



The Texas EMS, Trauma & Acute Care Foundation (TETAF) is a nonprofit advocate for Texas' trauma, emergency, and acute health care systems. **The state's 22 Regional Advisory Councils (RACs) are a vital component of the trauma and emergency health care system.** Since 1989, RACs have partnered with prehospital and hospital providers to coordinate and optimize regional systems of care and improve patient outcomes. Each RAC has a **unique, regional view** of the needs of the community and how care is ideally delivered. RACs have become an **integral part of the complex health care delivery system** within their community, playing an important role in communication, coordination, and performance improvement among public and private health care facilities, emergency medical services providers, and first responder organizations that provide care to the citizens they serve. RACs have **detailed knowledge** regarding capability and capacity within the hospitals and health care providers in their region, as well as referral patterns and transfer requirements for specialty care. Each RAC functions in a different environment based on health care resources, population, geography, and location, but at its core, **each RAC is focused on optimizing the delivery of time-sensitive medical care to patients experiencing trauma, heart attack, stroke, and labor/delivery.**

Beyond this day-to-day work, **the value of the RAC system is amplified when disasters strike.** The RACs prepare, train, and coordinate response to mass casualty incidents and disasters, including hurricanes, wildfires, and acts of violence. The RACs also manage systems for patient transfers during major incidents. In addition, the RACs support health care providers through assignment and distribution of critical resources such as water, food, and oxygen during Winter Storm Uri; or surge staffing, ventilators or personal protective equipment during the COVID-19 pandemic.

Texas has an opportunity to invest in the RAC system and regional systems of care through:

Implementation, Management, and Integration of Regional Emergency Health Care Systems – \$16 million for the biennium

Goal: *Enhance regional systems of care for trauma, stroke, cardiac, maternal, neonatal, and disaster response, including educational outreach for system improvement.*

Regional systems of care deliver patients to the right place at the right time – the central mission of the RACs. Trauma, stroke, cardiac, maternal, neonatal, and disaster plans are at the core of regional emergency health care system operations. Plans provide for efficient movement, triage, and treatment of a patient. Plans are developed in partnership with organizations who typically operate in a competitive health care environment, including prehospital and hospital providers, yet work collaboratively within the RAC structure to ensure that the needs of the patient are met within the community. Regional systems of care ensure that patients experiencing a wide range of emergency conditions do not see hours-long delays that worsen prognosis or render care less effective and instead receive rapid intervention to decrease morbidity and mortality from time-sensitive emergencies.

RACs have stretched funding initially appropriated for the trauma system to support stroke, cardiac, maternal, and neonatal systems of care. **Funding for the RACs has not kept pace with RACs' growing mission.** To ensure Texas maintains a robust trauma system and can realize the full benefit of strong regional emergency health care systems in stroke, cardiac, maternal, and neonatal care, **new funding is critical.**

- **Operations - \$6 million**
 - Funds will support RACs in meeting the state's new RAC standards. RACs need qualified staff to elevate the trauma and emergency health care system in Texas, implement impending rule changes with increased scope, respond to mass casualty events, make data-informed decisions, and reduce death and disability from trauma, cardiac, stroke, and perinatal events.

Support Regional Systems of Care

Taking Care of Texans

- **Outreach and Education Programs to Decrease Death and Disability** - \$5 million
 - Funds will be used for education on regional health issues. Professional education examples provided to health care professionals include burn care, neonatal resuscitation, and items identified by regional quality assurance and performance improvement (QAPI) and the Governor's EMS and Trauma Advisory Council (GETAC). Community education on topics like Stop the Bleed, hands-only CPR, shaken baby syndrome, drowning prevention, suicide prevention, and fall prevention all contribute to a healthy and resilient Texas.
- **Training for Mass Casualty Incidents** - \$5 million
 - Funds will allow each RAC to coordinate training and tabletop, functional, and full-scale exercises to prepare the medical response to situations such as mass-casualty incidents, transportation incidents, structural collapse, active shooter/threat incidents, and weather-related events.
 - Communication is critical during large-scale incident response. Therefore, efforts will include exercising the Texas Statewide Communications Interoperability Plan to improve regional communication interoperability between health care facilities, EMS, and first responders.

Regional Data Collection – \$9 million for the biennium

Goal: Improve health outcomes with data collection, data analysis, and regional quality improvement initiatives.

RACs collaboratively analyze regional data to identify gaps in care. Working with hospitals to minimize the reporting burden and to support quality care, RACs collect hundreds of regional data points in trauma, cardiac, and stroke data sets – from race to age, to time of 911 call, time arrived at hospital, hospital disposition, and many points in between. **Good data and subsequent data analysis enables the RAC to identify opportunities to improve care** delivered to Texans.

Armed with this crucial data, clinical leaders within the RAC lead multi-disciplinary quality improvement initiatives, using regional data to **adapt evidence-based practices to meet local needs**. For example, the RAC/Perinatal Care Region (PCR) Alliance developed a project around NICU head imaging which identified significant variation that was not associated with improved care. As another example, one RAC recognized the importance of EMS intervention following out-of-hospital childbirth through data analysis and implemented specialized training for EMS personnel on neonatal resuscitation to improve the prognosis for infants upon arrival to the hospital.

Data collection and analysis with **better health information technology** would enhance the ability of the RACs to capture, process, analyze, and act on data.

- **Data Collection, Analysis, and Development of Acute Emergency Health Care Initiatives** - \$4 million
 - Provide regional emergency health care providers with tools for secure data reporting, ensure quality and accuracy of submitted data, and conduct agency follow-ups. Granular patient data at the regional level allows medical providers to have a greater understanding of patient needs and supports efforts to improve patient outcomes in multiple systems of care including cardiac, stroke, trauma, and other acute care initiatives. Regional best practices influence statewide improvement in patient care.
- **Statewide Perinatal Database** - \$5 million
 - TETAF and the RACs support the recommendation of the Texas Collaborative for Healthy Mothers and Babies to establish a statewide perinatal database. There is a critical need for data that hospitals can use for qualitative measures, and for the state to improve care and determine where resources and education should focus.

*Because of the RACs, patient care remains a top priority,
and the lives of Texans are saved every day.*