

Texas EMS Trauma News

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Harvey response thank you

On Friday August 25, Hurricane Harvey made landfall between Port Aransas and Port O'Connor, Texas, as a Category 4 storm with winds reaching 130 mph. Over the next four days Texas experienced catastrophic and record breaking rain, displacing more than 30,000 people, and resulting in more than 17,000 rescues. Coordination between federal agencies, law enforcement, emergency medical services and area hospitals proved invaluable as area trauma centers experienced flooding and evacuations. The Catastrophic Medical Operations Center (CMOC) and Emergency Medical Task Force (EMTF) coordinated response efforts and utilized 255 assets including 13 ambulances, 25 air ambulances, mobile medical units, ambulance strike teams and registered nurses, along with medical incident support teams, to evacuate and transport 3200 patients.

I want to thank the EMS and Trauma Systems community of Texas for your outstanding service in response to Hurricane Harvey. The commitment you have shown to the safety and well-being of the citizens of Texas is unwavering. Your dedication and compassion is a testament to the strength and character for which our state is known. You have set the standard for response and preparedness. As we continue to learn and prepare ourselves to meet the ever increasing challenges of future disasters, your efforts are appreciated and recognized.

Jon Huss, Associate Commissioner
DSHS- Consumer Protection Division

Harvey - responses from the ground

Response

*Chief Tim McIntosh, EMS Director
City of Port Aransas
Division of Emergency Services
CBRAC-Region U Chair*

I've been tasked with giving my perspective of the category 4 hurricane that has forever changed my community and the citizens that we, as the EMS Division, proudly serve. Just imagine that we are sitting down together in a coffee shop or bar as I share this story.

I have been asked the same questions over and over since Harvey.

Was it my decision to stay during the storm?

Were you scared during the storm?

What were you thinking about?

Did your preplan work, what would you do different, what did you learn, would you ride the storm out again if faced with another hurricane?

City leadership and the public safety group had been watching the tropical storm form and grow into a category 1, possible 2 hurricane. All of the weather reports had the storm 5 days out (120 hours), or at worst 4 days out (96 hours). We had meetings to review basic responsibilities of our response and the mayor called for a voluntary evacuation. That night, my family discussed packing "go bags" just in case things began to deteriorate.

The storm began to slowly strengthen on Wednesday late afternoon and evening and on Thursday morning we met. The potential magnitude of storm began to set in after an early call from the National Weather Service. The city leaders and public safety group all were in agreement with the mayor's decision to call for a mandatory evacuation beginning around noon on Thursday. **This early mandatory evacuation potentially saved hundreds to thousands of lives.**

Thursday evening came and went and on early Friday morning, I reported to city hall for our first meeting of the morning. Everyone's cell phones were working overtime. The hurricane had grown stronger and larger overnight and was a category 3 with the potential to be a category 4. The winds had picked up and were steady at 30-35 mph. There are only two roads to leave our island and one of those is a ferry boat system that had already shut down operations. The other road has several bridges and road flooding or washout is not uncommon.

I began receiving reports of area emergency rooms closing. We have no hospitals, urgent care center or any medical services other than our one family physician and our EMS system. I notified the Communications Center at 09:20 we were suspending EMS operations and

notified my chain of command of my decision. I then notified my staff to begin packing up their belongings to evacuate. By 13:00 (that's 1:00 p.m. for you normal folks), everyone had bunkered down or were leaving within the hour.

The wind steadily increased throughout the afternoon. We had our last phone call with the National Weather Service at 16:30 and for the first time, I got concerned and scared when the chief meteorologist said, "Guys, (insert long pause here) good luck." He didn't say, "see you tomorrow, I'll call you later" no, it was "good luck".-

I called my wife and tried to get through the call without crying and the whole "just in case I don't survive this". That would be the last she would hear from me for 22 or 23 hours. We lost all power and phones somewhere around 18:00.

I listened to the winds continue to grow stronger until around 21:30 when you could feel the wind beginning to shift and change directions. Twenty minutes later we heard a window crack, break and then water began coming in. We tried to find out where the water was coming from in pitch black using flashlights and cell phone lights, splashing through the hallway. We reached the end of the hallway and heard several more windows breaking that we couldn't see. This was a bit unnerving, windows shattering in almost total darkness.

We determined which room the water is coming from, (water pouring out from under a door, usually a good clue). We pushed the door open, there is total blackness and the three of us are literally sucked into the dormitory apartment room. The door slams shut behind us and myself and the city manager grab the door pull and pry it open enough to allow me to wedge myself into the door frame and push as he pulled. The wind is as deafening as having a freight train in your ear and rain is pelting us at 100 mph.

