

Office of EMS Trauma Systems
Texas Department of State Health Services
dshs.texas.gov/dshs-ems-trauma-systems

INSIDE THIS ISSUE:

2024 Year in Review

A look at a year focused on system advancements, rules, and collaboration.

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.

Pediatric Readiness Participation

Texas EMS Achieves Record Participation in National Prehospital Pediatric Readiness Project (PPRP) Assessment.

Beyond the Chart

Patient Care Reports (PCRs) are crucial for documenting the care provided by EMS personnel in Texas.

Understanding Stroke Screening Practices in the Prehospital Setting

The GETAC Stroke Committee aims to gather valuable insights into the current practices, knowledge, and training.

FROM THIS SIDE

Insight • Inspiration • Ideas



Whether you are just starting your EMS career or have been serving your community for years, either as a career or volunteer professional, the Texas EMS Conference has something for you.

Learn about the latest advancements in pre-hospital healthcare, while learning about the latest equipment and products that support state-of-the-art emergency healthcare.

Please join your fellow EMS professionals in Fort Worth from November 24-27 for the 2024 Texas EMS Conference. I look forward to seeing y'all there!

Take care!
Joe

GETAC Participation

Attend the Governor's EMS and Trauma Advisory Council (GETAC) and have input into the future of the Texas EMS system.

November 23-25

Ask Joe: Q&A With the State EMS Director

Come spend a couple hours with State EMS Director Joe Schmider as he answers questions, responds to comments, and discusses important EMS updates.

November 26, 8:00-9:00 AM CST & 9:15-10:15 AM CST

CE: AOR, Preparatory

Texas EMS Trauma Awards

Celebrate the great work being done in Texas EMS at the awards luncheon.

November 26



Joe Schmider
State EMS Director



Texas EMS Achieves Record Participation in National Pediatric Readiness Evaluation

By Sam Vance, MHA, LP, EMS for Children State Partnership, Texas

"The Texas EMS for Children Program expresses its sincere appreciation to all the EMS agencies and FROs that participated in the assessment."

While the majority of EMS and fire-rescue agencies provide emergency care to children, pediatric calls are rare. In fact, because most agencies see fewer than eight pediatric patients per month, many EMS clinicians don't feel fully capable or confident when caring for children.

Being pediatric-ready, or ensuring agencies are trained, equipped, and prepared to care for children in accordance with national recommendations, can reduce anxiety and increase confidence. Research suggests it may also improve outcomes.

To assess agencies' readiness to treat pediatric patients, the first National Prehospital Pediatric Readiness Project (PPRP) Assessment took place from May 1 to July 31. The PPRP Assessment is based on the 2020 Pediatric Readiness in Emergency Medical Services Systems joint policy statement and technical report. This national, multi-phase initiative focuses on the prehospital EMS system and was led by the EMS for Children Program, in partnership with more than 30 national organizations and stakeholders. The assessment included all EMS agencies in Texas that transport patients, as well as First Responder Organizations (FROs) that respond to 911 calls.

Nationally, over 15,000 EMS agencies received the assessment, with more than 7,000 agencies participating! In Texas, over 1,100 EMS agencies and FROs were invited to participate, the highest number in any state. Texas had the third-highest number of participating agencies nationally, with 415 agencies. This represents the strongest response from Texas EMS agencies to any EMS assessment in over five years.

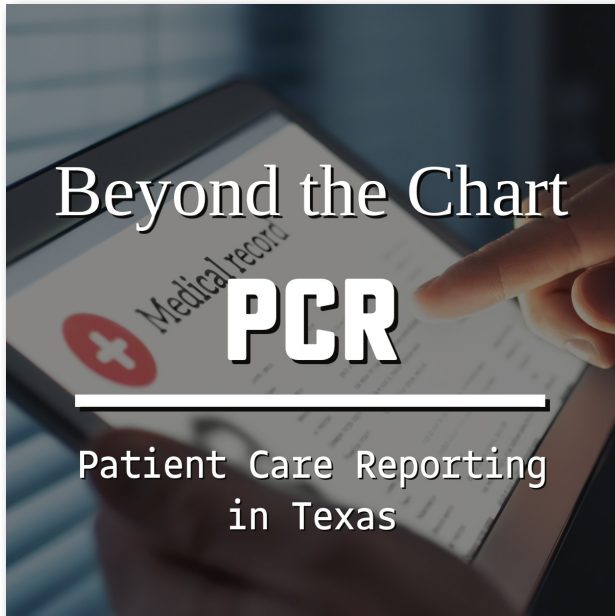
Respondents to the PPRP Assessment received an overall weighted pediatric readiness score, along with an agency-specific gap analysis report. The report also included links to evidence-based resources.

