

PUBLIC HEALTH AND ACUTE EMERGENCY CARE DURING DISASTERS IN TEXAS: A PHYSICIAN'S PERSPECTIVE

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EMS MEDICAL DIRECTION



- **Texas Health and Safety Code, Chapter 773**
 - **Sec. 773.007. SUPERVISION OF EMERGENCY PREHOSPITAL CARE.**
 - (a) The **provision of advanced life support must be under medical supervision and a licensed physician's control.**
 - (b) The provision of basic life support may be under medical supervision and a licensed physician's control.
 - **Sec. 773.0571. REQUIREMENTS FOR PROVIDER LICENSE.** The department shall issue to an emergency medical services provider applicant a license that is valid for two years if the department is satisfied that....
 - (6) **the applicant employs a medical director;** and
 - **Sec. 773.114. SYSTEM REQUIREMENTS.** (a) Each emergency medical services and trauma care system must have:
 - (1) **local or regional medical control** for all field care and transportation, consistent with geographic and current communications capability;
 - (2) triage, transport, and transfer **protocols;** and

EMS MEDICAL DIRECTION



- **Texas Occupations Code, Title 3, Subtitle B, Chapter 157**

- **Sec. 157.001. GENERAL AUTHORITY OF PHYSICIAN TO DELEGATE.**

- (a) A **physician may delegate to a qualified and properly trained person** acting **under the physician's supervision** any medical act that a reasonable and prudent physician would find within the scope of sound medical judgment to delegate if, in the opinion of the delegating physician:

- (1) the act:

- (A) can be properly and safely performed by the person to whom the medical act is delegated;

- (B) is performed in its customary manner; and

- (C) is not in violation of any other statute; and

- (2) the person to whom the delegation is made does not represent to the public that the person is authorized to practice medicine.

- (b) The delegating physician remains responsible for the medical acts of the person performing the delegated medical acts.

- **Sec. 157.003. EMERGENCY CARE.** The authority to delegate medical acts to a properly qualified person as provided by this subchapter **applies to emergency care provided by emergency medical personnel** certified by the Texas Department of Health.

EMS MEDICAL DIRECTION



- **Texas Administrative Code Title 22, Part 9, Chapter 197**
 - Delegates the practice of emergency care to EMS providers
 - Credentials and/or de-credentials each EMS provider providing care under his/her practice
 - Remains responsible for that medical care
 - Provides standing orders
 - Provides real-time (on-line) direction to EMS providers
 - Writes and maintains protocols for medical care
 - Stays actively involved in and directs education and continuing education of EMS personnel
 - Is responsible for the Quality Assurance / Performance Improvement of medical care of an EMS System
 - Acts as a liaison between the EMS Administration and the local medical community

EMS MEDICAL DIRECTION



- **Texas Administrative Code Title 22, Part 9, Chapter 197**
 - Determines any remediation needed for EMS providers
 - Determines where EMS patients are transported (destination)
 - Determines when a patient will not be transported
 - Determines when a patient will be transported against his/her will
 - Provides real time (on-scene or on-line) direction as needed
 - Determines when other physicians on the scene of an emergency can provide direction to EMS personnel

EMS MEDICAL DIRECTION



During a disaster....

- Triage
- Destination decisions – change?
- Altered treatment decisions / standards of care
- No transport / Altered transport
- No send / Delayed response
- Jurisdictional boundaries
- EMS functioning in alternate settings
- Altered scope of practice
- EMS participation in state response
- Responder health and safety
- Liability

PUBLIC HEALTH vs. ACUTE CARE



- **Public Health = care for the masses**
 - Population health
 - Vaccinations / Mass prophylaxis
 - Epidemiology
 - Food Safety

- **Acute Care = care for the one**
 - Hospitals
 - EMS
 - Emergency Medical Task Force

TEXAS DISASTER MEDICAL SYSTEM



Courtesy TDEM Website

The Texas Disaster Medical System is the collaboration of all public health and acute medical care preparedness initiatives within the State of Texas relating to the mitigation of, response to, and recovery from natural and manmade disasters and other significant events within any region in Texas, with respect to Emergency Service Function (ESF)-8 functions.

TEXAS DISASTER MEDICAL SYSTEM - GOALS



- Ensure highest level of public health and medical readiness to respond
- Ensure coordination, communication and collaboration among public health and acute care partners
- Ensure understanding of roles and responsibilities of partners
- Maintain updated list of ESF-8 resources

WHERE DOES TDMS GET ITS AUTHORITY?



The Texas Disaster Medical System (TDMS) Steering Committee was established under the direction of the Texas Department of State Health Services (DSHS) in 2010. DSHS is the lead agency for Emergency Support Function (ESF)-8 (Public Health & Medical Services) per the state of Texas Emergency Management plan, Annex H, Texas Government Code §§ 418.042, 418.043(13), and 418.173(a).

TDMS STEERING COMMITTEE



TDMS Steering Committee

Acute Care



Public
Health

TDMS STEERING COMMITTEE MEMBERSHIP



DSHS

- Director, Preparedness Section
- Director and Ops Manager, Response and Recovery
- Preparedness Branch Manager
- HPP and PHEP Program Team Leads
- Regulatory Emergency Preparedness
- Mass Fatality
- Disaster Behavioral Health Branch Manager
- HSR Regional Medical Directors
- HSR Preparedness Managers

TDMS STEERING COMMITTEE MEMBERSHIP



- EMS Medical Director
- EMTF SCO
- University Partners – Clinical and Admin
- Texas Military Forces
- Hospital Administrators
- Texas Hospital Association
- TDEM – Planning and Field Response
- Local Health Dept Directors
- Local Health Dept Managers- small, med, large
- RACs – small, medium, large
- EMS agencies
- DBH SMEs
- Mass Fatality SMEs
- At Large Members

INITIATIVES



- **Cataloguing of all state ESF-8 response assets**
- **Typing of all state ESF-8 response assets**
- **Deconfliction of medical response teams/rosters**
- **Coordination with Texas Military Forces resources**
- **Deconfliction of funding responsibilities**
- **Liability coverage of medical response personnel**
- **Continuation of funding of teams/assets**
- **Our role in medical component of mass-care sheltering**
- **FNSS integration into plans and operations**

INITIATIVES



- Patient tracking issues
- Standardized patient records
- Integration of Medical Operations Centers into TDEM organizational chart
- Medical Operations Centers functions and purpose
- Integration of MOCs across the State
- Mass Fatality planning, development of state response teams

STILL WORKING...



- Standardization of ESF-8 training curricula
- HIPAA compliance during a disaster
- Use of MRCs / VOADs / volunteers
- Use and implementation of DBH assets
- Patient records management
- Responder Safety and Health guidelines
- Medical Countermeasures
- MOC Toolkit
- Alternate care sites during a disaster
- **High Consequence Infectious Disease management**

QUESTIONS?