I'm a pretty good size dude at 6 feet and 225 lbs and I'm pushing the door open as our city manager is wiggling between the door and me trying to get back to the hallway. As he gets through, the wind literally pushes me straight back and the door slams shut. Now the only issue is that three of us went in and only two of us are now out. Our emergency manager is on the other side yelling, "Hey guys, hey guys!". We begin pushing the door again, trying to get it open as our emergency manager is pulling. I remember the door being open about 3 or 4 inches and I looked at our city manager and jokingly asked, "Are you sure we have to let him back in?" We got the door open and retrieved our emergency manager.

At midnight the wind again shifted dramatically and increased in speed and strength. In the next two hours, more windows shattered and now the wind was so strong it felt like the building was "breathing". It felt as the building was moving back and forth. This is the second time I really wondered if we'd survive with that wind strength or if the building would cave in.

It was a very long 6 hours with little to no sleep listening to the wind and rain. The wind died down somewhere between 03:00-05:00. The first break of daylight was around 06:10 and we all were able to finally see the beginning of what Harvey had done.

I stepped outside and the quiet was incredible, no birds, no electricity, no cars on the road and truly a sense of heaviness hung in the air. Every vehicle in the parking lot had shattered windows. I walked down to my Chief's vehicle and shut off the light bar that had been turned on by the rocks and other items. My windows were shattered, my speedometer screen destroyed, I had two inches of glass on my front seats and when I looked in the back at my first in kit, there were little tree frogs jumping around in the rear compartment of my vehicle.

We decided to wait until there was enough light to drive safely. We loaded into my Tahoe and I put my tactical vest on my seat to avoid getting glass in places that would be embarrassing to have removed. There was truly a disturbing quietness as we pulled out of the parking lot and headed West towards town. I jumped out to check on my home and this was my first view of just how devastating the storm was to our Island. There were RV's turned upside down or on their sides and some were totally collapsed to the ground.

We continued towards City Hall and every power and cable line was down. There were boats and yachts sitting in the middle of the road to navigate around. The pictures you see don't begin to show the damage inflicted as we got our first look at some of the condos and local businesses. We arrived at City Hall and evaluated the Civic Center for use as an EOC. At 07:50 the first citizen arrived with his dog. His home was all but destroyed by another building flying into it. I was choked up to see him because I was with him when his wife of over 35 years died in their home. We both have family from the same backwoods of Kentucky.-

My emergency manager and I left for search and rescue at 08:00. We drove to the RV parks first hoping to find survivors. I would guess that 70% of all of the RV's at the first three parks we went to were totally destroyed. I went quickly from home to home calling out. The wind made listening difficult. We continued Search and Rescue until noon with a check in at 10:00. We didn't have any form of communication. We learned a 3G phone would work as our first citizen had one, but a 4G or higher was worthless. Our repeater for the radio wasn't working, and despite our circumstances I found myself thinking it was like being in a really bad "B" horror movie. I wouldn't have been too surprised to see Godzilla come out from somewhere.

We returned to the EOC and our other resources began arriving and my attention switched from search and rescue to setting up a medical aid station and providing health care for our community. I did finally get to speak to my wife at 16:00 on Saturday and got to hear her voice.

To answer those questions I mentioned earlier. What led me to stay during the storm? I am a man of strong faith and I prayed about staying or going. I felt as though I was to stay and be there for my community as soon as weather allowed. Was I scared? As you've read, I had really only two events where I was worried about not surviving. What was I thinking about? Honestly, I took inventory of my life and wondered

if my life has made a difference and where has it made a difference. Would I stay again if faced with another hurricane? I would once again pray and then decide.

Did your pre-plan work? Yes and no. Having a pre-plan gave me a good starting point of reference. The secret to any large scale event is to realize that you cannot plan for every single issue that you will be facing on a day to day and hour to hour basis. You must remain flexible and have the ability to adapt and change in a moment's notice. If you get so locked in on your pre-plan "to do list" and are not flexible, you increase your chances of failure.

Final thoughts: You get one shot at living your life, live it with passion, integrity and be the very best professional you can be in your job. Love your family and forgive others often and easily. Your job does not define who you are, your character and convictions define who you are and how others see you.

Response

Eric Epley, NREMT-P, CEM

Executive Director, Southwest Texas Regional Advisory Council (STRAC)

Hurricane Harvey made landfall in Rockport, TX on August 25th, 2017 as a category 4 major hurricane packing winds of more than 130 mph. It left a path of destruction that covered nearly a quarter of Texas, from Corpus Christi to the Louisiana border and northward to Central Texas. Harvey dumped dozens of inches of rain causing historic flooding and remained over Texas for more than five days. Harvey's path brought the storm back over the Gulf of Mexico several times, allowing it to recharge and impact additional communities. In total, Harvey made landfall in Texas three times, decimating infrastructure, stranding Texans in elevated flood water and destroying businesses, homes and lives.

