

Texas EMS Trauma News

Spring 2021

Volume 8 No. 2

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



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"Tornados, flooding, potential hurricanes, and mass shooting events significantly challenge the trauma and emergency response system"

From This Side

By Jorie Klein, MSN, MHA, BSN, RN,
Director, EMS /Trauma Systems



Disaster Planning

The COVID pandemic has increased our response skills and provided rich ground for learning and collaboration; however, staff turn-over during this time creates a need for education and training as we focus on our readiness for spring storms and the no-notice responses. Tornados, flooding, potential hurricanes, and mass shooting events significantly challenge the trauma and emergency response system due to the no-notice incident, as well as the higher number of critical casualties.

Training staff for these types of responses is often difficult, time consuming, and costly if using the standard functional exercises. Didactive overviews of disaster response plans combined with simple simulation and hands-on training build the knowledge, competencies, and performance skills necessary for response readiness. Hospitals can create simple training programs that allow their required staff to actively participate in simulated responses. To learn more about preparing for and deploying disaster training scenarios in the hospital setting, [read here](#).

COVID-19 UPDATE

Johnson & Johnson Vaccine

The CDC and FDA recommended pausing the administration of the Johnson & Johnson/Janssen COVID-19 vaccine (J&J). On April 13, DSHS released a [statement](#) to recommend providers stop administering those for now. To date, there have been six recipients in the US who have experienced a rare and serious blood clot that is hard to treat. None of those cases were in Texas.



On April 14, the Advisory Committee on Immunization Practices (ACIP) held an emergency meeting to discuss updated recommendations for use and determined to continue the J&J pause until more information is available. The pause is expected to continue another couple of weeks, at minimum. DSHS will provide [updates](#) as they become available.

From the [Joint CDC and FDA Statement on Johnson & Johnson COVID-19 Vaccine](#):

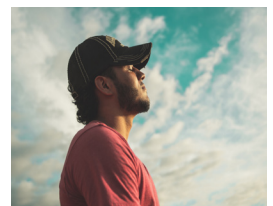
People who have received the J&J vaccine who develop severe headache, abdominal pain, leg pain, or shortness of breath within three weeks after vaccination should contact their health care provider. Health care providers are asked to report adverse events to the Vaccine Adverse Event Reporting System at <https://vaers.hhs.gov/reportevent.html>.

For more information, read the [Johnson & Johnson Safety Information](#) posted on our website.

DE-STRESS

Stress is an inevitable reality of life for most. It can be a great motivator, but it can also be destructive to the mind, body, and soul if not managed. It's always a good idea to include exercise, good nutrition, and restful sleep on a daily basis, but it's even more important during stressful times.

In addition to those daily habits, when you are feeling the weight of a difficult situation, the following suggestions can help ease the load you are carrying.



- **Step away and take a break.** Give your mind a timeout and let it rest. Meditation, prayer, and listening to calming music are great ways to ease the mind.
- **Make time for a hobby.** Puzzles, gardening, reading, and painting are good stressbusters.
- **Spend time in nature.** The sights, sounds, and smells of nature help bring a sense of calming and balance. Unplug from technology and just soak in the beauty and essence of the nature around you.
- **Take a break from technology.** Log out of your social media accounts and take a short hiatus. Leave your phone in another room. Don't take it to the bathroom with you. Simply unplug to give yourself a break.

Those are just a few reminders of the things you can do to give yourself a little space to breathe and "just be." If you find that your stress feels overwhelming, reach out and talk to someone you trust. You can also speak to someone at the [Heroes Helpline](#) at 833-367-4689 if you'd prefer to talk to someone anonymously.



TEXAS SHINES

MedStar paramedic Trey McDaniel shares his story of survival during historic winter storm 133 car pile-up on I-35 W.

February 11th, 2021, started like any typical morning. I woke up, got dressed in my MedStar paramedic uniform, and headed for my shift to administer COVID-19 vaccines to the Fort Worth community.

It was dark along southbound I-35W, and as I approached the top of a hill, I noticed brake lights ahead. I prepared to slow down, but my Toyota began sliding as I encountered invisible black ice. The anti-lock brakes slowed me down, and I came to a stop in the left lane against the middle barrier. I looked up to see a pile of wrecked cars, trucks, and semi-trailers blocking the entire southbound lanes. Before I could evaluate the severity of the situation, a sliding car to my right smashed into the vehicles, adding to the pileup. At that moment, I looked in my rearview mirror and saw a semi-truck barreling toward me. Before I could think, the semi slammed into the rear of my Toyota with such force that it pushed me into the pileup, launching me airborne—upside down—and over the center barrier. I made a full rotation before landing wheels down in the northbound lanes. I opened my eyes, not understanding what had just happened, and wondered how I was alive.

