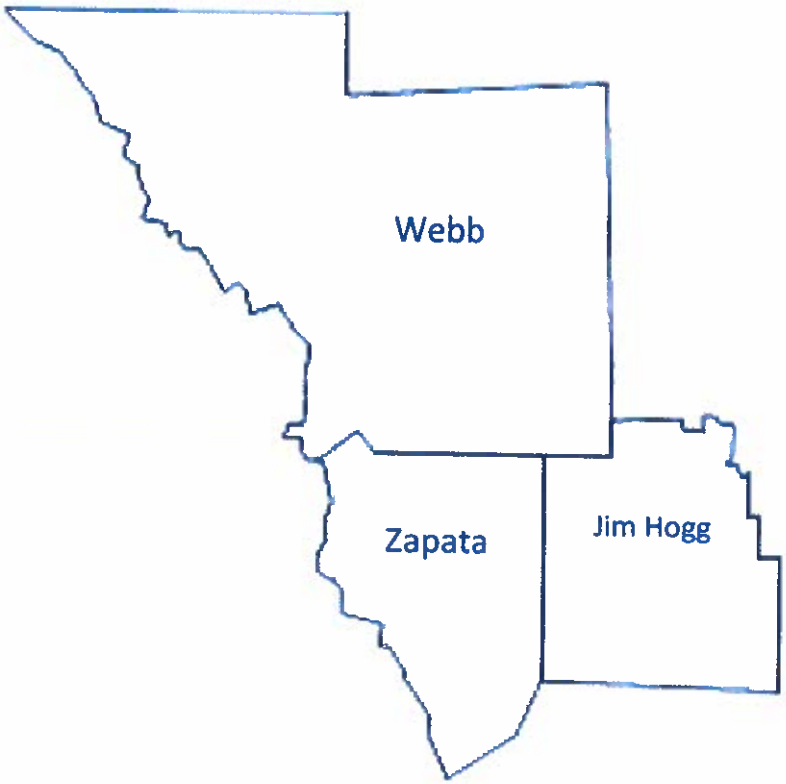
SEVEN FLAGS REGIONAL ADVISORY COUNCIL

Trauma Service Area "T"



JIM HOGG, WEBB, ZAPATA

Seven Flags Regional Advisory Council
Trauma Service Area "T"

SEVEN FLAGS REGIONAL ADVISORY COUNCIL (SFRAC) BOARD MEETING

AGENDA

Seven Flags Regional Advisory Council
Trauma Service Area "T"

Regular Meeting of the SFRAC Board of Directors
Tuesday, October 26, 2021, 10:00 a.m.

SFRAC BOARD OF DIRECTORS MEETING AGENDA

22-01 Item 22-01 Call to Order – Chairman, Guillermo Heard.
a. Roll Call – Chairman.
b. Introduction of Guests – Chairman.

22-02 *(Tab 1)* Item 22-02: Presented to the Board for Review and Possible Action is the approval of the Minutes to the SFRAC Board meeting held August 30, 2021 – Chairman.

22-03 *(Tab 2)* Item 22-03: Presented to the Board for Review and Possible Action is the Approval of the August 2021 and September 2021 Bank Fund Account Statements and Program Expense Report – Juan Canavati, Treasurer.

22-04 Item 22-04: Presented to the Board for Discussion and Possible Action is the Approval of the Appointment and Installation of SFRAC Officer Positions of Vice-Chairman and Secretary, to be Jorge Delgado and Ricardo Jaime, Respectively, for the Period of September 1, 2021, to August 31, 2023 – Chairman.

22-05*(Tab 3)* Item 22-05: Presented to the Board for Discussion and Possible Action is the Approval to Ratify the Submission of the FY21 System Development (Tobacco) and EMS RAC Final Financial Reports to DSHS - Chairman.

22-06*(Tab 4)* Item 22-06: Presented to the Board for Discussion and Possible Action is the Approval to Accept the Second Reading of the Revisions, Deletions, and Additions to the SFRAC Organization By-Laws and Adopt the By-Laws as such for Fiscal Year 2022 - Chairman.

22-07*(Tab 5)* Item 22-07: Presented to the Board for Discussion and Possible Action is the Approval to Accept Villa Ambulance Services', LLC Request to Join as an Official, Participating, and Paying Member of the SFRAC Board and Organization – Chairman.

22-08*(Tab 6)* Item 22-08: Presented to the Board for Discussion and Possible Action is the Acceptance of the Final Draft Seven Flags Regional Advisory Council (SFRAC) Region Trauma Plan as Presented by Consultants Health Care Strategists and Subsequent Approval to Adopt the SFRAC Regional Trauma Plan for Trauma Service Area T – Chairman.

22-09 Item 22-09: Presented to the Board for Discussion and Possible Action as an Item Tabled during the August 30, 2021, Board Meeting is the Approval to Create a Memorandum of Understanding (MOU) Between Seven Flags RAC Members and Local Hospitals/Fee Standing Emergency Room Facilities to Facilitate Non-Emergency Transports - Chairman.

22-10 Item 22-10: Presented to the Board for Discussion and Possible Action is the Approval of the SFRAC Committees Reports – Chairman.

Trauma/Injury Prevention Committee (Chairman: Letisia Colon; Vice-Chairman: Joe Gonzalez)
Perinatal/NICU Committee (Chairman: Nancy Puig; Vice-Chairman: Lupita Cisneros)
EMS/Prehospital Committee: (Chairman – Victor Villarreal; Vice-Chairman – Liz Cuellar)
Stroke/STEMI Committee: (Chairman: Jennifer Garcia; Vice-Chairman: Angie Alvarez)

22-11*(Tab 7)* Item 22-11: Other Business – Chairman.

a. Report on the Membership Summary as Reported in October for September 2021.
b. Review Status of the Senate Bill 500 Regional and Local/Regional Expenditures and Projects.
   - ► Wristband Project
   - ► CEVO Coaching Emergency Vehicle Operator/Ambulance Online Course
   - ► TCAR Educational Trauma Nurse Self-Paced Online Course
c. Review Status of the Local Program Grant (LPG) Projects.
   - ► Continuing Education
   - ► Broselow Bags and Pediatric Color Tape
d. City of Laredo Health Department Report.
e. Report on Hospital Preparedness Program: Coastal Bend RAC Representative.

22-12 Item 22-12 Communications/Correspondence – Chairman.

22-13 Item 22-13: Open Forum – Chairman.

22-14 Item 22-14: Next SFRAC Board meeting – Chairman.

FY21 Meeting Schedule	
Date	**Location**
Friday, October 29, 2021	**TBD**
Friday, January 28, 2022	**TBD**
Wednesday, March 30, 2022	**TBD**
Monday, May 30, 2022	**TBD**
Friday, July 29, 2022	**TBD**
Tuesday, August 30, 2022	**TBD**

Name	Title/Location	Cell
Guillermo Heard	**TSA-T Chair**	**(956) 236-3254**
John Keiser	**TSA-T Administrator**	**(956) 693-0536**

22-15 Item 22-15: Adjournment – Chairman.

Seven Flags Regional Advisory Council
Trauma Service Area "T"

ITEM 22-01 (TAB 1)

Seven Flags Regional Advisory Council
Trauma Service Area "T"

Regular Meeting of the SFRAC Board of Directors
Monday, August 30, 2021, 10:00 a.m.

SFRAC BOARD OF DIRECTORS MEETING AGENDA

MINUTES

Conducted via Zoon: ***https://us06web.zoom.us/j/85497932084?pwd=VTRYalRJMVdNWEFicEhXT0kwSjhOQT09***

21-101 Item 21-101 Call to Order – Chairman, Guillermo Heard.

Chairman Guillermo Heard called the meeting to order.

a. Roll Call – Chairman.

Chairman asked the SFRAC Administrator, John Keiser to call roll.

Administrator proceeded on conducting the roll call:

Air Evac Lifeteam: Jason Delattre (Director) – Absent
Angel Care Ambulance: Ricardo Jaime (Director) – Present
Bronze Star Ambulance: Hector Medina, Jr. (Director) - Present
City of Laredo Fire/EMS: Chief Guillermo Heard (Chairman) – Present
City of Laredo Fire/EMS: Chief Silvestre Rodriguez (Alternate) – Present
Doctors Hospital of Laredo: Letisia Colon (Director) – Present
Doctors Hospital of Laredo: Angelica Alvarez (Alternate) - Present
Prestige EMS: Jorge Delgado (Vice-Chairman) – Present
Laredo Medical Center: Joe Gonzalez (Director) – Present
Medpoint Ambulance: Roy Arriaga (Director) Present
South Texas Ambulance Response: Juan Canavati (Treasurer) – Present
Webb County Volunteer Fire/EMS: Ricardo Rangel (Director) – Present
Webb County Volunteer Fire/EMS: Francisco Martinez (Alternate) – Present
Zapata County Fire/EMS: Daniel Arriaga (Director) – Present
Victorious Care Ambulance Service: Victor Villarreal (Director) - Present
Laredo Lifeline: Peter Gonzalez (Director) – Present
Lalitas Ambulance: Guadalupe Gutierrez (Alternate) – Present
Julie Tijerina (Member-At-Large) – Absent
Capital Care EMS: Absent
Texas Superior Ambulance Service: – Absent
Jenisis Emergency Service: Gladys Luna (Alternate) – Present
Skyline EMS: Kevin Harris (Director) – Present
Laredo Hope Ambulance: - Absent

b. Introduction of Guests – Chairman.

Mr. Joe Schuman, Driscoll Hospital Representative
Ms. Melissa Guzman, Doctors Hospital of Laredo, Chest Pain Coordinator

21-102 *(Tab 1)* Item 21-102: Presented to the Board for Review and Possible Action is the approval of the Minutes to the SFRAC Board meeting held July 30, 2021 – Chairman.

A motion to accept the minutes to the July 30, 2021, meeting as presented was made by Mr. Jorge Delgado and seconded by Mr. Juan Canavati. Motion passes unanimously.

21-103 *(Tab 2)* Item 21-103: Presented to the Board for Review and Possible Action is the Approval of the July 2021 Bank Fund Account Statements and Program Expense Report – Juan Canavati, Treasurer.

Mr. Canavati presented the Board with the July 2021 Bank Fund Account Statements report and Mr. Keiser the program expense report. Mr. Canavati pointed out the Bank Fund Account Statement table was not included and appeared not to have been included in the packet. Mr. Keiser confirmed noting that this was and error in oversight and that the next Board's meeting report will contain the information. A motion to accept the reports as presented was made by Mr. Ricardo Jaime and seconded by Ms. Letisia Colon. Motion passes unanimously.

21-104*(Tab 3)* Item 21-104: Presented to the Board for Discussion and Possible Action is the Approval to Equally Redistribute the Remaining FY21 System Development, and EMS County Assistance Alignment Unclaimed Fund Balances Among Eligible Member Entities Who Met the Deadline and Submitted Reimbursement Claims with the Required Supporting Documentation - Chairman.

Mr. Keiser presented the Board with an explanation that due to certain entities not having claimed their FY System Development and EMS County Assistance (Alignment) funds, any left-over funds will be equally distributed among the rest of the eligible EMS and hospital entities. A motion to accept the motion was made by Mr. Canavati and seconded by Mr. Jaime. Motion passes unanimously.

21-105*(Tab 4)* Item 21-105: Presented to the Board for Discussion and Possible Action is the Approval to Submit the Revised Distribution Plan to the Texas Department of State Health Services (DSHS) for the Redistribution of the FY21 EMS County Assistance Alignment Grant - Chairman.

Mr. Keiser explained to the Board that in order to proceed with the planned redistribution of EMS County Assistance Funds as presented in the previous item, that a revised Distribution Plan need to be submitted to DSHS for review and approval. A motion to approve the item as presented was made by Mr. Jaime and seconded by Chief Danny Arriaga. Motion passes unanimously.

21-106*(Tab 5)* Item 21-106: Presented to the Board for Discussion and Possible Action is the Approval to Accept the First of Two Readings of the Revisions, Deletions, and Additions to the SFRAC Organization By-Laws - Chairman.

Mr. Keiser explained to the Board that each year the RAC needed to review its By-Laws and determine whether any revision, deletions or additions needed to be made. Based on this several changes to the By-Laws were presented to the Board for the first reading. A second reading will be made at the October meeting followed by approval if the Board were to decide to accept. A motion to accept the first reading of the changes to the By-Laws was made by Ms. Colon and seconded by Mr. Joe Gonzalez. Motion passes unanimously.

21-107*(Tab 6)* Item 21-107: Presented to the Board for Discussion and Possible Action is the Approval to Ratify the Submittal of the FY21 Local Planning Grant Spending Plan as Required to DSHS for Approval - Chairman.

A motion to accept the ratification on the submittal of the FY21 Local Planning Grant Spending Plan to DSHS was made by Mr. Hector Medina and seconded by Ms. Colon. Motion passes unanimously.

21-108*(Tab 7)* Item 21-108: Presented to the Board for Discussion and Possible Action is the Approval to Submit the FY21 Local Planning Grant (LPG) Final Financial Report to DSHS - Chairman.

A motion to accept the item as presented for the submittal of the FY21 Local Planning Grant Final Report to DSHS was made by Mr. Medina and seconded by Chief Arriaga. Motion passes unanimously.

21-109*(Tab 8)* Item 21-109: Presented to the Board for Discussion and Possible Action is the Approval to Accept the Nomination of Board Officers Vice-Chairman and Secretary to Serve the Two-Year Fiscal Year Term from September 1, 2021, to August 31, 2023, for Subsequent Appointment and Installation at the October 2021, SFRAC Board Meeting - Chairman.

Mr. Keiser announced that based on the notice and nomination forms he had sent out for the nomination process of the SFRAC's Vice-Chairman and Treasure, one nomination form with nominations has been submitted. Mr. Keiser called for any final nominations during the meeting and being none he announced that nominations had been submitted for Jorge Delgado to continue as Vice-Chairman and Ricardo Jaime to continue as Secretary.

21-110*(Tab 9)* Item 21-110: Presented to the Board for Discussion and Possible Action is the Approval of the Proposed FY22 Operating and Grants Program Budget Including FY22 EMS RAC, FY22 EMS County Assistance, and FY22 System Development - Chairman.

Mr. Keiser presented the Board with the proposed operating budget for FY22 consisting of program and grant budgets. A motion to accept the FY22 proposed budget as presented was made by Ms. Colon and seconded by Mr. Gonzalez. Motion passes unanimously.

21-111 Item 21-111: Presented to the Board for Discussion and Possible Action as an Item Tabled in the July 30, 2021, Board Meeting is the Approval to Create a Memorandum of Understanding (MOU) Between Seven Flags RAC Members and Local Hospitals/Fee Standing Emergency Room Facilities to Facilitate Non-Emergency Transports - Chairman.

A motion to once again table this item for the next Board meeting was made by Mr. Jaime and seconded by Mr. Medina, Jr. The motion passes unanimously.

21-112*(Tab 10)* Item 21-112: Presented to the Board for Discussion and Possible Action is the Approval to Renew the Contract Between the Seven Flags Regional Advisory Council and South Texas Development Council for Administrative and Grant Management Services for Fiscal Year 2022, for a Fee not to Exceed $35,000 - Chairman.

A motion by Mr. Jaime was made to renew the administrative contract between the SFRAC and STDC for the period beginning September 1, 2021 and August 31, 2022 for a total not to exceed $35,000. The motion was seconded by Mr. Canavati and passed unanimously.

21-113 Item 21-113: Presented to the Board for Approval are the SFRAC Committees Reports – Chairman.

Trauma/Injury Prevention Committee (Chairman: Letisia Colon; Vice-Chairman: Joe Gonzalez)

No items to report to the Board.

Perinatal/NICU Committee (Chairman: Nancy Puig; Vice-Chairman: Lupita Cisneros)

No items to report to the Board.

EMS/Prehospital Committee: (Chairman – Victor Villarreal; Vice-Chairman – Liz Cuellar)

No items to report to the Board.

Stroke/STEMI Committee: (Chairman: Jennifer Garcia; Vice-Chairman: Angie Alvarez)

No items to report to the Board.

21-114 *(Tab 11)* Item 21-114: Other Business – Chairman.

a. Report on the Membership Summary as Reported in August for July 2021.

The Board was presented with a summary of the membership participation report. SFRAC Administrator noted that several entities did not meet the participation criterion making them ineligible for next year's funding. Mr. Keiser reminded the Board that according to the by-laws if a member misses three or more consecutive meeting their status is recognized as members Not In Good Standing.

b. Report on the Status of the Senate Bill 500 Regional and Local/Regional Expenditures and Projects.

A brief status report was provided to the Board by Mr. Keiser, Mr. Gonzalez and Chief Rodriguez regarding the related projects funded by the Senate Bill 500 appropriation.

- ► Wristband Project
- ► CEVO Coaching Emergency Vehicle Operator/Ambulance Online Course
- ► TCAR Educational Trauma Nurse Self-Paced Online Course

c. Report on the Status of the Local Program Grant (LPG) Projects.

Same as the previous item, a brief status report was provided by Mr. Keiser and Mr. Gonzalez on the status of the projects funded by the FY21 Local Planning Grant funds.

- ► Continuing Education
- ► Broselow Bags and Pediatric Color Tape

d. City of Laredo Health Department Report.

SFRAC Chairman, Guillermo Heard provided the Board with a summary report on behalf on the City of Laredo Health Department.

e. Report on Hospital Preparedness Program: Coastal Bend RAC Representative.

No items to report to the Board.

21-115 Item 21-115 Communications/Correspondence – Chairman.

No items to report to the Board as a matter of communications and/or correspondence.

21-116 Item 21-116: Open Forum – Chairman.

No comments on open forum.

21-117 Item 21-117: Next SFRAC Board meeting – Chairman.

FY21 Meeting Schedule	
Date	**Location**
Friday, October 29, 2021	**TBD**
Friday, January 28, 2022	**TBD**
Wednesday, March 30, 2022	**TBD**
Monday, May 30, 2022	**TBD**
Friday, July 29, 2022	**TBD**
Tuesday, August 30, 2022	**TBD**

Name	Title/Location	Cell
Guillermo Heard	**TSA-T Chair**	**(956) 236-3254**
John Keiser	**TSA-T Administrator**	**(956) 693-0536**

21-118 Item 21-118: Adjournment – Chairman.

A motion to adjourn was made by Ms. Colon and seconded by Mr. Medina. Meeting adjourned.

Seven Flags Regional Advisory Council
Trauma Service Area "T"

ITEM 22-03 (TAB 2)

SEVEN FLAGS REGIONAL ADVISORY COUNCIL
ACCOUNTS STATEMENT REPORT

SFRAC BANK PROGRAM FUND ACCOUNTS AND ENDING BALANCE REPORT						
Period Ending	EMS County Assistance Fund Closing Balance	EMS RAC Fund Closing Balance	General Fund Closing Balance	System Development (i.e., Tobacco) Fund Closing Balance	Holding Account Closing Balance	Total
September 30, 2020	$11,824.40	$32,085.00	$16,191.64	$11,084.40	68,588.02	$139,773.46
October 31, 2020	$66,511.40	$32,091.00	$17,982.13	$7,275.36	$142,229.02	$266,088.91
November 30, 2020	$66,511.40	$32,091.00	$22,394.63	$7,275.36	$142,229.02	$270,501.41
December 31, 2020	$51,125.40	$32,091.00	$23,894.63	$50,927.36	$98,577.02	$256,615.41
January 31, 2021	$43,432.40	$32,091.00	$23,700.53	$50,927.36	$98,577.02	$248,728.31
February 28, 2021	$28,046.40	$16,048.50	$26,238.03	$50,927.36	$98,577.02	$219,837.31
March 31, 2021	$28,046.40	$16,048.50	$26,238.03	$50,922.36	$98,572.02	$219,827.31
April 30, 2021	$16,080.40	$16,048.50	$26,688.03	$50,922.36	$98,572.02	$208,311.31
May 31, 2021	$60,057.40	$16,048.50	$15,967.04	$42,985.11	$98,577.02	$233,635.07
June 30, 2021	$24,422.40	$8,027.25	$11,620.64	$31,557.99	$10,258.02	$85,886.30
July 31, 2021	$64,623.40	$8,027.25	$26,513.03	$30,780.79	$34,855.58	$164,800.05
August 31, 2021	$64,623.40	$30,045.25	$24,488.03	$30,780.79	$12,873.58	$162,811.05
September 30, 2021	$47,207.40	$4,723.00	$21,573.03	$22,843.97	$825.61	$97,173.01

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San Antonio, Texas 78265-9507

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SEVEN FLAGS REGIONAL ADVISORY COUNCIL ON
P O BOX 450094
Laredo TX 78045

00000016 0008128 0001-0001

Customer Number:	2210910129
Statement Date:	08/31/2021
Statement Period:	08/01/2021 - 08/31/2021
Enclosure Items:	0
Page Number:	1 of 1

EMS County Assistance

Contact Information

Address:
Commerce Bank
5800 SAN DARIO
LAREDO TX 78041

Bank Phone:	1- (956) 724-1616
IBC Voice:	1- (956) 791-1616
Visit us Online:	www.IBC.com
Mobile Banking:	**Download app or visit at: www.myIBC.com**

Please examine and report any discrepancies within 14 days from your statement date.

Biz Rite — Account Recap — Account Number: 2210910129

Beginning Balance	Number of Credits	Deposits & Credits	Number of Debits	Withdrawals & Debits	Closing Balance
64,623.40	2	2.00	2	2.00	64,623.40

Balance Summary

Average Collected Balance	64,623.40

Electronic Activity

Credits

Date	Description	Amount
08/27	Transfer Deposit FROM ACCOUNT XXXXXX0137	1.00
08/27	Transfer Deposit FROM ACCOUNT XXXXXX0145	1.00

Debits

Date	Description	Amount
08/27	Transfer Withdrawal TO ACCOUNT XXXXXX0137	1.00
08/27	Transfer Withdrawal TO ACCOUNT XXXXXX0145	1.00

Daily Ending Balance

Date	Amount	Date	Amount
08/01	64,623.40	08/27	64,623.40

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San Antonio, Texas 78265-9507

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SEVEN FLAGS REGIONAL ADVISORY COUNCIL ON
P O BOX 450094
Laredo TX 78045

00000318 0010835 0001-0003

Customer Number:	2210910129
Statement Date:	09/30/2021
Statement Period:	09/01/2021 - 09/30/2021
Enclosure Items:	7
Page Number:	1 of 3

EMS County Assistance

Contact Information

Address:
Commerce Bank
5800 SAN DARIO
LAREDO TX 78041

Bank Phone:	1- (956) 724-1616
IBC Voice:	1- (956) 791-1616
Visit us Online:	www.IBC.com
Mobile Banking:	**Download app or visit at: www.myIBC.com**

Please examine and report any discrepancies within 14 days from your statement date.