What the world witnessed following this merciless storm was nothing short of inspiring. News outlets broadcast videos of hundreds, if not thousands of Texans leaving their homes to render aid to communities impacted by Hurricane Harvey. Citizens arrived with boats, trucks, trailers, food, water, clothing, cleaning supplies and other relief supplies to assist their fellow Texans in their time of need. State agencies activated emergency response teams to assist affected jurisdictions with critical public safety resources. Among these responders was the Texas Emergency Medical Task Force, or TX EMTF. The Texas Emergency Medical Task Force was developed following Hurricane Ike in 2008, and is comprised of eight geographic regions which coordinate regional response capabilities and provide resources to the statewide response effort during state-level activations. The program is comprised of nine components: Ambulance Strike Teams, Ambulance Buses, Air Medical Resources, Mobile Medical Units, Infectious Disease Response Units, Nurse Strike Teams, Ambulance Staging Management Teams, Medical Incident Support Teams and Mortuary Response Teams. Ambulance Strike Teams are comprised of five ambulances with an assigned Strike Team Leader, and they work closely to Ambulance Buses, which are capable of carrying up to 20 litter patients. Air Medical Resources are coordinated through the EMTF Program, and provided by air medical agencies from across the State. Mobile Medical Units are "disaster emergency rooms", capable of providing resuscitative and stabilization of critical patients and management of basic emergency medical needs within a community following a disaster. Ambulance Staging Management Teams ensure the safety and readiness of hundreds of deployed assets and personnel, providing them with important time-sensitive mission-related information in austere environments. Medical Incident Support Teams work with local government, Regional Health/Medical Operations Center, Texas Disaster Districts and healthcare institutions to assess healthcare needs and provide information and resources to support emergency needs following a disaster.

Activated by the Texas Department of State Health Services, the TX EMTF quickly assembled 100 Ambulances, 13 Ambulance Buses, 9 Air Ambulances, 3 Mobile Medical Units, 4 Staging Management Teams and 7 Medical Incident Support Teams, positioning those resources in San Antonio to await requests for assistance. These resources were quickly deployed to support evacuation prior to landfall. As the storm grew in size and intensity, TX EMTF resources raced to assist affected jurisdictions and healthcare institutions with evacuation and other critical needs. For 36 hours, EMTF resources worked alongside local EMS and Fire Departments evacuating hospitals, nursing homes and assisted living facilities. Medical Incident Support Teams were embedded in local Emergency Operations Center, Texas Disaster District Committees and Regional Health/Medical Operations Centers to coordinate resource and assistance requests. Following the storm, a Type 1 Mobile Medical Unit was deployed in Ingleside, providing much needed medical care to hundreds of citizens impacted by Hurricane Harvey. Several Ambulance Strike Teams were assigned to respond to 911 calls for agencies that lost ambulances during the storm or were unable to manage the increase in emergency calls, especially due to long transport times because of closures of local emergency departments impacted by the hurricane. EMS Units remained in place to allow local EMS staff to handle any personal impacts of the storm as it passed through their community. Several EMTF crews assisted local EMS and Fire personnel to clean up their stations and homes, to allow them to get back to work.

As clean-up was undertaken in communities across the Coastal Bend, Harvey was only just beginning to impact communities across Southeast Texas. Because of the overwhelming response by EMTF member agencies, the program was able to pivot and support additional jurisdictions and healthcare institutions from Katy to Orange. Ambulances and Ambulance Buses were sent to assist with evacuations of hospitals and nursing homes that were inundated with floodwater, Mobile Medical Units were deployed in Pasadena and Orange and Air Operations continued out of Houston, Beaumont and other metropolitan areas with hospitals impacted by the floodwaters and loss of infrastructure.

In all, Texas EMTF Ambulances and Ambulance Buses transferred over 3,200 patients and treated over 1,800 people at the three Mobile Medical Units. At the height of the response, Texas EMTF member agencies had over 500 personnel and 250 assets activated across the State of Texas. Even as this article is being written in early October, EMTF continues to provide support to recovery operations in South East Texas, providing ambulances to communities that continue to require state assistance.

First Responder PPE Recommendations

The Interagency Board for Equipment Standardization and Interoperability (IAB) has issued recommendations on the use of personal protective equipment and decontamination products for first responders against exposure hazards to synthetic opioids, including Fentanyl and Fentanyl Analogues. The document can be found at <https://www.interagencyboard.org/publications/documents>.

Where do I find it? - Trauma Registry Responsibilities and Requirements

Reminder: Pursuant to Texas Administrative (Code Title 25, Part 1, Chapter 103, § 103.4), all EMS providers are required to report all run data to the Texas EMS & Trauma Registries. To learn more about reporting requirements, please visit <https://www.dshs.texas.gov/injury/rules.shtm>

For information on how to set up an account with the Texas EMS & Trauma Registries, please contact the customer service team at injury.web@dshs.state.tx.us or call the toll free number at 1-800-242-3562.

