



# News affecting you

First Responders

public, government & community leaders

Stroke Hospitals

Trauma Hospitals

Designation Programs

Paramedics

Regional Advisory Councils (RAC)

GETAC

Grants / Funding

NAEMSO

NREMT

etc...

Summer 2020

Vol.7 No. 3

## 1 COVID-19 Response

## 2 Jorie Klein

## 3 EMS Trauma Rule Sets

## 4 HHSC Human Trafficking Course Available

## 5 Christus Mother Frances Jacksonville Receives EMSC Recognition

### COVID-19 Response: Virtual Transition

By Chuck Rowe, AAS, EMS Program Specialist - East Group

As it seems to happen with any crisis, we all seem to learn something about ourselves. The EMS community has adapted in ways they haven't imagined or in some cases much sooner than planned.

- **Education Programs** found challenges completing courses without compromising their student's training, experience, and final competency. While there are still issues with skills that require a level of restricted contact, they have been very resourceful. They are using virtual options and working with DSHS to get programs running and students certified.
- **EMS Providers** also faced challenges. They dealt with staffing issues and maintaining adequate PPE with a limited supply chain. The RACs assisted with acting as a distribution point for state allotted PPE supplies, making sure those that needed it got help. DSHS allowed a staffing variance to allow a non-certified 2nd staff member to be a driver when COVID 19 cut into available staffing of Providers. Some Provider areas were seeing an increase in pre-hospital cardiac arrest and critical cases because patients avoided going to doctors or hospitals out of COVID-19 exposure fears. This resulted in part to a call volume and revenue reduction. Some providers put out joint statements with local hospitals that the hospitals were safe.
- **DSHS EMS** needed to insure compliance through monitoring, inspections, and surveys while restricting personal contact. We began using a virtual monitoring system that both Education Programs and EMS Providers have been very receptive and cooperative with.



With all this, we as a team found solutions. A substantial cooperative effort and ability to adapt made our adjustments a success. In some cases, we found better and more efficient ways to maintain our mission and we may see some of these changes stay.



The Code Green Campaign

Additional Links

NEWS FROM THE WEB

DSHS RESOURCES

GETAC

Rules

Disciplinary actions

Staff Contacts

Preparedness



There are still some challenges. We're still looking for good options, but if we maintain what have been doing, we will meet those challenges. We will be stronger than before and more prepared for the next crisis.

Texas has seen a major increase in COVID-19 cases. Stay informed by visiting the Texas Department of State Health Services (DSHS) [COVID-19 website](#). They are working closely with the Centers for Disease Control and Prevention (CDC) to monitor updates. Hospitals, healthcare professionals, local public health, community leaders, and others can find resources throughout this website to help them in their response to COVID-19.

## GETAC Meetings

Due to the COVID-19 Pandemic, all upcoming GETAC meetings will be conducted virtually. Please visit the [GETAC homepage](#) for current meeting notifications. You can also sign up to receive [email notifications](#).

## Jorie Klein, named new Office of EMS/Trauma Systems Director



Please join us in welcoming Jorie Klein as the new director of the EMS/Trauma Systems section.

Jorie comes to us from Parkland Hospital in Dallas where she served as Senior Director of Trauma, Emergency Department, Urgent Care, and Disaster Management. In this role, she was responsible for the overall direction and operational management of Parkland's Level I trauma program. In her accomplished 38-year career at Parkland, Jorie held many positions including the first trauma coordinator position in Texas where she led Parkland to become the first recognized trauma center in the Southwest United States.

Jorie has also served as a trauma center site surveyor for the American College of Surgeons and traveled to Israel with a NATO team to teach mass casualty response. In addition, Jorie has served on numerous state and national workgroups, committees, and training teams focused on improving the quality and performance of the Texas trauma system. She will officially start in her new role on August 3.

## EMS Trauma Systems Rule Sets

The EMS Trauma Systems Section is initiating separate rule projects to move forward in a streamlined manner. Updates will be provided for each rule set when available.

### Rule Set 1

§157.122 - Trauma Service Areas (TSAs)

§157.132 - Regional Trauma Account (repeal)

§157.133 - Stroke Facility Designation

### Rule Set 2

§157.123 - Regional Advisory Councils (RACs)

§157.130 - EMS and Trauma Care System Account

§157.131 - Designated Trauma Facility and Emergency Medical Services Account

### Rule Set 3

§157.125 - Trauma Facility Designation

§157.128 - Denial, Suspension, and Revocation of Trauma Facility Designation

### Rule Set 4

Neonatal Designation Rules

### Rule Set 5

EMS Rules

## COVID-19 Mental Health Support Line



As we continue to work together through these challenging times, the most important part of our response is to insure the well-being of our workforce, family and friends. Texas Health and Human Services has provided you and the people that matter to you, a source of help.