Biz Rite — Account Recap — Account Number: 2210910129

Beginning Balance	Number of Credits	Deposits & Credits	Number of Debits	Withdrawals & Debits	Closing Balance
64,623.40	0	0.00	7	17,416.00	47,207.40

Balance Summary

Average Collected Balance	50,605.40

Checks (Debits)

Date	Check #	Amount	Date	Check #	Amount	Date	Check #	Amount
09/24		748.00	09/29	27*	748.00	09/27	32*	748.00
09/02	23	5,983.00	09/16	29*	748.00	09/27	33	748.00
09/02	24	7,693.00						

* Indicates a skip in check number sequence

Daily Ending Balance

Date	Amount	Date	Amount	Date	Amount
09/01	64,623.40	09/16	50,199.40	09/27	47,955.40
09/02	50,947.40	09/24	49,451.40	09/29	47,207.40

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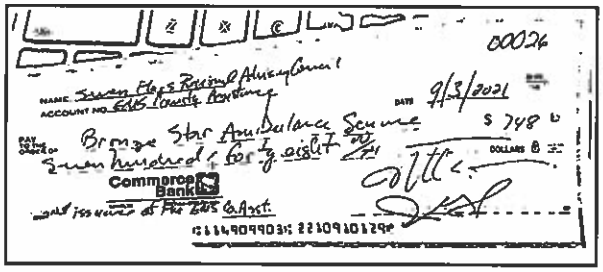
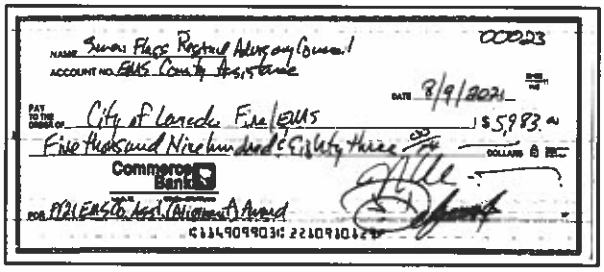


$748.00 09/24/2021



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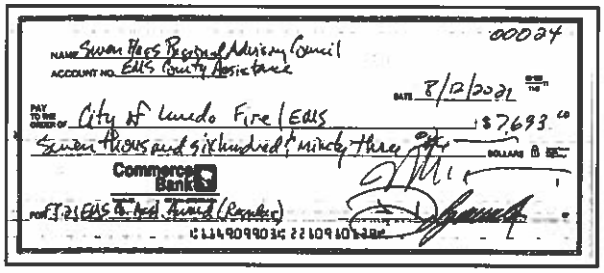

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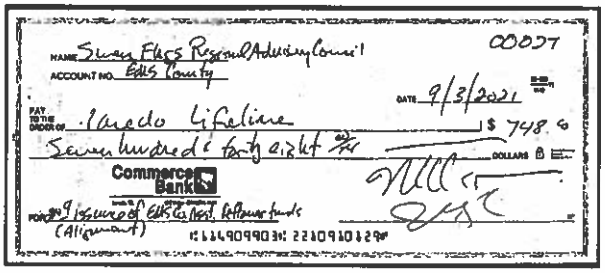

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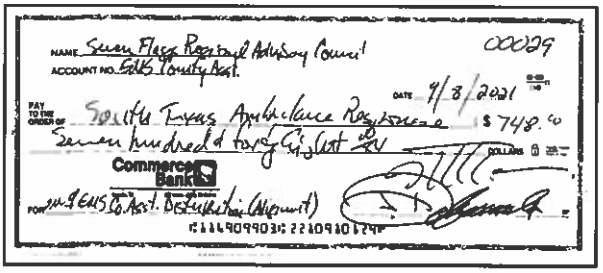

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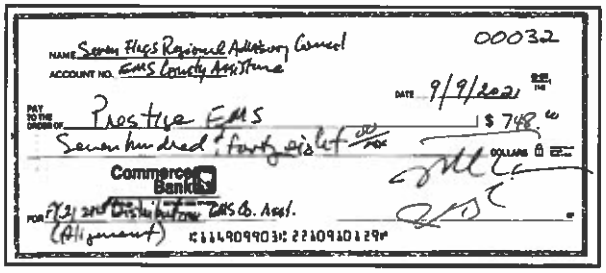

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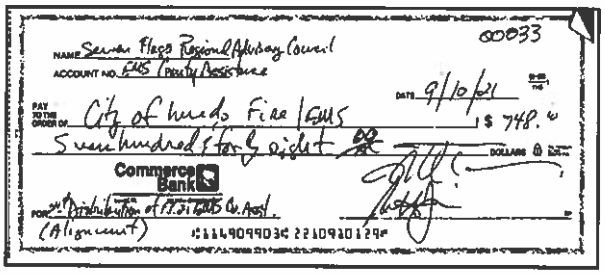
00033
NAME Seven Flags Regional Advisory Council
ACCOUNT NO. EMS County Assistance
DATE 9/10/21
PAY TO THE ORDER OF City of Laredo Fire/EMS $ 748.00
Seven hundred forty eight DOLLARS
Commerce Bank
FOR 2nd Distribution of FY21 EMS Co. Asst.
(Alignment)
⑆114909903⑆ 2210910129⑈

0033 $748.00 09/27/2021

00000318 0010837 0003-0003

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SEVEN FLAGS REGIONAL ADVISORY COUNCIL
ON TRAUMA TRAUMA SERVICE AREA T
PO BOX 450094
LAREDO TX 78045

00000019 0008132 0001-0001

Customer Number:	2210910161
Statement Date:	08/31/2021
Statement Period:	08/01/2021 - 08/31/2021
Enclosure Items:	0
Page Number:	1 of 1

RAC

Contact Information

Address:
Commerce Bank
5800 SAN DARIO
LAREDO TX 78041

Bank Phone:	1- (956) 724-1616
IBC Voice:	1- (956) 791-1616
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Mobile Banking:	**Download app or visit at: www.myIBC.com**

Please examine and report any discrepancies within 14 days from your statement date.

Biz Rite		Account Recap		Account Number: 2210910161	
Beginning Balance	Number of Credits	Deposits & Credits	Number of Debits	Withdrawals & Debits	Closing Balance
8,027.25	1	22,018.00	0	0.00	30,045.25

Balance Summary

Average Collected Balance	11,578.54

Electronic Activity

Credits

Date	Description	Amount
08/27	Transfer Deposit FROM ACCOUNT XXXXXX0188	22,018.00

Daily Ending Balance

Date	Amount	Date	Amount
08/01	8,027.25	08/27	30,045.25

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San Antonio, Texas 78265-9507

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SEVEN FLAGS REGIONAL ADVISORY COUNCIL
ON TRAUMA TRAUMA SERVICE AREA T
PO BOX 450094
LAREDO TX 78045

00000321 0010842 0001-0002

Customer Number:	2210910161
Statement Date:	09/30/2021
Statement Period:	09/01/2021 - 09/30/2021
Enclosure Items:	3
Page Number:	1 of 2

RAC

Contact Information

Address:
Commerce Bank
5800 SAN DARIO
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Bank Phone:	1- (956) 724-1616
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Please examine and report any discrepancies within 14 days from your statement date.

Biz Rite — Account Recap — Account Number: 2210910161

Beginning Balance	Number of Credits	Deposits & Credits	Number of Debits	Withdrawals & Debits	Closing Balance
30,045.25	0	0.00	3	25,322.25	4,723.00

Balance Summary

Average Collected Balance	18,007.98

Checks (Debits)

Date	Check #	Amount	Date	Check #	Amount	Date	Check #	Amount
09/15		8,021.25	09/13	5	9,437.00	09/23	7*	7,864.00

* Indicates a skip in check number sequence

Daily Ending Balance

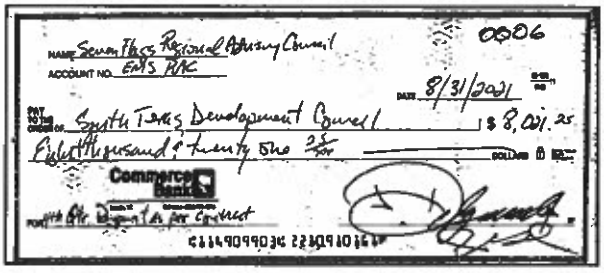
Date	Amount	Date	Amount	Date	Amount
09/01	30,045.25	09/15	12,587.00	09/23	4,723.00
09/13	20,608.25				

Commerce Bank

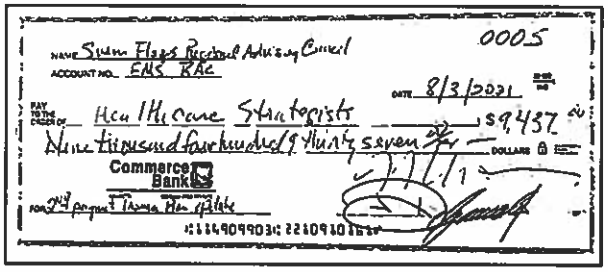
We Make It Happen

Customer Number:	2210910161
Statement Date:	09/30/21
Statement Period:	09/01/21 - 09/30/21
Page Number:	2 of 2

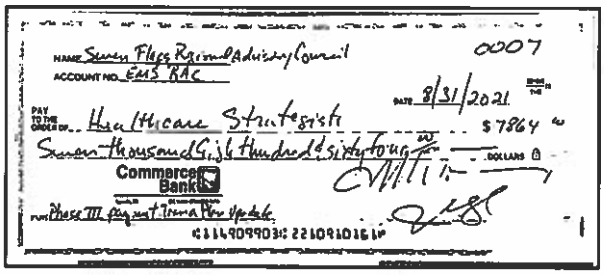
00000321 0010843 0002-0002



$8,021.25 09/15/2021



0005 $9,437.00 09/13/2021



0007 $7,864.00 09/23/2021

Commerce Bank

We Make It Happen

P.O. Box 659507
San Antonio, Texas 78265-9507

00000018 TI307S09012104551500 05 000000000 0000000 002

SEVEN FLAGS REGIONAL ADVISORY COUNCIL ON
P O BOX 450094
Laredo TX 78045

00000018 0008130 0001-0002

Customer Number:	2210910145
Statement Date:	08/31/2021
Statement Period:	08/01/2021 - 08/31/2021
Enclosure Items:	2
Page Number:	1 of 2

General Fund

Contact Information

Address:
Commerce Bank
5800 SAN DARIO
LAREDO TX 78041

Bank Phone:	1- (956) 724-1616
IBC Voice:	1- (956) 791-1616
Visit us Online:	www.IBC.com
Mobile Banking:	**Download app or visit at: www.myIBC.com**

Please examine and report any discrepancies within 14 days from your statement date.

Biz Rite — Account Recap — Account Number: 2210910145

Beginning Balance	Number of Credits	Deposits & Credits	Number of Debits	Withdrawals & Debits	Closing Balance
26,513.03	1	1.00	3	2,026.00	24,488.03

Balance Summary

Average Collected Balance	24,768.68

Checks (Debits)

Date	Check #	Amount	Date	Check #	Amount
08/06		600.00	08/05	11	1,425.00

* Indicates a skip in check number sequence

Electronic Activity

Credits

Date	Description	Amount
08/27	Transfer Deposit FROM ACCOUNT XXXXXX0129	1.00

Debits

Date	Description	Amount
08/27	Transfer Withdrawal TO ACCOUNT XXXXXX0129	1.00

Daily Ending Balance

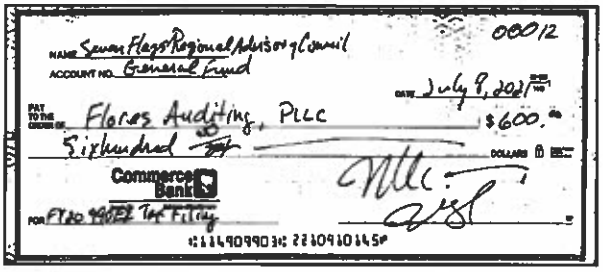
Date	Amount	Date	Amount	Date	Amount
08/01	26,513.03	08/06	24,488.03	08/27	24,488.03
08/05	25,088.03				

Commerce Bank

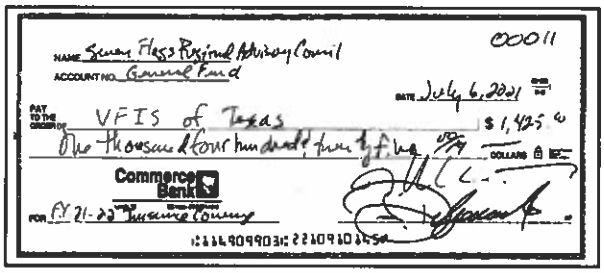
We Make It Happen

Customer Number:	2210910145
Statement Date:	08/31/21
Statement Period:	08/01/21 - 08/31/21
Page Number:	2 of 2

00000018 0008131 0002-0002



$600.00 08/06/2021



0011 $1,425.00 08/05/2021

Commerce Bank

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P.O. Box 659507
San Antonio, Texas 78265-9507

00000320 TI307S10012104004600 06 000000000 0000000 002

SEVEN FLAGS REGIONAL ADVISORY COUNCIL ON
P O BOX 450094
Laredo TX 78045

00000320 0010840 0001-0002

Customer Number:	2210910145
Statement Date:	09/30/2021
Statement Period:	09/01/2021 - 09/30/2021
Enclosure Items:	1
Page Number:	1 of 2

General Fund

Contact Information

Address:
Commerce Bank
5800 SAN DARIO
LAREDO TX 78041

Bank Phone:	1- (956) 724-1616
IBC Voice:	1- (956) 791-1616
Visit us Online:	www.IBC.com
Mobile Banking:	**Download app or visit at: www.myIBC.com**

Please examine and report any discrepancies within 14 days from your statement date.

Biz Rite		Account Recap		Account Number: 2210910145	
Beginning Balance	Number of Credits	Deposits & Credits	Number of Debits	Withdrawals & Debits	Closing Balance
24,488.03	0	0.00	1	2,915.00	21,573.03

Balance Summary

Average Collected Balance	22,933.36

Checks (Debits)

Date	Check #	Amount
09/15		2,915.00

* Indicates a skip in check number sequence

Daily Ending Balance

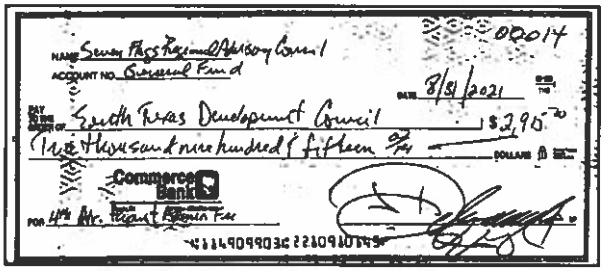
Date	Amount	Date	Amount
09/01	24,488.03	09/15	21,573.03

Commerce Bank

We Make It Happen

Customer Number:	2210910145
Statement Date:	09/30/21
Statement Period:	09/01/21 - 09/30/21
Page Number:	2 of 2

00000320 0010841 0002-0002


00014
NAME Sweetwater Regional Advisory Council
ACCOUNT NO. General Fund
DATE 8/31/2021
PAY TO THE ORDER OF South Texas Development Council $2,915.00
Two thousand nine hundred fifteen 00/100 DOLLARS
Commerce Bank
FOR 4th Qtr. Grant Admin Fee

$2,915.00 09/15/2021

00000320 0010841 0002-0002 TI307S10012104004600 06 L 00000000

Commerce Bank

We Make It Happen

P.O. Box 659507
San Antonio, Texas 78265-9507
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SEVEN FLAGS REGIONAL ADVISORY COUNCIL ON
P O BOX 450094
Laredo TX 78045

00000017 0008129 0001-0001

Customer Number:	2210910137
Statement Date:	08/31/2021
Statement Period:	08/01/2021 - 08/31/2021
Enclosure Items:	
Page Number:	

System Development Tobacco

Contact Information

Address:
Commerce Bank
5800 SAN DARIO
LAREDO TX 78041

Bank Phone:	1- (956) 724-1616
IBC Voice:	1- (956) 791-1616
Visit us Online:	www.IBC.com
Mobile Banking:	**Download app or visit at: www.myIBC.com**

Please examine and report any discrepancies within 14 days from your statement date.

Biz Rite		Account Recap		Account Number: 2210910137	
Beginning Balance	Number of Credits	Deposits & Credits	Number of Debits	Withdrawals & Debits	Closing Balance
30,780.79	1	1.00	1	1.00	30,780.79

Balance Summary

Average Collected Balance	30,780.79

Electronic Activity

Credits

Date	Description	Amount
08/27	Transfer Deposit FROM ACCOUNT XXXXXX0129	1.00

Debits

Date	Description	Amount
08/27	Transfer Withdrawal TO ACCOUNT XXXXXX0129	1.00

Daily Ending Balance

Date	Amount	Date	Amount
08/01	30,780.79	08/27	30,780.79

Commerce Bank

We Make It Happen

P.O. Box 659507
San Antonio, Texas 78265-9507
00000319 TI307S10012104004600 06 000000000 0000000 002

SEVEN FLAGS REGIONAL ADVISORY COUNCIL ON
P O BOX 450094
Laredo TX 78045

00000319 0010838 0001-0002

Customer Number:	2210910137
Statement Date:	09/30/2021
Statement Period:	09/01/2021 - 09/30/2021
Enclosure Items:	4
Page Number:	1 of 2

System Development (Tobacco

Contact Information

Address:
Commerce Bank
5800 SAN DARIO
LAREDO TX 78041

Bank Phone:	1- (956) 724-1616
IBC Voice:	1- (956) 791-1616
Visit us Online:	www.IBC.com
Mobile Banking:	**Download app or visit at: www.myIBC.com**

Please examine and report any discrepancies within 14 days from your statement date.

Biz Rite — Account Recap — Account Number: 2210910137

Beginning Balance	Number of Credits	Deposits & Credits	Number of Debits	Withdrawals & Debits	Closing Balance
30,780.79	0	0.00	4	7,936.82	22,843.97

Balance Summary

Average Collected Balance	26,425.80

Checks (Debits)

Date	Check #	Amount	Date	Check #	Amount	Date	Check #	Amount
09/24		3,357.94	09/16	23*	610.56	09/30	26*	610.56
09/02	21	3,357.76						

* Indicates a skip in check number sequence

Daily Ending Balance

Date	Amount	Date	Amount	Date	Amount
09/01	30,780.79	09/16	26,812.47	09/30	22,843.97
09/02	27,423.03	09/24	23,454.53		

Commerce Bank

We Make It Happen

Customer Number:	2210910137
Statement Date:	09/30/21
Statement Period:	09/01/21 - 09/30/21
Page Number:	2 of 2

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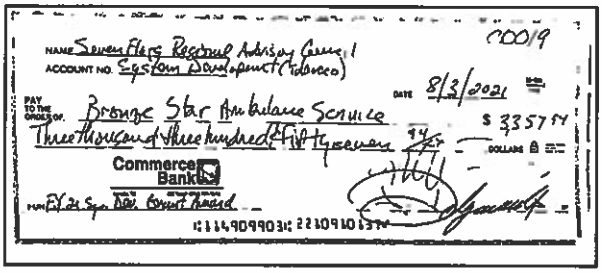
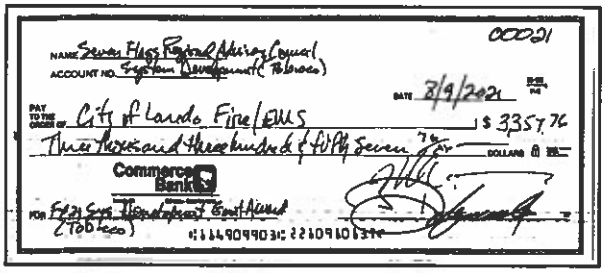
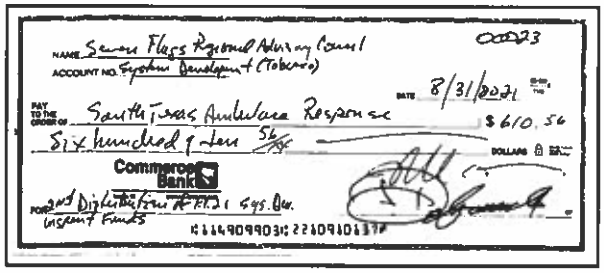


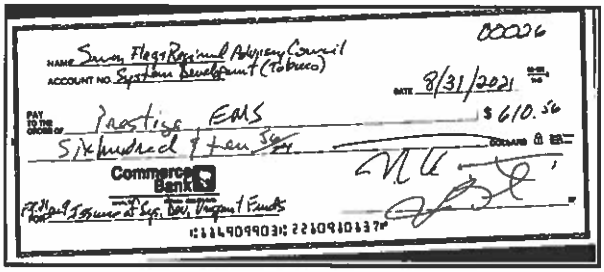
$3,357.94 09/24/2021



0021 $3,357.76 09/02/2021



0023 $610.56 09/16/2021



0026 $610.56 09/30/2021

Commerce Bank

We Make It Happen

P.O. Box 659507
San Antonio, Texas 78265-9507

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SEVEN FLAGS REGIONAL ADVISORY COUNCIL
ON TRAUMA TRAUMA SERVICE AREA T
PO BOX 450094
LAREDO TX 78045

00000020 0008133 0001-0001

Customer Number:	2210910188
Statement Date:	08/31/2021
Statement Period:	08/01/2021 - 08/31/2021
Enclosure Items:	0
Page Number:	1 of 1

Holding Account

Contact Information

Address:
Commerce Bank
5800 SAN DARIO
LAREDO TX 78041

Bank Phone:	1- (956) 724-1616
IBC Voice:	1- (956) 791-1616
Visit us Online:	www.IBC.com
Mobile Banking:	**Download app or visit at: www.myIBC.com**

Please examine and report any discrepancies within 14 days from your statement date.

Biz Rite		Account Recap		Account Number: 2210910188	
Beginning Balance	Number of Credits	Deposits & Credits	Number of Debits	Withdrawals & Debits	Closing Balance
34,855.58	0	0.00	1	22,018.00	12,837.58

Balance Summary

Average Collected Balance	31,304.29

Electronic Activity

Debits

Date	Description	Amount
08/27	Transfer Withdrawal TO ACCOUNT XXXXXX0161	22,018.00

Daily Ending Balance

Date	Amount	Date	Amount
08/01	34,855.58	08/27	12,837.58

Commerce Bank

We Make It Happen

P.O. Box 659507
San Antonio, Texas 78265-9507
00000322 TI307S10012104004600 06 000000000 0000000 002

SEVEN FLAGS REGIONAL ADVISORY COUNCIL
ON TRAUMA TRAUMA SERVICE AREA T
PO BOX 450094
LAREDO TX 78045

00000322 0010844 0001-0002

Customer Number:	2210910188
Statement Date:	09/30/2021
Statement Period:	09/01/2021 - 09/30/2021
Enclosure Items:	2
Page Number:	1 of 2

Holding Account

Contact Information

Address:
Commerce Bank
5800 SAN DARIO
LAREDO TX 78041

Bank Phone:	1- (956) 724-1616
IBC Voice:	1- (956) 791-1616
Visit us Online:	www.IBC.com
Mobile Banking:	**Download app or visit at: www.myIBC.com**

Please examine and report any discrepancies within 14 days from your statement date.