Additionally, respondents received a comparative analysis that benchmarked their agency against similarly sized EMS agencies (based on annual pediatric volume) across the United States.

At both the state and national levels, the data collected will be used to develop tools and resources that address identified gaps, ultimately helping agencies in Texas and nationwide enhance pediatric care. Similar initiatives in emergency departments have demonstrated that improved pediatric readiness can reduce mortality risk by up to 76%.

We would also like to thank the Department of State Health Services (DSHS) Office of EMS and Trauma Systems, RAC Directors, Chairs, and their staff, the EMS Fellows at UT Health San Antonio, and many others who contributed to messaging and encouraging agency participation. These results will establish important benchmarks for the future and help us understand how best to support EMS and fire-rescue agencies in further improving pediatric readiness.





Patient Care Reports (PCRs) are crucial for documenting the care provided by EMS personnel in Texas. These reports ensure continuity of care by informing healthcare professionals at receiving facilities about all prior treatments and interventions.

[Texas Administrative Code 157.11](#) outlines the responsibilities of EMS providers, which include ensuring patient confidentiality and documenting care accurately. Providers are required to submit the PCR to the receiving facility at the time of patient delivery whenever operationally feasible.

In situations where the EMS unit has a pending dispatch and a quick turnaround is needed, the code allows for an abbreviated report to be provided at the time of delivery, with the full PCR submitted within 24 hours. This flexibility helps ensure patient safety without delaying EMS units from returning to service when necessary.

In addition to state regulations, the American College of Emergency Physicians (ACEP) developed a [policy statement](#) in collaboration with several emergency medical and healthcare organizations further underscoring the importance of thorough documentation during patient care transitions. This policy stresses that both verbal and written reports are critical to avoiding potential errors and ensuring continuity of care and can be found at the following link.



12th Annual Texas EMS Hall of Honor Fund Raising Event

The Texas Association of Air Medical Services (TAAMS) invites you to the 12th Annual Texas EMS Hall of Honor Fundraising Event. This event helps support the families of EMS personnel who have died in the line of duty.

Event Details

Date: Sunday, November 24, 2024

Time: 7:00 p.m.

Location: Omni Fort Worth Hotel

Activities

- Cornhole Tournament
- Food and Drinks
- Yard Games
- Awards Ceremony



Registration Information

Visit taams.org/ for details on participation and sponsorship opportunities.

Registration closes on Sunday, November 24, 2024, at 5:00 p.m.

Come together for an enjoyable evening filled with community spirit and support for a worthy cause.



Understanding Stroke Screening Practices in the Prehospital Setting

The **GETAC Stroke Committee** aims to gather valuable insights into the current practices, knowledge, and training related to stroke severity screening and assessment tools used in prehospital settings. This brief [survey](#) is designed to identify areas for improvement and opportunities for targeted education, ultimately enhancing the quality of care provided to stroke patients.

Purpose of the Survey

The primary goal of this survey is to understand how EMS professionals currently approach stroke screening and assessment. By collecting data on existing practices and knowledge levels, we can pinpoint specific areas where additional training or resources may be needed. This targeted approach ensures that EMS teams are well equipped to provide the best possible care to stroke patients, potentially improving outcomes and saving lives.

Importance of Participation

Your candid responses and active participation are crucial to the success of this assessment. The insights gained from your feedback will directly influence the development of educational programs and resources aimed at addressing identified gaps. By participating, you are contributing to a larger effort to enhance the capabilities of EMS professionals in stroke care.

Anonymity and Confidentiality

To ensure the integrity of the data and the privacy of respondents, all survey responses will be kept anonymous in the final reports. This confidentiality encourages honest and open feedback, which is essential for obtaining accurate and useful information.

