prevention, education, preparedness, and response.*

Ms. Camacho inquired regarding the Texas Wristband information in relation to the new rules. Ms. Helgesen responded all incoming trauma patients need to be banded and the facilities are required to have a mechanism to track (a searchable field in their electronic document) the TX EMS Wristband number. She also offered we are pushing that everyone is banded (to include patients other than trauma) to be able to track all patients.

**NEXT SCHEDULED MEETINGS –Wednesday, October 8, 2025.**

**ADJOURNMENT** – There being no further business, the meeting adjourned at 1203 hours.  
/scs