



Grants available for ECA training

Are you in a rural area that needs more EMS personnel? DSHS has money available for EMS training programs, registered first responder organizations (FROs), coordinators and instructors to conduct ECA courses in rural or underserved areas of the state lacking local EMS training resources. Grant funds cover the cost of instruction and textbooks, as well as other expenses such as printing and supplies. OEMS/TS will accept grant applications on a first-come-first-served basis until the funds run out for the fiscal year. Eligibility requirements for ECAT grants: A minimum of three students; students must agree to perform emergency care attendant services for at least one year with a local emergency medical service provider or first responder organization; services must be provided in a designated rural or underserved area of Texas, as determined by zip code or county; and the course coordinator must be affiliated with an educational program. And give yourself plenty of time: It takes about 60 days for an ECAT grant to work its way through the DSHS approval process.

For more information, go to www.dshs.state.tx.us/emstraumasystems/TrainingFunding.shtm or contact Roxanne Cuellar at (512) 834-6700 ext. 2377 or roxanne.cuellar@dshs.state.tx.us. Recently awarded ECA training grants:

**Coon Memorial Hospital/
Dalhart EMS
Fort Hancock EMS & VFD
Earth EMS**

NAEMT endorses medical direction for EMS



In a new position statement, the National Association of Emergency Medical Technicians (NAEMT) calls medical direction an essential component of an effective EMS system in order to ensure that patient care is administered with appropriate clinical oversight using medically accepted standards. The paper goes on to say that all EMS systems should operate with medical direction and oversight from an EMS physician. To view the full position statement, please go to the NAEMT Positions page in the Advocacy section of www.naemt.org.

EMS Week fan page now on Facebook



We know EMS Week was just a couple of months ago, but you can become a Facebook fan for 2010 while you're helping the American College of Emergency Physicians plan for next year. And you can add your community events, heroes, photos and articles on the page to be considered for inclusion in next year's (May 15-21, 2011) EMS Week Planning Guide.

Health care workers most affected by H1N1

Hospital emergency medical personnel had the highest infection rate during the H1N1 pandemic, and half of the reported H1N1 cases occurred in emergency medicine, pediatrics, ambulatory care and anesthesiology. Records of 123 confirmed reports of laboratory-confirmed influenza A or novel H1N1 infections in hospital employees were analyzed according to department. The adult emergency department (infection rate = 28.8%) and the pediatric emergency department (infection rate = 25.0%) had the highest infection rates per department, according to the *Disaster Medicine and Public Health Preparedness*.



FDA issues recalls on defibrillators, battery packs

Several models of defibrillator are on a recall list. The Food and Drug Administration has expanded its recall of Cardiac Science defibrillators. The first recall, issued in November of 2009, has now been expanded to include Nihon Kohden models 9200G and 9231 and GE Responder models 2019198 and 2023440. In all, about 280,000 external defibrillators used worldwide are affected. The FDA also now considers the recall a Class I, in which there is a reasonable probability that the use of the product will cause serious adverse health consequences or death.



Faulty components in defibrillators may cause the devices to fail to properly deliver a shock. In addition to failure to deliver needed shocks, other problems with the affected models may include interruption of electrocardiography (ECG) analysis, failure to recognize electrode pads, and interference or background noise that makes the device unable to accurately analyze heart rhythm. The 14 models, which include automated and semi-automated devices, are:

- Powerheart models 9300A, 9300C, 9300D, 9300E, 9300P, 9390A and 9390E
- CardioVive models 92531, 92532 and 92533
- Nihon Kohden models 9200G and 9231 and
- GE Responder models 2019198 and 2023440.

The FDA recommends that health care providers use alternative external defibrillators and arrange for the repair or replacement of the affected defibrillators. However, if alternative external defibrillators are not immediately available, then FDA recommends continuing to use the affected devices if needed, because they may still deliver necessary therapy. The potential benefits of using the available external defibrillators outweigh the risk of not using any of the affected external defibrillators or the risk of device failure.