In true paramedic fashion, I did a quick survey of my potential injuries. I was in pain but could move my extremities. My ears were ringing, and I could hear vehicles continuing to crash into one another around me. Weighing scene-safety options, I determined it was safest to self-extricate to avoid being a sitting duck. I crawled out of the broken window, made sure I was alright, and started checking on others.

The flashing lights of an approaching MedStar ambulance were a beacon of hope in the dark. First responders started swarming the massive scene, jumping into the wreckage. I assisted a firefighter with moving a lady over the barrier and then gathered backboards from the ambulance, taking them to where they were needed.



One of my supervisors arrived on scene and noticed blood coming from my nose and glass dust in my hair and clothes. He asked what happened—I pointed to my Toyota. He couldn't believe I was walking, much less helping on scene.

I, along with my fellow responders, had never seen anything like the carnage that transpired that morning. Looking back, I now understand that when first responders are placed in an unthinkable situation, our EMS DNA kicks in, and we immediately jump into action naturally doing what EMS professionals are trained to do.



It's been almost a month and still feels surreal. The support I've received has been more than I could've asked for. I am thankful to be in such a rewarding career and look forward to where life takes me next.

Patient Care Records (PCR)

We have received many questions lately about PCRs and who must submit them and when. All EMS Providers should be submitting records for all EMS runs. The best rule of thumb is if you turn a wheel on the ambulance you should submit a PCR.

This data is extremely important for many reasons including patient care, documentation of care given, quality of care, and research and funding opportunities based on historical response data.



Let's look at Texas Administrative Code 157.11:

- (7) assuring the confidentiality of all patient information is in compliance with all federal and state laws;
- (8) assuring that Informed Treatment/Transport Refusal forms are signed by all persons refusing service, or documenting incidents when a signed Informed Treatment/Transport Refusal form cannot be obtained;
- (9) assuring that patient care reports are completed accurately for all patients and meet standards as outlined in [25 Texas Administrative Code, Chapter 103](#);
- (10) assuring that patient care reports are provided to facilities receiving the patient:
 - (A) whenever operationally feasible, the report shall be provided to the receiving facility at the time the patient is delivered, or a full written or computer-generated report shall be delivered to the facility within 24 hours of the delivery of the patient,
 - (B) if in a response-pending status, an abbreviated documented report shall be provided at the time the patient is delivered and a completed written or computer-generated report shall be delivered to the facility within 24 hours of the delivery of the patient;
 - (C) the abbreviated report shall document, at a minimum, the patient's name, patient's condition upon arrival at the scene; the prehospital care provided; the patient's condition during transport, including signs, symptoms, and responses to treatment during the transport; the call initiation time; dispatch time; scene arrival time; scene departure time; hospital arrival time; and, the identification of the ambulance staff; and
 - (D) in lieu of subparagraph (C) of this paragraph, personnel may follow the Regional Advisory Council's process for providing abbreviated documentation to the receiving facility.

If you have any questions regarding PCRs please email Joseph Schmider at joseph.schmider@dshs.texas.gov

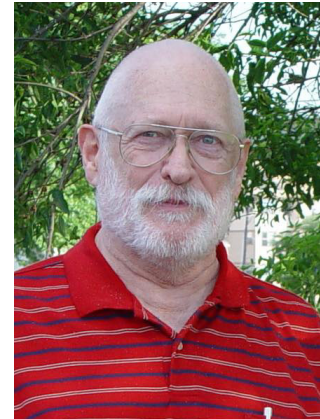
We need to remember those who helped make EMS great

Jane E. Dinsmore, B.S., LP, NRP, FP-C, CCCP-C

The EMS community is really a small one in the grand scheme of things and the development of what we know as EMS today has not taken that many years. There have been a relatively small number of “movers and shakers” who were ultimately responsible for the “what” and the “how” of what we do today in EMS in Texas and nationwide. More of these fantastic people are working now to move it forward more and more and continue to build what those who have come before started.

But we, as a community and a profession, have done a very poor job of remembering those that blazed the way for us. We have not kept track of our history and have not shared that history or these people with those who will take the reins from those of us who serve now. And many of us currently know little about those that came before us.

