

9.d. GETAC EMS Committee Update to Council - March 2025

Chair: Chief Kevin Deramus, LP

Vice-chair: Chief James Campbell, LP



EMS Committee

2025 Committee Priorities

Strategic Plan Pillar & Objective	Strategy and Implementation Activity
<p>1. <u>Clinical Elements - Coordinated Clinical Care</u>: <i>Improve timely access to care for urgent conditions regardless of geographic location across the state.</i></p>	<p>a. Strategy: <i>Develop standards to minimize the time from the onset of illness or injury to definitive care. (This is Strategy 2 under the Coordinated Clinical Care section of the Clinical Elements Pillar.)</i></p> <p>b. Implementation Activity: Review and implement best practice guideline that have proven to reduce EMS Wall Times and improved throughputs of patient which ultimately improve care for community EMS departments as well.</p>
<p>2. <u>Clinical Elements – Emergency Medical Services:</u> Evaluate PSAP centers throughout the state to determine if pre-arrival, lifesaving instructions are being provided. If it is determined that pre-arrival instructions are not being provided, advise the DSHS on strategies to ensure that all 911 callers are afforded this service. Overall goal to reduce RLS responses when not indicated.</p>	<p>a. Strategy: Develop a survey for PSAP centers, or the Council of Governments (COGs) that oversee PSAP centers to determine if any pre-arrival instructions are provided when a caller accesses 911. If it is determined that the need exist, advise the DSHS on strategies for partnering services to assist in filling the need or advise the DSHS on contracting opportunities for this service</p> <p>b. Implementation Activity: The committee formed a workgroup in 2024 to address this concern. Initially the workgroup with support of the Regional Advisory Councils will collect data on the use of RLS and those using EMD to triage the use of RLS. The committee will address gaps in statewide coverage of EMD use and overuse of RLS due to that impact. Recommendation strategies for correction may include statewide initiative (much like whole blood TF) to address this growing concern. Workgroup formation underway with Workgroup Chair – Arron Clouse chairing</p>

EMS Committee

2025 Committee Priorities

Strategic Plan Pillar & Objective	Strategy and Implementation Activity
<p>3. <u>System Support – Essential emergency Healthcare Systems:</u> Encourage review of legislation and/or regulations supporting further innovation and enhanced integration of EMS into the Texas emergency healthcare system.</p>	<p>a. Strategy: Provide recommendations guiding regulatory and legislative decision-making relevant to the Texas Emergency Healthcare. (This is Strategy 1 under the Essential Emergency Healthcare Systems of the System Support Pillar)</p> <p>b. Implementation Activity: Review current 157.11 rules in conjunction with statewide EMS participation and guidance from DSHS using a workgroup format that will update the EMS Committee on a quarterly basis and thereby updating the council on the progress of the review in preparation for the rule change process..</p>

EMS Committee

2025 Committee Priority Outcomes

Priority Not Implemented

Priority Activities Recorded

Priority Completed and Monitored

Committee Priorities	Outcomes	Status
Rule Revision 157.11 and 157.14	<i>Dwayne Howerton is chairing our workgroup on rule revision to provide a framework for recommendations to DSHS / GETAC Council for revision recommendations.</i>	
Workplace Violence on EMS Personnel	Chief Hayes is leading the newly created committee workgroup to discuss the every increasing concern and problem of worquarter support of DSHS staff. Finalizing data survey to EMS providers for next GETAC Quarterly Meetings.	
Reduction of Red, Lights and Sirens usage.	Previously, the Committee’s White Paper on the use of RLS. With the committee returning to full 17 member participation in 2025 we will include a workgroup that focuses on the appropriate use of RLS (red lights & sirens). The workgroup work is underway.	
Stroke Workgroup	Donald Janes – Chair our workgroup that is corresponding and working directly with the Stroke Committee provided updates and continues to work to approve stroke recommendations	