Call to Action

We greatly appreciate your participation in this important survey. Please complete the survey by the closing date of **December 1, 2024**. Your involvement is not only valuable but also instrumental in driving improvements in stroke care within the EMS community.

Thank you for your time and dedication to this critical initiative. Together, we can make a significant difference in the lives of stroke patients.



Early vaccination a defense against serious illness as new flu season begins this month

Posted October 1, 2024

Texas Influenza Awareness Day is today, and DSHS recommends Texans get vaccinated against flu as soon as possible to protect themselves and their families from illness. Because the body takes about two weeks to make flu antibodies after getting a flu shot, early vaccination is critical as flu cases traditionally begin to rise this time of year.

“We recommend everyone ages six months and older get a flu shot as soon as possible,” said DSHS Commissioner Jennifer Shuford, MD, MPH. “Flu illness spreads rapidly through our communities, and unfortunately small children and older adults, pregnant women and people with chronic health conditions often suffer the most severe effects. The time is now to protect yourself and your family from flu illness.”

People with flu are most contagious in the first three days of their illness. Virus is spread through droplets that people with flu make when they talk, cough or sneeze. Those infected may begin showing symptoms quickly, and many will experience fever and/or chills, muscle aches, cough and sore throat, fatigue, and headaches. Children may more often experience vomiting and diarrhea during flu illness.

DSHS advises those with symptoms of flu to stay at home and avoid contact with other people, especially those who might be at greater risk of serious flu illness. Those in high-risk groups with flu symptoms should contact their physicians immediately as antiviral treatments are available but are most effective when prescribed soon after symptom onset. These drugs can reduce flu symptoms faster and may also prevent flu illness complications.

It is also recommended those with flu not visit the emergency room if their symptoms remain mild. If for 24 hours they remain fever free and symptoms improve overall, they may return to normal activities.

For more flu prevention tips, visit dshs.texas.gov/influenza-flu. Information about where to find a 2024-2025 flu vaccine, as well as vaccine for other respiratory illnesses like COVID-19 and RSV, can be found at Vaccines.gov. You can also contact your local health department, doctor, or pharmacy to learn where you can get a flu shot.

“My life has been devastated by the loss of my daughter.”

— Veronica, who lost her daughter Danica to deadly fentanyl



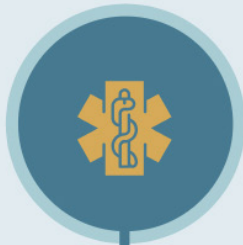
OnePillKillsTX.com

Fighting the Fentanyl Crisis

Five Texans die every day, on average, from fentanyl poisoning. Understanding the dangers of fentanyl is crucial in reducing the threat it poses to you and your loved ones.

The Year In Review

Commitment and Collaboration



EMS



DESIGNATION



FUNDING



COUNCILS



MAB

In 2024, the EMS-Trauma System Section continued its focus on system advancements, facility designation, data access to monitor outcomes, and the continued support and enhancements of the twenty-two regional advisory councils. Through collaboration and the unwavering dedication of our partners, we continued to strengthen our statewide network, ensuring timely access to life-saving care for all Texans.

We are actively updating our practices and addressing tasks identified from 2022 to 2024 as we prepare for the 2025 Texas Legislature assignments.

2022	Initiated monthly stakeholder conference calls.	Amended the Stroke Facility Designation Rule and the Trauma Service Area Rule.	Sponsored six TOPIC Courses and three Optimal Courses.
	Collaborated with regional advisory councils (RAC)s to implement and manage the Senate Bill 8 EMS Recruitment and Retention project.		
2023	Developed and implemented a Perinatal Quality Assessment Performance Improvement Module.	Amended the Maternal Level of Care Designation and Neonatal Level of Care Designation Rules.	Sponsored two TOPIC Courses and three Rural TOPIC Courses.
	Exceptional Item approved to provide an additional \$150,000 annually for each RAC.		
	Developed and implemented guidelines and training for department-approved survey organizations, surveyors, and facilities, focusing on maternal and neonatal designation surveys.		
2024	Proposed amendments to the Medical Advisory Board Rules.	Developed rules for Dialysis Transport.	Sponsored two TOPIC Courses and two Rural TOPIC courses to expand the number of Texas TOPIC instructors.
	Completed the development of the RAC performance criteria and a standardized self-assessment with RAC leader's participation.		
	Proposed changes to Chapter 157 include definitions, RAC requirements, trauma facility designation requirements (ending August 31, 2025 and starting September 1, 2025), denial, suspension, revocation of designation, and funding.		