William Eugene (Gene) Gandy, JD, LP, was one of those primary trailblazers in Texas EMS. We may have lost the man, as he died in February of last year after losing a battle with cancer, but we have not lost what he gave us – his insight, his knowledge, his dedication, his wit, and his strong sense of ethically and professionally offering emergency medical care to every patient who needs it. He taught many of us who are currently serving the public today either in EMT, AEMT, or Paramedic school, continuing education courses, ACLS, PALS, PHTLS, or in traveling programs like “SLAM – Street Level Airway Management.” He wrote numerous articles in various state and nationally recognized publications, chapters in textbooks, and even continued to grade papers for students up to the day before he went into hospice.



Gene is just one of the many heroes of Texas EMS but he deserves a special mention because he has most likely touched each and every person who is reading this directly or indirectly and in some fashion by and through his teaching and writings. This link is to a short article about this man, this legend... who he really was and how he played his role in make Texas EMS what it is today.

www.percomcourses.com/remembering-gene-gandy/

Gene, you are missed by many. Thank you for everything you did for us over the years.

TEXAS EMS AWARDS

We're looking for the best in Texas, so let us know what makes your nominee really stand out.

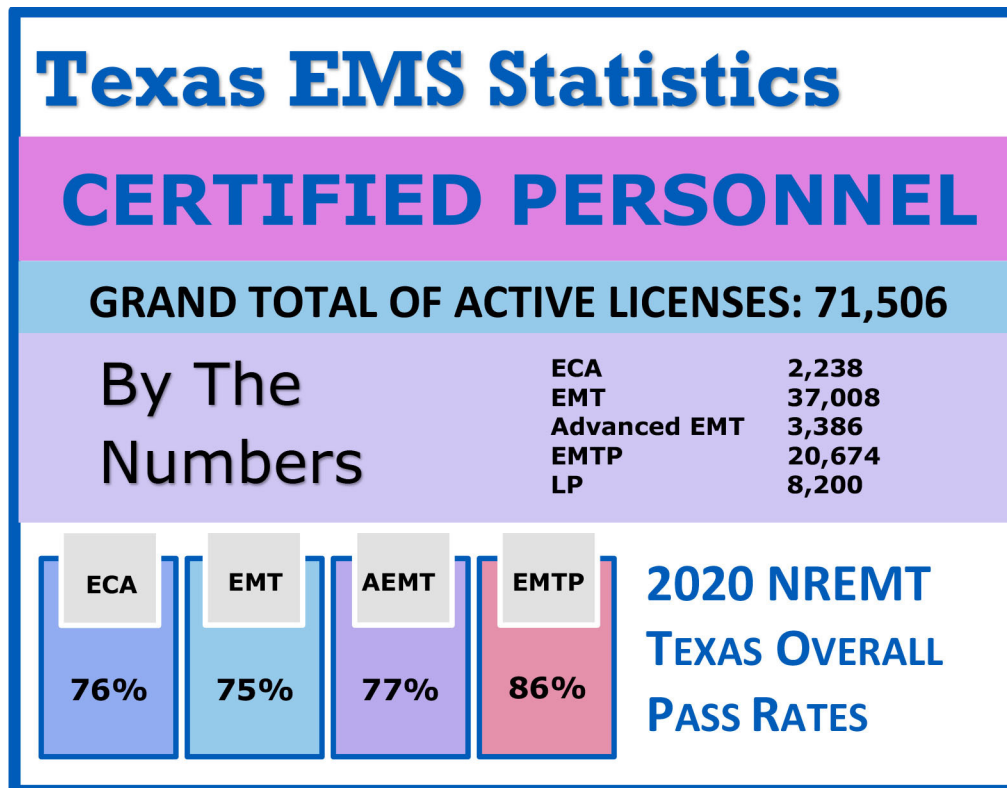
Winners will be announced at the Texas EMS Conference Awards Luncheon

CLICK THE BANNER TO SUBMIT
NOMINATIONS BY SEPTEMBER 17

National Registry Pass Rates

A complete list of the 2020 Texas pass rates by program is available at:
dshs.texas.gov/emstraumasystems/nationalregistry.shtm

The statistics include the 2019 Texas EMS program pass rates and compare overall test scores to the national average. A pass rate with a low number of students may not be indicative of a program's capabilities.



The state EMS director and DSHS EMS managers for your region are available to discuss different avenues of improvement for Texas EMS education programs.

State EMS Director, Joseph Schmider, 512/834-6737
joseph.schmider@dshs.texas.gov

EMS Manager East, Joey Ancelet, 713/767-3331
joey.ancelet@dshs.texas.gov

EMS Manager North, Valerie Tumlinson, 817/264-4721
valerie.tumlinson@dshs.texas.gov

EMS Manager South, Jaime Vallejo, 210/949-2052
jaim.vallejo@dshs.texas.gov

Contact information for National Registry: (614) 888-4484 or website www.nremt.org.
Contact information for [National Registry Representatives](#).



