

Office of EMS Trauma Systems
Texas Department of State Health Services
dshs.texas.gov/emstraumasystems/



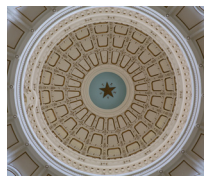
INSIDE THIS ISSUE:

2021 NEMSIS Public-Release Research Dataset Now Available



From this Side

EMS/Trauma Systems leadership team and staff share their experiences and perspectives to spark conversation on issues important to the EMS and trauma system in Texas.



Updates

The Office of EMS/Trauma Systems provides the latest regulatory changes, important programmatic data, and relevant funding information to keep you informed.



News and Links

Access current news, initiatives, and publications from national EMS and public health organizations, as well as links to GETAC, rules, and enforcement actions.

Texas Traffic Safety Conference Recap

Sabrina Lee Richardson, EMT, EMS Investigator with the DSHS Central Group, shares highlights, takeaways, and resources from her experience attending the 2022 Texas Traffic Safety Conference. She highlights two important issues regarding roadway incidents and first responder safety.

Taking Care of Us: Resources for Healthcare Workers

Explore the many resources available that focus on the well-being of first responders and healthcare workers, including research-based educational opportunities, stress reduction and coping strategies, and counseling referral services.

Sample Protocol for Transport of Dialysis Patients During Disasters

The Governors EMS and Trauma Advisory Council (GETAC) Medical Directors committee provides a sample protocol regarding the preferential transport of end-stage renal disease patients requiring dialysis during a disaster.

FROM THIS SIDE

Insight • Inspiration • Ideas



The 6 Rs of EMS

Over the years, you have heard me speak about the 5Rs of EMS: **R**ecruitment, **R**etention, **R**eimbursement, **R**ecognition, and **R**elationship; but it is time to add the 6th R, **R**esponse.

I truly am honored to lead our EMS system and work with over 72,000 professionals.

Please always remember that we are in this together. You each have a calling to serve, and Texas is a better place to live because of your dedication!



Joseph Schmider,
State EMS Director

Thank You,
joe

RECRUITMENT AND RETENTION

The Department of State Health Services (DSHS), in partnership with the Texas EMS Alliance, Texas Ambulance Association, and all 22 Regional Advisory Councils (RAC)s, with the financial support from Senate Bill 8, are working cooperatively to address the immediate need to increase the EMS workforce as well as the retention of the current workforce. Working together, we will see an increase in the Emergency Medical Services (EMS) workforce in 2023 and continue to support the current workforce.

REIMBURSEMENT

We must continue educating community leaders on the increasing cost of providing EMS in all parts of Texas. Without future financial support, it becomes harder and harder to provide EMS to our communities. The concern with the cost to provide EMS is just as important for career services as it is for volunteer services.

RECOGNITION

What is EMS? We need to better educate every community on the value of EMS. EMS is the first step into the emergency healthcare system; you make a difference in someone's life every minute of every day. We must continue to tell our story!

RELATIONSHIP

Don't wait for a disaster or problem to introduce yourself to your local leaders, including your EMS neighbors. We are a system, and a good system works better when we work with all of our partners.

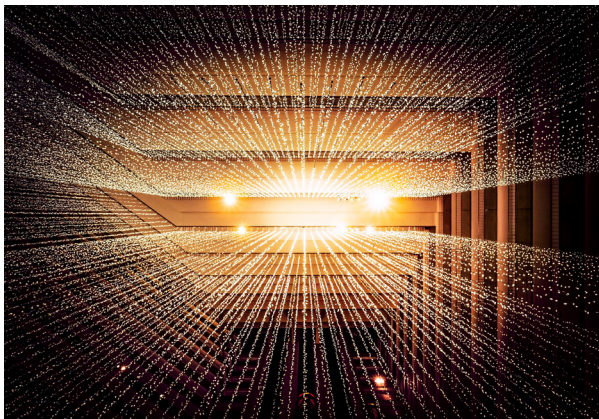
RESPONSE

We all know the challenges Texas and the national EMS system has gone through over the past 2.5 years, but above all, it is all about the patients in our care. We must continue to respond to EMS dispatches and treat each patient as if they were a member of our family. No matter what happens in your life, you have the duty to provide your best on every call; that is what you would expect for your own family member.

