

I. Background

The North Central Texas Trauma Regional Advisory Council (NCTTRAC) is an organization designed to facilitate the development, implementation, and operation of a comprehensive trauma care system based on accepted standards of care to decrease morbidity and mortality. The Air Medical Committee for the North Central Texas Trauma Regional Advisory Council is a standing committee that provides recommendations and guidance for air medical operations in the Trauma Service Area - E (TSA-E). It is the mission of the Air Medical Committee to promote safe, ethical, and high-quality patient care during air medical transport for the citizens of Texas.

The purpose of a Regional Advisory Council (RAC) is to develop, implement, and monitor a regional emergency medical service trauma system plan within a TSA. A RAC is an organized group of healthcare entities and other concerned citizens who have an interest in improving and organizing trauma care within a specified Trauma Service Area. RAC membership may include hospitals, physicians, nurses, EMS providers, rehabilitation facilities, dispatchers, as well as other community groups. Regional Advisory Council objectives are to reduce the incidence of trauma through education, data collection and analysis and performance improvement. This is accomplished by providing educational programs and conducting performance improvement efforts that provide every provider guidance and motive to reduce the incidence of trauma as well as improve the outcome of trauma patients.

II. Purpose

The purpose of this document is to:


- A. Define the system established by the TSA-E Air Medical programs to assist EMS ground providers and facilitate requesting the closest appropriate aircraft for the patient in need
- B. Describe the review request process and specific indicators for systems performance improvement
- C. Improve patient care, collaboration, and foster a community partnership for all stakeholders within the RAC

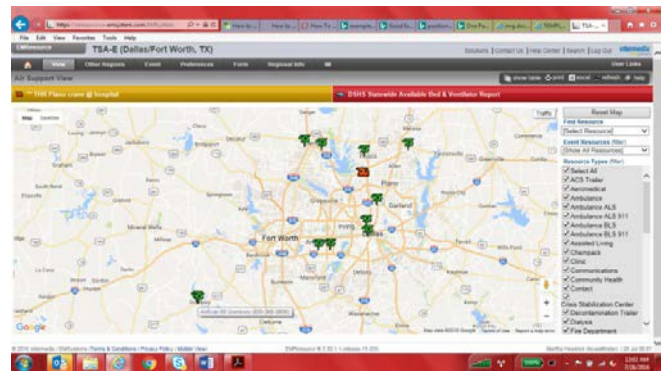
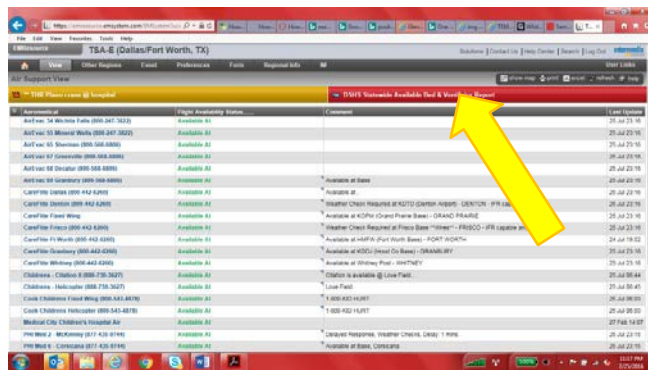
III. Desired Outcomes

The desired outcome is to request the closest appropriate aircraft and integrate air medical providers into the RAC System Performance Improvement (SPI) process. This provides a platform for concerns regarding air medical services to be identified, addressed, and provided a mechanism for loop closure within the Regional Advisory Council. This should occur when they are unsuccessful in being addressed among corporate entities. The intent is not to replace interworking collaboration among Air Medical and EMS services or care facilities.

- A. Concerns regarding the air medical service(s) may include: safety, patient care, dispatching, or membership services.
- B. The Air Medical Committee recommends that the evaluation of appropriate use of a helicopter rests with the requesting organization.
- C. Performance improvement may include, educational initiatives, process improvement plans and/or recommendations from the NCTTRAC and/or GETAC Air Medical Committees.