EMS Criminal History

The Texas Department of State Health Services (Department) reviews an applicant's and/or certified/licensed EMS personnel criminal background to determine eligibility for EMS certification.

Here are five things you should know and additional information can always be found on our website at:

www.dshs.texas.gov/emstraumasystems/qicriminal.shtm

1

How do I report that I have been arrested and/or have a final outcome of a criminal offense?

You may notify the Department of your recent or previous criminal history changes or updates by completing the Criminal History Report form on our [website](#).

2

Can I have my criminal history evaluated prior to enrolling in an EMS course to find out if I may be eligible for EMS certification?

You may have your previous criminal history evaluated by submitting the EMS Criminal History Pre-Screening application located on our [website](#).

3

If I completed a fingerprint-based background check for another agency, do I need to complete this again?

Unfortunately, because of federal legal restrictions, criminal history information can't be shared between organizations. You will need to complete another [fingerprint-based background check for DSHS](#).

4

If I have completed the fingerprint-based background check and my name is not included on the fingerprint-based background list provided on the DSHS website, do I need to wait until my name is on this list before completing the certification renewal process?

If you have recently completed the fingerprint-based background check, you **do not** need to wait until your name appears on fingerprint-based background list and you may proceed with your renewal application.

5

Why do I need to notify the Department when my address has changed?

In the event the Department needs to contact you regarding your certification, your contact information must be current to include your mail, email, and phone. It is also required in Rule to keep your contact information current. You will find the Address/Name change form on our [applications and forms page](#).



RULES

The following rules are under revision by the Department. The Perinatal Advisory Council, GETAC Council, and the GETAC Committees will serve as the point for stakeholder comments, participation, and recommendations.

- **157.122 TSA and 157.133 Requirements for Stroke Facility Designation**
 - ◇ Moved to the Rule Coordination Office
 - ◇ Expected public comment period Fall 2021
 - ◇ Anticipated effective January 2022
- **133.181 – 133.190 Hospital Level of Care Designation for Neonatal Care**
 - ◇ Internal process of creating a draft
 - ◇ The Perinatal Advisory Council will take the lead role in stakeholder comments and recommendations
- **157.123 RACs, 157.125 Requirements for Trauma Facility Designation, 157.128 Trauma Denial, Suspension, and Revocation of Trauma Facility Designation, 157.130 EMS and Trauma Care System Account, and 157.131 Designated Trauma Facility and Emergency Medical Services Account**
 - ◇ Internal process of creating a draft
 - ◇ The Governor's EMS and Trauma Advisory Council and the Trauma Systems Committee will take the lead role in stakeholder comments and recommendations

If you have any questions regarding this process please contact Jorie Klein, Director of EMS / Trauma Systems Section, at jorie.klein@dshs.texas.gov, or Joe Schmider, State Director of EMS, at joseph.schmider@dshs.texas.gov.

TEXAS EMS CONFERENCE CE CERTIFICATES

Are you looking for a record of your 2020 Texas EMS Conference CE? Your certificate is available to download and/or print until November 18, 2021. You will receive continuing education credits for the first 22 hours you complete between the virtual conference (Nov. 23-25, 2020) and April 30, 2021.

Do I need to print certificates for each class/lecture?

No. Texas EMS Conference 2020 – Virtual will track your CE hours based on log-in times and time of each lecture viewed until you reach the 22-hour maximum. Once 22 hours are complete your certificate will not add any additional CE credit.

View, print and download your certificate:

- Go to www.expobadge.com/certification/TEXASEMS20.
- Use your email address to login.

Additional continuing education information for the 2020 Texas EMS Virtual Conference can be found at texas-emscconference.com/continuing-education.

GETAC

The Governor's EMS and Trauma Advisory Council (GETAC) met on Friday, April 9, 2021.

The following actions were taken:

- The Council agreed to have each GETAC Committee review the Pediatric Disaster Coalition's [HHS Federal Planning Region VI (Texas, Arkansas, Louisiana, Oklahoma and New Mexico)] White Paper: Disaster Response for Pediatric Hospitals and Specialty Patients, <https://www.dshs.texas.gov/emstraumasystems/PediatricTransportWhitePaperfinal.pdf>, and report back to Council.
- The Council approved the Child Passenger Safety Program Position Statement from the Injury Prevention and Public Education Committee.
- The Council approved the Child Abuse Screening/Management Toolkit from the Pediatric Committee.