2021 NEMSIS Public-Release Research Dataset Now Available

The National Emergency Medical Services Information System Technical Assistance Center (NEMSIS TAC) has released the 2021 Public-Release Research Dataset. The dataset is the largest publicly available dataset of emergency medical service activations in the United States. NEMSIS looks to improve understanding of, confidence in, and support for EMS data collection and analysis with this release. Hopefully, this will lead to data being utilized more effectively to improve patient care.

Those interested in requesting a copy of the 2021 Public-Release Research Dataset can contact the NEMSIS TAC and fill out a request form at their [website](#).



Dataset Includes

48,982,990	EMS Activations
13,949	EMS Agencies
53	States and Territories

For those who are new to the NEMSIS Public Release Research Dataset, a video training about the Data Cube and Public Release Research Dataset is [available](#). The video provides an overview of the dataset and resources, including the data dictionary and user's manual.

To find more information on requesting data and training, visit the NEMSIS TAC [website](#).

EMS Trauma Registry Update: NEMSIS 3.5 Transition

On **March 1, 2023**, the Texas Emergency Medical Services and Trauma Registries (EMS/TR) will transition to the National EMS Information System (NEMSIS) **version 3.5 data format**. All EMS agencies should work with their software vendors to implement the new format by that date. Agencies who conduct manual data entry will have access to the new format on March 1st when they log in to enter data. All past data in version 3.3.4 format should be submitted prior to that date.

Please work with your software vendor to implement the new format, or contact the EMS/TR Registry Operations Support (ROS) Team for assistance at injury.web@dshs.texas.gov.

2022 Texas Traffic Safety Conference Recap



By Sabrina Lee Richardson, EMT, EMS Central Group

In July, I had the opportunity to attend the 2022 Texas Traffic Safety Conference held in College Station; it provided an insightful look at various aspects of patterns and behaviors impacting severe and fatal vehicle crashes in our state. I attended two sessions that specifically stood out to me as a first responder.

The first session was "Traffic Incident Management & Post-Crash Care: Challenges with Electric and Autonomous Vehicles." This presentation highlighted many of the challenges we, as first responders, face when working emergencies involving electric and self-driving vehicles, as well as ways to overcome those hurdles. Along with many others that attended, I found this information extremely useful, especially since electric vehicles are becoming increasingly popular on our roadways. The National Highway Traffic Safety Administration (NHTSA) website provides [guidance](#) for shutting down and disabling these types of vehicles; this is crucial information for first responders to know.

The session that resonated the most with me was "Post-Crash Care: Safety First for Emergency Responders." This session addressed the many issues responders face when responding to roadway accidents and offered options to help protect the safety of those on the scene. Lieutenant Brady Robinette, AEMT, from Lubbock Fire/EMS, presented a [case study](#) involving headgear and responder safety. His study demonstrated how fire helmets are designed to provide protection when fighting a fire, but how they are not as effective at protecting from the dangers faced while working an accident scene on the roadway. His message was that simply changing the type of headgear worn by first responders - police, fire, and EMS - working roadway incidents can drastically decrease the chance of a significant head injury or death. In an article provided by the [CVVFA/Emergency Responder Safety Institute](#), Lieutenant Robinette goes into more detail regarding his research and findings, as well as what his department has done to mitigate these risks.



The Texas Traffic Safety Conference aimed to share and discuss innovative solutions to the safety issues on our roadways and [#EndTheStreak](#) of daily fatal crashes in Texas. These two sessions explicitly focused on emergency responder safety to increase education and awareness so that we all get the chance to come home safely.

3,894 people lost their lives on Texas roadways in 2020.

There's been a death every day on Texas roads for 21 years straight

That's over 75,000 people.

That's a streak we want to break.

HELP #EndTheStreakTX
End the streak of daily deaths on Texas roadways.

Taking Care of Us

The first responder and health care workforce are at greater risk of mental health issues such as anxiety, depression, and compassion fatigue due to the physical and emotional toll of acute and chronic stress. Fortunately, there is growing awareness and support through various initiatives for the emergency and hospital personnel who work hard to take care of Texans daily.



Continuing Education

The [Heroes First Responder Education Program](#) through UT Health offers free one-hour CE courses for first responders and health care workers. This campaign is a research-based educational opportunity that covers mental wellness concerns and substance use disorders in the first responder and health care communities.

Below are just a few of the courses offered, so be sure to visit their [online catalog](#) to view all available courses.

[First Responder and Healthcare Leadership Support: Culturally Competent Care](#) provides emergency health care leaders with “practical tools to normalize talking about substance use and mental health issues.”