Biz Rite — Account Recap — Account Number: 2210910188

Beginning Balance	Number of Credits	Deposits & Credits	Number of Debits	Withdrawals & Debits	Closing Balance
12,837.58	0	0.00	2	12,011.97	825.61

Balance Summary

Average Collected Balance	9,735.80

Checks (Debits)

Date	Check #	Amount	Date	Check #	Amount
09/29	6	7,410.00	09/14	7	4,601.97

* Indicates a skip in check number sequence

Daily Ending Balance

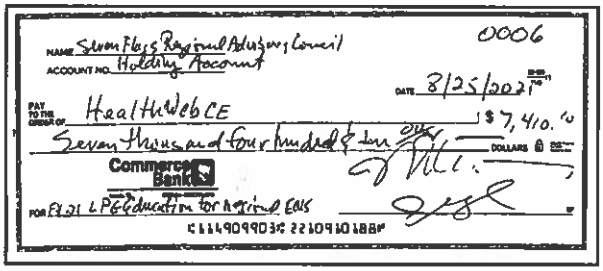
Date	Amount	Date	Amount	Date	Amount
09/01	12,837.58	09/14	8,235.61	09/29	825.61

Commerce Bank

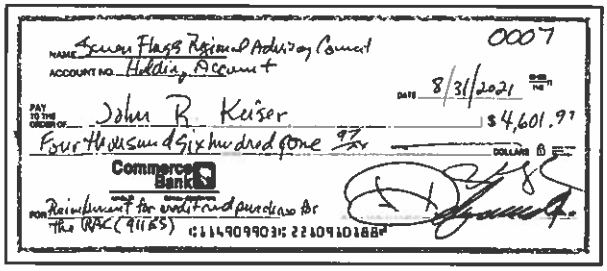
We Make It Happen

Customer Number:	2210910188
Statement Date:	09/30/21
Statement Period:	09/01/21 - 09/30/21
Page Number:	2 of 2

00000322 0010845 0002-0002


NAME Seven Flags Regional Advisory Council
ACCOUNT NO. Holding Account
0006
DATE 8/25/2021
PAY TO THE ORDER OF HealthWebCE $ 7,410.00
Seven thousand four hundred & ten DOLLARS
Commerce Bank
FOR FY21 LPE Education for regional EOIS
⑆114909030⑆ 2210910188

0006 $7,410.00 09/29/2021


NAME Seven Flags Regional Advisory Council
ACCOUNT NO. Holding Account
0007
DATE 8/31/2021
PAY TO THE ORDER OF John R. Keiser $ 4,601.97
Four thousand six hundred & one 97/100 DOLLARS
Commerce Bank
FOR Reimbursement for credit card purchase for the RAC (91165)
⑆114909030⑆ 2210910188

0007 $4,601.97 09/14/2021

FISCAL YEAR 21 OPERATING BUDGET SEPT. 1, 2020 THRU AUGUST 31, 2021: CASH FLOW CLOSE-OUT REPORT (Part II)

FY21 SFRAC GENERAL FUND MEMBERSHIP REVENUE SUMMARY

General Fund Projected Membership Revenue for FY21	$14,250.00
Actual Membership Funds Collected to Date	$16,850.00
Total (+/-)	$2,600.00

FY21 GRANT PROGRAM FUNDS

EMS County Assistance Grant (Regular)	$66,492.00
EMS County Assistance Grant ("Alignement" Funding)	$66,492.00
Senate Bill 500 Funding	$27,811.00
System Development (i.e., Tobacco)	$43,652.00
Local Planning Grant (LPG)	$12,021.00
EMS RAC Grant (Regular)	$32,085.00
EMS RAC Grant ("Alignment" Funding)	$32,085.00
Total	$280,638.00

General Fund Expenditure

	Projected Cost	Actual Cost Paid	Difference
Post Office Fee	$106.00	$106.00	$0.00
VFIS Insurance	$1,431.00	$1,425.00	$6.00
TETAF Dues	$900.00	$900.00	$0.00
Administrative Fee to STDC (4th Qtr.)	$2,915.00	$2,915.00	$0.00
CPA IRS Filing/Income Statement	$600.00	$600.00	$0.00
GETAC Travel (May 2021, Austin, Tx.)	$1,500.00	$0.00	$1,500.00
GETAC Travel (August 2021 Austin, Tx., Required)	$1,500.00	$0.00	$1,500.00
TETAF Annual Workshop/Confernce	$0.00	$0.00	$0.00
GoDaddy Web Site Renewal	$354.00	$354.00	$0.00
Other (Laredo Morning Times)	$194.00	$194.00	$0.00
Pixl Labs (Re: PSA)	$610.00	$1,500.00	-$890.00
Print X Press	$25.00	$25.00	$0.00
Subtotal	$10,135.00	$8,019.00	$2,116.00

Total Under (-)/Over Budget: -$2,116.00

EMS County Assistance Grant (Regular Issuance)

	Projected Cost	Actual Cost Paid	Difference
Bronze Starr Ambulance	$7,693.00	$7,693.00	$0.00
Laredo Fire Department EMS/Fire	$7,693.00	$7,693.00	$0.00
Angel Care Ambulance	$7,693.00	$7,693.00	$0.00
South Texas Ambulance Response	$7,693.00	$7,693.00	$0.00
Webb County Volunteer Fire/EMS	$7,693.00	$7,693.00	$0.00
Victorious Care Ambulance	$7,693.00	$7,693.00	$0.00
Prestige EMS	$7,693.00	$7,693.00	$0.00
Zapata County Fire/EMS	$12,641.00	$12,641.00	$0.00
Subtotal	$66,492.00	$66,492.00	$0.00

EMS County Assistance Grant ("Alignment" Funding)

	Projected Cost	Actual Cost Paid	Difference
Bronze Starr Ambulance	$6,731.00	$6,731.00	$0.00
Laredo Fire Department EMS/Fire	$6,731.00	$6,730.00	$0.00
Angel Care Ambulance	$6,731.00	$6,731.00	$0.00
South Texas Ambulance Response	$6,731.00	$6,731.00	$0.00
Webb County Volunteer Fire/EMS	$6,731.00	$6,731.00	$0.00
Victorious Care Ambulance	$6,731.00	$6,731.00	$0.00
Prestige EMS	$6,731.00	$6,731.00	$0.00
Zapata County Fire/EMS	$12,645.00	$12,645.00	$0.00
Laredo Lifeline	$6,731.00	$6,731.00	$0.00
Texas Superior	$0.00	$0.00	$0.00
Subtotal	$66,493.00	$66,492.00	$0.00

System Development Grant (i.e., Tobacco)

	Projected Cost	Actual Cost Out	Difference
Bronze Starr Ambulance	$3,968.50	$3,968.50	$0.00
Laredo Fire Department EMS/Fire	$3,968.24	$3,968.24	$0.00
Angel Care Ambulance	$3,968.32	$3,357.76	$610.56
South Texas Ambulance Response	$3,968.32	$3,968.32	$0.00
Webb County Volunteer Fire/EMS	$3,968.32	$3,968.32	$0.00
Victorious Care Ambulance	$3,968.50	$3,357.94	$610.56
Prestige EMS	$3,968.32	$3,968.32	$0.00
Laredo Lifeline	$3,968.32	$3,968.32	$0.00
Capital Care EMS	$0.00	$0.00	$0.00
Texas Superior Ambulance	$0.00	$0.00	$0.00
Zapata County Fire/EMS	$3,968.33	$3,968.33	$0.00
Laredo Medical Center	$3,968.33	$3,968.33	$0.00
Doctors Hospital of Laredo	$3,968.50	$3,968.50	$0.00
Subtotal	$43,652.00	$42,430.88	$1,221.12

Other

	Projected Cost	Actual Cost	Difference
			$0.00
			$0.00
			$0.00
Subtotal			$0.00

EMS RAC Grant (Regular Issuance)

	Projected Cost	Actual Cost Paid	Difference
Administrative Fee (1st Qtr.)	$8,021.25	$8,021.25	$0.00
Administrative Fee (2nd Qtr.)	$8,021.25	$8,021.25	$0.00
Administrative Fee (3rd Qtr.)	$8,021.25	$8,021.25	$0.00
Adminstrative Fee (4th Qtr.)	$8,021.25	$8,021.25	$0.00
			$0.00
			$0.00
Subtotal	$32,085.00	$32,085.00	$0.00

EMS RAC Grant ("Alignment" Funding)

	Projected Cost	Actual Cost Paid	Difference/Balance
Regional Project: Contract of Consultant Services for Revision/Update of SFRAC Trauma Plan	$31,455.00	$31,455.00	$0.00
Total State Allocation	$32,085.00	$31,455.00	$630.00
Phase I Payment	$9,437.00	$9,437.00	$0.00
Phase II Payment	$9,437.00	$9,437.00	$0.00
Phase III Payment	$7,864.00	$7,864.00	$0.00
Phase IV Payment	$4,717.00	$4,717.00	$0.00
Subtotal			$630.00

FY20-21 Senate Bill 500 Funding (Total Allocation: $27,811)

	Projected Cost	Actual Cost	Difference
Total Funds Awarded	$27,811.00	$27,624.44	$186.56
Precision Dynamics Corp (State Project/Wrist Bands)	$7,259.44	$7,259.44	$0.00
National Safety Council (CEVO/Regional Project)	$7,975.00	$7,975.00	$0.00
Trauma Care After Resuscitation (TCAR/Regional Project)	$12,390.00	$12,390.00	$0.00
			$0.00
Subtotal			$186.56

FY21 Local Planning Grant (LPG) (Total Allocation $12,021)

	Projected Cost	Actual Cost	Difference
Continuing Education	$7,410.00	$7,410.00	$0.00
31-Patient Care Broselow Bag	$3,874.69	$3,874.69	$0.00
31 Patient Care Broselow Pedia Tape	$607.29	$607.29	$0.00
Shipping	$119.99	$119.99	$0.00
Subtotal		$12,011.97	$0.00
Total Project Allocation	$12,021.00	$12,011.97	$9.03

FY22 OPERATING BUDGET SEPTEMBER 2021 REPORT

FY22 SFRAC GENERAL FUND MEMBERSHIP REVENUE SUMMARY

General Fund Projected Membership Revenue for FY21	$16,650.00
Actual Membership Funds Collected to Date	$0.00
Total (+/-)	($16,650.00)

FY22 GRANT PROGRAM FUNDS

EMS County Assistance Grant (Regular)	$72,634.00
EMS County Assistance Grant ("Alignement" Funding)	$0.00
Senate Bill 500 Funding	$0.00
System Development (i.e., Tobacco)	$37,736.00
Local Planning Grant (LPG)	$0.00
EMS RAC Grant (Regular)	$33,790.00
EMS RAC Grant ("Alignment" Funding)	$0.00
Total	$144,160.00

FY22 General Fund Expenditure

	Projected Cost	Actual Cost (Paid)	Difference
Post Office Fee	$106.00		$106.00
VFIS Insurance	$1,500.00		$1,500.00
TETAF Dues	$900.00		$900.00
Administrative Fee to STDC (4th Qtr.)	$1,210.00		$1,210.00
CPA IRS Filing/Income Statement	$750.00		$750.00
GETAC Travel (February 2022, Austin, Tx., Required)	$2,000.00		$2,000.00
GETAC Travel (August 2021 Austin, Tx., Required)	$2,000.00		$2,000.00
TETAF Annual Workshop/Confernce	$0.00		$0.00
GoDaddy Web Site Renewal	$400.00		$400.00
Other	$0.00		$0.00
Subtotal	$8,866.00	$0.00	$8,866.00
Total Under/Over Budget:			-$8,866.00

FY22 EMS County Assistance Grant (Regular Issuance)

	Projected Cost	Actual Cost Paid	Difference
Bronze Starr Ambulance	$5,882.50		$5,882.50
Laredo Fire Department EMS/Fire	$5,882.50		$5,882.50
Angel Care Ambulance	$5,882.50		$5,882.50
South Texas Ambulance Response	$5,882.50		$5,882.50
Webb County Volunteer Fire/EMS	$5,882.50		$5,882.50
Victorious Care Ambulance	$5,882.50		$5,882.50
Prestige EMS	$5,882.50		$5,882.50
Zapata County Fire/EMS	$13,809.00		$13,809.00
Genisis Emergency Care	$5,882.50		$5,882.50
Texas Superior	$5,882.50		$5,882.50
Medpoint Ambulance	$5,882.50		$5,882.50
Subtotal	$72,634.00	$0.00	$72,634.00

FY22 EMS County Assistance Grant ("Alignment" Funding)

	Projected Cost	Actual Cost Paid	Difference
N/A	$0.00	$0.00	$0.00
Subtotal	$0.00	$0.00	$0.00

FY22 System Development Grant (i.e., Tobacco)

	Projected Cost	Actual Cost	Difference
Bronze Starr Ambulance	$2,515.73		
Laredo Fire Department EMS/Fire	$2,515.74		
Angel Care Ambulance	$2,515.73		
South Texas Ambulance Response	$2,515.73		
Webb County Volunteer Fire/EMS	$2,515.73		
Victorious Care Ambulance	$2,515.73		
Prestige EMS	$2,515.73		
Laredo Lifeline	$2,515.73		
Genesis Emergency Services	$2,515.73		
Texas Superior Ambulance	$2,515.73		
Zapata County Fire/EMS	$2,515.73		
Laredo Medical Center	$2,515.75		
Doctors Hospital of Laredo	$2,515.75		
Medpoint Ambulance	$2,515.73		
Skyline EMS	$2,515.73		
Subtotal	$37,736.00		$0.00

Other

	Projected Cost	Actual Cost	Difference
			$0.00
			$0.00
			$0.00
Subtotal			$0.00

FY22 EMS RAC Grant (Regular Issuance)

	Projected Cost	Actual Cost Paid	Difference
Administrative Fee (1st Qtr.)	$8,447.50	$0.00	$8,447.50
Administrative Fee (2nd Qtr.)	$8,447.50	$0.00	$8,447.50
Administrative Fee (3rd Qtr.)	$8,447.50	$0.00	$8,447.50
Adminstrative Fee (4th Qtr.)	$8,447.50	$0.00	$8,447.50
			$0.00
			$0.00
Subtotal	$33,790.00	$0.00	$33,790.00

EMS RAC Grant ("Alignment" Funding)

	Projected Cost	Actual Cost Paid	Difference
N/A	$0.00	$0.00	$0.00
			$0.00
			$0.00
			$0.00
			$0.00
Subtotal	$0.00	$0.00	$0.00

Senate Bill 500 Funding

	Projected Cost	Actual Cost	Difference
N/A	$0.00	$0.00	$0.00
Subtotal			$0.00

Local Planning Grant (LPG)

	Projected Cost	Actual Cost	Difference
To Be Determined	$0.00	$0.00	$0.00
			$0.00
			$0.00
Subtotal			$0.00

ITEM 22- 05 (TAB 3)

EMS/RAC EXPENDITURES (5/1/2020 - 6/31/2021)

Total FY21 EMS/RAC Expenditures	$	32,000.00
Program Costs	$	-
Administrative Costs	$	32,000.00
TOTAL of ADMINISTRATIVE and PROGRAM COSTS	$	32,000.00
Program Income	$	-

In Support of Reimbursement Requests for — RAC NAME: Seven Flags Regional Advisory Council

In Support of Reimbursement Requests for — RAC NAME: Seven Flags Regional Advisory Council

In Support of Reimbursement Requests for — RAC NAME: Seven Flags Regional Advisory Council

In Support of Reimbursement Requests for — RAC NAME: Seven Flags Regional Advisory Council

In Support of Reimbursement Requests for — RAC NAME: Seven Flags Regional Advisory Council

Enter RAC Name

Enter funds Program funds generated

FY21 Contract Activities

		1st Quarter					2nd Quarter				3rd Quarter				4th Quarter				5th Quarter				
		May 2020	June 2020	July 2020	August 2020	1st Quarter Totals	September 2020	October 2020	November 2020	2nd Quarter Totals	December 2020	January 2021	February 2021	3rd Quarter Totals	March 2021	April 2021	May 2021	4th Quarter Totals	June 2021	July 2021	August 2021	5th Quarter Totals	Total Expenditures
PERSONNEL	1st employee	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
	2nd	$ -	$ -	$ -	$ -		$ -	$ -	$ -		$ -	$ -	$ -		$ -	$ -	$ -		$ -	$ -	$ -		
FRINGE BENEFITS	Fringe Benefits	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
		0.00	0.00	0.00	0.00		0.00	0.00	0.00		0.00	0.00	0.00		0.00	0.00	0.00		0.00	0.00	0.00		
TRAVEL	1st each individual expense	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
	2nd Travel	0.00	0.00	0.00	0.00		0.00	0.00	0.00		0.00	0.00	0.00		0.00	0.00	0.00		0.00	0.00	0.00		
Report TOTAL costs for each Conference attended on a single line.	3rd																						
EQUIPMENT	1st each individual equipment	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
	2nd	0.00	0.00	0.00			0.00	0.00	0.00		0.00	0.00	0.00		0.00	0.00	0.00		0.00	0.00	0.00		
SUPPLIES	1st each individual expense	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
	2nd	0.00	0.00	0.00	0.00		0.00	0.00	0.00		0.00	0.00	0.00		0.00	0.00	0.00		0.00	0.00	0.00		
CONTRACTUAL	1st each individual expense	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ 10,042.00	$ 10,042.00	$ -	$ -	$ -	$ -	$ 6,691.36	$ -	$ 6,691.36	$ 10,042.00	$ 32,000.00
	2nd Contractual, optional, behavioral, 911, CE, and TOTAL	0.00	0.00	0.00	0.00		0.00	0.00	0.00		0.00	0.00	10,042.00		0.00	0.00	0.00		6691.36		6691.36		
OTHER	1st each individual expense	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
	2nd	0.00	0.00	0.00	0.00		0.00	0.00	0.00		0.00	0.00	0.00		0.00	0.00	0.00		0.00	0.00	0.00		
INDIRECT COSTS	List costs by individual. If applicable and report at Non-Personnel indirect costs as one line item.	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
		0.00	0.00	0.00	0.00		0.00	0.00	0.00		0.00	0.00	0.00		0.00	0.00	0.00		0.00	0.00	0.00		
	20 Non-Personnel Indirect Costs																						
TOTAL COSTS		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ 10,042.00	$ 10,042.00	$ -	$ -	$ -	$ -	$ 6,691.36	$ -	$ 6,691.36	$ 10,042.00	$ 32,000.00
																							$ 32,000.00

MONTHLY BREAKDOWN OF PROGRAM & ADMINISTRATIVE COSTS

	May 2019	June 2019	July 2019	August 2019	1st Quarter Totals	September 2019	October 2019	November 2019	2nd Quarter Totals	December 2019	January 2020	February 2020	3rd Quarter Totals	March 2020	April 2020	May 2020	4th Quarter Totals	June 2020	July 2020	August 2020	5th Quarter Totals	Total Expenditures
Program Costs																						
PERSONNEL	$ -	$ -	$ -	$ -	$ -	$ -	$ -		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -				$ -	$ -
FRINGE BENEFITS	$ -	$ -	$ -	$ -	$ -	$ -	$ -		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -				$ -	$ -
TRAVEL	$ -	$ -	$ -	$ -	$ -	$ -	$ -		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -				$ -	$ -
EQUIPMENT	$ -	$ -	$ -	$ -	$ -	$ -	$ -		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -				$ -	$ -
SUPPLIES	$ -	$ -	$ -	$ -	$ -	$ -	$ -		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -				$ -	$ -
CONTRACTUAL	$ -	$ -	$ -	$ -	$ -	$ -	$ -		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -				$ -	$ -
OTHER	$ -	$ -	$ -	$ -	$ -	$ -	$ -		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -				$ -	$ -
TOTAL COSTS	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Administrative Costs																						
PERSONNEL	$ -	$ -	$ -	$ -	$ -	$ -	$ -		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -				$ -	$ -
FRINGE BENEFITS	$ -	$ -	$ -	$ -	$ -	$ -	$ -		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -				$ -	$ -
TRAVEL	$ -	$ -	$ -	$ -	$ -	$ -	$ -		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -				$ -	$ -
EQUIPMENT	$ -	$ -	$ -	$ -	$ -	$ -	$ -		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -				$ -	$ -
SUPPLIES	$ -	$ -	$ -	$ -	$ -	$ -	$ -		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -				$ -	$ -
CONTRACTUAL	$ -	$ -	$ -	$ -	$ -	$ -	$ -		$ -	$ -	$ -	$ 10,042.00	$ 10,042.00	$ -	$ -	$ -	$ -	$ 6,691.36		$ 6,691.36	$ 10,042.00	$ 32,000.00
OTHER	$ -	$ -	$ -	$ -	$ -	$ -	$ -		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -				$ -	$ -
INDIRECT	$ -	$ -	$ -	$ -	$ -	$ -	$ -		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -				$ -	$ -
TOTAL COSTS	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ 10,042.00	$ 10,042.00	$ -	$ -	$ -	$ -	$ 6,691.36	$ -	$ 6,691.36	$ 10,042.00	$ 32,000.00
	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ 10,042.00	$ 10,042.00	$ -	$ -	$ -	$ -	$ 6,691.36	$ -	$ 6,691.36	$ 10,042.00	$ 32,000.00

Name & phone number of Person Completing this Form

1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	5th Quarter
John R. Kaiser / 660-723-3000	John R. Kaiser 660-723-3000	John R. Kaiser / 660-723-3000	John R. Kaiser / 660-723-3000	John R. Kaiser / 660-723-3000

EMS/RAC EXPENDITURES (9/1/2020 - 8/31/2021)

In Support of Reimbursement Requests for — RAC NAME: Seven Flags Regional Advisory Council FY2021

In Support of Reimbursement Requests for — RAC NAME: Seven Flags Regional Advisory Council FY2021

In Support of Reimbursement Requests for — RAC NAME: Seven Flags Regional Advisory Council FY2021

In Support of Reimbursement Requests for — RAC NAME: Seven Flags Regional Advisory Council FY2021

Enter RAC Name

Total FY21 EMS/RAC Expenditures	$	31,456.00
Program Costs	$	31,456.00
Administrative Costs	$	-
TOTAL of ADMINISTRATIVE and PROGRAM COSTS	$	31,456.00
Program Income	$	-

Enter Program funds generated.