NEXT MEETING DATES

June 18, 2021

The 2nd Quarter council meeting will be held virtually.

September 17, 2021

This 3rd Quarter council meeting is currently planned virtually

October, 2021

The GETAC Retreat focuses on the standard operation procedures for the council and committees. DSHS is exploring options for a face-to-face meeting and will update stakeholder as information becomes available.

November 20-22, 2021

The 4th Quarter council and committee meetings will be held in person in conjunction with [Texas EMS Conference](#).

IS YOUR ED PEDIATRIC READY?



Take the National Pediatric Readiness Project assessment starting May 2021! Participate in the largest initiative to improve the readiness of emergency departments to care for children in the United States. When you complete the assessment, you will receive immediate feedback in the form of a readiness score and a gap analysis report. The report summarizes the ED strengths and weaknesses in regards to pediatric readiness to help guide quality improvement efforts.



You can help now by doing the following:

- Review the 2018 joint policy statement: tinyurl.com/PedsReady
- Explore the new NPRP toolkit & checklist: tinyurl.com/NPRP-Toolkit-QI
- Download and print the assessment: pedsready.org
- Follow the Peds Ready Facebook page: [@PedsReady](#)

Supported by:



NATIONAL PEDIATRIC READINESS PROJECT (NPRP) ASSESSMENT OPENING MAY 1ST!

The NPRP Assessment is a national assessment of America's EDs to determine progress in pediatric readiness, identify existing gaps, promote quality improvement (QI) efforts in hospital EDs around the country, develop national collaboratives to address common and critical gaps, and identify best practices.

The NPRP assessment helps ED personnel to be better prepared to provide quality care for all patients of all ages by evaluating the QI process of EDs over time.

Information on the upcoming assessment can be found at:

<https://emscimprovement.center/domains/pediatric-readiness-project/>.

Celebrate

Thank you to all our healthcare professionals!

The month of May is dedicated to our healthcare heroes who work tirelessly to support the health and wellness of the people in their community. The past year has asked more from them than anyone could have ever imagined. Join us in thanking our Texas EMS and nursing personnel as we recognize them for their unfailing commitment to meet the needs of those placed in their care. Additionally, please help spread trauma and safety awareness and the importance of injury prevention as we continue “living, working, and playing” through a pandemic.

Here are the themes for this year

Click on the event logos to stay up to date on changing guidelines that may affect this year’s celebrations.

National Trauma Awareness Month:

Safe and Secure: Safety is a Choice,
Prevention is Key



National Nurses Month:

Excel. Lead. Innovate.



National EMS Week May 17-23:

THIS IS EMS: Caring for Our
Communities



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NEWS

NHTSA's EMS Update: Learn more about current projects and efforts in EMS from NHTSA and its Federal partners.

CDC Newsroom: View the latest CDC public health news and press releases.

Bulletin of the American College of Surgeons: *The Bulletin of the American College of Surgeons is published monthly by the American College of Surgeons.*

Washington Update: The Washington Update is produced bi-monthly by the National Association of State EMS Officials in cooperation with NHTSA OEMS, with funds also provided by HHS EMSC.

NACo County News: The voice of American counties.

EMSC Pulse: The EMSC Pulse Newsletter is a digest of program news and activities. Each issue includes a wealth of information about the pediatric emergency medical care community.

Integrated Healthcare Delivery: Integrated Healthcare Delivery focuses on improving the patient experience of care through inter-professional collaborations.

External links to other sites are intended to be informational and do not have the endorsement of the Texas Department of State Health Services. These sites may also not be accessible to persons with disabilities.

Links

GETAC: Visit the Governor's EMS and Trauma Advisory Council web page to view council, committees, and meeting information

Rules: This page contains links to the Texas Administrative Code rules pertaining to EMS/Trauma Systems.

Disciplinary actions: This page provides public notice of disciplinary action by the Department of State Health Services and the Consumer Protection Division, Consumer Safety Unit.

Staff Contacts: This page provides contact information for the Office of EMS/Trauma Systems staff and programs.

Preparedness: The Center for Health Emergency Preparedness and Response is to provide public health leadership and improve health and well-being in Texas.

Homes for Texas Heroes Home Loan Program: The program, spearheaded by the Texas legislature, provides a 30-year fixed rate home loan to Texas EMS personnel, firefighters, peace officers and others. In addition, this program offers down payment and closing cost assistance of up to 5% of the mortgage loan amount, in the form of a grant.



The Code
Green
Campaign



TEXAS
Health and Human
Services

Texas Department of State
Health Services

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