EMS Committee

2025 Committee Priority Outcomes

Priority Not Implemented
Priority Activities Recorded
Priority Completed and Monitored

Committee Priorities	Current Activities	Status
<p>Strategy: Develop standards to minimize the time from the onset of illness or injury to definitive care. (This is Strategy 2 under the Coordinated Clinical Care section of the Clinical Elements Pillar.)</p>	<p>Committee petitioned GETAC Council in late 2024 for broad collaborative TASK FORCE that will bring all affected into proactive discussions to identify problematic area and initiate proven strategies to increase patient throughput and return EMS units to serve their communities timely and efficiently. Last years Committee work on the Wall Time white paper will serve as a primary source document for the Task Force work and understanding of definition and time parameters associated with an EMS response call. Chief Wait – is Chairing our Task Force - coordinating</p>	
<p>Strategy: Develop a survey for PSAP centers, or the Council of Governments (COGs) that oversee PSAP centers to determine if any pre-arrival instructions are provided when a caller accesses 911. If it is determined that the need exist, advise the DSHS on strategies for partnering services to assist in filling the need or advise the DSHS on contracting opportunities for this service.</p>	<p>The GETAC EMS Committee has created a workgroup to work monthly on this initiative that will initially gather data from the council of governments and by the assistance of the regional advisory councils to provide a clear state-wide picture of the current problems of what we believe to be an overuse of RLS (red lights and sirens) usage by EMS and First Responders in the State of Texas. This is believed to be a parallel problem of lack of EMD dispatching initiatives that leaves TCO’s with limited options of triaging 911 responses. This data and workgroup initiative is in progress. – Aaron Clouse chairing workgroup meeting monthly for data collection.</p>	
<p>Strategy: Provide recommendations guiding regulatory and legislative decision-making relevant to the Texas Emergency Healthcare. (This is Strategy 1 under the Essential Emergency Healthcare Systems of the System Support Pillar)</p> <p>b. Implementation Activity: Review current 157.11 and 157.14 rules in conjunction with statewide EMS participation and guidance from DSHS using a workgroup format that will update the EMS Committee on a quarterly basis and thereby updating the council on the progress of the review in preparation for the rule change process..</p>	<p>Committee has formed a working workgroup that is meeting monthly in conjunction with DSHS representation to review and make recommendations for rule changes. Our initial meeting was held January 14th, 2025. Follow-up discussion was also held and Dwayne Howerton is chairing this workgroup. We have discussed time-lines and will receive an rule revision update process from DSHS State EMS Director at our February meeting. The workgroup will provider quarterly updates and concepts of rule revisions to the public at our quarterly GETAC EMS Committee Meeting and further update this council at those meetings.</p>	

EMS Committee

Priority Not Implemented
Priority Activities Recorded
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2025 Recommended Performance Improvement Initiatives

Committee PI Initiatives	Recommended Performance Measure	Accepted
<p>Reduction of RLS (Red Lights & Sirens) usage during EMS responses to 911 calls and transportation of patients to definitive care.</p>	<p><i>Reduce the use of RLS by 50% for nonpriority 1 responses. Using existing EMD priority determinants to identify universal priority response.</i></p> <p><i>Reduce the transport of patients while using RLS by 80% for nonpriority 1 patients. Forming workgroup to lead this charge.</i></p>	
<p>Reduction of EMS Wall Times in Texas and analyze the impact of the associated white papers on the issue.</p>	<p>Gained Council approval to form a wide collaborative Task Force to analyzes and make recommendations regarding “Wall time reductions” across Texas.</p> <p>Chief Wait has been assigned our Chair for this Task Force and is organizing.</p>	

GETAC Committee/Stakeholder No Action Item Request for Council March 2025

Kevin Deramus, LP
EMS Committee



TEXAS
Health and Human
Services

Texas Department of State
Health Services

9.d.A. Approval: Workplace Violence in EMS Survey

Deferred until Q2