FY21 Contract Activities

		1st Quarter				2nd Quarter				3rd Quarter				4th Quarter				
		September 2020	October 2020	November 2020	1st Quarter Totals	December 2020	January 2021	February 2021	2nd Quarter Totals	March 2021	April 2021	May 2021	3rd Quarter Totals	June 2021	July 2021	August 2021	4th Quarter Totals	Total Expenditures
PERSONNEL	List employees	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
	Job	$ -	$ -	$ -		$ -	$ -	$ -		$ -	$ -	$ -						
FRINGE BENEFITS	Fringe Benefits	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
		0.00		0.00		0.00	0.00	0.00										
TRAVEL	List each individual expense	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
	Local Travel		0.00	0.00	0.00	0.00	0.00	0.00		0.00	0.00	0.00		0.00	0.00	0.00		
	Job																	
Report TOTAL costs for each Conference attended on a single line.																		
EQUIPMENT	List each individual expense	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
	Job		0.00	0.00	0.00	0.00	0.00	0.00		0.00	0.00	0.00		0.00	0.00	0.00		
SUPPLIES	List each individual expense	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
	Job		0.00	0.00	0.00	0.00	0.00	0.00		0.00	0.00	0.00		0.00	0.00	0.00		
CONTRACTUAL	List each individual expense	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ 9,437.00	$ -	$ 22,019.00	$ 31,456.00	$ 31,456.00
			0.00	0.00	0.00	0.00	0.00	0.00		0.00	0.00	0.00		9437.00		7864.00		
																4717.00		
OTHER	List each individual expense	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
	Job		0.00	0.00	0.00	0.00	0.00	0.00		0.00	0.00	0.00		0.00	0.00	0.00		
INDIRECT COSTS	List costs by individual, if applicable and report all Non-Personnel related costs as one lump sum.	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
	Job		0.00	0.00	0.00	0.00	0.00	0.00		0.00	0.00	0.00		0.00	0.00	0.00		
	All Non-Personnel Indirect Costs																	
TOTAL COSTS		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ 9,437.00	$ -	$ 22,019.00	$ 31,456.00	$ 31,456.00
																		$ 31,456.00

MONTHLY BREAKDOWN OF PROGRAM & ADMINISTRATIVE COSTS

	September 2019	October 2019	November 2019	2nd Quarter Totals	December 2019	January 2020	February 2020	3rd Quarter Totals	March 2020	April 2020	May 2020	4th Quarter Totals	June 2020	July 2020	August 2020	5th Quarter Totals	Total Expenditures
Program Costs																	
PERSONNEL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -				$ -	
FRINGE BENEFITS	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -				$ -	
TRAVEL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -				$ -	
EQUIPMENT	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -				$ -	
SUPPLIES	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -				$ -	
CONTRACTUAL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ 9,437.00		$ 22,019.00	$ 31,456.00	
OTHER	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -				$ -	
TOTAL COSTS	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ 9,437.00	$ -	$ 22,019.00	$ 31,456.00	
Administrative Costs																	
PERSONNEL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	
FRINGE BENEFITS	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	
TRAVEL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	
EQUIPMENT	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	
SUPPLIES	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	
CONTRACTUAL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	
OTHER	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	
INDIRECT	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	
TOTAL COSTS	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	
	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ 9,437.00	$ -	$ 22,019.00	$ 31,456.00	

Name & phone number of Person Completing this Form

John R. Keener / 956-723-3885

John R. Keener / 956-723-3885

John R. Keener / 956-723-3885

John R. Keener / 956-723-3885

EMS/LPG EXPENDITURES (5/1/2020 - 8/31/2020)

In Support of Reimbursement Requests for

RAC NAME: *Seven Flags Regional Advisory Council*

Enter RAC Name

Total FY2021 EMS/LPG Expenditures	$ 12,946.00

FY20 Contract Activities

		1st Quarter				
		May 2020	June 2020	July 2020	August 2020	Total Expenditures
EQUIPMENT	List each individual expense.	$ -	$ -	$ -	$ -	$ -
SUPPLIES	List each individual expense.	$ -	$ -	$ -	$ -	$ -
CONTRACTUAL	List each individual expense.	$ -	$ -	$ -	$ -	$ -
OTHER	List each individual expense.	$ -	$ -	$ -	$ 12,946.00	$ 12,946.00
		0.00	0.00	0.00	0.00	
	CPR Ecards -BLS @ $5.00/ea., ACLS @ $10.00/ea., Heartsaver @20.00	0.00	0.00	0.00	0.00	
	1x Annual Training Site Fee FY21 @1,000/ea.	0.00	0.00	0.00	0.00	
	1x Code Blue III Pediatric Training Manekin w/ OMNI 2	0.00	0.00	0.00	0.00	
	1x HAL 4-lead CPR+D and ECG Skills Trainer Adult Manekin	0.00	0.00	0.00	1096.00	
	ModifiedPhsio (Lifepack) Defibrilation Snaps Accessory	0.00	0.00	0.00	1000.00	
	Frieght & Handling				6495.00	
					3995.00	
					225.00	
					135.00	
TOTAL COSTS		$ -	$ -	$ -	$ 12,946.00	$ 12,946.00
						$ 12,946.00

Name & phone number of Person Completing this Form

John R. Keiser / 956-722-3995

RAC SYSTEMS DEVELOPMENT EXPENDITURES (9/1/2020 - 8/31/2021)

In Support of Reimbursement Requests for — RAC NAME: Seven Flags Regional Advisory Council

In Support of Reimbursement Requests for — RAC NAME: Seven Flags Regional Advisory Council

In Support of Reimbursement Requests for — RAC NAME: Seven Flags Regional Advisory Council

In Support of Reimbursement Requests for — RAC NAME: Seven Flags Regional Advisory Council

Enter RAC Name

Total FY2021 RAC SYSTEMS DEVELOPMENT Expenditures	$	43,052.00
Program Costs	$	43,052.00
Administrative Costs	$	-
TOTAL of ADMINISTRATIVE and PROGRAM COSTS	$	43,052.00
Program Income	$	-

FY21 Contract Activities

		1st Quarter				2nd Quarter				3rd Quarter				4th Quarter				
		September 2020	October 2020	November 2020	1st Quarter	December 2020	January 2021	February 2021	2nd Quarter Totals	March 2021	April 2021	May 2021	3rd Quarter Totals	June 2021	July 2021	August 2021	4th Quarter Totals	Total Expenditures
PERSONNEL	List employees	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
FRINGE BENEFITS	Fringe Benefits	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ -
TRAVEL	List each individual expense	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ -
EQUIPMENT	List each individual expense	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ -
SUPPLIES	List each individual expense	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ -
CONTRACTUAL	List each individual expense	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ -
OTHER	List each individual expense	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ 3,357.76	$ 10,073.29	$ 13,431.05	$ 6,715.52	$ 3,357.77	$ 20,147.00	$ 30,220.05	$ 43,052.00
	Service Line Assistance	0.00	0.00	0.00		0.00	0.00	0.00		0.00	0.00	0.00				3000.50		
	Lenoir Fire Department EMS	0.00	0.00	0.00		0.00	0.00	0.00		0.00	0.00	0.00				3000.24		
	Angel Care Ambulance	0.00	0.00	0.00		0.00	0.00	0.00		0.00	0.00	3357.76				670.50		
	Lenoir - Caldwell Hospital	0.00	0.00	0.00		0.00	0.00	0.00		0.00	0.00	0.00		3357.76		670.50		
	Wilkes County Volunteer Fire Ms	0.00	0.00	0.00		0.00	0.00	0.00		0.00	3357.76	0.00				670.50		
	Caldwell County Fire Departments	0.00	0.00	0.00		0.00	0.00	0.00		0.00	0.00	0.00			3357.77	670.50		
	Lenoir Hospital of Lenoir	0.00	0.00	0.00		0.00	0.00	0.00		0.00	0.00	0.00				3000.50		
	Lenoir Medical Center	0.00	0.00	0.00		0.00	0.00	0.00		0.00	0.00	3357.77				670.50		
	Wilkes Ambulance	0.00	0.00	0.00		0.00	0.00	0.00		0.00	0.00	0.00				3000.50		
	Freedom EMS	0.00	0.00	0.00		0.00	0.00	0.00		0.00	0.00	3357.76				670.50		
	Lenoir Alarm	0.00	0.00	0.00		0.00	0.00	0.00		0.00	0.00	0.00		3357.76		670.50		
	Gulf Coast EMS	0.00	0.00	0.00		0.00	0.00	0.00		0.00	0.00	0.00		0.00	0.00	0.00		
	Lake Norman Ambulance	0.00	0.00	0.00		0.00	0.00	0.00		0.00	0.00	0.00						
INDIRECT COSTS	List costs by individual, if applicable and report all Non-Personnel indirect costs as one lump	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ - 0.00	$ - 0.00	$ - 0.00	$ -	$ -
	All Non-Personnel Indirect Costs																	
TOTAL COSTS		$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ 3,357.76	$ 10,073.29	$ 13,431.05	$ 6,715.52	$ 3,357.77	$ 20,147.00	$ 30,220.05	$ 43,052.00
																		$ 43,052.00

MONTHLY BREAKDOWN OF PROGRAM & ADMINISTRATIVE COSTS

	September 2019	October 2019	November 2019	1st Quarter	December 2019	January 2020	February 2020	2nd Quarter Totals	March 2020	April 2020	May 2020	3rd Quarter Totals	June 2020	July 2020	August 2020	4th Quarter Totals	Total Expenditures
Program Costs																	
PERSONNEL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -				$ -	$ -
FRINGE BENEFITS	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -				$ -	$ -
TRAVEL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -				$ -	$ -
EQUIPMENT	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -				$ -	$ -
SUPPLIES	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -				$ -	$ -
CONTRACTUAL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -				$ -	$ -
OTHER	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ 3,357.76	$ 10,073.29	$ 13,431.05	$ 6,715.52	$ 3,357.77	$ 20,147.00	$ 30,220.05	$ 43,052.00
TOTAL COSTS	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ 3,357.76	$ 10,073.29	$ 13,431.05	$ 6,715.52	$ 3,357.77	$ 20,147.00	$ 30,220.05	$ 43,052.00
Administrative Costs																	
PERSONNEL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
FRINGE BENEFITS	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
TRAVEL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
EQUIPMENT	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
SUPPLIES	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
CONTRACTUAL	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
OTHER	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
INDIRECT	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
TOTAL COSTS	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
										$ 3,357.76	$ 10,073.29	$ 13,431.05	$ 6,715.52	$ 3,357.77	$ 20,147.00	$ 30,220.05	$ 43,052.00

Name & phone number of Person Completing this Form

John R. Kerner / 828-722-3886 | John R. Kerner / 828-722-3886 | John R. Kerner / 828-722-3886 | John R. Kerner / 828-722-3886

ITEM 22-06 (TAB 4)

Seven Flags Regional Advisory Council
Trauma Service Area "T"

BYLAWS

Amended and Approved Effective:
May 30, 2019

SEVEN FLAGS REGIONAL ADVISORY COUNCIL ON TRAUMA, TRAUMA SERVICE AREA T, INC.

ARTICLE I

AUTHORITY

1.01. This Board shall be named the Seven Flags Regional Advisory Council on Trauma. The Board shall be created by the Seven Flags Regional Advisory Council on Trauma, Trauma Area T, Inc., to act in a governance capacity. Formation and governance of this Board shall be in accordance and pursuant to provisions stipulated within the Tobacco Endowment Fund, established by Texas Government Code, 403.106; Health and Safety Code 780.003; and funds appropriated during the 83rd Legislative Session.

ARTICLE II
MISSION, DESIGNATED JURISDICITON AND PURPOSE

Mission

2.01. The Seven Flags Regional Advisory Council (SFRAC) is an organization of local citizens representing health care entities within a specified Trauma Service Area (TSA). The SFRAC is an organization chartered by the Texas Department of State Health Services, Division of Regulatory Services, Office of EMS/Trauma Systems Coordination; to develop, implement, improve monitor and report on regional emergency services and trauma system networks for TSA "T. The Seven Flags Regional Advisory Council shall encourage and support a comprehensive continuum of quality health care to be provided within the Trauma Service Area "T", without regard to race, color, creed, gender, national origin, or ability to pay.

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Designated Jurisdiction

2.03. The following counties have been designated by the State of Texas or approved upon petition to the Seven Flags Regional Advisory Council with subsequent approval by the State of Texas to be included in TSA "T": Jim Hogg, Webb, and Zapata.

Purpose

2.04. This corporation is organized exclusively for charitable and educational purposes within the meaning of section 501(c)(3) of the Internal Revenue Code of 1986, as amended, or corresponding provision hereafter in effect ("The Code"). More specifically, the corporation is organized and shall be operated exclusively to carry out one or more of the following purposes:

(a) Encourage the development of a comprehensive trauma care system based on accepted standards of care,
(b) Solicit participation from all health care entities located within its designated trauma service area,
(c) Encourage trauma service area unity in providing trauma care services, promote improvement of all medical facilities, EMS Services, First Responder Organizations, and Educational Institutions that provide EMS Training, and
(d) Cooperate with all entities, agencies and organizations in the establishment of proficient and effective system of care for injured patients.

ARTICLE III
MEMBERSHIP

Membership Composition and Qualifications/Roles

3.01. Membership qualifications require that the member entity reside in Trauma Service Area (TSA) "T" and be:

(a) Hospital: An individual or individuals designated by a hospital located in TSA T._Hospital members shall not be eligible to receive EMS County Assistance Funds;
(b) EMS Service Provider: An individual or individuals designated by an EMS land or air Service provider located in TSA T;
(c) First Responder Organization: An individual or individuals designated by a First Responder Organization Service located in TSA T;
(d) Education: An individual or individuals designated by an Education Institution involved in trauma service training located in TSA T. Educational entity members shall not be eligible for RAC related funding with the exception of Local Planning Grant (LPG)Funds as appropriated by DSHS either through the RACs as an allocation to the region or directly through competitive grants let by DSHS.
(e) Member At-Large: At-Large Members shall:
(i) Participate in listening and communicating issues, needs, and interests among Directors of the Board in order to identify potential problems and opportunities, to work effectively toward common goals, and develop objectives and action plans for selected projects.
(ii) Provide the Board of Directors with information based on experience, expertise, or special insight as a subject matter expert, if level of knowledge is suitable and applicable to the needs of the Board as deemed appropriate by a majority of the Board. A member At-Large may be exempt from paying membership dues. Additionally, a Member At-Large is not eligible to receive any program funding.
(e) Ex-Officio Member: An ex-officio Board member is a member who does not have membership with an organization but is able to serve on the board. This member serviing as ex-officio is able to do so because of another position the person holds, such as a state employee or representative. Unlike other board members, the ex-officio board member has the

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privilege of partaking in some board activities, but this is not required. The ex-officio member shall not be counted in constituting a quorum and shall not have voting power. The ex-officio member may contribute to the boards business by participating in item discussion and committee activities.

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Special Qualifications for Hospitals

3.02. Membership status for new hospitals shall be provisional for six (6) months.

3.03. Continued membership status for hospitals will be dependent on a commitment to trauma care as demonstrated by trauma facility designation or involvement in the designation process as prescribed in Texas Administrative Code, Title 25, Chapter 157, Rule §157.125 Requirements for Trauma Facility Designation.

Provisional Membership Status for New Members

3.04. If a new entity wishes to become a member of SFRAC, then an application and dues must be submitted with the SFRAC office within ten (10) days of their intent in applying for membership. The Secretary shall present the application for membership to the Board of Directors, which shall, at its next meeting, approve or disapprove such application.

3.05. The Secretary shall then notify the applicant of the action of the Board of Directors. If membership is granted to the entity, then the said entity shall remain with a provisional status until the beginning of the next fiscal year and shall become eligible for funding after one fiscal year of participating as a SFRAC member in good standing. Recognition of an entity will not take effect until their application is on file, dues paid, and application for membership is approved by the Board of Directors.

Dues

3.06. Membership dues for hospitals is $1,950.00 (i.e., $1,500 / membership fee + $450 / hospital ½ share of TETAF annual fee); EMS/HHA Service(s) dues is $750.00; First Responder Organizations dues is $750.00; and educational institutions are exempt from membership dues. Dues will be required to be paid in full upon a new fiscal year for both provisional and current members. Dues are to be made payable to Seven Flags RAC by entity check or money order. No cash or personal checks will be accepted. All dues paid to SFRAC are non-refundable. Dues may be changed for any given projected fiscal year. Change in dues should be for one fiscal year at a time and would require approval by the Board of Directors through a 2/3 vote of the members. Change in dues should be implemented at the beginning of each fiscal year which runs September 1st through August 31st.

Prorated Dues for New Members

3.07. Prorated dues for new member entities will be determined by the amount of months left within the current fiscal year. Prorated dues will not cover subsequent fiscal years.

Member in "Good Standing"

3.08. A member in "Good Standing" is defined as a member that meets all Active Participation and Funding Requirements set forth within these By-Laws.

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Membership Renewal Application

3.09. Membership application is required to be submitted with the SFRAC office on a fiscal year basis. All existing members must submit their application and dues at the beginning of every fiscal year with their primary and three alternate representatives listed. Recognition of a member entity will not take effect until their application is on file and dues are paid with the SFRAC office.

3.10. An existing member in "Good Standing" that does not renew their membership four (4) months after the fiscal year has begun, must wait until the beginning of the following fiscal year to renew their membership.

Late Payment Fee for Membership Renewal

3.11. Payment of membership dues shall be made no later than October 31st of each new fiscal year. After the October 31st due date a late fee of $25 will be added to membership dues for every month that the membership dues are late up to four (4) months after the fiscal -year for all existing members.

Resignation

3.12. A member entity wishing to resign may do so by submitting in writing to the SFRAC Secretary on official letterhead that the entity no longer wishes to participate in the SFRAC and all its committees. A member entity resigning will remain in "Good Standing" if the aforementioned is submitted. Dues paid to SFRAC remain non-refundable in any type of resignation.

Reapplication

3.13. A member entity who resigns in "Good Standing" may reapply for membership. The Secretary shall present all applications for membership to the Board of Directors, which shall at its next regular meeting approve or disapprove such application. The Secretary shall then notify the applicant of the action of the Board of Directors.

Member "Not In Good Standing"

3.14. A Member entity shall be deemed to be **"Not In Good Standing"** if Member representative or alternate misses three (3) consecutive monthly meetings (Board or Committees), or if any of the Active Participation requirements are not met. Member "Not In Good Standing" **will not be considered eligible for fund allocations for the following fiscal year.**

3.15. A member entity who is discontinued funding for disciplinary action levied against a participating hospital, EMS Service, First Responder Organization by the Texas Department of State Health Services may reapply for Membership. The Secretary shall present all applications for membership to the Board of Directors. The Secretary shall then notify the applicant of the action of the Board of Directors.

Removal of Member

3.16. A member of the SFRAC may be removed by a majority vote of the Board of Directors, at any regular or special meeting for participation and compliance violations.

Active Participation

3.17. Active Participation is defined as: Attendance to a minimum of one (1) of the Standing Committee Meetings, and attendance to a minimum of one (1) event.

SFRAC Events

3.18. SFRAC events shall be coordinated by the Permanent Committees of the corporation. Each member entity shall receive at least one month notice [through their representative(s)] via email of their required attendance/participation. A minimum of one event attended by the member entity is required. Each participating entity must complete and submit a SFRAC's entity participation report after the event is concluded.

Types of Events
(a) Trauma Healthcare Related Events
(b) Injury Prevention Related Events
(c) Stroke/STEMI Related Events
(d) NICU/Prenatal Events
(e) Other events as assigned or formed by the board

Compliance Requirements for Members

3.19. Each Hospital, EMS Service, and First Responder Organization which has been designated membership must meet all the following categorical participation requirements with the SFRAC in order to become eligible for state grant funding.

(a) ***State Trauma Registry:*** All participating hospitals and EMS entities must upload to the State Trauma Registry via electronic medium as required by Texas Administrative Code, Title 25, Chapter 103, Injury Prevention and Control, Rule §103.13, "Who Shall Report," and Rule §103.19, "Electronic Reporting". Reporting must be done in accordance with registry submission guidelines. Compliance will be determined after verification is obtained through the State Trauma Registry Office.

(b) ***Licensure Compliance***: All participating hospitals must be licensed general hospital and designated trauma facility or considered in "Active pursuit" of designation by the Texas Department of State Health Services. Verification of licensure compliance will be obtained through the Texas Department of State Health Services. Disciplinary Action levied against a participating hospital by the Texas Department of State Health Services is considered prima facie evidence for the Seven Flags RAC to discontinue funding for the rest of the current fiscal year (Reapplication for membership will be required at the end of the current fiscal year for reconsideration for the following year). This is not limited to letters of reprimand, administrative penalties, probation and/or fines sanctioned by the Texas Department of State Health Services for not maintaining compliance or violation of licensure statutes/rules.

(c) ***Licensure Compliance:*** All participating EMS Services must be licensed EMS Provider by the Texas Department of State Health Services. Verification of licensure compliance will be obtained through the Texas Department of State Health Services. Disciplinary Action levied against a participating EMS Service by the Texas Department of State Health Services is considered prima facie evidence for the Seven Flags RAC to discontinue funding for the rest of the current fiscal year (Reapplication for membership will be required at the end of the current fiscal year for reconsideration for the following year). This is not limited to letters of reprimand, administrative penalties, probation and/or fines sanctioned by the Texas Department of State Health Services for not maintaining licensure compliance or violation of licensure statutes/rules.

(d)

Licensure Compliance: All participating First Responder registered First Responder Organization with the Texas Department of State Health Services. Verification of registration compliance will be obtained through the Texas Department of State Health Services. Disciplinary Action levied against a participating hospital by the Texas Department of State Health Services is considered prima facie evidence for the Seven Flags RAC to discontinue funding for the rest of the current fiscal year (Reapplication for membership will be required at the end of the current fiscal year for reconsideration for the following year). This is not limited to letters of reprimand, administrative penalties, probation and/or fines sanctioned by the Texas Department of State Health Services for not maintaining licensure compliance or violation of licensure statues/rules.

(e) ***Submission of a needs assessment:*** All participating hospitals and EMS entities must submit to the RAC Administrator a needs assessment at the beginning of each fiscal year in the form provided by the SFRAC.

(f) ***Affidavit Acknowledging Utilization of RAC Regional Protocols Regarding Patient Destination and Transport:*** All participating EMS Services must file a copy of the signed affidavit form at the beginning of every fiscal year with the Seven Flags RAC office. All EMS Services are required to comply with the aforementioned in accordance with Texas Administrative Code, Title 25, Chapter 157, Rule §157.130(d)(2)(B) and Rule §157.131(d)(2)(B), "demonstrate utilization of the Regional Advisory Council regional protocols regarding patient destination and transport in all TSA's in which they operate."

(g) ***Attendance:*** All participating Educational Institutions in the Seven Flags RAC (TSA T) may attend all Committee and Board of Directors meetings during a fiscal year. Educational Institutions are not subject to the participation requirements herein. Note: State funds are only available for participating hospitals, EMS Services, and First Responder Organizations in accordance with Texas Administrative Code, Title 25, Chapter 157, Rule §157.130 & §157.131. Participation is extended onto workshops and other committee meetings that are directly related to SFRAC TSA T business (i.e. Finance Committee, Bylaws Committee, Budget Workshops, Technical Assistance Reviews, RAC 101 Overview, Stroke Protocol Committee). Participating hospitals, EMS/HAA services and first responder agencies/organizations are expected to attend each Board and Committee meetings. Should a Board director not be able to attend a Board or Committee meeting in a given month, it is the responsibility of that Board director to ensure compliance by assigning that at least one of the three possible alternates for that Board Director representing a given entity be present for the meeting to duly represent the absent Board director and the respective participating entity/organization. Members who consecutively miss three of any meetings (i.e., Committees or Board) will be considered a Member Not in Good Standing and, therefore, will not be eligible for funding for the following fiscal year.

(h) ***Payment of Membership Dues:*** All members must be current in the payment of their membership dues. Members who remain delinquent in the payment of SFRAC dues by July 31st of any given fiscal year will be considered a Member Not in Good Standing and, therefore, will not be eligible for funding for the following fiscal year. Final payment will be held until such time that the entity is current in any remittance of payment.

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Tardiness

3.20. It is the sole responsibility of the participating Board representative(s) to "sign in" during every meeting. Member representatives arriving thirty (30) minutes after the start time are considered late and will not receive credit for attendance of their Committee and/or a Board of Directors Meeting. Moreover, not signing in will constitute and "absence" on behalf of the participating entity and will not be able to obtain credit for the said meeting.

Note: Funding is directly tied into meeting participation requirements; therefore it is imperative that your organization representative(s) sign the official Board of Directors attendance records at every meeting.

ARTICLE IV
BOARD OF DIRECTORS

4.01. "Board", when used in relation to any power or duty requiring collective action, means "Board of Directors".

4.02. The business and affairs of the Board and all powers vested shall be exercised by or under authority of the Board of Directors, subject to limitation imposed by the Act, the Articles of Incorporation, or these Bylaws. No single entity shall place undue influence on the governance of the Corporation.

Minimum Number of Directors and Board Officers

4.03. The number of Board Officers of this Regional Advisory Council (RAC) shall be at least four (4): Chairperson, Vice Chairperson, Secretary and Treasurer, all of whom must be residents of the State of Texas. The number of Board Directors may be increased or decreased from time to time by amendment of these Bylaws, but no decrease shall be the effect of shortening the term of any incumbent directors.

Board Officers and Directors Appointments

4.04. Board Officers shall be appointed by the Active Members of the SFRAC through nomination. Each Board Director will be entitled to naming three (3) alternate individuals and each will have the authority to cast a vote in the absence of the Principal Director. Each Director position representing a given entity will count as one (1) vote, regardless of the number of alternates. Appointed alternates may cast one (1) vote only for a given Principal Director representing a given entity. Trauma designated facilities will each appoint a Board Director. Each member EMS Provider and First Responder Organization shall also appoint a Board Director. Similarly, Board Officer votes count for the given entity they represent.

Appointment of Directors shall be made by the given agencies/entities/organizations that the Director is representing while serving on the Board. The SFRAC Board shall recognized and approve the slate of members to serve on the Board for each new fiscal year at the first meeting of each fiscal year held in October. Identification of appointed members by given participating agencies/entities/organizations will be done using the SFRAC's "Membership Application and Registration Form"

4.05. Each of these Directors shall be an individual who is an employee or agent of an EMS provider or First Responder Organization and who has been designated by that EMS provider or First Responder Organization as a candidate for Director.

Director Term of Office

4.06. The term in office of each director shall be for one (1) year and may serve consecutive terms or until his or her successor is elected at a regular meeting or a special meeting of the Directors held for that purpose, in which a quorum of the Directors is present.

4.07. Entities with multiple facilities may designate one person to act as Director for all its entities and such person shall have one vote for each facility at meetings of the Directors of the Corporation.

Director Vacancy

4.08. The Board of Directors may declare vacant the office of a Director in any of the following cases: (a) if he/she is adjudged incompetent by an order of the court; (b) if he/she is convicted of a felony; or (c) if within sixty (60) days after notice of election, he/she does not accept the office either in writing or by attending a meeting of the Board of Directors.