Legislative Session

89th Regular Legislative Session

The Texas Legislature is gearing up to convene on January 14, 2025. Texas is fortunate to have multiple stakeholder organizations that prioritize bills and disseminate the intent of the bill and provide updates to stakeholders. This is a valuable resource. Determine the organization most suited to your agency and identify how you can receive their updates. Explore the resources available to help you stay informed during the upcoming session.

Follow the Process

Stakeholders should log into the [Texas Legislature Online](#) and create a bookmark to follow introduced bills. Identify who in your organization coordinates the legislative review process and defines the impact of the bills. Open the link while reading this to familiarize yourself with the available information.

Left Column Information

Texas House

Learn about the Speaker of the House.

House Committee Meetings

Schedules, live broadcasts, email alerts, mobile devices, room schedules.

Registering for House Committee Meetings

Kiosks, instructional video.

A Kids Guide to the Texas House of Representatives: Available as a PDF.

Your Representative

Identify your Representative and their committee memberships.

Texas Senate

Review information about the Lieutenant Governor.

Your Senator

Identify your Senator and their committees.

Committee Meeting Link

Lists bills in or out of committee (useful for the 89th session).

Review the Toolbars

Red Toolbar (Right)

Help, FAQ, Site Map, Contact, Login

Blue Toolbar

Home, My TLO, House, Senate, Legislation, Search, Committee Calendar

Explore Each Tab

Understand the information provided in each tab. Many stakeholders are familiar with the middle section of this site, which allows you to look up current and past bills.

The “**How Do I**” section offers helpful information for navigating the upcoming session. The final section outlines steps for tracking selected bills, which stakeholders typically find especially useful.

The right column, like the other two, provides resource information. The third section focuses on the legislative process, with links to “**How a Bill Becomes Law**” and “**How to Follow a Bill.**”

Click on each link to review the information, increase your knowledge, and prepare for the 89th session.



EMS Highlights

Senate Bill 8

Our initiative aimed to address the current and future needs of our communities by increasing the Emergency Medical Services (EMS) workforce and improving retention rates, ensuring that all areas receive the critical support they need.

As of September 30, 2024



DSHS Online Licensing

We have streamlined our online licensing to include processes like personnel roster updates, vehicle replacements, and prescreening.

The ability to manage transactions such as adding a medical director, AOR, and location changes are also now available. Further enhancements are underway.

Current Statistics for EMS Personnel as of October 1, 2024	
Emergency Care Attendant (ECA)	1,975
Emergency Medical Technician (EMT)	41,193
Advanced Emergency Medical Technician (AEMT)	3,434
Emergency Medical Technician-Paramedic (EMT-P)	22,492
Licensed Paramedic (LP)	9,363
EMS Educators	3,866
EMS Agencies	736
First Responder Organizations	630

Fingerprinting Requirement for Renewal Project Completed

In June 2020, the Department of State Health Services (DSHS) mandated that all EMS certificate and license holders complete a fingerprint-based background check during their renewal, if not already done. An Excel spreadsheet was provided to help personnel identify those needing fingerprint submission. As of July 1, 2024, all personnel are expected to have completed both the recertification and fingerprinting processes.

To avoid delays in renewing your certification/licensure, we recommend starting the recertification process three to four months before your expiration date, as certification/licensure cannot be extended beyond that point.

This policy applies to all cases (refer to the late renewal option if needed).

Once licensees complete the initial fingerprinting process, there is no need to repeat it unless required for recertification. The Department will unsubscribe the licensee's background check with the Department of Public Safety one year after the certification or license expires. If a licensee reapplies after this one-year period, a new fingerprint background check will be required.

Important: Only criminal or disciplinary information not previously reported or incidents that occurred since your last application (initial or renewal) must be disclosed to DSHS.