Cardiac Science issued a software update for two of its recalled Powerheart defibrillators in February 2010 and plans to issue similar software updates for other affected devices. However, FDA's review of the software indicates that the software detects some, but not all, identified defects.

The FDA announced a Class I recall of 5,418 DBP-2800 battery packs used in the Lifeline AED® and ReviveR AED™ (semi-automatic external defibrillators). This recall affects all DBP- 2800 Battery Packs shipped prior to June 4, 2007. In rare instances, the battery pack may cause the AED may to falsely detect an error condition during charging for a shock, then cancel charge. Defibtech has received four reports of this malfunction. The affected battery packs are used in AEDs which can be identified by the words "Lifeline AED®" and "ReviveR AED™" on the front of the device.

Defibtech will provide customers with a free battery pack update card to address this issue for all affected battery packs. The correction to the battery pack will be able to be performed

at the location where the battery pack is deployed. The affected battery packs are used in AEDs which can be identified by the words "Lifeline AED®" and "ReviveR AED™" on the front of the device. The company has recommendations for using the AED until the battery pack has been corrected that allow the battery pack to remain in service. A copy of these recommendations is being mailed to customers. This customer notification, as well as instructions on determining whether a battery pack is affected, can also be found on the www.defibtech.com/batteryFA web page. For additional information, go to www.fda.gov/Safety/Recalls/ucm214859.htm or contact your distributor or Defibtech at techsupport@defibtech.com, (877) 453-4507 or (204) 453-4507.

If you suspect any electronic or mechanical problems with a recalled external defibrillator, the FDA encourages filing a voluntary report at www.fda.gov/Safety/MedWatch/HowToReport/default.htm. For more information, visit the FDA website at www.fda.gov/MedicalDevices/Safety/AlertsandNotices/ucm191426.htm.

On Duty



TEXAS EMS
25
years

Conference 2010

November
21-24
Austin



PSHSB launches new website

The Federal Communications Commission's Public Safety and Homeland Security Bureau launched a new web page: Broadband and Public Safety and Homeland Security. The FCC wants to ensure that the public safety community, the general public, government agencies and communications providers have access to the latest news and information on the FCC's efforts to implement the National Broadband Plan for public safety. The plan will include initiatives to bring interoperable communications to first responders through creation of a nationwide wireless broadband network and new cyber security reporting and monitoring programs; Next Generation 9-1-1 services; and emergency alerts and warnings through a variety of outlets, including television and radio broadcasts (Emergency Alert System), wireless hand-held devices such as cell phones and the Internet. The web page includes access to the press releases, public notices, field hearings and presentations: www.fcc.gov/pshs/broadband.html.

Veal takes job as emergency coordinator

Kevin Veal, who until recently was the EMS Program Manager in Arlington, has taken a job as Emergency Preparedness Liaison for DSHS's Regulatory Division in Austin. In the new position, Veal will be coordinating emergency response for the division, including planning and coordinating the division's emergency response programs and working on policies and procedures. Veal, a paramedic for about 20 years, replaces Jon Huss, who took a job with DSHS in Temple.



Kevin Veal

AHRQ releases evacuation guide

Just in time for hurricane season, the Agency of Healthcare Research and Quality has released a new, online hospital evacuation guide. The Hospital Evacuation Guide will help hospital officials consider the many factors that come to play in ordering a facility evacuation, and to assist them in identifying some of the special situations, often overlooked, that may be present in the facility or area. The guide contains two tools: A pre-disaster assessment of critical infrastructure that focuses on critical vulnerabilities that may affect the likelihood of evacuation; and an evacuation time self-assessment worksheet, that helps estimate the time required to safely evacuate patients. A companion guide is designed to help organize the initial assessment of a hospital upon return after an evacuation/closure due to an emergency event. The evacuation guide is at www.ahrq.gov/prep/hospevacguide/hospevacsum.htm and the recovery guide is at www.ahrq.gov/prep/hosprecovery.