4.09. Vacancies in the Board of Directors shall exist in the case of happening of any of these events: (a) the death, resignation, or removal of any Director, or (b) the authorized number of Directors is increased.

4.10. In the event that the office of the Chair becomes vacant, the Vice Chair will succeed the Chair and hold office for the unexpired Chair's term. After completion of the vacant Chair's term, the Board shall elect a Chair. If the office of the Vice-Chair, Secretary, or Treasurer, becomes vacant by reason of death, resignation, removal, or otherwise, the Board shall elect a successor who shall hold office for the unexpired term and until his successor is elected after expiration of the term. Vacancies may be filled by any of the remaining Directors. Each Officer so elected shall hold office until his successor is elected at a regular or special meeting of the Board.

Director Resignation

4.11. Any Director may resign at any time by giving written notice to the Chair or the Secretary of the Board. Any resignation shall take effect at the date of receipt of that notice or any time specified therein, and, unless otherwise specified therein, the acceptance of that resignation shall not be necessary to make it effective.

Director Removal

4.12. Any Director failing to attend 75% of the scheduled Board of Directors meetings within the contract year may be removed from office by vote of a majority of the Board. If a hospital director is removed, the hospital shall be requested to appoint a new director to finish the current term. If an EMS Director is removed, the EMS Provider, which employs that director, shall be requested to appoint a new director to finish the current term.

4.13. Any Director may be removed, either with or without cause, by a majority vote of the Board, at any regular or special meeting, provided however, that the removal shall be without prejudice to the contract rights, if any, of the person removed.

Voting by Alternate

4.14. An Alternate representative may vote on behalf of a Board member. The presence of an Alternate meets attendance requirements.

Board of Directors Compensation

4.15. Board members shall not receive compensation for their services as Officers or Directors of the Board.

ARTICLE V
OFFICERS

5.01 There shall be the following Officers of the Board of Directors elected by the Board of Directors annually on alternating terms and each shall serve until the successor of such officer is elected.

(a) Chairman
(b) Vice-Chairman
(c) Secretary
(d) Treasurer

5.02. An officer who does not comply with assigned responsibilities may be relieved of office by a majority vote of the Board of Directors.

Nominations

5.03. Nominations of Officers to the Board of Directors shall be done during the August Board of Directors meeting of the SFRAC. Individuals may nominate candidates by the following methods: (1) During the aforementioned meeting at the indicated time on the agenda, (2) In writing during the meeting at the indicated time of the agenda (must fill out the SFRAC nomination form), (3) In writing to the SFRAC Secretary via e-mail, fax or U.S. Mail on the SFRAC nomination form. All nominations received adhering to the previously mentioned process will be placed as an agenda item in the August Board of Directors meeting. Candidates accepting the nominations will then be placed on the election ballot for voting in the October Board of Directors meeting.

Deleted: Nomination form shall not exceed five (5) business days. The nomination period will close at the end of the fifth business day. Nominations received after the fifth business "Seven Flags Regional Advisory Council on Trauma, Trauma Service Area T, Inc. Bylaws" day will not be accepted for consideration.

Elections

5.04. Election of new officers will be held in August with the new officers assuming office during the October meeting of the Board of Directors.

(a) To be eligible for an officer position as Vice-Chair, Treasurer or Secretary, the individual must be a SFRAC Board Director affiliated with a member entity that is currently participating and is in good standing with the Seven Flags RAC for one (1) year prior to being nominated. The individual must reside in the State of Texas and has not been found in violation resulting in a felony.
(b) To be eligible as Chairman of the Board an individual must meet the same eligibility criteria as Vice-Chair, Treasurer and Secretary, with the only exception that the individual may not necessarily be a Board Director at the time of nomination. Additionally, the nominated Chairman need not necessarily be a member of or affiliated with a SFRAC member entity.
(c) Candidates may run for only one office at a time.
(d) To facilitate transition of administration, officers will be installed at the next regular Board of Directors meeting following the election with the outgoing officer serving one (1) year as ex-officio officer member.

Officers Term of Office

5.05. The term in office of each Board Officer shall be for two (2) years until his or her successor is nominated and elected by the Board of Directors during a regular meeting or a special meeting of the Board of Directors held for that purpose, in which a quorum of the Board of Directors is present. Officers may be nominated and re-elected for multiple consecutive terms. Election of officers will be rotated each year with one-half of the officer positions replaced. Elections for the Vice-Chairman and Secretary positions will be held in the odd years. Elections for the Chairman and Treasurer will be held in the even years.

Installation of Board Offices

Board of Directors Officers will be installed at the October regular Board of Directors meeting following the election.

Removal and Resignation of Officer

5.06. Any Officer may be removed, either with or without cause, by a majority of the Board of Directors, at any regular or special meeting, provided however, that the removal shall be with prejudice to the contract rights, if any, of the person removed. Any officer may resign at any time by giving written notice to the Board of Directors, the Chairman, or the Secretary of the Corporation. Any resignation shall take effect at the date or receipt of that notice or any time specified therein, and, unless otherwise specified there in, the acceptance of that resignation shall not be necessary to make it effective. Any Board of Directors Officer failing to attend seventy-five percent (75%) of the Board of Directors Meetings in the current fiscal year may be removed from office by vote of a majority of the Board of Directors.

Duties of the Chairman

5.07. The Chairman shall:

(a) Preside at all meetings of the Executive Board, Board of Directors and at any Special Meeting of the Corporation.

(b) Make interim appointments as needed with the approval of the Board of Directors.

(c) Sign all contracts after approval of the Board of Directors. The chairman may assign the SFRAC Administrator to sign program contracts on his behalf with approval from the SFRAC Board.

(d) Call a special or emergency meeting when necessary.

(e) Will act as the registered agent of the corporation and must file with the Texas Secretary of State's Office in a timely fashion.

(f) Sign all legal/non-profit corporation documents for the SFRAC.

(g) Must be placed on the authorized signature card at the financial institution where the Seven Flags RAC conducts their banking affairs. After the completion of the elected term, resignation or removal of the Chairman, he or she must tender over his or her letter of completion of term or resignation and must be sent to the financial institution immediately where the RAC conducts its' business affairs to serve as tangible evidence that he or she is no longer affiliated with the Seven Flags RAC.

(h) Travel as required to meet contractual obligations and/or stakeholder meetings (local, statewide or national) to accurately represent the Seven Flags RAC at the GETAC and TETAF meetings. GETAC meetings considered mandatory are scheduled in February and August during the year and the Chairman may assign a Board Officer or Board Director to attend the DSHS RAC Chair meeting on his/her behalf. During non-mandatory RAC Chair meetings the Chairman may include the SFRAC Administrator, in

addition to a Board Officer or Director, to attend the DSHS RAC Chair meeting on his/her behalf.

Duties of the Vice Chairman

5.08. The Vice-Chairman shall perform the duties of the Chairman and perform such duties as are assigned by the Chairman.

(a) Must be placed on the authorized signature card at the financial institution where the Seven Flags RAC conducts their banking affairs. After the completion of the elected term, resignation or removal of the Chairman, he or she must tender over his or her letter of completion of term or resignation and must be sent to the financial institution immediately where the RAC conducts its' business affairs to serve as tangible evidence that he or she is no longer affiliated with the Seven Flags RAC.
(b) Oversee the revision of the Trauma Systems Plan.
(c) Oversee the revision of the Bylaws of the Corporation.
(d) May require travel to GETAC and DSHS Chair meetings throughout the state as needed or when the SFRAC Chairman is unable to attend, to represent the SFRAC Chairperson at mandatory and non-mandatory meetings.
(e) Shall conduct SFRAC Board meetings in the absence of the Chairperson.

Duties of the Secretary

5.09. The Secretary of the Board of Directors or a person designated by the Secretary shall:

(a) Call the roll.
(b) Determine if a quorum is present at every meeting if needed.
(c) Record the minutes of all proceedings of the Executive Board, Board of Directors Special and/or Emergency meetings.
(d) Handle the correspondence of the organization.
(e) Send a Board of Directors listing to each member.
(f) Present the minutes to each member at the current meeting.
(g) Shall receive all written Alternates by members prior to every meeting.
(h) Must be placed on the authorized signature card at the financial institution where the Seven Flags RAC conducts their banking affairs. After the completion of the elected term, resignation or removal of the Secretary, he/she must tender over his/her letter of completion of term or resignation and must be sent to the financial institution immediately where the SFRAC conducts its' business affairs to serve as tangible evidence that he or she is no longer affiliated with the Seven Flags RAC.

Duties of the Treasurer

5.10. The Treasurer shall:

(a) Prepare and present the financial report(s) for each Board of Directors meeting.

(b) Review receipts and disbursements of all funds.

(c) Assist with tax reporting requirements as prescribed by the United States Internal Revenue Service and the State of Texas Comptroller's Office.

(d) Must be placed on the authorized signature card at the financial institution where the Seven Flags RAC conducts their banking affairs. After the completion of the elected term, resignation or removal of the Treasurer, he/she must tender over his/her letter of completion of term or resignation and must be sent to the financial institution immediately where the SFRAC conducts its' business affairs to serve as tangible evidence that he or she is no longer affiliated with the Seven Flags RAC.

(e) Prepare and submit financial reports as required by all contract(s) with DSHS, as prescribed by the United States Internal Revenue Service regarding quarterly or annual filings with the State of Texas Comptroller's Office, and any other contracted entities with Seven Flags RAC in accordance with deadline dates.

Officer Salaries

5.11. The Officers shall serve without salary in accordance with the Non-Profit Act of the State of Texas.

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ARTICLE VI
MEETINGS

Frequency

6.01. Meetings of the Board of Directors shall take place a minimum of six (6) times a year, preferably on an monthly alternating schedule throughout the year. The date and place of the next meeting will be determined at the end of each meeting.

6.02. Committee Meetings shall take place a minimum of six (6) times a year. Meetings of the Board will be held throughout the year on the 30th day of each of the following months: August, October, January, March, May, and July. If the 30th falls on a weekend, then the meeting would be held on the Friday preceding the weekend.

6.03. Meetings of the Board of Directors and/or Committee(s) shall take place as called upon by the Board of Directors Chairman or designated Administrator representing the Seven Flags Regional Advisory Council for the Trauma Service Area - T.

6.04. The Administrator for the Seven Flags Regional Advisory Council designated to coordinate and call upon its members and officers to convene Committee and/or Board of Director meetings on behalf of the Chairman, Officers and General Membership is the South Texas Development Council (STDC) and it's designated agent representing the agency at the time.

Parliamentary Authority

6.02. Robert's Rules of Order (revised) shall be the guide to parliamentary procedure for all Seven Flags RAC meetings.

Quorum

6.03. A quorum for conducting the business of the Board of Directors and General Membership Meetings shall not be less than one half (1/2) of the Members present.

6.04. In the absence of a quorum, a majority of the Members present may adjourn the meeting. At the discretion of the members present informational items on the agenda may be presented and discussed. However, action items shall not be presented or discussed until the next re-scheduled meeting or the next regular meeting.

6.05. Notice of time and place of a re-scheduled meeting that was adjourned need not be given to absent Members if the re-scheduled meeting will be at the next regular meeting of the Board and the time and place has been previously provided.

Special Meetings

6.06. A Special meeting of the Board of Directors shall be called by the Chairman, or if he/she is absent, is unable too, or refuses to act; a special meeting shall be called by the Vice-Chairman or by any two Officers of the Board.

6.07. Written notice of the time, place, and purpose of special meetings of the Board of Directors, shall be delivered to each Member personally, via mail, e-mail, fax, or by phone at least five (5) days before the meeting. If the address of a Board Member is not shown on the records and is not readily ascertainable, notice shall be addressed to him in the city or place in which meetings of the Board are regularly held. Notice of the time and place of holding an adjourned meeting need not be given to absent Board members, if the time and place are fixed at the meeting adjourned.

Voting by Board of Directors, Chairman and Board Officers

6.08. Each Hospital, EMS Service, and First Responder Organization which has designated membership shall be entitled to one (1) vote at any meeting of the Board of Directors, except the Provisional Members who shall not vote until

completion of their first fiscal year. The Chairman of the Board shall be entitled to cast a vote only in situations where a vote is needed to break a tie in voting among the members.

6.09. Every action or decision made by a majority of the Directors present at any meeting duly held at which a quorum is present is the action of the Board of Directors. Each Director who is present at a meeting will be deemed to have assented to any action taken at such meeting unless his/her dissent to the action is entered in the minutes of the meeting, or unless he/she shall file his/her written dissent thereto with the Secretary of the meeting or shall forward such dissent by registered mail to the Secretary of the Corporation on the next business day after such meeting.

6.10. Any action required or permitted to be taken by the Board of Directors under any provision of the Texas Business Corporation Act may be taken without a meeting, if all members of the Board shall individually or collectively consent in writing to such action. Such written consent or consents shall be filed with the minutes of the proceedings of the Board. Such action by written consent shall have the same force and effect as a unanimous vote of the Board. Any certificate or other document filed under any provision of the Act which relates to action so taken shall state that the action was taken by unanimous written consent of the Board of Directors to so act, and such statement shall be prima facie evidence of such authority.

Action by Consent of Board Without Meeting

6.11. Any action required or permitted to be taken by the Board of Directors under any provision of the Texas Non-Profit Corporation Act may be taken without a meeting, if all members of the Board shall individually or collectively consent in writing to such action. Such written consent or consents shall be filed with the minutes of the proceedings of the Board. Such action by written consent shall have the same force and effect as a unanimous vote of the Board. Any certificate or other document filed under any provision of the Act which relates to action so taken shall state the action was taken by unanimous written consent of the Board to so act, and such statement shall be prima facie evidence of such authority.

Electronic Voting

6.12. Board Members may cast their vote electronically via official e-mail address of the member entity at a given time. Electronic voting may be used when a member is unavailable to attend a meeting where a vote is required. In the event the SFRAC is faced with a time-sensitive action item(s), electronic voting shall remain the preferred method of casting a vote in lieu of a special meeting. In this instance, a majority vote is required in order to take action on any item(s) that may impact or directly affect the business of the SFRAC.

Meetings via Telephone or Other Means of Communication

6.13. Subject to the provisions for notice required by these Bylaws and the Act for notice of meetings, Board members may participate in and hold a meeting by means of conference telephone or other communications equipment, including but not limited to virtual platforms such as Zoom, by which all persons participating in the meeting can hear each other. Participation in the meeting held by conference telephone or other communications equipment shall constitute presence in person at the meeting, except when a person participates in a meeting for the sole purpose of protesting to the transaction of any business on the ground that the meeting is not lawfully called or concerned.

Conduct of Meetings

6.14. At every meeting of the Board, the Chairman of the Board, or in his/her absence, the Vice-Chairman or in his/her absence, the Secretary or in his/her absence, the Treasure or in his/her absence of such designation, a Chairman chosen by majority of the Board Members present shall preside as Chairman. In the case the Secretary shall be absent from any meeting, the Chairman may appoint any person to act as Secretary of the meeting. Similarly, in the case that the Secretary is acting as interim Chair, the interim Chair/Secretary may appoint any person from the Directors to act as interim Secretary of the meeting.

Adjournment

6.15 In the absence of a majority of the Board members that are needed to establish quorum, adjournment of the meeting may be called by the majority of the members present.

Notice of Adjourned Meeting

6.15. Notice of time and place of a re-scheduled meeting that was adjourned need not be given to absent Board Member if the re-scheduled meeting will be at the next regular meeting of the Board and the time and place has been previously provided.

ARTICLE VII

COMMITTEES

7.01. The Board of Directors, by an affirmative vote, may appoint committees, which shall have and may exercise such powers as shall be conferred or authorized by resolution of the Board of Directors.

Standing Committees

(a) Bylaw Committee
(b) Finance Committee
(c) Trauma Systems Plan Committee

7.02. Participation in SFRAC Committees by each entity is required. Committee attendance shall be counted in the assessment of a "member in good standing" as it relates to accumulated absences or attendance to use in reporting under the EMS County Assistance program for those entities assessed as eligible or non-eligible for funding.

7.03. Specific Committees will be called as needed during each fiscal year by the Chairman of the SFRAC. A minimum of one the following committees must be attended by a member entity per fiscal year.

Types of Specific Committees:
(d) Bylaw Committee
(e) Finance Committee
(f) Trauma Systems Plan Committee

Permanent Committees

7.04. The Pre-hospital Committee, Quality Management Committee, Injury Prevention Committee, Education Committee, Perinatal/NICU and Stroke/STEMI Committee are the permanent committees of the SFRAC.

7.05. Committees shall be composed of individuals from the participating member entities.

Committee Appointments

7.05. Appointments to a committee shall be done on a yearly basis and commencing on the fiscal year. The committees are responsible for providing input, guidance, and strategy as it relates to the current issues affecting Trauma Service Area "T". A majority of any such committee may determine its action and fix the time and place of its meeting. Any committee that does not comply with their assigned responsibility shall be subject to the oversight of the Executive Board.

Voting Committee Meeting

7.06. A quorum of at least ½ half of the members of the committees will be present to hold a voting meeting.

Committee Responsibilities

7.07. The Board of Directors by affirmative vote shall have the authority at any time to change the responsibilities and composition, or dissolve any standing committees.

ARTICLE VIII
FISCAL POLICIES

8.01. The SFRAC-T will follow the US Generally Accepted Accounting Standards. At each Board of Directors meeting, the Board will review the financial statements presented. The SFRAC-T will retain the financial reports in the Administrative Agency office, if applicable, or with the Treasurer of the Board.

Expenditure Approval

8.02. Requests for issuance of checks for all account payables shall be initiated by the RAC Administrator and approved (in signature) by two of the four SFRAC Board officers. The RAC Administrator shall make available to the Treasurer all transactions occurring within given months throughout the year. Should a Board Member, SFRAC Member or office personnel incur an unexpected cost, a reimbursement request form must be completed along with invoice and/or receipts attached. The Treasurer will review and approve payment if the amount does not equal or exceed $2000.00, if so the incurred cost will need the approval by the Board. The approval requirement in this section shall not apply to EMS County funding, as EMS County funding remains pass-through in nature.

Authority and Execution of Instruments

8.03. The Board, except as otherwise provided in these Bylaws, may authorize any officer or officers, agent or agents, or the SFRAC administrator to enter into any contract or execute and deliver any instrument in the name of and on behalf of the Corporation, and such authority may be general or confined to specific instances and, unless so authorized, no officer, agent or employee shall have any power or authority to bind the Corporation by any contract or engagement or in pledge its credit or to render it liable pecuniary for any purpose or to any amount, unless authorized by the Board of Directors.

8.04. Unless otherwise specifically determined by the Board, or otherwise required by law, formal contracts of the Corporation, promissory notes, deeds of trust, mortgages and other evidence of indebtedness of the Corporation and other corporate instruments or documents, and certificates shares of stock owned by the Corporation, shall be executed, signed or endorsed by the Chairman or Vice-Chairman, and may have the corporate seal affixed thereto.

Endorsement without Countersignature

8.05. Endorsement for deposit to the credit of the Corporation in any of its duly authorized depositories may be made without countersignature by the Chairman, Vice-Chairman, Treasurer, or by any other officer or agent of the Corporation to whom the Board, by resolution shall have delegated such power, or by hand-stamped impression in the name of the Corporation.

Deposits

8.06. All funds of the Corporation shall be deposited from time to time to the credit of the Corporation with such banks, trust companies, or other depositories as the Board of Directors may select or as may be selected by any officer or officers, agent or agents of the Corporation to whom such power may be delegated by the Board of Directors.

Check Endorsement

8.07. All checks must be signed by at least two (2) of the four (4) Officers of the Board of the Corporation. Each of the four (4) Board Officers shall be designated as signatory of checks for the Corporation. A signatory cannot sign on a check made out under the same name as a signing signatory. Checks equaling or exceeding two thousand dollars shall be signed by the aforementioned and must be approved by the Board of Directors at the earliest convenience unless there is a direct impact that will effect funding or is in the best interest of the Seven Flags RAC to proceed with the issuance of such a check to conclude SFRAC business or meet specific contract requirements/obligations. The same will be allowed if there are extenuating circumstances that will directly affect or impact the Corporation financially by not issuing of a check or payment on behalf of the Seven Flags RAC and would not be feasible to have a formal meeting to obtain such an approval by the Board of Directors. In such cases, the Chairman, Treasurer, or Secretary of the Corporation may give verbal consent to issue out the check(s) after it is determined that by not issuing out the said check(s), it would not be in the best interests of the Seven Flags RAC. This section shall not apply to EMS County Funding distributions as they remain pass through funding for EMS Providers that have meet eligible requirements.

Books of Account

8.08. The Corporation shall keep and maintain adequate and correct accounts of its properties and business transactions, including accounts of its assets, liabilities, receipts, disbursements, gains, losses, capital surplus and shares. Any surplus, including earned surplus, paid in surplus and surplus arising from a reduction of

stated capital, shall be classified according to source and shown in a separate account.

Annual Operating Budget

8.09. The SFRAC Regional Administrator will develop the operating budget for each year and present it to the Board of Directors for approval. The budget will be adopted when approved by the Directors.

8.10. The operating budget shall be composed of the following funding sources: Entity Dues (Hospitals, EMS Services, First Responder Organizations) Public & Private Donations and State Grant Funding (Senate Bill 911, House Bill 1131, House Bill 3588 & Tobacco Endowment Funds)

Budget Allocations

8.11. The operating budget shall have the following designated percentages of funds through grant contracts, dues and donations received by the Seven Flags RAC:

(a) 100% from the "EMS RAC Contract" (SB 911, HB 1131, HB 3588) awarded by the Texas Department of State Health Services are to be used for administrative or programmatic purposes.
(b) Up to 20% from the Tobacco Endowment Fund Contract awarded by the Texas Department of State Health Services may be used for administrative purposes. Shall not exceed 20% as per contractual requirements.
(c) No less than 80% from the Tobacco Endowment Fund Contract awarded by the Texas Department of State Health Services are to be used for programmatic purposes.
(d) Entity dues collected may be used for administrative or programmatic purposes as deemed appropriate by the Board for each fiscal year.
(e) Public and private donations received are to be used as determined by the SFREAC Board for administrative and or programmatic purposes unless otherwise restricted/required by donor and/or grantor.

EMS County Assistance, System Development (A.K.A. Tobacco) Program Funding

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8.12. Pursuant to the Texas Administrative Code, Title 25, Part I, Chapter 157, Rule 157.130(c)(2)(A) and 157.131(c)(2)(A), all "EMS County Assistance " contracted funds will remain a 100% pass thru and shall not be subject to any administrative fee(s) unless previously authorized by all the eligible EMS entity(s) in writing and approved by all eligible EMS entity(s) within that specific county. To further clarify, this does not prohibit a single or several eligible EMS entity(s) from voluntarily returning a specific amount and/or percentage of their entity's funds within a fiscal year. If an eligible entity(s) wishes to voluntarily return funds to the RAC for its

operations, then, the entity(s) can do so by completing the SFRAC "Voluntarily Return of Funds Form."

8.13. All eligible EMS entities shall receive an equal share of the total county funds awarded within the "EMS County RAC" contact(s) through the Texas Department of State Health Services. *Example: If county is awarded the sum of $10,000.00 and there are five (5) eligible EMS entities, then, each EMS Service shall receive $2,000.00.* If an entity chooses to relinquish their share of EMS County Assistance Funds, then the total of the funds returned shall be incorporated equally among the remaining entities on the eligible recipient list within the county of which the forfeiting entity officially resides. Entities must meet all participation requirements as provided in 2.23 herein in order to become eligible in receiving the aforementioned funding. Eligible entities shall be notified of their funding status at a regular meeting of the General Membership. All entities receiving funding must complete a SFRAC expenditure report and attach all supporting invoices and/or receipts for their expenditures within the specific contract period as set forth by the Texas Department of State Health Services EMS County RAC contract(s).