Designation Highlights

Facility Calls

Monthly virtual meetings are held for all designated facilities to support program leadership and promote statewide collaboration and problem-solving to improve trauma, stroke, maternal, and neonatal care in Texas.

Total designated facilities as of October 2024

Performance Measures



Maternal
217



Neonatal
225



Stroke
190



Trauma
299

Designation Process

Non-contingent: 30 days from application to award
Contingent: 60 days from application to award

Current Status Numbers

Trauma: 47 days (contingent), 22 days (non-contingent)
Stroke: 21 days
Maternal: 42 days
Neonatal: 32 days

Training

Perinatal Quality Assessment Performance Improvement (QAPI)
1,200 attendees.

Disaster Management Emergency Preparedness (DMEP) Course:
Sponsored for Trauma Medical Directors and Program Managers.

Workgroups

Acute Stroke Ready Level IV Workgroup
Added monthly calls in addition to existing Level I-IV calls.

Injury Severity Score (ISS) Workgroup:
Ongoing meetings, no major updates.

Collaboration

Texas AIM and Maternal Designation Collaboration:
Alliance for Innovation on Maternal Health, A quality initiative to enhance birth safety, improve maternal health, and save lives.

Designation Survey Guidelines
Began on January 1, 2024.

TOPIC Courses

The department offered the Trauma Outcomes and Performance Improvement Course (TOPIC) to rural Level IV and Level III facilities. Due to the high cost of educational courses, this opportunity allowed multiple attendees from each program to participate. The target audience included the Trauma Program Manager, Trauma Medical Director, and Trauma Registrar.

- **Level IV facilities:** Three courses were offered with a total of 68 attendees.
- **Level III facilities:** Two courses were offered with a total of 50 attendees.

A revised TOPIC course was provided on August 20, 2024. This initiative aimed to strengthen the Performance Improvement (PI) process, addressing top deficiencies, and fostering better teamwork between the Program Manager and Medical Director.



Funding

Funding Strategy

The EMS Trauma Systems Section funding unit is responsible for the trauma uncompensated care (UCC), regional advisory council (RAC) allotments, the EMS pass-through allotment, and the RAC system development funding allocations. This team also addresses the extraordinary emergency funding (EEF) requests. The team completed two major grant projects in 2024.

\$13,189,405.00

EMS Allotment

Emergency Medical Services (EMS) funds of \$13,189,405.00 for fiscal year (FY) 2025 were allotted to the Regional Advisory Councils (RAC) for distribution. This distribution was completed on September 24, 2024. Each RAC received funding based on a calculation of the number of emergency runs that occurred in its respective counties and the geographical land area and population of its region.

\$10,202,312.85

UCC Funding

Uncompensated Trauma Care (UCC) funds totaling \$10,202,312.85 for FY 2024 were distributed to 290 hospital facility applicants on July 19, 2024. The Standard Dollar Amount Add-On (SDA) provided to DSHS and used in the calculation of UCC distribution included funding from the Comprehensive Hospital Increase Reimbursement Program (CHIRP), which resulted in overpayments to some facilities and underpayments to others. DSHS has distributed the funds to the underpaid facilities and is in the process of collecting the overpayments.

Fiscal Year 2025

EMS Trauma System Funding for FY 2025 has an appropriated budget of **\$103,393,826**. It will be allocated to Extraordinary Emergency Fund (EFF), Emergency Medical Services (EMS), Regional Advisory Councils (RAC), administration, transfer to HHSC for Safety Net Add-On and Trauma Add-On, and Uncompensated Trauma Care (UCC).



Council Highlights

Governor’s EMS and Trauma Advisory Council (GETAC)

The Governor’s EMS and Trauma Advisory Council (GETAC) advises and makes recommendations on developing and implementing rules for the Texas emergency healthcare system.

Rules

GETAC was instrumental in moving the trauma rules package through the rule proposal process by working collaboratively with the EMS/Trauma Systems Section (EMS/TS) on new and revised rules improving emergency/trauma care across the spectrum of prehospital and emergency care of Texans.