Texas population increases

Does it feel like you're running more calls? Could be – demographers estimate the population of Texas grew nearly 20 percent in the last ten years. Texas now has an estimated 24.8 million people, an increase of 3.9 million since 2000. The numbers are based on annual estimates, rather than the ongoing count of residents being conducted by the Census Bureau this year. Texas remains second in population to California, with an estimated 37 million people.



Research workshops added

New this year! Texas EMS Conference will include workshops with an emphasis on research, including a poster session that brings together researchers and practitioners for an exchange of ideas. The track and poster session are being coordinated by GETAC's Education Committee. For information on the track or poster session, contact Lance Villers at VILLERS@uthscsa.edu.

Houston EMS office welcomes two

Two new EMS specialists have joined the DSHS EMS office in Houston. Ethan Brofman began in EMS as a junior member of Cy-Fair VFD in 1998 and went on to become a paramedic with the Westlake Fire Department (near Houston) in 2000. He worked as an instructor with Emergency Consultants, Inc., as director of provider relations for Intermedix, and in the Hurricane Katrina relief effort in Louisiana before leaving EMS for a few years. He's a native of Baton Rouge, Louisiana, although he's lived in Houston since 1989.



Ethan Brofman

Julie Davis became an EMT in 1986 and a paramedic in 1991. Davis started as a volunteer at Pearland EMS while working full-time as a paramedic for NASA. While the Houston native took a break from EMS for a few years for a career in retail, she discovered what she considers to be her passion second to EMS: sailing. She is now working on recertifying as a paramedic and hopes to be able to volunteer with the Coast Guard Auxiliary.



Julie Davis

Brofman and Davis will join the Houston office and be responsible, along with other Houston team members, for doing provider inspections and conducting investigations.

Children's hospital planned for Temple

Scott & White Healthcare plans to open a regional children's hospital as early as summer 2011 in the building once occupied by its chief rival. Last year, Scott & White merged with King's Daughters Hospital, but the transformation into a children's hospital was delayed as the Federal Trade Commission and Texas attorney general's office determined whether the merger created an unfair competition. Scott & White got the okay to move ahead, and the \$32 million project will be the only free-standing children's hospital between Austin and Dallas-Fort Worth. It will have 48 private inpatient beds, 16 intensive-care rooms and 12 beds in the emergency department. Dell Children's Medical Center, the closest freestanding children's hospital, has 176 beds. Dell is considering adding 72 beds by 2014.



On Duty

Enforcement begins for booster seat law

Children younger than eight years and shorter than four feet, nine inches must now ride in a safety or booster seat. The old law required only that children under age five and less than 36 inches ride in a child safety seat. The law, which became effective in September but allowed a grace period until June for enforcement, also sets fines and court costs for the each offense. Booster seats raise the child in the seat so the lap and shoulder belts fit better. Belts that ride too high can cause internal organ and spine damage in a crash. Texas was just one of six states without a booster seat requirement. The law also directs that any money collected from fines must be used to purchase and distribute child passenger safety seat systems to low-income families.



As part of a health safety fair, the El Paso-area BorderRAC demonstrated the correct use of booster seats in May.



Send in your EMS Awards nominations

Send us your best in EMS and trauma! We've posted the award nomination form and an explanation of each category on our website at www.dshs.state.tx.us/emstraumasystems/10AwardsIntroduction.shtm. Save the Microsoft Word document to your computer and fill it out by clicking in the gray areas beside each question. Include examples of why this person or organization should win. Please be specific. Keep in mind that the people who review the nominations most likely won't be as familiar with your nominee as you are. When you finish, save the file and email it back to EMSAwards@dshs.state.tx.us.

Send the file to us by email no later than October 8, 2010. The packets are then distributed to the OEMS/TS and sent to each EMS compliance group. Each program and compliance service group ranks the nominations for each category and returns the information to the OEMS/TS, where scores are tallied. Scores are kept confidential from all except those who tally the scores. Winners are announced at the Awards Luncheon at Texas EMS Conference in Austin.

Award Categories 2010

EMS Educator Award honors a state-certified EMS instructor or course coordinator who advances EMS education in Texas through innovation, collaboration and a commitment to students.

