

NAEMSO issues brief on respirators

Looking for information and best practices about how to protect EMS personnel from infectious diseases? We reported last issue that the Centers for Disease Control and Prevention (CDC) has developed a website about NIOSH-approved respirators. The ever-helpful National Association of State EMS Officials now has developed a briefing document that sorts through conflicting information from the scientific community, news media and other organizations about masks and respirators. The brief includes best practices and links to reputable information, and has a question and answer section that's very helpful. Find it at www.nasemso.org/Advocacy/PositionsResolutions/IssueBriefs.asp.

Grants available for ECA training

Are you in a rural area that needs more EMS personnel? DSHS has a total of \$50,000 this fiscal year 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; and services must be provided in a designated rural or underserved area of Texas, as determined by zip code or county. 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 grants:

Coryell County Memorial Hospital Authority
Rankin Volunteer Ambulance Service

DNR form changes coming

The 81st Texas Legislature made changes to Health and Safety Code 166, affecting the Out-of-Hospital Do-Not-Resuscitate form. The proposed rules were published in the Texas Register on February 12. After a comment period, the rules will go back the Health and Human Services Commission before the final rules are published in the Texas Register, probably in late spring. That means the new rules – and the new form – may go into effect early this summer. Please watch our website and the listservs for information. The new form reflects the legislative changes, including allowing a notary public to sign in lieu of two witnesses and the addition of the ability to sign the form electronically. The form will still carry the Texas graphic with the words “Stop” and “Do Not Resuscitate.” And remember: Any form, no matter which version or when it was signed, is still in force until it is revoked or the patient dies. This will be the third revision of the form since the law went into effect in 1995. Check our website for the latest version: www.dshs.state.tx.us/emstraumasystems/dnr.shtm. We've also added an approved manufacturer of metal DNR bracelets and necklaces, bringing that list to three. The Texas Medical Association is the approved provider for the plastic bracelets.

Tips may help make funding request a success

Has your area suffered a devastating event that might qualify you for Extraordinary Emergency Funding? The Extraordinary Emergency Fund is available to assist licensed



EMS providers, hospitals and registered first responder organizations if unforeseeable events cause a degradation of service to the community. Situations that may severely reduce or incapacitate emergency response capability are considered extraordinary emergencies. You can increase your chances of success in requesting funding by remembering these simple guidelines:

- Organizations eligible to apply include: licensed EMS providers, licensed hospitals and registered first responder organizations.
- Your organization must be meeting its Regional Advisory Council (RAC) participation requirements. Contact your RAC to verify this requirement.
- Requests are evaluated to determine whether there will be a degradation in the service you currently provide to your community if the request is not fulfilled.
- Items cannot be purchased prior to receiving a contract. This fund is not a reimbursement grant. Items funded can only be purchased during the contract period once the grant is awarded.
- In the case of a malfunctioning piece of equipment, include with your request the documents showing the repair history of the product. Other helpful documentation could include a supportive statement from the manufacturer indicating that the product is outdated and cannot be fixed.
- Extraordinary Emergency Funding is not available for equipment upgrades or enhancement of services. Please contact our office or your local EMS regional staff about the annual Local Projects Grant for non-emergency funding opportunities (see page 6 for details).

After a request has been funded, your organization must send in receipts to verify purchase of the requested items/services. You also will be required to send an impact statement of how the funding has helped your organization and community at large.

Paramedic programs face January 1, 2013, deadline



A big change is coming for paramedic programs. Beginning on January 1, 2013, all students who take the NREMT paramedic exam must have completed a nationally accredited paramedic program. (EMT-I, EMT and ECA programs are **not** affected by this.) Currently, only 15 of the 100 or so paramedic education programs in Texas are nationally accredited, but many programs are looking toward accreditation. Luckily, programs have more than three years to achieve the accreditation, which begins with a program of self-study and evaluation. And there are resources to help. GETAC's Education Committee will hold information sessions about accreditation throughout the year. For more information about accreditation, go to www.coaemsp.org or to www.naemse.org, or contact members of GETAC's Education Committee: www.dshs.state.tx.us/emstraumasystems/EducationCommittee.pdf.