**Call the toll-free COVID-19 Mental Health Support Line 24/7 at: 833-986-1919**

You do not have to carry this stress alone, help is just a phone call away. Please make the call!

Download a copy of the support line [brochure](#).

## PCR Reminder:

In accordance with Texas Administrative Code [§103.5](#) and [§157.11](#), please be reminded that it is a requirement to complete patient care reports and submit to the receiving hospital within 24 hours of delivering patient.

## First Human Trafficking Course for Healthcare Providers Posted on HHSC Website

Pursuant to [House Bill 2059 \(86th Regular Session, 2019\)](#), the Health and Human Services Commission (HHSC) is pleased to announce the first approved training course on human trafficking for health care providers has been posted on its [Texas Human Trafficking Resource Center website](#). Called SOAR to Health and Wellness, information about this training course can be found by clicking the "Health Care Practitioner Training" tab on the website.

HB 2059 requires "human trafficking prevention training as a condition of registration permit or license renewal for certain health care practitioners."

To facilitate this requirement, HB 2059 also requires the HHSC to:

- approve training courses on human trafficking for healthcare providers, including at least one that is free of charge;
- post the list of approved trainings on the [HHSC website](#); and
- update the list of approved trainings as necessary.

Questions can be directed to [human\\_trafficking@hhsc.state.tx.us](mailto:human_trafficking@hhsc.state.tx.us).

## FAQ

**Q:** Must a service animal be allowed to ride in an ambulance with its handler?

**A:** Generally, yes. However, if the space in the ambulance is crowded and the dog's presence would interfere with the emergency medical staff's ability to treat the patient, staff should make other arrangements to have the dog transported to the hospital.

Source: [www.ada.gov/regs2010/service\\_animal\\_qa.pdf](http://www.ada.gov/regs2010/service_animal_qa.pdf)



## Christus Mother Frances Jacksonville Recognized by the Texas EMS for Children Program

By Fatma Diouf, MPH, Program Manager, Texas EMS for Children State Partnership

The Texas EMSC State Partnership, through their Voluntary Pediatric Readiness Program (VPRP) has recognized the emergency center at Christus Mother Frances in Jacksonville as a Pediatric Ready Facility. This achievement recognizes the ED's dedication to providing optimal care for ill and injured pediatric patients. This facility is the very first to obtain this recognition in the state of Texas.

The VPRP program is a pediatric readiness program that was established to prepare EDs to provide higher quality care for infants, children, and adolescents for the evaluation, treatment, and/or stabilization of children with medical and traumatic emergencies. One of its primary goals is to bolster pediatric readiness within communities and critical access hospitals such that children and families can benefit from the availability of at least one ED in their own community that is equipped to stabilize and/or manage common emergencies for children.

Similar to trauma center designation, a pediatric readiness program aids facilities in self-identifying areas in which they can optimize care. Unlike trauma center designation, however, the purpose of the VPRP is NOT to designate, or differentiate EDs based on the level of care they can provide for children.

Rather, the purpose is to promote basic readiness for ALL EDs to be able to provide initial stabilization of children with emergency conditions given that nationally, 30% of ED patients are children. Furthermore, more than 90% of children are seen in general EDs when they have an emergency, not at a children's hospital. The intent of the VPRP is to equip all EDs with the ability to safely treat and manage children in their own communities when appropriate, not to bypass these facilities.

The program is multitiered with three separate levels of recognition. Each level has specific criteria that must be met by a facility seeking that level of recognition. Each hospital goes through a site review by a team of experienced site reviewers. Hospitals that are recognized through this program must meet the essential criteria set forth by the VPRP, as outlined in the *Joint Policy Statement—Pediatric Readiness in the Emergency Department*.

For more information on the Texas EMSC program and the VPRP, visit the [Emergency the Medical Services for Children website](#).







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.

## NEWS FROM THE WEB

### Summer Links

#### Hot Car Death Prevention:

[You Can Help Prevent Hot Car Deaths](#)

#### Hurricane Preparedness:

[FEMA 2020 Hurricane Preparedness Tips](#)

[DHS Hurricanes](#)

#### Mosquitoes:

[Don't Give Mosquitoes a Fighting Chance](#)

[Controlling Mosquitoes at Home](#)

### Additional Reading

[NHTSA's EMS Update](#)

[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.

[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.

[The Pony Express](#): Official Newsletter of the EMSC State Partnership, Texas.

[Integrated Healthcare Delivery](#): Integrated Healthcare Delivery focuses on improving the patient experience of care through inter-professional collaborations.

Questions, comments or suggestions about *Texas EMS Trauma News*? Contact us at  
[EMSTraumaNews@dshs.state.tx.us](mailto:EMSTraumaNews@dshs.state.tx.us).