EMS Medical Director Award honors a physician who has served as a medical director, on-line or off-line, for an EMS organization, and continually demonstrates a commitment to excellent patient care.

EMS Administrator Award honors an administrator, researcher or manager at the local, city, county, regional or state level who has made a positive contribution to EMS and is committed to building a strong team able to respond effectively.

Public Information/Injury Prevention Award honors an EMS group or individual for outstanding achievement in public education or injury prevention.

Citizen Award honors a private citizen for a heroic lifesaving act or unique advocacy of EMS.

Private/Public Provider Award honors a ground or air organization that demonstrated leadership in EMS in patient care, public access, medical control, disaster preparedness, public education or training.

Volunteer Provider Award honors an organization staffed by volunteers that demonstrated leadership in EMS in patient care, public access, medical control, disaster preparedness, public education or training.

First Responder Award honors a first responder organization that demonstrated leadership in EMS in patient care, public access, medical control, disaster preparedness, public education or training.

Air Medical Service Award honors a public or private air medical service in Texas that has demonstrated the highest standards in providing patient care, leading the way in innovation and commitment to patient care.

Outstanding EMS Person of the Year honors an EMS-certified/licensed person who has demonstrated uncommon leadership and courage in providing emergency medical service to the citizens of Texas.

Telecommunicator of the Year honors a person or team who handled a call or system event with a level of professionalism and efficiency that allowed the first responders on the scene to give the patients the best care possible. An individual or a team is eligible for the award.

Trauma Center Award honors a designated trauma facility in Texas that has demonstrated leadership and high standards in implementing injury prevention programs and providing trauma patient care to the citizens and visitors of Texas.

Regional Advisory Council Award honors a regional advisory council in Texas that has demonstrated leadership and high standards in improving emergency medical service and improving the Texas EMS/Trauma System.

Red Flag rules delayed again



Remember the “Red Flag” rules, those federal (not state) rules, that said EMS agencies must follow the Federal Trade Commission’s rules for preventing identity theft? Originally, the rules were

supposed to go into affect in 2008, but the feds delayed enforcement until June 2010 — when the rule enforcement was delayed again. A press release from the FTC says several members of Congress requested the delay because Congress is considering revising the scope of entities covered. At this point, the U.S. House of Representatives has passed a bill that exempts any health care, accounting or legal practices with twenty or fewer employees. The U.S. Senate has not yet acted on that bill.

This rule, developed in response to the Fair and Accurate Credit Transactions Act of 2003 (FACTA), requires financial institutions and creditors to develop and implement written “identity theft prevention programs.” The programs must provide for the identification, detection and response to “red flag” patterns, practices, or specific activities that indicate potential

identity theft. Why is EMS included? Under FACTA, “creditor” is defined the same way it is in the Equal Credit Opportunity Act (ECOA): Any entity that regularly extends, renews or continues credit; any entity that regularly arranges for the extension, renewal or continuation of credit; or any assignee of an original creditor who is involved in the decision to extend, renew or continue credit. The ECOA definition of credit includes a right granted to defer payment for any purchase. Thus, any person that provides a product or service for which the consumer pays after delivery is a creditor—including emergency medical services agencies.

On Duty

Governor appoints, reappoints for GETAC

The Governor’s Office notified the Office of EMS/Trauma Systems in June of the following appointments to the Governor’s EMS and Trauma Advisory Council. All terms expire January 1, 2016.

Nora Casteneda-Rivas, of Harlingen, is a new appointment to the Council representing the general public. Casteneda-Rivas is marketing director for Treasure Hills Imaging Center, which provides CT scans, MRIs and other advanced technology imaging. Casteneda-Rivas replaces Hector Longoria.

Ryan Matthews, of Holiday, Texas, was reappointed to represent EMS private providers. Matthews is president of Trans Star, Inc., a private provider.

Robert M. Vezzetti, MD, of Austin, is a new appointment representing pediatricians. He is an attending physician in pediatric emergency medicine for Dell Children’s Medical Center. Vezzetti replaces Joan Shook, MD, an original member of GETAC.