[Understanding and Coping with Anxiety](#) focuses on recognizing and coping with acute or chronic stress, anxiety, and PTSD using evidence-based strategies.

[Culturally Competent Care for Communities with Chronic Conditions](#) aims to provide training to “improve experiences in emergency care for people living with chronic infectious disease.”

Reading Resources

In addition to the learning opportunities above, [TexasAIM](#) has compiled a list of resources to support the mental wellness of health care workers.

- CDC: [Information for Disaster Responders: Tips for Taking Care of Yourself](#)
- CDC: [Use of Buddy System for Peer Support and Resilience](#)
- CDC: [Stress and Coping](#)
- CDC: [Taking Care of Your Emotional Health](#)

Live Support & Referral

Anyone in emotional distress or suicidal crisis can call or text the [Suicide & Crisis Lifeline](#) at **9-8-8**, the mental health version of 9-1-1.

It is free, confidential, and available 24/7.

Remember that the Heroes Helpline (1-833-EMS-IN-TX) is also available 24/7. It is specifically for Texas’ first responders and hospital personnel. The Helpline provides a “FREE, entirely confidential, telephone support and referral service that affords first responders and healthcare workers the opportunity to seek treatment without fear of judgment, stigma, or occupational threats.”

Below is a snapshot of the only data that is compiled from callers who call the [Heroes Helpline](#). To date, 206 of our peers have called the Helpline, and 63 have entered some form of treatment (counseling/therapy, support groups, peer recovery support services, or inpatient).

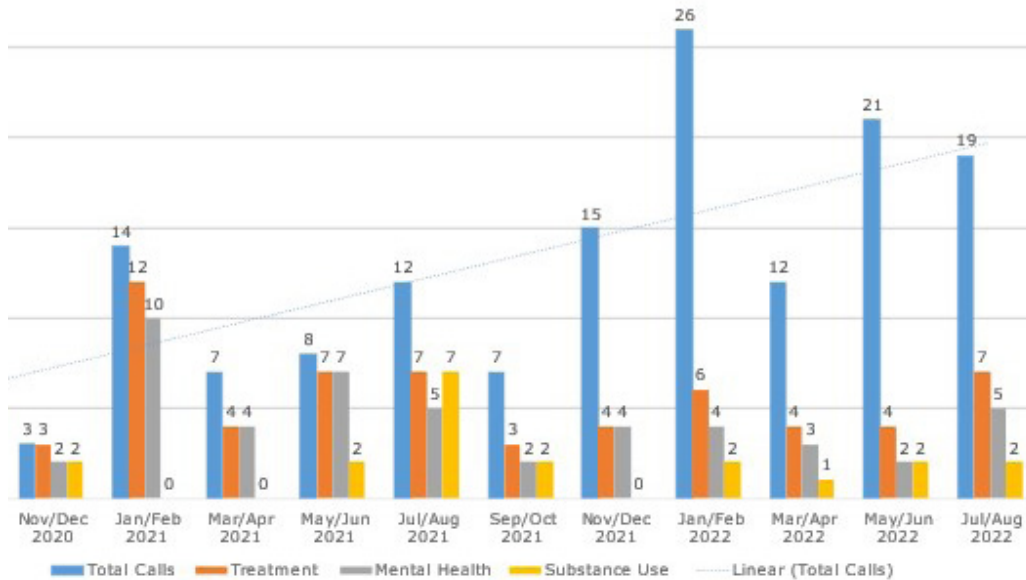


Figure 1: Total number of calls to the Heroes Helpline, the number of callers who entered some form of treatment, and the main reason for calling – mental health or substance use concern.



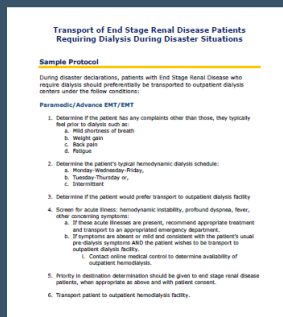


Sample Protocol for Transport of End Stage Renal Disease Patients Requiring Dialysis During Disaster Situations

Following the 87th Legislative session, Governor Abbott signed Senate Bill 1876, regarding the transport of end-stage renal disease patients requiring dialysis during a disaster. The final rule has been approved and went into effect on **September 13, 2022**.