Frequently asked questions about the Texas EMS & Trauma Registries [http://www.dshs.texas.gov/injury/Texas-EMS-Trauma-Registry---Frequently-Asked-Questions-\(FAQs\).doc](http://www.dshs.texas.gov/injury/Texas-EMS-Trauma-Registry---Frequently-Asked-Questions-(FAQs).doc)

EMS refresher courses in Texas

Education programs in Texas rarely hold state approved refresher courses, but the National Registry **will accept CE hours in lieu of a refresher course!** Click on the applicable link below to see the CE breakdown under the Traditional Model tab.

ECA - <https://www.nremt.org/rwd/public/document/emr-recert>

EMT - <https://www.nremt.org/rwd/public/document/emt-recert>

AEMT - <https://www.nremt.org/rwd/public/document/advancedemt-recert>

Paramedic - <https://www.nremt.org/rwd/public/document/paramedic-recert>

Additional options to renew your NREMT certification are also available on the pages linked above. Keep in mind when using the NCCP model to renew your NREMT certification, Texas has not developed a local or state competency component at this time. The hours earned in this area should be considered flexible content unless otherwise noted by your EMS administrator or medical director.

If you have questions about renewing your NREMT certification you will need to contact National Registry directly.

For the complete list of approved CE Programs in Texas please look for the EMS CE Programs Excel document here:

www.dshs.texas.gov/emstraumasystems/formsresources.shtm#Open

As a reminder Texas will accept any CEs approved by the Commission on Accreditation for Pre-Hospital Continuing Education (CAPCE formerly CECBEMS - <https://www.cecbems.org/>) or any CEs approved for nurses and/or physicians.

Advanced Administrator of Record Course: Lessons from Harvey

Sunday, November 19, 8:30 am–5:00 pm Omni Fort Worth

We're bringing together EMS administrators, medical directors, EMTF representatives, and state and federal officials to take us through what happened before, during and after the hurricane and how Houston dealt with the devastating flooding that followed. What went well? What did we learn to improve for the next time a disaster threatens Texas? What can you

do to prepare if your service is in the middle of a disaster? If you're not in the affected area, how can you help? Join us for a fascinating day that will give you what a disaster looks like from the inside out. Administrators and all others welcome. For more information on course content, contact Joe Schmider at joseph.schmider@dshs.texas.gov. CE: Administrator or CRO

View details on class registration at: <http://texasemsconference.com/PreConClasses.html>

The Interstate Commission for EMS Personnel Practice met for the first time on Oct. 7-8, 2017 in Oklahoma City, Oklahoma. The body adopted bylaws, elected officers and held its first public hearing.

Congratulations to the newly elected officers and members of the Commission's Executive Committee:

Chairman, Joe Schmider (Texas)
Vice Chair, Jeanne-Marie Bakehouse (Colorado)
Treasurer, Stephen Wilson (Alabama)
Secretary, Andy Gienapp (Wyoming)
Member-at-Large, Donna G. Tidwell (Tennessee)
(Not pictured: Keith Wages, Georgia)

For more information on REPLICA and the Commission, please visit:

<http://www.emsreplica.org>

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

FEATURED ARTICLES

EPCC EMT Dual Credit Program Wins National Championship (Story is from the El Paso Herald Post)

<http://elpasoheraldpost.com/epcc-emt-dual-credit-program-wins-national-championship/>

Officer Safety Alert from the DEA: Carfentanil: A dangerous new factor in the U.S. opioid crisis

https://www.dea.gov/divisions/hq/2016/hq092216_attach.pdf

The Minnesota Department of Health has published a Community Paramedic (CP) Toolkit to assist employers and organizations who are planning to hire Community Paramedics. The toolkit and background resources are available on our Toolkit webpage at <http://www.health.state.mn.us/divs/orhpc/toolkit.html>

Additional Reading

NHTSA's EMS Update: <https://content.govdelivery.com/accounts/USDOTNHTSAEMS/bulletins/1b755e1>

Homes for Texas Heroes Home Loan Program: www.tsahc.org/homeownership/loans-down-payment-assistance 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: <http://bulletin.facs.org/>

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

Washington Update: <http://www.nasemso.org/NewsAndPublications/TheWashingtonUpdate/>

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: <http://www.naco.org/newsroom/countynews/Current%20Issue/1-13-14/Pages/default.aspx> The voice of American counties.

The Pony Express: <https://www.bcm.edu/departments/pediatrics/texasemsc/?pmid=15790>

Official Newsletter of the EMSC State Partnership, Texas.

Integrated Healthcare Delivery: <http://ihdelivery.com/>

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