Funds may be redistributed to other member providers within the Trauma Service Area under basically three conditions: 1) a provider entity has notified the SFRAC in writing that they wish return the funds initially allocated to them; 2) a provider entity is no longer in service and has notified the SFRAC in writing that they have no use for the funds; and 3) a provider entity fails to meet the reimbursement submittal deadline and other Member in Good Standing provisions prescribed in the SFRAC By-Laws. In such cases, the SFRAC will notify DSHS to develop and submit a redistribution plan to be approved by DSHS. Funds which are redistributed must revert back to eligible EMS entities within an affected county, only. However, if only a single member which represents a given county becomes ineligible to receive EMS County Assistance Funds during a current and active grant cycle, and there are no other member entities within that given county to have the funds in question re-allocated, re-distributed or re-assigned to them, those funds then revert back to the state (i.e., DSHS).

All reimbursement request forms and financial supporting documentation shall be submitted no later than May 31st or no later than 90-days before the end of the contract year as it pertains to the EMS County Assistance Program.

System Development Program Funds are primarily earmarked for Administration, EMS entities and hospitals within the SFRAC. If an entity be it an EMS entity or hospital fails to submit a timely reimbursement form for expenses incurred for purchases made under the respective programs on the deadline being July 31st of the fiscal year, or is by the end of July 31st deemed as a member Not in Good Standing, then the funds from the entity(s) in question is subject to being lost and spent based on how the SFRAC Board decides as a whole. It would be up to the SFRAC Board to designate the spending of the funds for the benefit of all the eligible SFRAC members in good standing. The Board may choose to decide based on the assessments submitted by each entity or may choose to make a

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another choice based on other criteria, provided the expenditure(s) is/are in line with allowed DSHS program purchases and costs guidelines. In such case, the administrator may be appointed to assist in the expenditure of the reallocated funds or may choose another particular entity within the SFRAC to do the same.

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Receipt of Gifts and Contributions

8.14. The Board of Directors may accept on behalf of the Corporation any contribution, gift, bequest or devise for the general purposes or for any specified purpose of the Corporation with no personal gain or profit.

8.15. The Corporation may not indemnify any person who was, is, or is threatened to be named defendant or respondent in a proceeding, whether civil, criminal, administrative, arbitrative, or investigative.

8.16. The Corporation will undergo different types of audits according to the amount of funds received state and federally.

8.17. A check request form must be completed for all account payables and approved by the Administrator and Treasurer. Should a Board Member incur unexpected cost, a reimbursement request form must be completed along with invoice and/or receipts attached. The Treasurer will review and approve payment.

Annual Report

8.18. An annual report will be completed by the SFRAC Administrator for approval from the Board of Directors and then submitted to the Texas Department of State Health Services.

Fiscal Year

8.19. The fiscal year of the Corporation shall coincide with the State of Texas fiscal year commencing on September 1st of every year and ending on August 31st of the following year.

Travel By Board Members

8.20. Travel incurred by SFRAC Board members shall be in accordance with the State of Texas approved rates and shall be accounted for and submitted for reimbursement or advance on forms approved by the SFRAC. Costs associated with air travel shall be an allowable expense whenever travel time and cost to a particular location using ground travel exceed the time and cost and practicality of air travel. Such air travel, however, shall be limited to coach fare. First class travel rates are not considered an allowable expense and not reimbursable.

Travel related costs for lodging and per diem shall conform to rates published in U.S. General Services Administration at gsa.gov. Mileage paid for use of a personal vehicle for out of town trips related to SFRAC business shall not exceed a rate per mile that is approved and deemed by the State of Texas as authorized at the time of travel. Use of a company, county or city vehicle in making out of town trips shall not qualify as a reimbursable mileage expense.

ARTICLE IX
ADMINISTRATOR

9.01. The Regional Administrator will serve as the administrator of the Corporation. The Regional Administrator will be responsible for the management and operation of the organization, including the performance and discharge of powers, duties and functions necessary to carry out the policies of the Executive Board. The Regional Administrator reports to the Chairman and serves at the will of the General Membership. The Regional Administrator will establish management procedures and delegate responsibilities applicable to the office management. He or she is charged with the administration of personnel procedures and will be the final authority concerning personnel consistent with Executive Board policy. The Regional Administrator shall also perform other duties appointed by the General Membership and may be removed by a majority General Membership through an official vote as well as being able to show just cause for such removal. The Regional Administrator shall be compensated for his/her employment duties with the Seven Flags Regional Advisory Council. Salary is to be determined by the Executive Board and approved by the General Membership.

ARTICLE X
CORPORATE RECORDS, REPORTS, AND SEAL

Minutes to Meetings

10.01 The Corporation shall keep at its principal office, or such place as the Board may order, a book of minutes of all meetings of its Board, with the time and place of holding, whether regular or special, and, if special, how authorized, the notice thereof given, and the names of those present.

ARTICLE XI
DISSOLUTION CLAUSE

11.01 Upon the dissolution of the organization, the Directors shall, after paying or making provision for payment of all of the liabilities of the organization, dispose of all of the assets of the organization exclusively for the purposes of the organization in such manner, or to such organization or organizations organized and operated

exclusively for charitable, educational, religious, or scientific purposes as shall at the time qualify as an exempt organization or organizations under Section 501(c)(3) of the Internal Revenue Code of 1954 (or the corresponding provision of any future United States Internal Revenue Law) as the Directors shall determine. Any such assets not so disposed of shall be disposed of by a State District Court of the county in which the principal office of the organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

ARTICLE XII
AMENDMENT OF BYLAWS

Adoption, Amendment, Repeal of Bylaws by the Board of Directors

12.01 Bylaws may be altered, amended, or repealed and new Bylaws may be adopted by the Board of Directors. Annual review of this document is required prior to the start of every fiscal year. Two meetings will be held prior to or during committee meetings prior to Board of Directors meeting to review the Amended Bylaws. Potential amendments will require research by the committee. Once the said research and review is completed, then correction or revisions offered by the Committee will be added to the final draft of the document. The final draft will be distributed to the Board of Directors to review and comments. This document shall be distributed fifteen (15) days prior to the next Board of Directors meeting for approval, either electronically or hard copy. Final approval of precedent amendments, are subject to a majority vote by the Board of Directors at any subsequent regular or special Board meeting.

ARTICLE XIII
AMENDED BYLAWS

13.01 These Bylaws (hereinafter, referred to as the "Bylaws") of the Seven Flags Regional Advisory Council on Trauma (SFRAC), Trauma Service Area T, a non-profit corporation (hereinafter referred to as the ("Corporation"), are adopted effective 16st day of December 2014, to supersede the previous bylaws and amendments of the Corporation by action of the Board of Directors of the Corporation.

Adopted by the General Membership on the 16th day of August, 2006.

Amended by the General Membership on the 9th day of November 2006.

Amended by the General Membership on the 17th day of October, 2007.

Amended by the General Membership on the 22nd day of August, 2012.

Amended by the General Membership on the 21st day of August, 2014.

Amended by the General Membership on the 16th day of December 2014.

Amended by the General Membership on the 18th day of August 2015.

Amended by the General Membership on the 23 day of February 2016.

Amended by the General Membership on the 31st day of March, 2017.

Amended by the General Membership on the 12th day of February 2018.

Amended by the General Membership on the 30th day of May, 2019.

Amended by the General Membership on the 30th day of August 2021.

Seven Flags Regional Advisory Council on Trauma, Trauma Services Area T, Inc.

Attest: _____
Chairman

Attest: _____
Secretary

ITEM 22-07 (TAB 5)

Seven Flags Regional Advisory Council
Trauma Service Area "T"

EMS Membership RAC Application Form FY 2022

(PLEASE PRINT)

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ITEM 22-08 (TAB 6)

Seven Flags Regional Advisory Council

Trauma Service Area-T

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EMS Trauma System Plan

Fiscal Year 2021

INTRODUCTION

The Seven Flags Regional Advisory Council (SFRAC) is an organization of local citizens representing all healthcare entities within Trauma Service Area (TSA) T. The SFRAC is an organization chartered by the Texas Department of State Health Services, Division of Regulatory Services, Office of EMS/Trauma Systems Coordination; to develop, implement, and monitor regional emergency services or Trauma System Plan for TSA-T; and to oversee trauma system network. SFRAC Bylaws are included by reference.

Member Counties

Texas TSA-T consists of three counties, Jim Hogg, Webb, and Zapata. These three counties cover approximately 5,507 square miles, with a population that exceeds 270,000 residents. TSA-T has a geographical composition of urban (Laredo), rural (Zapata), and frontier (Jim Hogg), all presented with unique challenges in the delivery of care to trauma patients. This TSA is located on the United States-Mexico border and renders trauma and general health care to Mexican citizens and patients from hospitals in Nuevo Laredo and Tamaulipas, Mexico.

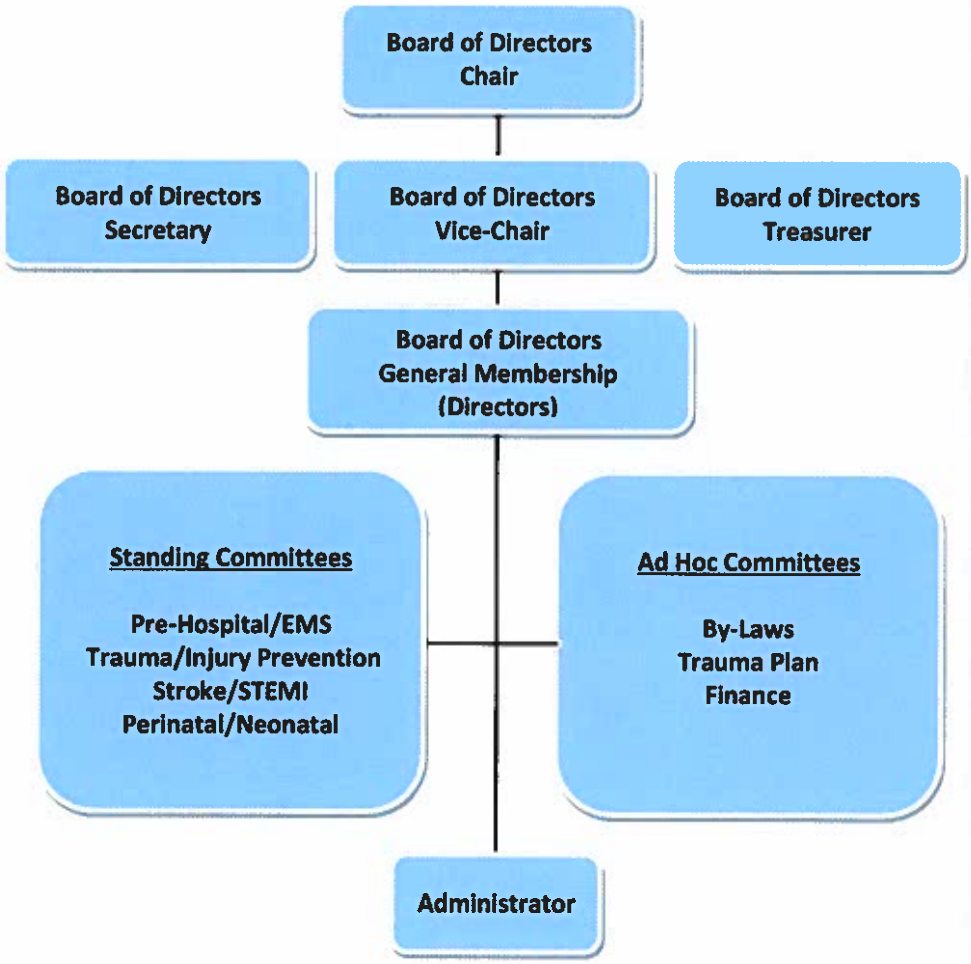
Currently, two hospitals in Laredo provide healthcare/trauma services in this area: Laredo Medical Center and Doctors Hospital of Laredo.

Seven Flags Regional Advisory Council Mission

The primary mission of the SFRAC is to provide the infrastructure and leadership necessary to develop an inclusive trauma system within the tri-county area through the following activities:

- Encourage multi-community participation in providing trauma care, ensuring the most efficient, consistent, and expeditious care for everyone who experiences an acute injury,
- Enhance assessment, triage, and communication between prehospital providers and hospitals to facilitate treatment and transportation of patients to the most appropriate trauma facility,
- Encourage activities designed to promote cooperation between member organizations and provide a forum to resolve conflicts regarding the care of the injured patient,
- Provide and facilitate professional education for trauma care providers in the region,
- Provide and facilitate public education and awareness through trauma prevention activities, and
- Develop a Trauma System Plan and regional standards of care through the cooperative efforts of member organizations.

Seven Flags Regional Advisory Council
Organizational Structure



REVISION DATE HISTORY

Section	Change	Date
Access to the System	Review	December 16, 2014
Communication	Review	December 16, 2014
Medical Oversight	Review	December 16, 2014
Pre-hospital Triage Criteria	Review	December 16, 2014
Diversion Policies	Review	December 16, 2014
Bypass Protocols	Review	December 16, 2014
Regional Medical Control	Review	December 16, 2014
Facility Triage Criteria	Review	December 16, 2014
Inter-hospital Transfers	Review	December 16, 2014
Designation of Trauma Facilities, Planning	Review	December 16, 2014
Performance Improvement	Review	December 16, 2014
Regional Trauma Treatment Protocols	Review	December 16, 2014
Regional Helicopter Activation Protocols	Review	December 16, 2014
Injury Prevention	Review	December 16, 2014
Medical Oversight	Review	December 16, 2015
Access to the System	Review/Revised	March 24, 2015
Communication	Review/Revised	March 24, 2015
Medical Oversight	Review/Revised	March 24, 2015
Pre-hospital Triage Criteria	Review/Revised	March 24, 2015
Diversion Policies	Review/Revised	March 24, 2015
Bypass Protocols	Review/Revised	March 24, 2015
Regional Medical Control	Review/Revised	March 24, 2015
Facility Triage Criteria	Review/Revised	March 24, 2015
Inter-hospital Transfers	Review/Revised	March 24, 2015
Designation of Trauma Facilities, Planning	Review/Revised	March 24, 2015
Performance Improvement	Review/Revised	March 24, 2015
Regional Trauma Treatment Protocols	Review/Revised	March 24, 2015
Regional Helicopter Activation Protocols	Review/Revised	March 24, 2015
Injury Prevention	Review/Revised	March 24, 2015
Medical Oversight	Review/Revised	March 24, 2015
Medical Oversight	Removed	April 21, 2015
Regional Medical Control	Removed	April 21, 2015
Air Medical Activation	Revised	April 21, 2015
Facility Diversion	Revised	April 21, 2015
Facility Diversion	Reviewed/Revised	July 28, 2016
Working Committees	Reviewed/Revised	February 12, 2018
Communication, Prehospital Triage, and Inter-hospital Transfers	Reviewed	April 23, 2019
Comprehensive Edits to all Sections	Revised	August 30, 2021

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I. REGIONAL SYSTEM ACCESS

In SFRAC, the primary emergency communication systems for public access are **Basic** or **Enhanced 9-1-1**. The emergency communication systems were implemented, providing citizens access to emergency communications to municipalities and counties (incorporated and unincorporated areas) in the TSA-I.

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Basic 9-1-1

The primary regional system provides dedicated trunk lines that allow the direct routing of emergency calls administered by the City of Laredo Information Services and Telecommunications Department for South Texas Region 19, comprised of Webb, Zapata, and Jim Hogg counties. The communication system encompasses the cities of: El Cenizo, Escobares, La Grulla, Laredo, Rio Bravo, Rio Grande City, and Roma. Although Automatic Number Identification (ANI) and Automatic Location Identification (ALI) are not provided with the Basic 9-1-1 system, public access incorporates the Enhanced 9-1-1 system. Additionally, all coin-operated telephones and cellular providers offer complimentary 9-1-1 access.

Enhanced 9-1-1

Enhanced 9-1-1 is a system that automatically routes emergency calls to a pre-selected answering point based upon the geographical location from which the call originated. The system operates by a caller dialing the digits 9-1-1. First, the call is routed to the local telephone company Central Office (CO). Then, the telephone number is attached to the voice and sent to the Public Safety Answering Point (PSAP). Next, with ALI and Selective Routing (SR), the call is forwarded to the CO, and the 9-1-1 computer assigns an address to the phone number, then routes the call to the designated PSAP.

ANI is a system capability that enables an automatic display of the ten-digit number of the telephone utilized to place a 9-1-1 call. ALI is a system that enables the intuitive display of the calling party's name, address, and other pertinent information. Alternate Routing (AR) is a selective routing feature that allows 9-1-1 calls to be routed to a designated alternative location if all incoming 9-1-1 lines are busy or the central system (PSAP) closes for some reason. Finally, the SR enables 9-1-1 calls from a defined geographical area to be answered at a pre-designated PSAP.

Selective Routing Capabilities

A. Selective routing capabilities are available for calls received from outside the city limits.

B. Calls from the County of Webb are routed to the Webb County Sheriff's Department, which relays information to 9-1-1 to activate proper response of Fire and/or EMS.

C. Calls from the County of Zapata are routed to the Zapata County Sheriff's Department, which relays information to 9-1-1 to activate proper response of Fire and/or EMS.

D. Due to the interconnecting county lines, SR capabilities are also available for calls outside the city limits. Some calls are answered in Webb or Zapata County and are then redirected to Jim Hogg by administrative lines (i.e., frontier, ranch areas).

E. In cases of system failure or busy lines, the pre-designed PSAP in Corpus Christi will answer, and the 9-1-1 calls will be forwarded to Zapata County Sheriff's Department. Then, they will redirect to Jim Hogg County through administrative lines. Finally, Jim Hogg County PSAP will forward calls to local EMS via party conference by phone, mobile radio, cell phone, or pager.

II. COMMUNICATIONS

Relating to the broad types of EMS and first responder organization agencies in TSA-T: municipal, city, county, basic and advanced equipped, acute care, and transport providers, various communication systems and dispatch methods are employed in SFRAC. Although each agency has established dispatch methods that utilize two-way radios on VHF and 700MHz radio frequency, most providers have cellular telephones used when radios are out of range to contact hospitals for patient reports.

Hospital Communications

The ambulance crews can contact the hospital emergency department (ED) via VHF-band radios. In addition, crews typically use cellular phones to provide patient reports, especially those in the urban area with consistent cell coverage.

Each hospital can post its status using EMResource, a component of EMSystem. This post enables providers and dispatch to see the status of the ED, CT scanner, OR availability, etc. In addition, this same software can support an MCI by sharing patient capacity and collecting patient information to aid in family reunification efforts.

During disasters, the hospitals have redundant communications using HAM radios and satellite telephones in addition to the day-to-day VHF radio system.

Fire Communications

Laredo Fire utilizes a digital 700MHz radio system within the City of Laredo. Webb County uses a combination of VHF analog and digital trunk radio systems. The rest of the fire agencies within the RAC use VHF radios to communicate with each other and dispatch.

EMS Communications

The ambulance crews communicate with dispatch, EDs, air ambulances, and each other via the same VHF frequencies as the fire departments. While EMS providers monitor fire agency radio traffic, they do not typically transmit on fire frequencies. For example, Webb County Volunteer Fire/EMS and current contracted EMS Provider, Angel Care, use Webb County Volunteer Fire Department frequency for dispatch and transmission. Crews also use cellular phones for similar communication needs when feasible.

HEMS Communications

Helicopter EMS (HEMS) providers utilize VHF radios to coordinate with first responders, EMS providers, and dispatch centers. There is a satellite telephone for additional backup.

SFRAC shall aspire to develop a robust infrastructure for communications and disseminating education, injury prevention, and internal discussion items. Both internal and external electronic mailing lists shall be created to achieve this process. In addition, digital archiving shall be employed to maximize difficult to reach stakeholders and to communicate to the TSA-T public community.

SFRAC will continue to improve the region's website to efficiently target stakeholders and community members with resources such as:

- Frequent news and updates to inform the community
- Trauma data and supportive injury prevention efforts

- Performance reports
- Information about SFRAC activities and contact information
- Instructional, resource links, and materials for stakeholders and medical professionals
- Board and Committee meeting information
- Archival documents

SHORT TERM GOAL: Ensure all fire, EMS, and HEMS resources can communicate during an incident for scene safety and coordination during an MCI or significant incident.

LONG TERM GOAL: Advance the operations of the SFRAC website to provide concurrent information to stakeholders.

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III. MEDICAL OVERSIGHT

Medical oversight is defined as the assistance given to the RAC in system planning by a physician or group of physicians designated by the RAC to provide technical assistance. Input from the medical community is critical to the success of the RAC. Ideally, all SFRAC clinical committees should have access to and support of physician representation.

The successful functioning of a Regional Trauma Plan should require the active participation of qualified and engaged physicians representing as many RAC entities as possible. Physician involvement from as many RAC stakeholder organizations as possible should regularly participate in the RAC structure, including physicians and medical directors of EMS agencies and hospitals. Physician representation at the RAC level should be composed of clinically qualified physicians who are competent in treating and managing trauma patients.

The geographical challenges of TSA-T's frontier area and the limited physician resources of SFRAC are acknowledged with regards to a formal RAC-level physician's oversight committee. Although there is no single position of medical oversight for SFRAC, each EMS service and hospital has its own Medical Director who is experienced in emergency medical systems (EMS) and trauma care in both the prehospital and acute care setting. Medical oversight and management of triage, transport, treatment, and transfer guidelines and protocols should be integrated within the RAC system. The Trauma System Plan should foster a collaborative working relationship between all entity medical directors. It is beneficial to establish a cohesive team of medical directors to collaborate and advance the care of trauma patients at the regional level.

SHORT TERM GOAL – Begin earnest discussions to enhance physician oversight and leadership within the SFRAC stakeholder medical directors. Create enrichments to support physician involvement in SFRAC committees to include input via physical and electronic venues.

LONG TERM GOAL- Establish an SFRAC Medical Director Committee that meets quarterly to provide guidance and review prehospital and hospital treatment, treatment protocols, and regional trauma care improvement opportunities. Attend, and sponsor when possible, attendance at clinical conferences to bring back EMS innovation and best practices to SFRAC providers.

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IV. PREHOSPITAL TRIAGE CRITERIA

Time and distance are critical variables to consider when triaging injured patients and making transport decisions to the two designated trauma centers within SFRAC or transporting them to a higher designated facility outside SFRAC. These variables are of unique significance when considering the geographical layout of SFRAC and its large frontier area. Consideration should be given to the impact on the entire regional system when adapting prehospital triage criteria. Thought processes should include using Level III Trauma Centers within SFRAC to stabilize trauma patients in relation to their immediate transport to facilities outside of SFRAC. Patients who sustain major injuries may require care at a Level I or Level II Trauma Center; however, they may receive initial stabilization at one of SFRAC's Level III Trauma Centers, especially if the incident occurs in a rural area. It should be noted that patients with major severe injuries can be secondarily triaged to more distant trauma centers should local resources become inadequate for continued care.

Specific prehospital trauma triage guidelines should, at a minimum, align with the most recent national Trauma Center Field Triage Criteria found in the American College of Surgeons (ACS), Resources for Optimal Care of the Injured Patients, and the Centers for Disease Control (CDC) guidance. Furthermore, the regional prehospital trauma triage criteria should be reviewed regularly by SFRAC and revised accordingly. This review is mandatory if there is a change in trauma center status or a new hospital or trauma center opens within the SFRAC.

It should be remembered that the immediate transportation of trauma patients is a high priority. Therefore, on-scene treatment should be limited only to those techniques used to stabilize life-threatening injuries. In addition, attention should be given to any scene treatment that would prolong the transport of the patient to a designated trauma facility.

Multiple factors are involved in determining the most beneficial method of transportation to a Trauma Center. Considering the geographic area and concurrently available resources of SFRAC, transportation of the trauma patient by the most expedient means may be via helicopter. The following should be considered when determining transport mode:

- Patient is extricated, and land transport time to the nearest trauma center is significant.
- Patient is entrapped, and HEMS can arrive at the scene before extrication, thus reducing transport time.
- Inclement weather.
- Prolonged ground transport would significantly impact the response to additional emergencies by the remaining EMS services.