The [Governors EMS and Trauma Advisory Council](#) (GETAC) Medical Directors Committee developed a sample protocol that an EMS provider's medical director **may** use to meet this requirement. It was presented at the August 19, 2022 GETAC council meeting and received the Council's recommendation. Please note that this is a sample protocol; an EMS Medical Director is not required to use the attached sample, but they must have a protocol.

View
Sample
Protocol



SB 1876 required protocol language.

SECTION 2. Section 773.112, Health and Safety Code, is amended by adding subsection (d) to read as follows:

(d) Consistent with rules adopted under this section, the executive commissioner by rule shall require that each applicable emergency medical services medical director approve protocols that give preference to the emergency transfer of a dialysis patient from the patient's location directly to an outpatient end stage renal disease facility during a declared disaster. For purposes of this subsection:

(1) "Disaster" has the meaning assigned by Section 418.004, Government Code. The term includes a disaster declared by:

(A) the president of the United States under the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. Section 5121 et seq.); and

(B) the governor under Section 418.014, Government Code.

Updates

Regulations • Programs • Funding



RULES

Current Proposed Rule Amendments

The following reflects the status of rules with proposed amendments. The Perinatal Rules specific to maternal and neonatal programs have the opportunity for stakeholder comments and feedback through the Perinatal Advisory Council. The Trauma Rules have the opportunity for stakeholder comment and feedback through the GETAC structure.

TSA

Rule: 157.122 **Status:** Adopted **Adoption Date:** February 17, 2022
Effective Date: March 1, 2022

STROKE

Rule: 157.133 **Status:** Adopted **Adoption Date:** February 17, 2022
Effective Date: All stroke facilities are accountable to the new requirements beginning September 1, 2022. All stroke surveys will follow the new requirements beginning September 1, 2022.

HOSPITAL LEVEL OF CARE DESIGNATIONS FOR MATERNAL CARE AND PLACENTA ACCRETA SPECTRUM DISORDER (HB 1164, 87th)

Rule Amendments: 133.201, 133.202, 133.203, 133.204, 133.205, 133.206, 133.207, 133.208, 133.209, 133.210, **New:** 133.211
Status: Continuing through the rule process. Informal comments reviewed and integrated into the rules as appropriate.
Adoption Date: November of 2022. Formal comments completed and reviewed.
Effective Date: Maternal facilities must integrate the Placenta Accreta Spectrum Disorder (PASD) into their Maternal Program Plan by October of 2022. All maternal designated facilities are accountable for the new criteria to include the PASD beginning January 1, 2023. These elements will be included in the site survey process.

NEONATAL

Rule Amendments: 133.182, 133.183, 133.184, 133.185, 133.186, 133.187, 133.188, 133.189, 133.190
Status: Continuing through the Rules Coordination Office
Adoption Date: Potentially July of 2023. Next step is the formal comment period.
Effective Date: All neonatal facilities are accountable to the new rules and meeting the requirements of the new rules by January 1, 2024. All designation surveys after June 1, 2023, will align with the new requirements.

TRAUMA

Rules: 157.2, 157.123, 157.125, 157.128, 157.130, 157.131
Status: Enter Rules Coordination Office activities on June 7, 2022
Adoption Date: July 2023. Informal comments completed and reviewed.
Effective Date: All facilities must be compliant by January 1, 2024. All trauma designation surveys after January 1, 2024, will follow the new requirements. 157.123 elements specific to the RAC criteria and RAC self-assessment begin in September or August of 2024 and accountable to the initial RAC performance criteria and self-assessment for 2024 and 2025, then accountable to the inclusive RAC performance criteria and self-assessment beginning with the new contract in 2025 and 2026 moving forward.

Updates

Regulations • Programs • Funding



DESIGNATION

New Facility Contact Form

You can now update your facility contact information using the [DSHS Designation Program: Facility Update Form](#). The form is also available on each of our [website](#) designation pages. Complete one form for each updated role. All required fields must be completed in order to submit the form. You will receive confirmation upon submission.

Stroke Designation Application Updated

The designations team has updated the [stroke designation application](#) to include all four of the stroke facility designation levels with the addition of the new Level IV Acute Stroke-Ready designation.

Facilities surveying after September 1, 2022, may apply for one of the new stroke designation levels as appropriate. All other designated stroke facilities will remain designated at their current level, until the facility's next stroke certification or verification survey occurs. The facility will then submit a new stroke designation application to the department for the appropriate level. The new application process and aligning the designation period with the certification or verification period provided by the survey organization, will streamline the designation process for the Stroke Program Managers.