On Duty



Testing for NREMT? Take identification

Taking your NR exam at a Pearson VUE testing center? Make sure that the name on your identification matches exactly what the testing center has in its records. The name on the application must be the same as the legal name on the identification. NREMT reports that the most frequent reason students are turned away is that IDs do not match student information. NREMT recently renewed its contract with Pearson VUE to administer the exams. Based on the contract, NREMT projects no cost increases for the computer-based exams through 2016.

On Duty



List of stroke centers online

DSHS began designating stroke centers late last year and we've already got 42 approved or pending facilities who have met the requirements for stroke designation. To find a list of the centers or other information about stroke designation, including an application, go to www.dshs.state.tx.us/emtraumasystems/etrauma.shtm.

DSHS schedules "town hall" meetings

Want the latest updates on EMS from DSHS? Plan on attending one of the town hall meetings DSHS EMS is scheduling around the state.



Hear about rules, instructor guidelines, approved instructor courses, national registry, accreditation and the EMS Agenda for the Future. DSHS will also conduct a question and answer session. Check the website for current locations and times, as additional meetings may be added.

Amarillo	March 24
Harlingen	April 8th or 9th
Tyler	April 15
Midland	April 22

First extremely drug-resistant TB identified

And here's another reason to learn about respirators: The first case of a patient with extremely drug resistant TB (XXDR-TB) has appeared in the United States. Extremely drug resistant TB is much rarer than extensively drug resistant TB (XDR-TB) and has been seen in only a handful of patients worldwide. XXDR-TB is resistant to both first and second-line drugs for TB. In a related event, a patient with XDR-TB was able to board a cross-country flight recently even though he was on a federal "do not board" list. That list was created in 2007 to prevent the spread of contagious diseases like tuberculosis. Since then, 88 people have made the list, all of them infected with tuberculosis. For the history of the list, go to the CDC's website at www.cdc.gov/mmwr/preview/mmwrhtml/mm5737a1.htm.



It's the law: Report abuse

EMS and first responders are in a unique position to help identify and report evidence of child abuse by the very nature of the services provided. But did you know that EMS personnel are *required* by law to report any suspected abuse encountered while on the job?

The following excerpt from the Health and Safety Code, Subtitle E, Chapter 261, Subchapter B, regarding abuse reporting requirements details the specific mandate:

(b) If a professional has cause to believe that a child has been or may be abused or neglected, the professional shall make a report not later than the 48th hour after the hour the professional first suspects that the child has been or may be abused or neglected. In this subsection, "professional" means an individual who is licensed or certified by the state or who is an employee of a facility licensed, certified, or operated by the state, and who, in the normal course of official duties for which a license or certification is required, has direct contact with children. The term includes teachers, nurses, doctors, and day-care employees. (**Ed. Note:** A legal opinion includes EMS in this list.)

SEC.261.103. REPORT MADE TO APPROPRIATE AGENCY

A report shall be made to:

- (1) any local or state law enforcement agency;
- (2) the department (Texas Department of Protection and Regulatory Services);
- (3) the state agency that operates, licenses, certifies, or registers the facility in which the alleged abuse or neglect occurred; or
- (4) the agency designated by the court to be responsible for the protection of children.

There may be some misconceptions about a first responder's responsibilities. The following list can help you determine the best course of action.

Myth: If one of the responding crew reports the suspicion of abuse, neglect or exploitation, that report covers everyone.

Fact: State law requires a report from anyone who has encountered the victim of abuse, neglect or exploitation. (Yes, this does mean that multiple reports will be made.)

Myth: I can report the abuse to the doctor.

Fact: While you may well want to report the suspicions to the doctor as part of your patient report, such a report does not meet the statutory requirements for a report to TDFPS or law enforcement.

Myth: The hospital social worker will take care of it.

Fact: Again, such a report does not remove your legal obligation to make a report to law enforcement and/or TDFPS.

Myth: I have to have concrete proof of abuse, neglect or exploitation before I can make a report.

Fact: Texas Family Code Chapter 261 and Texas Human Resources Code §48.051 et. seq requires a report when the reporter believes that abuse, neglect or exploitation has occurred.