Further consideration in adopting prehospital trauma triage criteria should include the following:

- Burn patients
- Pediatric patients
- Geriatric patients on anticoagulants
- Obstetric patients

SHORT TERM GOAL – Develop a uniform prehospital trauma triage criterion that can be enacted within the next year and adopted for use by all SFRAC stakeholders.

LONG TERM GOAL – Lower the TSA-T prehospital on-scene time by 5% within the next five years.

V. SATURATION (DIVERSION) POLICIES

The current composition of TSA-T acute care resources, composed of only two hospitals, both located in the same city and designated as Level III Trauma Centers, creates a symbiotic relationship regarding trauma diversion situations. In conditions where one facility elects to divert EMS trauma patients, the other facility is significantly impacted. These conditions dictate that concurrent communication is established between the two Trauma Centers and EMS dispatching.

Diversion of ambulance traffic should occur only by prearrangement. To implement a diversion period or extend the period, the facility should have a person in authority decide (e.g., house supervisor, administrative representative, or emergency physician). This status change should be posted using EMResource (see Reference page) and notify the appropriate communications centers (i.e., 9-1-1 dispatch). If both facilities request simultaneous diversion status, diversion status will end for both. EMS personnel should be notified of facility status via the communications centers.

The consistent use of the EMResource software platform catalogs and annotates hospital and EMS stakeholder concurrent conditions. It affords the ability to produce status reporting for review, transparency, and performance improvement. In addition, facilities can report on the general status of their EDs using the 'Open / Advisory / Advisory-Surge / Closed' status general conditions.

- **Open**: The ED is open and accepting patients with no limitations.
- **Advisory**: Hospital is advising EMS about a resource constraint so that EMS crews can make an informed decision regarding patient destination.
- **Advisory-Surge**: Hospital is advising EMS about a high patient census in the ED that may affect EMS and patient care wait times. Hospitals can still receive EMS patients.
- **Closed**: The ED is suffering from an internal disaster or facility emergency preventing it from accepting patients (e.g., fire, flood, water shortage, loss of power).

Trauma Diversion

The two Trauma Centers should strive for minimal diversion time considering their importance and impact within the TSA-T. Therefore, considerations for diversion status ideally should be limited to:

- Trauma surgical support is not available
- Trauma Surgeon is not available
- Specialty equipment is not available

If trauma diversion exceeds 5%, this is a critical deficiency requiring an immediate corrective action plan.

ED saturation and trauma diversion are two distinct conditions. The immediate surgical intervention for the trauma patient should have minimal bearing on a facility's ED census. The use of the EMResource platform affords this distinction of status.

Facility diversion should be reviewed both at the hospital and SFRAC levels in the spirit of improving the regional trauma system.

SHORT TERM GOAL: Begin scheduled review of facility diversion and EMS availability at the SFRAC level. Maximize the use of EMResource platform for capturing status and diversion hours for SFRAC quality improvement review.

LONG TERM GOAL: Due to the limited SFRAC acute care hospitals, develop a 'No Diversion' policy.

Commented [BB3]: Ms. Ewing asked to clarify PT with records in one system asked if EMS could decide what facility they would go to.

VI. BYPASS PROTOCOLS

Facility bypass protocols should be developed by each of the two Trauma Centers and optimally supported by SFRAC. Field Triage Criteria should also be vetted at the TSA-T level to address conditions or situations that would require either Level III Trauma Center to be bypassed for a higher level of trauma care external to the SFRAC regional trauma operations area. Consideration of ground vs. air transport, weather, and 'out of service' support factors should be considered in the development of bypass protocols.

SHORT TERM GOAL: Establish at the SFRAC level a uniform guideline for bypassing a Level III Trauma Center for higher care external to TSA-T.

LONG TERM GOAL: Revise any established bypass protocols to minimize scene transport out of the TSA-T region and maximize stabilization of high injury severity score (ISS) trauma patients within the SFRAC facilities.

Commented [BB4]: Leti reports xfer by ground to I or II is 2 hour trip; point made that the focus is entire RAC and not just city of Laredo.

VII. REGIONAL MEDICAL CONTROL

Regional Medical Control is a centralized location for receiving online and offline medical orders and developing regional treatment protocols. Per this definition, there is no regional medical control in TSA-T. In addition, having a single centralized medical control in TSA-T is challenging considering the large geographic area and terrain.

Presently, each EMS agency has a separate medical director and standard operating procedures. Each medical director has the legal authority under Texas Administrative Code, Chapter 197, and the Texas Department of State Health Services Chapter 157 for developing the agency's local protocols and guidelines. Additionally, each medical director within the TSA-T assumes the responsibility for trauma oversight and specific performance improvement to investigate patient outcomes for their EMS personnel.

Currently, there is no standardized prehospital report form, and each EMS agency has its own BLS or ALS-specific form. Although regional medical control has yet to be established, prehospital agencies have worked together and integrated their individual medical control guidelines as needed. A regional protocol is not established, but experience is obtained through interagency training set by individual EMS providers. The supervising agency at the scene is established by the determination of the lead agency for geographic location. Exercises involving federal, state, and regional stakeholders should occur regularly.

SHORT TERM GOAL: Establish a medical directors committee at the SFRAC level.

LONG TERM GOAL: Establish regional protocols to set proper expectations for prehospital and ED staff. Exercise training operations that dictate required regional medical control regularly.

VIII. FACILITY TRIAGE CRITERIA

The triage process allows hospitals to prioritize patients based on the patient complaint, history, and physical assessment findings. This process is individualized according to facility designation level and input from medical staff; however, guidance can be found in the ACS – Committee on Trauma document "Resources for Optimal Care of the Injured Patient."

With both Trauma Centers geographically located in the same city and designated as Level III Trauma Centers, each facility's trauma triage criteria should align with industry standards, including the ACS Committee on Trauma recommendations.

When both Trauma Centers have the same designation level, it affords collaboration and unifies both criteria at the regional level. Additionally, the capability of establishing a uniform language or terminology for hospital activation levels can be accomplished at the SFRAC level via the Trauma Committee consensus. The results are then released for all EMS and hospital personnel to implement. Then, prehospital staff can correctly identify trauma level when transporting a trauma patient.

SHORT TERM GOAL: Create a uniform facility trauma triage criteria for the region. A sample protocol is included below.

LONG TERM GOAL: Conduct reviews and needed revisions to facility triage criteria on an annual basis.

Table 3 An Example of a Tiered Trauma Team Activation Protocol

FULL Trauma Team Criteria Persons who sustain injury with any of the following			
PRIMARY SURVEY: PHYSIOLOGIC			
Airway	Unable to adequately ventilate intubated or assisted ventilation	Unable to adequately ventilate intubated or assisted ventilation	
Breathing	Respiratory rate <10 or >29 per minute	Any sign of respiratory insufficiency (hypoxia, accessory muscle use, grunting)	
Circulation	SBP <90 mm Hg perfusion	Any sign of abnormal (capillary refill >2 secs, BP low for age)	
		Age <1 y 1–10 y >10 y	SBP (mm Hg) <60 <70 + 2× age <90
Deficit	GCS motor score ≤5, GCS ≤13	AVPU: responsive to pain or unresponsive	
• Deterioration of previously stable patient • Transfers requiring blood transfusion			
SECONDARY SURVEY: ANATOMIC			
• Penetrating injuries to the head, neck, torso, or extremities proximal to the elbow/knee • Open or depressed skull fracture • Paralysis or suspected spinal cord injury • Flail chest • Unstable pelvic fracture • Amputation proximal to the wrist or ankle • Two or more proximal long bone fractures (humerus or femur) • Crushed, degloved, or mangled extremity			

LIMITED Trauma Team Criteria Persons who sustain injury with any of the following
MECHANISM OF INJURY
• Falls: adult >20 ft; child >10 ft or 3× height • Fall from any height if anticoagulated older adult • High-risk auto crash with: - Intrusion of vehicle >12" in occupant compartment; >18" in other site - Ejection (partial or complete) from automobile - Death in same passenger compartment • Auto vs. pedestrian/cyclist thrown, run over, or with significant (>20 mph) impact • Motorcycle crash >20 mph • High-energy dissipation or rapid decelerating incidents, for example: - Ejection from motorcycle, ATV, animal, and so on - Striking fixed object with momentum - Blast or explosion • High-energy electrical injury • Burns >10% TBSA (second or third degree) and/or inhalation injury • Suspicion of hypothermia, drowning, hanging • Suspected nonaccidental trauma • EMS provider judgment • Blunt abdominal injury with firm or distended abdomen or with seatbelt sign

IX. INTER-HOSPITAL TRANSFERS

Access to timely trauma care is a system focus within TSA-T, including minimizing the time between the onset of injury and definitive care. It is critical to decide to transfer early, and non-essential diagnostic testing and procedures should be avoided when these could delay the transfer. Attention should be focused on life-saving stabilization and rapid transfer when the decision to elevate the patient to a higher designated trauma facility is made. DSHS standards specify that transfers of patients to a higher level of care should occur no later than two hours after arrival at the initial treating facility.

The need for inter-hospital transfers within TSA-T is not applicable as both facilities hold the same trauma designation level. Injured patients should be transferred to a higher level of care when the medical needs of the patients supersede the resources of the initial treating facility. It should be noted that the TSA-T trauma centers should be utilized to stabilize high ISS trauma patients when determining transport from the EMS scene to higher-level trauma centers outside the region.

Timely transfer of trauma patients to a Level I or Level II facility outside of TSA-T may include patients with:

- Neurosurgical support injuries: Open skull fractures and spinal cord injuries.
- Complex Pelvic fracture injuries: open book, unstable pelvis, open pelvis.
- Pediatric high ISS injuries
- Significant burn injuries
- Regionally determined acute injuries

Transferring facilities should send medical records, including radiographic studies, to the receiving facility during the initial management. Electronic/Web-based delivery of records should be considered for efficiency. Care should be taken to reduce exhaustive imagery that could delay the transfer or potentially repeated at the receiving facility due to the failure to include studies with the transferring packet or lesser quality imagery.

Physician-to-physician communication is essential between the initial facility and the receiving referral facility. Early contact with the receiving trauma surgeon can increase the efficiency of the transfer process. Scrutiny of this process for improvement opportunities should be reviewed at the hospital and RAC level.

Although a review of trauma cases exceeding the DSHS transfer standard of two hours is completed at the hospital level, it is recommended that all transfers external to TSA-T be reviewed for potential performance improvement at the SFRAC level on a routine basis. The purpose of the Texas 22 Regional Advisory Council systems is to oversee trauma transfers between RACs.

SHORT TERM GOAL: Using the SFRAC Trauma Committee, develop a documented process to review trauma transfers to facilities outside of the region.

LONG TERM GOAL: Decrease the inter-facility transport average time by 10%. Review all transfers, including non-trauma, leaving the region for performance improvement opportunities.

X. DESIGNATION OF TRAUMA FACILITIES

The Omnibus Rural Health Care Rescue Act of 1989 charged DSHS through the Bureau of Emergency Management to designate trauma facilities in Texas. The law requires the Bureau to designate trauma facilities that are part of the regional trauma care system. Trauma facilities must be established in accordance with standards from the ACS for Level I & II facilities. Level III & IV facilities may be surveyed based on criteria adopted by DSHS.

TSA-T follows the Texas Administrative Code 157.125 'Requirements for Trauma Facility Designation' when recognizing designated Trauma Centers within the region. In addition, this Code includes guidance for facilities' In Active Pursuit.'

Although the SFRAC consists of two Level III facilities, it should encourage the development of additional or higher-level trauma centers as needed. A facility that desires to proceed with 'In Active Pursuit' status shall inform the SFRAC Board of its plan in writing and offer a formal plan presentation, assets, and operational support including clinical and physical plant in an environment enabling question and answer format from SFRAC stakeholders. It is acknowledged that the DSHS process for trauma facility designation requires written support from the RAC.

As mandated by DSHS, Trauma Centers within SFRAC must maintain SFRAC membership in good standing and meet active participation requirements. Therefore, a hospital seeking 'In Active Pursuit' status shall notify SFRAC and DSHS of their intent, qualifications, and timetable.

Trauma Centers that cannot meet DSHS stipulated essential criteria must notify the Office of EMS/Trauma Systems, SFRAC, and impacted EMS agencies. Critical elements that must be reported include:

- Loss of Trauma Medical Director (excluding active interim)
- Loss of Trauma Program Manager (excluding active interim)
- Loss of Trauma Registry (without an interim plan)
- Loss of capabilities to provide Injury Prevention or Outreach Education (without an interim plan)
- Loss of ability to provide acute trauma resuscitation and critical care stabilization

SHORT TERM GOAL: Incorporate DSHS revised RAC 157.122 (TSA rules) criterion, and DSHS revised 157.125 (Trauma Facility rules) criterion into TSA-T plan when adopted and published by DSHS.
DSHS TSA website
DSHS Trauma Facility website

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Field Code Changed

LONG TERM GOAL: Support the establishment of additional trauma centers or level upgrades within TSA-T as requested.

XI. PERFORMANCE IMPROVEMENT

The TSA-T Trauma System Performance Improvement (PI) program aims to reduce morbidity and mortality from trauma by identifying educational needs and opportunities for improvement relating to trauma patient care and system processes. In addition, the program should provide ongoing assessment and improvement activities designed to monitor and evaluate the effectiveness of the regional trauma system through objective and systematic data analysis. Specific focus will be applied to:

- The evaluation of high-risk, high volume, or problem-prone areas related to trauma care via stakeholder request or analysis of regional trauma data.
- Collaborate with other committees and workgroups to provide educational offerings when opportunities for quality improvement are identified through the PI process.

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Authority for the implementation and adherence to the PI process shall rest with the SFRAC Board of Directors. This responsibility includes oversight, participation of stakeholders, conflict of interest issues, confidentiality, equity, and the dissemination of improvement action items.

Although the ultimate responsibility for the TSA-T PI process resides with the Board of Directors, it should be recognized that the appointment of a PI standing committee or workgroup should be established to provide equity and fairness when reviewing and examining specific stakeholder issues. Considering the limited SFRAC stakeholders, trauma centers, and EMS 9-1-1 responder agencies, this process can present a challenge.

Trends in the quality of trauma care and adherence to established metrics can best be reviewed by scrutinizing and analyzing applicable data. It is noted that trauma facility data is reported at scheduled SFRAC Board Meetings and should be engrained into the plan for collation via an aggregated dashboard tool. Optimally, data shall be regularly submitted to SFRAC by stakeholders (both prehospital and hospital) to review trends, develop PI metrics, and aggregate analysis on a defined time plan – like the EMS and Trauma Center submission process to the State of Texas. The development of submission tools to include spreadsheets and registry software should be explored for viability. Cataloging of meeting dates, participants, and issues being reviewed is essential.

All members privy to protected healthcare information (PHI) or non-aggregated data for performance improvement shall have non-disclosure and confidentiality agreements on file with SFRAC. Further, maximum efforts to ensure objectivity shall be enacted by the SFRAC Board of Directors and any committees or workgroups. Documents relating to PI shall be secured by the SFRAC administration and protected from discovery under the Health and Safety Code of Texas Chapter 773 and related statutes.

Data analysis is essential to increasing the quality of care for trauma patients and the regional trauma system. Specific best practice interventions, strategic system goals, and evaluations of trauma care necessitate the submission and review of stakeholder data at the SFRAC level. The PI process shall also be used to drive the SFRAC assessment annual performance reporting to the State of Texas and program budget justifications across SFRAC programs.

SHORT TERM GOAL: Establish a formal process with supporting tools and structure for PI operations.

LONG TERM GOAL: Acquire the ability to receive registry submissions at the SFRAC level.

XII. REGIONAL TRAUMA TREATMENT PROTOCOLS

Texas Administrative Code, Title 25, Part 1, Chapter 157, Subchapter G, Rule §157.123 establishes the legal framework of the Emergency Medical Services (EMS) Trauma System in the State of Texas. The Code includes creating Regional Advisory Councils and their respective authority to develop an EMS/Trauma System plan based on standard guidelines for comprehensive system development, including trauma treatment guidelines.

SFRAC, therefore, adopts the following general trauma treatment protocols with the understanding that changes in best-practice guidelines and ongoing medical treatment advances should be incorporated into the SFRAC treatment protocols as needed. In addition, a protocol review shall be undertaken at the SFRAC Board level on an annual basis at a minimum.

For the trauma patient, as for other critically ill patients, assessment is the foundation on which all management and transportation decisions are based. The trauma patient's survival depends upon rapid recognition/management of life-threatening injuries and rapid transport to an appropriate trauma facility. Scene times should be kept to a minimum with only the necessary interventions to correct immediate life-threatening conditions. All secondary interventions should be performed en route to an appropriate facility or while awaiting Air Medical evacuation.

The first step in trauma assessment is the Scene Assessment/Scene Size-Up. As you approach the scene, assure safety for yourself and the patient while taking BSI precautions. Next, rapidly identify the number/type of patients and request additional resources as appropriate.

- Additional resources (e.g., air medical evacuation, special rescue, ambulances, police, hazmat) should be notified based on dispatch information; and requested to proceed with arrival/landing on scene during scene assessment/scene size-up.
- Recognition of multi-patient and mass-casualty incidents is critical. During these events, priority shifts from focusing all resources on the most injured patient to providing the greatest good to the most patients.

Once a brief scene assessment/scene size-up has been performed, including rapid triage of multiple patients, attention should focus on evaluating individual patients. Individual patients should be assessed/treated based on initial triage priority.

The Primary Assessment begins with a simultaneous, global overview of the patient's respiratory, circulatory, and neurological systems. The goal is to identify obvious, significant problems with oxygenation, circulation, hemorrhage, or gross deformities. Next, a rapid, focused assessment of Airway, Breathing/Ventilation, Circulation/Bleeding, Disability, and Expose/Environment is completed.

- Make immediate interventions to correct life-threatening injuries in the order assessed. For example, progress from BLS (least invasive) to ALS (most invasive), utilizing the most appropriate intervention warranted in a given situation.
- Assess the Patient's Mental Status: If unresponsive, check for a pulse. If no pulse, initiate CPR per local protocol.
- Airway: While simultaneously applying C-spine precautions (if able), the provider should establish/ensure a patent airway by opening (e.g., jaw-thrust), clearing (e.g., suction), assessing, and intervening with the appropriate device.
- Breathing: Ensure adequate oxygenation and ventilation of the lungs utilizing appropriate oxygen-delivery devices. If abnormal ventilation is present, expose the chest and visually assess

for trauma while assessing breath sounds. If an open pneumothorax is present, cover with an occlusive dressing. If a tension pneumothorax is suspected, rapidly decompress the affected side.

- Circulation: Control massive hemorrhage utilizing appropriate hemorrhage control devices. Observe the skin's color, temperature, and moisture while rapidly assessing for pulses' presence/location/quality (e.g., carotid, femoral, and radial) to estimate Blood Pressure and perfusion. IV access and fluid administration are secondary to the initiation of Rapid Transport.
- Disability: Rapidly assess Level of Consciousness, pupils, and motor/sensory responses. If Central Nervous System injury is suspected, utilize appropriate devices to restrict spinal motion. Observe patient for increased ICP and signs/symptoms of impending brain-stem herniation (e.g., unequal pupils, bradycardia, hypertension, irregular respirations).
- Expose/Environment: Rapidly extricate/remove patients from dangerous environments (e.g., fire, water, chemicals, etc.). Remove patient's clothing to assess for injury fully. After evaluating, cover the patient to maintain normothermia.

The Secondary Assessment begins after the recognition/management of life-threatening injuries found in the Primary Assessment and after a transport decision has been made. The objective of the Secondary Assessment is to identify injuries not initially found.

- Reassess/Confirm Airway, Breathing, and Circulation. Make appropriate interventions as necessary.
- Obtain full, detailed vital signs utilizing available equipment.
- Obtain vascular access and administer appropriate fluid boluses to restore/maintain a radial pulse or SBP > 90 mmHg. Do not over-resuscitate trauma patients with IV fluids. Do not attempt to restore baseline vital signs.
- Perform a detailed head-to-toe physical examination.
- Immobilize/Splint suspected fractures and dress secondary wounds. Reassess circulation, motor, and sensory after intervention.
- Obtain SAMPLE history if able (i.e., Symptoms, Allergies, Medications, Past medical history, Last oral intake, Events preceding injury.
- Continuously reassess airway, breathing, circulation, and disability. Document vital signs frequently. Make appropriate interventions as necessary.

Special consideration should be applied to the following patient categories:

- Witnessed cardiac arrest secondary to blunt mechanism of injury
- Burns
- Geriatric
- Bariatric
- Pregnancy
- Pediatrics
- Special Needs population

SFRAC establishes a regional prehospital patient handoff of care report to assist the receiving hospital or entity accepting patient care to maximize efficiency and uphold best practice guidelines and compliance with TDSHS EMS Rule 157.11. The handoff communication standards will include:

- Notification of patient(s) and patient(s) status prior to EMS arrival
- At the time of transfer of patient care, verbal communication will occur, and a paper (or electronic) draft report will be delivered.

- A final paper (or electronic) prehospital report will be available within 24 hours

SHORT TERM GOAL: Conduct a minimum of 2 annual exercises with SFRAC stakeholders and community participants that include scenarios requiring regional trauma treatment protocols and incorporate 'lessons learned' into protocol revisions.

LONG TERM GOAL: Test regional protocols through a tabletop exercise with external SFRAC stakeholders (law enforcement at the local, county, and federal levels).

XIII. REGIONAL HELICOPTER ACTIVATION GUIDELINES

Considering TSA-T's vast frontier landscape, national border proximity, limited trauma centers, and geographically spread-out EMS/first responders, rotor-wing air activation and transport play an impactful role in supporting the regional trauma system.

Representatives from air transport stakeholders should regularly attend all SFRAC Board and Committee meetings to facilitate the customization and dissemination of developed SFRAC air activation guidelines and operations. The unique aspects of air operations within TSA-T dictate that collaborative work by all stakeholders and federal agencies be discussed, developed, and practiced optimizing safety and expedience.

Helicopter services may be utilized for the care and transport of high-acuity trauma patients according to the Texas Trauma Service 'T' guidelines under such circumstances as:

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- Scenes involving severe trauma patients where treatment or transport will be delayed with resulting delay impacting patient outcome.
- When air services can deliver severe trauma patients to a trauma center more rapidly than land transport.
- Scenes that are inaccessible by ground access.

Dispatch and coordination of helicopter services shall be accomplished through the responding helicopter communication system. It is acknowledged that the scene commander or designee should notify the helicopter service of potential responding requests as soon as possible to afford maximum response preparation for the helicopter dispatch and aircrew.

Landing zone safety is critical to helicopter operations, and the following general safety rules should be maintained:

- Approach the aircraft when signaled by the flight crew
- Approach the aircraft only from the front for maximum cockpit view
- Approach the aircraft only by walking
- Do not assist the aircrew in opening or closing the helicopter doors
- Crowds must always be kept to a minimum of 150 feet from the aircraft

Anatomical considerations for air transport should be considered, including:

- Significantly decreased GCS
- Respiratory rate below 10 or above 30
- Crushed, mangled, or de-gloved extremity
- Paralysis
- Open or depressed skull fracture
- Significant burns

SHORT TERM GOAL: Ensure continued participation by SFRAC stakeholders in determining the proper dispatch and transport of patients via air ambulance.

LONG TERM GOAL: Participate in air ambulance organization's performance improvement processes to maximize clear, efficient air activation guidelines.

XIV. DISASTER MANAGEMENT

As reflected in the State of Texas Emergency Management Plan, Annex H (Public Health and Medical), all emergencies are considered a local responsibility. Legal responsibility for providing support for emergencies is placed on the senior elected official within the affected jurisdiction. Local Health Care Coalition (HCC) partners such as hospitals and EMS agencies must work through these officials when local assets cannot meet resource needs alone.