IV. Process to Locate, Request, Communicate, And Improve Air Medical Services

- A. EMResource is a software system that will publish all aircraft in TSA-E, their location, and availability. You can view this in a list or map view.
- B. Obtain a facility or personal login by creating a support ticket with NCTTRAC
 - 1. Visit our website at <http://ncttrac.org/>
 - 2. Click on the SUPPORT icon , upper right corner
 - 3. Click on the TICKETS icon
 - 4. Click on 'Start Ticket'
 - 5. In the DEPARTMENT drop down box, choose "Crisis Applications – New Account Request TSA-E/DFW Region "
 - 6. Click Submit
- C. Once Log In is attained, go to <https://emresource.emsystem.com/login.htm>
- D. You will see a list of area helicopters, hospitals, EMS and their status (set up a preferred view and notifications so the system is what you need).
- E. Find the **table view** and list of helicopters (pictured below on the left). It will state in **GREEN** "Available at" if available for a call and the location (usually "at base") or **RED** "Unavailable" if on a flight or out of service for a Maintenance Event.
- F. Change and set the helicopter **map view** as your preference (yellow arrow indicates where to change the view, the map view is pictured below on the right). It is a very quick view with the helicopters mapped in their locations (hovering over or clicking on the icon will identify the aircraft). They are colored for their availability: **GREEN=Available**
RED=Unavailable for a patient flight



All aircraft in your area can be viewed and you will be able to identify the closest **available** aircraft to your location and call the appropriate provider.

Radio **communication for Ground to Air**, will occur utilizing the preferred contact method and channel as designated by the requesting ground agency, either at the time of the activation or through prearranged channel designation with the Air Provider. In the event of a disaster or MCI situation, the Texas Statewide Interoperability Channel Plan should be implemented. This plan states that radio communication from Ground to air, authorized by

the Texas Government Code and regulated by the FCC, is to be performed on radio channel VMED 28. (see below)

Label	Receive	Transmit	Station Class	CTCSS RX /TX	Use
VMED28	155.3400	155.3400	FBT / MO	CSQ / 156.7	Tactical Channel

(and for Air-to-Ground use)

- G. **Air Medical Indicators** to be referred to SPI Committee **if not met:**
1. Air Medical Services will provide a **launch location of the aircraft responding**
 2. Air Medical Providers participating in the NCTTRAC are operating on **EMResource tracking map, updating and refreshing the aircraft current positions** at least every 3 minutes.
 3. **ETE** (flight time only) will not exceed **5 minutes past time given**
 4. **ETA** (clock time arrival given to include lift time) will not exceed **5 minutes past time given**
 5. Air Medical Services **scene times should not exceed 20 minutes** (does not include specialty teams)
 6. Air Medical Services **inter-facility transfer times exceeding 40 minutes** (does not include specialty teams) are subject to possible review by the Air Medical Committee SPI group
 7. First attempt tracheal tube (TT) success should be reported using Ground and Air Medical Quality Transport *Ground and Air Medical qQuality Transport* (GAMUT) data and definitions
 8. Blood Glucose check for AMS should be reported using GAMUT data and definitions
 9. Provide air medical transport response for inter-facility trauma patients within 60 minutes of the time of the request
 10. Provide air medical transport response for inter-facility transfers for level 1 stroke patients within 30 minutes and 60 minutes for level 2 stroke patients from time of the request.
- H. If and **indicator falls outside** of the above parameters, the event **may be submitted to the NCTTRAC Air Medical SPI group** for review and it may be referred from the SPI group to the appropriate Individual Provider for action.
- I. Process for requesting reviews and/or reporting concerns to the SPI Committee:
1. Go to <https://www.ncttrac.org/>
 2. On the bottom right select [Create A Helpdesk Ticket](#)
 3. Start a Ticket
 4. Choose "Member – SPI Referral Form Request"
 5. Then fill in the necessary fields. Be as specific as possible to allow for a sufficient review.