On Duty

Busy hurricane season predicted



Two hurricane prediction centers have issued early season projections of more storms than last year — and more storms than an average tropical season. WSI, a private forecasting company, is forecasting 13 named storms (tropical storms and hurricanes), including three major hurricanes. A major hurricane is considered one of category 3 or higher, which is a storm with a sustained wind of at least 131 mph. Colorado State University is forecasting 11 to 16 named storms, including six to eight hurricanes and three to five major hurricanes. The 50-year average is 9.6 named storms, 5.9 hurricanes, and 2.3 major hurricanes per year. This year's predictions are pegged to El Nino, a weather phenomenon currently active and causing a colder and rainier winter, at least in Texas. El Nino is expected to decline during the upcoming summer. Here's where it all comes together: When El Nino is present during a hurricane season, there are typically fewer storms. The season following an El Nino has historically had an average or above average number of storms.

New DSHS website debuts in March

It's true we've been talking about a newly redesigned website since last fall, but this time the debut date is fairly firm. If you log onto the DSHS website after March 24, you'll see a completely new DSHS website. The OEMS/TS did not have a lot of input on the design, so we can't tell you what to expect. However, if you have trouble navigating the new site or find something is missing from the EMS/trauma pages, just drop us a line and we'll do our best to get it fixed.



Parkland approves plans for new structure

Parkland Memorial Hospital in Dallas has plans to build a \$1.27 billion facility to replace the current structure, built in 1954. The Level I trauma center is a public hospital, supported by tax dollars from Dallas County property owners. The hospital currently receives about one million patient visits per year, including a large number of trauma patients. The new facility will include an 862-bed, full service, 17-story acute-care hospital that includes 1.7 million square feet, an outpatient center of 380,000 square feet, a 275,000-square-foot office center, parking for 6,000 vehicles, a utility plant and other support facilities. The new facility is scheduled to open in 2014.



Looking for stories of saves!

Have you had a call that made a life-changing impact on a patient? We're looking for stories of patients who survived the odds

— thanks to EMS and the trauma system — and want to tell their story. Send your stories to Kelly Harrell at kelly.harrell@dshs.state.tx.us. Please give us the basic story plus the patient's name and contact information. We'll take care of the rest!

Coordinator Update

On January 1, DSHS began federal background checks on all initial applicants (an individual who doesn't currently have a Texas EMS certification). Now, in addition to the regular processing time of four to six weeks, applicants need to figure in the time it takes to undergo an FBI fingerprint criminal history check. (See page 30 for more information about the process.) Coordinators can help by encouraging students to submit their initial EMS certification applications early – ideally just after beginning the course. Once they submit their applications, students should submit their fingerprints through the Fingerprint Applicant Services of Texas (FAST) for Texas/FBI criminal history check by L-1 Identity Solutions (www.L1id.com). By submitting the application and fingerprints early, the applicant will cut down on the processing time once the course is completed. An application is good for two years; once fingerprints are submitted, they do not need to be submitted to DSHS again. If DSHS has received the criminal history and the application, once we receive notification from the National Registry that the student passed their exam, staff should be able to complete the department's certification process much more quickly. See our website for more information: www.dshs.state.tx.us/emstraumasystems/CrimHxJan2010.shtm
– Maxie Bishop, State EMS Director



Governor appoints and reappoints GETAC members

The Governor's Office notified the Office of EMS/Trauma Systems in February of the following appointments to the Governor's EMS and Trauma Advisory Council:

Vance L. Riley, LP
Victoria, Texas
Reappointed, term expires
January 1, 2016
Representing fire chiefs
Will serve as GETAC chair

Donald G. Philips, DO
Weatherford, Texas
New appointment, term
expires January 1, 2012
Representing medical directors

Michael Click, RN
Brownfield, Texas
Reappointed, term expires
January 1, 2016
Representing rural trauma
facilities

Linda Dickerson
New Braunfels, Texas
New appointment, term
expires January 1, 2014
Representing general public

On Duty

Exhibit hall hours changing ... again

We heard you! The exhibit hall hours for Texas EMS Conference are sliding back to Tuesday. We won't be shortening the number of hours we're open – you will still have 15 hours to peruse the exhibits, the same number you've had for years.

Sunday 2 – 7 pm
Monday 11 am – 6 pm
Tuesday 8 – 11 am