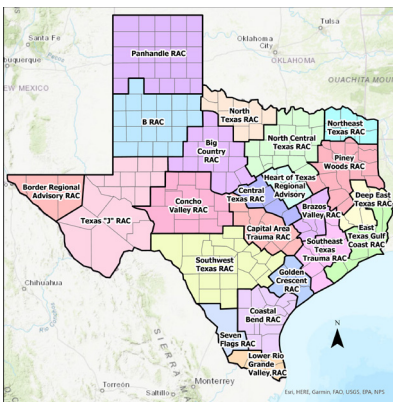
System Performance Improvement

The GETAC System Performance Improvement Task Force worked with all GETAC committees to identify the top five areas of focus for improvement opportunities across the state. The task force is now discussing reporting structure, stratification, frequency of reports, data transparency, and specific aims for selected measures.

Upcoming Meeting

The next regularly scheduled GETAC council and committee meetings will be held in conjunction with the Texas EMS Conference at the Ft. Worth Convention Center on November 23-25, 2024. For meeting information, such as dates, times, and locations, please visit the GETAC [webpage](#). Virtual meeting links and agendas will be posted by November 15.

Regional Advisory Councils (RACs)



Monthly Calls

Throughout 2024, monthly meetings with RAC Chairs and Executive Directors have provided an open forum for questions and support on funding, contracts, EMS/TR reporting, and upcoming RAC Performance Criteria and Self-Assessment requirements. These meetings also discuss any RAC assignments or requests from GETAC or its committees to keep the system moving forward between quarterly GETAC meetings.

DSHS Legislative Appropriations Request

An Exceptional Item (EI) request was approved to provide an additional \$150,000 annually for each RAC to keep pace with increasing responsibilities, including compliance with statutory requirements.

Documents Posted

The RAC performance criteria and a standardized self-assessment are posted to our [website](#).



MAB Highlights

The Medical Advisory Board (MAB) provides opinions and recommendations to the Texas Department of Public Safety (DPS) on an applicant's or license holder's ability to safely operate a motor vehicle or exercise sound judgment in the proper use and storage of a handgun.

Each panel member prepares an independent written report for DPS, offering an opinion on the individual's capabilities and may include recommendations for DPS's next actions.

Board Members

We currently have a total of 23 physicians on the board. We are in the process of appointing 16 new physicians to the board, who are currently being approved by the commissioner.

Makeup

The MAB program serves as an injury prevention element of the department. We aim to have a diverse group of physicians covering specialties commonly seen by the MAB unit.

Upcoming Meeting

The next regularly scheduled MAB meeting will be held November 22. Visit the MAB [webpage](#) for information. A virtual link and agenda will be posted by November 13.



Staffing

Ten staff members and a manager were added to the program to address the backlog of cases.



Process

Additional staff has allowed us to improve our processes and increase efficiency.



Outcomes

We have reduced our backlog, and cases received in August are going to the board.

Contact Us



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Programs

For information on our programs, please see the websites listed below.

[EMS Personnel](#)
[EMS Provider Agencies](#)
[First Responder Organizations](#)
[EMS Education Providers](#)
[Out of Hospital Do-Not-Resuscitate](#)

[Maternal Facility Designation](#)
[Neonatal Facility Designation](#)
[Stroke Facility Designation](#)
[Trauma Facility Designation](#)
[Medical Advisory Board](#)

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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

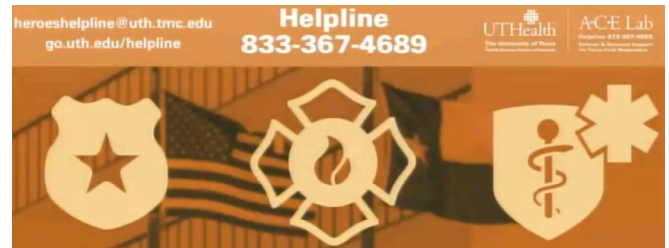
Public notice of disciplinary action by the Department of State Health Services and the Consumer Protection Division, Consumer Safety Unit.

Staff Contacts

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



Texas Department of State Health Services



the **CODEGREEN** campaign



National Registry Key Initiatives



For more information on all National Registry initiatives, scan this QR code or go to <https://linktr.ee/nremtcomms> for the latest updates!

- ALS Redesign Update
- AEMT Student Minimum Competencies
- Table of Authorities / EBGs
- Scaled Scores
- NCCP Update and EBGs

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.