Individual medical facilities and other resources in SFRAC have response obligations to their patients and communities. During emergencies with significant impact, private and public sector entities may require resources beyond their capacities, and these agencies must be incorporated into local emergency response activities. Both sectors must be prepared to share status information, coordinate their response and requests for support with their respective local government jurisdiction, and use the incident command system to integrate and manage their response activity. TSA-T supports this interaction with prehospital, hospital, jurisdiction emergency management, and public health authorities.

The **Hospital Preparedness Program (HPP)** provides leadership and funding through grants and cooperative agreements to improve surge capacity and enhance community and hospital preparedness for public health emergencies. The Office of the Assistant Secretary for Preparedness and Response (ASPR) manages the program, providing grant oversight and working with its partners such as the Coastal Bend Regional Advisory Council (CBRAC) to ensure that the program's goals are met or exceeded. Through a contract and partnership between SFRAC and CBRAC, this funding is used to support programs within SFRAC to help strengthen public health emergency preparedness in several ways. CBRAC's HPP covers three Trauma Service Areas: TSA-U, TSA-V, and TSA-T. TSA-T works in conjunction with the HPP assets of TSA-U to augment needed supplies, organization, and support during disaster magnitude events.

Additionally, TSA-T has the Texas Emergency Medical Task Force (TX EMTF), specifically EMTF-11. The TX EMTF is a series of components capable of activating resources on behalf of Texas on a state mission that provides a custom, scalable approach to medical disaster response. The key to the program is the ability to activate members from EMS and fire departments, public and private healthcare organizations, regional coalitions, and state and local governments who provide personnel and assets that activate during disasters.

The mission of EMTF-11 is to provide a well-coordinated response, offering rapid professional medical assistance to emergency operation systems during large-scale incidents. The critical tasks are accomplished through the utilization of specially trained teams that respond to incidents down to the local SFRAC level when needed, providing assets that include:

- Ambulance Staging Management Team (ASMT)
- Ambulance Strike Team (AST)
- Ambulance Medical Bus (AMBUS)
- Infectious Disease Response Unit (IDRU)
- Medical Incident Support Team (MIST)
- Mobile Medical Unit (MMU)
- Registered Nurse Strike Team (RNST)
- Wildland Fire Medical Support Unit (WFMSU)

The TSA-U HCC works with all member organizations, including TSA-T, to promote emergency preparedness and health care delivery response. Its purpose is to:

- Lead collaborative regional planning, formulate strategies and make recommendations to ensure that the best possible approaches to regional Health Care Coalition (HCC) planning can be achieved.
- Identify and assess regional needs to develop possible options for strengthening the overall resiliency of regional response capabilities based upon federal and state guidance and best practices (e.g., HPP, Centers for Medicare & Medicaid Services, Federal Emergency Management Agency).
- Serve to identify the regional priorities set forth by current federal and state guidelines by utilizing input from Subject Matter Experts to set strategic planning goals and objectives.

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While the current symbiotic relationship between SFRAC and CBRAC is financially sound, TSA-T recognizes the need for a more intentional coordination effort between itself and TSA-U's HCC.

SHORT TERM GOAL: Participate in a minimum of one HPP or EMTF tabletop drill per year.

LONG TERM GOAL: Increase collaboration between the SFRAC organization and local, regional, state, and federal disaster management organizations.

XV. APPENDICES

Resources

A. Texas Department of State Health Services EMS and Trauma Systems

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B. EMResource

C. DSHS TSA Texas Administrative Code 157.122

D. DSHS EMS Trauma Systems Code 157.123

E. DSHS Trauma Facility Code 157.125

F. DSHS Denial, Suspension, and Revocation of Trauma Facility Designation 157.128

G. DSHS Emergency Medical Services 157.1

H. DSHS EMS and Trauma Registries

I. DSHS Regional Advisory Councils

J. DSHS RAC Operation Guidelines

K. DSHS RAC Essential Criteria Guidelines (2009)

L. TSA-T Seven Flags RAC Homepage

M. CDC Guidelines for Field Triage of Injured Patients

N. ACS Interfacility Transfer of Injured Patients Guidelines for Rural Communities

O. ACS Interfacility Transfer Tool Kit for the Pediatric Injured Patient Guidelines for Rural Communities

P. ACS Resources for the Optimal Care of the Injured Patient (2014)

Member List

#	Person	Organization	Title
1	John Keiser	SFRAC	Administrator
2	Letisia Colon	Doctors Hospital of Laredo	Board Director
3	Jose "Joe" Gonzalez	Laredo Medical Center	Board Director
4	Jason Delattre	Air-Evac	Board Director
5	Ricardo Jaime	Angel Care Ambulance Service	Board Officer (Secretary)
6	Hector Medina	BronzeStar Ambulance	Board Director
7	Mike Martinez	Capital Care EMS	Board Director
8	Veronica Malacara	Jenesis Emergency Services	Board Director
9	Rene Castillo	Lalita's Ambulance	Board Director
10	Jesus Munoz	Laredo Hope Ambulance	Board Director
11	Peter Gonzalez	Laredo Lifeline	Board Director
12	Roy Arriaga	Medpoint Ambulance	Board Director
13	Jorge "JD" Delgado	Prestige EMS	Board Officer (Vice-Chairman)
14	Kevin Harris	Skyline EMS	Board Director
15	Juan Canavati	South Texas Amb Response (STAR)	Board Officer (Treasurer)
16	Gilbert Guardiola	Texas Superior Ambulance	Board Director
17	Victor Villarreal	Victoria's Care Ambulance	Board Director
18	Ricardo Rangel	Webb County Volunteer Fire/EMS	Board Director
19	Daniel Arriaga	Zapata County Fire	Board Director
20	Guillermo Heard	Laredo Fire Department	Board Officer (Chairman)
21	Nancy Puig	Laredo Medical Center	Perinatal/NICU Committee, Chair
22	Guadalupe Cisneros	Doctors Hospital of Laredo	Perinatal/NICU Committee, Vice-Chair
23	Jennifer Garcia	Laredo Medical Center	Stroke/STEMI Committee, Chair
24	Angie Alvarez	Doctors Hospital of Laredo	Stroke/STEMI Committee, Vice-Chair
25	Letisia Colon	Doctors Hospital of Laredo	Trauma/Injury Prevention, Chair
26	Joe Gonzalez	Laredo Medical Center	Trauma/Injury Prevention, Vice-Chair
27	Victor Villarreal	Victorious Care Ambulance	EMS/Prehospital Committee, Chair
28	Liz Cuellar	Laredo Medical Center	EMS/Prehospital Committee, Vice-Chair

Commented [BB7]: Update this list with RAC input, and add general membership to include Chair and CoChair of committees; separate out officers and directors from committee members and alternates

Commented [BB8R7]: John- I removed "chief" from lines 18 & 19 as we did not use titles anywhere else, including for Heard.
- I would also recommend we use "chair" instead of "chairman" to be politically correct. Same for vice-chair. Okay?

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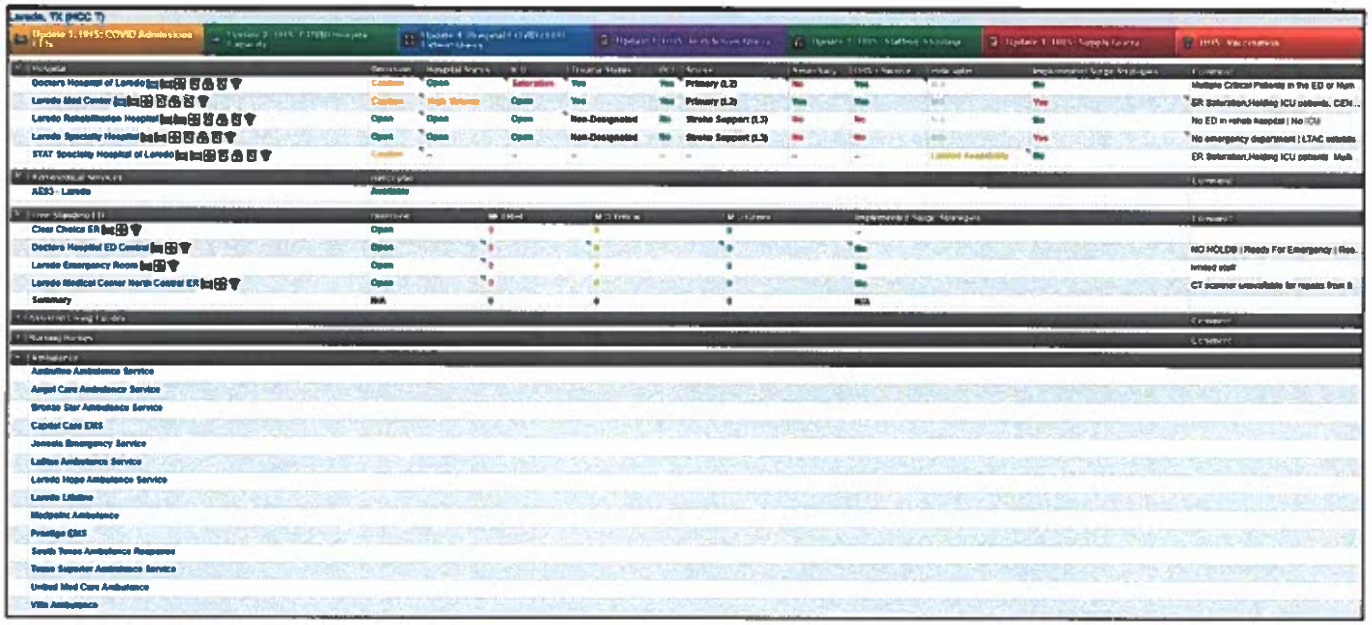
EMResource

A statewide system is used for tracking available hospital beds, hospital and EMS resources, and other emergency response data. The system is beneficial for scene commanders, incident commanders, and EMS personnel to obtain concurrent hospital information regarding patient transportation. EMResource features include emergency department status information, Trauma Center information, patient tracking, hospital bed tracking, and event notifications. EMResource was developed in response to the need for timely EMS and hospital resource information and is a user-friendly application that requires only an internet connection and a computer running a current web browser to operate.

The following is an example screenshot of the TSA-T EMResource page:



Commented [BB9]: Add reference of what these screenshots below are. John reports lack of reference materials in the plan; Build out hyperlinks and resource locations. Use one page each for screenshots and blow up bigger; add explanation for what/where these are.

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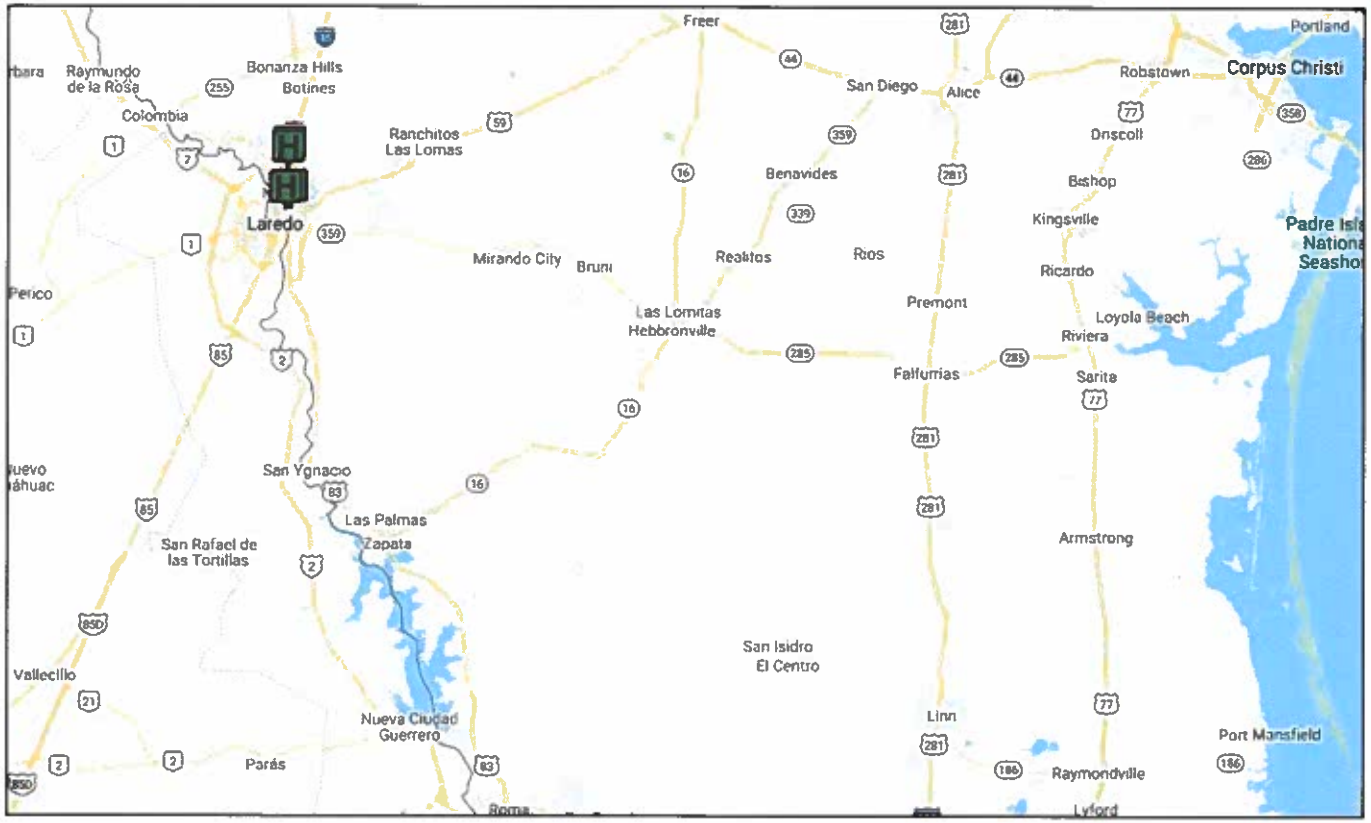
TSA-T Service Area

The following is a visual aid representing the two trauma facilities within TSA-T, their proximity to the international border, and the frontier distance comprising SFRAC. (source: EMSResource)



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ITEM 22-11 (TAB 7)

ITEM 22-11-a. (TAB 7)

FY21 SFRAC Membership Summary for August 2021

TSA	Entity Name	County	Application submitted	EMS Affidavit Submitted	Needs Assessment Submitted	Date Paid/Date Deposited	Check Number	Amount Due/Paid	9/30/20 Board Meeting	10/30/21 Board Meeting	No Board Meeting November 2020	12/30/20 Board Meeting	01/30/21 Board Meeting Rescheduled	Board Meeting February 4, 2021	03/30/21 Board Meeting Rescheduled	Board Meeting April 9, 2021	05/28/21 Board Meeting	No Board Meeting June 2021	07/30/21 Board Meeting	08/30/21 Board Meeting
T	Air Evac Lifeteam (Vested)	Webb	No	No	No			FY21 Membership Fees: $750/Paid: $0.00/Bal. $850	A	P		A		P		P	P		A	A
T	Angel Care Ambulance, LCC (Vested)	Webb	Yes	Yes	Yes	10-1-2020 / 10-24-2020	#11105	FY21 Membership Fees: $750/Paid: $750/Bal. $0.00	P	P		P		P		P	P		P	P
T	Bronze Star Ambulance Service, LLC (Vested)	Webb	Yes	Yes	Yes	11-4-2020 / 11-21-2020	#5330	FY21 Membership Fees: $750/Paid: $750 / Bal. $0.00	P	P		P		P		A	P		P	P
T	City of Laredo Fire Department (Vested)	Webb	Yes	Yes	Yes	6-8-2021 / Pending	#584146	FY21 Membership Fees: $750/Paid: $750.00/Bal. $0.00	P	P		P		P		A	P		P	P
T	Doctors Hospital of Laredo (Vested)	Webb	Yes	Yes	Yes	9-15-2020 / 9-28-2020	#62103086	FY21 Membership Fees: $1,950/Paid: $1,950/Bal. $0.00	P	P		P		P		P	A		P	P
T	Genesis Emergency Services, Inc. (Membership Initiated 10/30/20	Webb	Yes	Yes	Yes	11-18-2020 / 11-21-2020		FY21 Membership Fees $625/Paid: $625 Bal. $0.00	N/A	N/A		P		P		P	P		P	P
T	Lalitas Ambulance Care (Membership Initiated 7/31/2020)	Webb	Yes	Yes	Yes	2-11-2021 / 2-16-2021		FY20 Membership Fee: $750 w/Lae Fees Added = $850 + FY21 Membership Fees: $750/Total Due: $1,600 / Paid: $1,600 / Bal. $0.00	A	A		A		P		P	P		P	P
T	Laredo Lifeline, LLC (Membership Initiated 5/30/2020)	Webb	Yes	Yes	Yes	10-6-2020 / 10-24-2020	#2263	FY21 Membership Fees: $750/Paid: $750 / Bal. $0.00	P	P		P		P		P	P		A	P
T	Texas Superior Ambulance (Membership Initated 2/26/2020)	Webb	Yes	Yes	Yes	10/30/2020 / 10-31-2020	#118	FY21 Membership Fees: $1,537.50/Paid: $1,537.50 /Bal. $0.00	P	A		A		P		P	P		P	A

FY21 SFRAC Membership Summary for August 2021

T	Captial Care EMS (Member Since 10/30/2020	Webb	Yes	Yes	Yes	10-6-2020 / 10-24-2020	#4279	FY21 Membership Fees: $750/Paid: $750 / Bal. $0.00	P	A		A		A		A	A		A	A
T	Laredo Medical Center (Vested)	Webb	Yes	N/A	Yes	4-14-2021 / 4-17-2021	#380799	FY21 Membership Fees: $1,950/Paid: $1.950/Bal. $0.00	P	P		P		P		P	P		P	P
T	Prestige EMS (Vested)	Webb	Yes	Yes	Yes	12-15-2020/ 12-31-2020	#0181	FY21 Membership Fees: $750/Paid: $750 / Bal. $0.00	P	P		P		P		P	P		P	P
T	Medpoint Ambulance, Inc. (Member Since 8/18/2020	Webb	Yes	Yes	Yes	10-30-2020 / 11-21-2020	#2987	FY21 Membership Fees: $750/Paid: $750 / Bal. $0.00	P	P		P		P		P	P		P	P
T	South Texas Ambulance Response, Inc. (Vested)	Webb	Yes	Yes	Yes	12-18-2020/ 12/19/2020		FY21 Membership Fees: $750/Paid: $750.00/Bal. $0.00	P	P		P		P		P	P		P	P
T	Victorious Care Ambulance (Vested)	Webb	Yes	Yes	Yes	9-23-2020 / 9-18-2020	#1429	FY21 Membership Fees: $750/Paid: $750 / Bal. $0.00	A	P		P		A		A	P		P	P
T	Webb County Volunteer Fire/EMS (Vested)	Webb	Yes	Yes	Yes	11-5-2020 / 11-21-2020	#19181	FY21 Membership Fees: $750/Paid: $750 / Bal. $0.00	P	P		P		P		P	P		P	P
T	Skyline EMS, Membership Initiated December 17, 2020)	Jim Hogg	Yes	Yes	Yes	2-2-2021 / 2-16-2021	#6537	FY21 Membership Fees: $500/Paid: $500 / Bal. $0.00	N/A	N/A		P		P		P	P		P	P
T	Zapata County Fire/EMS (Vested)	Zapata	Yes	Yes	Yes	9-15-2020 / 9-28-2020	#302545	FY21 Membership Fees: $750/Paid: $750 / Bal. $0.00	A	P		P		P		P	P		P	P
T	Laredo Hope Ambulance, Initiated Membership February 4, 2021)	Webb	Yes	Yes	Yes	2-11-2021 / 2-16-2021		FY21 Membership Fees: $437.50 / Paid: $437.50 / Bal. $0.00	N/A	N/A		N/A		P		A	A		A	A

FY22 SFRAC Membership Summary for September 2021

TSA	Entity Name	County	Application submitted	EMS Affidavit Submitted	Needs Assessment Submitted	Date Paid/Date Deposited	Check Number	Amount Due/Paid	No Board Meeting September 2021	10/30/21 Board Meeting	No Board Meeting November 2021	No Board Meeting December 2021	01/28/22 Board Meeting	No Board Meeting February 2022	03/30/22 Board Meeting	No Board Meeting April 2022	05/30/22 Board Meeting	No Board Meeting June 2021	07/29/22 Board Meeting	08/30/22 Board Meeting
T	Air Evac Lifeteam (Vested)	Webb	No	No	No	No		FY22 Membership Fees: $750/Paid: $0.00/Bal. $750												
T	Angel Care Ambulance, LCC (Vested)	Webb	No	No	No	No		FY22 Membership Fees: $750/Paid: $0.00 Bal/ $750												
T	Bronze Star Ambulance Service, LLC (Vested)	Webb	No	No	No	No		FY22 Membership Fees: $750/Paid: $0.00 / Bal. $750												
T	City of Laredo Fire Department (Vested)	Webb	No	No	No	No		FY22 Membership Fees: $750/Paid: $0.00/Bal. $750.00												
T	Doctors Hospital of Laredo (Vested)	Webb	Yes	N/A	Yes			FY21 Membership Fees: $1,950/Paid: $1,950/Bal. $0.00												
T	Genesis Emergency Services, Inc. (Membership Initiated 10/30/20	Webb	No	No	No	No		FY22 Membership Fees $750/Paid: $0.00 Bal. $750												
T	Lalitas Ambulance Care (Membership Initiated 7/31/2020)	Webb	No	No	No	No		FY22 Membership Fees: $750 / Paid: $0.00 / Bal. $750												
T	Laredo Lifeline, LLC (Membership Initiated 5/30/2020)	Webb	No	No	No	No		FY22 Membership Fees: $750/Paid: $0.00 / Bal. $750.00												
T	Texas Superior Ambulance (Membership Initiated 2/26/2020)	Webb	No	No	No	No		FY22 Membership Fees: $750 / Paid: $0.00/ Bal. $750												
T	Capital Care EMS (Member Since 10/30/2020	Webb	No	No	No	No		FY22 Membership Fees: $750/Paid: $0.00 / Bal. $750												

FY22 SFRAC Membership Summary for September 2021

T	Laredo Medical Center (Vested)	Webb	Yes	N/A	Yes	10/15/2021/ Depostited: Pending	#385147	FY22 Membership Fees: $1,950/Paid: $1,950.00/Bal. $0.00												
T	Prestige EMS (Vested)	Webb						FY22 Membership Fees: $750/Paid: $0.00 / Bal. $750												
T	Medpoint Ambulance, Inc. (Member Since 8/18/2020	Webb						FY22 Membership Fees: $750/Paid: $0.00 / Bal. $750												
T	South Texas Ambulance Response, Inc. (Vested)	Webb						FY22 Membership Fees: $750/Paid: $0.00/Bal. $750												
T	Victorious Care Ambulance (Vested)	Webb						FY22 Membership Fees: $750/Paid: $0.00 / Bal. $750												
T	Webb County Volunteer Fire/EMS (Vested)	Webb						FY22 Membership Fees: $750/Paid: $0.00 / Bal. $750												
T	Skyline EMS, (Membership Initiated December 17, 2020)	Jim Hogg						FY22 Membership Fees: $750/Paid: $0.0o / Bal. $750												
T	Zapata County Fire/EMS (Vested)	Zapata						FY22 Membership Fees: $750/Paid: $0.00 / Bal. $750												
T	Laredo Hope Ambulance, (Initiated Membership February 4, 2021)	Webb						FY22 Membership Fees: $750 / Paid: $0.00 / Bal. $750												
T	Villa Ambulance Service (Pending Board Approval)	Webb						FY22 Membership Fees: $0 / Paid: $0 / Bal. $0												
T																				