If you have any issues or questions, send us an [email](#).

FDA APPROVAL REQUIREMENT FOR AED SYSTEMS

The US Food and Drug Administration (FDA) requires automated external defibrillator (AED) systems and accessories to be FDA-approved. After February 2021, the accessories for non-approved AEDs may no longer be supported or available from the manufacturer.

The FDA recommends the following steps to ensure the availability of quality and reliable AEDs for life-saving treatment.

1. Check the [list of FDA-approved AEDs](#) on the Automated External Defibrillators (AEDs) webpage on [FDA.gov](#) to see if your AED is FDA-approved.
2. If your AED is not listed, you should plan to transition to an FDA-approved AED system. Contact the manufacturer of your current AED to discuss your transition plans.
3. Ensure that you have compatible AED accessories to meet your needs until you transition to an FDA-approved AED; this is particularly important because AED accessories may require frequent replacement.

Since AEDs are highly effective life-saving devices when used quickly during a cardiac event, the FDA recommends that you keep and continue to operate your current AEDs as you transition from non-approved devices to FDA-approved replacements.

AED SYSTEMS

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GETAC

GETAC Retreat Rescheduled

Due to the challenge in finding hotel space in Austin, it has been decided to re-schedule the Council retreat until the February 2023 Council meeting. The draft plan is to have the retreat one day before the start of the February committee meetings. The retreat, committee, and Council meetings will be in person with an online option.

November GETAC meetings

The November GETAC Council and Committee meeting will be held in conjunction with the Texas EMS Conference in Austin. The meetings will be held in Salon H at the [Hilton Austin](#), 500 E 4th St, Austin, TX 78701. View meeting agendas on the GETAC [website](#).

Saturday, November 19, 2022

- 9:00 AM Disaster Preparedness and Response Committee
- 10:30 AM Pediatric Committee
- 1:00 PM Injury Prevention and Public Education Committee
- 2:30 PM Stroke Committee
- 4:00 PM Air Medical and Specialty Care Transport Committee

Sunday, November 20, 2022

- 9:00 AM EMS Education Committee
- 10:30 AM Emergency Medical Services Committee
- 1:00 PM EMS Medical Directors Committee
- 2:30 PM Trauma Systems Committee
- 4:00 PM Cardiac Care Committee

Monday, November 21, 2022

- 4:00 PM Governor's EMS and Trauma Advisory Council

Schedule

NEWS AND LINKS

Local • National • Resources

NHTSA's EMS Update

Learn more about current projects and efforts in EMS from NHTSA and its Federal partners.

[Learn more](#)

CDC Newsroom

View the latest CDC public health news and press releases.

[Learn more](#)

The Bulletin

The Bulletin of the American College of Surgeons.

[Learn more](#)

Washington Update

Bi-monthly newsletter of the National Association of State EMS Officials.

[Learn more](#)

EMSC Pulse

A digest of information about the pediatric emergency medical care community.

[Learn more](#)

Integrated Healthcare

Focuses on improving the patient experience of care through inter-professional collaborations.

[Learn more](#)

EMS/Trauma Systems Links

GETAC

Visit the Governor's EMS and Trauma Advisory Council web page to view council, committee, and meeting information.

Rules

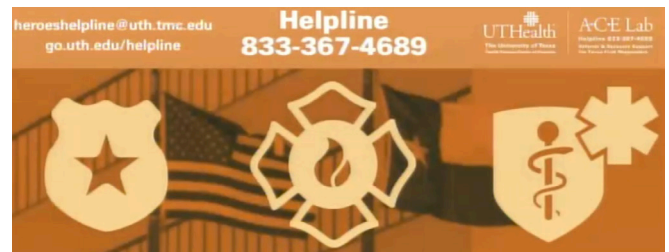
Links to the Texas Administrative Code rules pertaining to EMS/Trauma Systems.

Disciplinary actions

Public notice of disciplinary action by the Department of State Health Services and the Consumer Protection Division, Consumer Safety Unit.

Staff Contacts

Contact information for the Office of EMS/Trauma Systems staff and programs.



Texas Department of State
Health Services



Questions, comments, or suggestions about *Texas EMS Trauma News*? Contact us at EMSTraumaNews@dshs.state.tx.us.

External links to other sites are intended to be informational and do not have the endorsement of the Texas Department of State Health Services.