EMS Advisory Council Meeting Minutes September 15, 2011 Department of Natural Resources, Springfield

Call to order, Mike Hansen 11:06am

Roll Call & Approval of Minutes

Present: Kevin Bernard, Don Davids, Melissa Dunning, Randy Faxon, Ralph Graul, Michael Hansen, David Loria, George Madland, Mary Ann Miller, Annie Moy, Terry Pool, Brad Robinson, Doug Sears, Thomas Stecher, Herbert Sutherland, Jack Whitney, Thomas Willis, Absent: Fantus, Schmidt, wood

Proxy: Glenn Aldinger proxy to Dr. French; Marc Levison proxy to Leslee Stein-Spencer; Connie Mattera proxy to Annie Moy

We do have a quorum for this meeting

Call for the approval of the EMS Advisory Council portion of minutes from the June 2, 2010 Joint Council meeting. Motion made by Mike Hansen called for motion by Ralph Graul, second by Whitney. No discussions. All those in favor - Yes, opposed-None, abstentions-None. Minutes stand as approved.

Division of EMS Report - Jack Fleeharty

Introduction of Joe Albanese our New Trauma Program Coordinator

Trauma Program updates:

- 15 trauma site surveys were completed
- Review of two Level II trauma center applications were completed with comments sent back to the applicants for trauma plan revision and re-submission
- A newly re-platformed Trauma Registry has been deployed to the TEST environment; testing by volunteer Trauma Registrars will start on week of September 12, 2011
- A Beginners Trauma Registry training is scheduled on October 18-19, 2011 at Provena St. Joseph Medical Center in Joliet and on October 24-25, 2011 at DNR in Springfield
- Trauma Center Fund in the amount of \$4.5M has been distributed to designated Trauma Centers; last year's distributed amount was \$3.5M
- Language has been drafted to address the changes of trauma Distribution regarding HB 1391. After Legal has finalized the language we will submit the draft to the Trauma Advisory Council Members and the EMS Advisory Council for approval.

EMS Assistance Grant

- The EMS applications were due to the Department from the Regional EMS Advisory committee by June 30, 2011.
- The EMS Assistance fund Grants will go before the Department's Grant Review Board in September. Approximately \$90,000 will be awarded. Letters to awardees will go out sometime in October.

Legislative Report

- The following rules will go to JCAR in September: Arbitration, Reserve Ambulance, BLS Protocols, Military, Stretcher Van and VA Facilities.
- The TNS and the Critical Care rules have been published for public comment.
- The Spinal Cord Injury with paralysis Research Grant and AED went before the State Board of Health Rules Committee and was approved and now goes to the State Board of Health this month for approval.
- The Department will work on drafting rules for HB1391, Redistribution of Trauma Funds. HB 3134 will make changes to the Do Not Resuscitate (DNR) form.
- We will be working with the Trauma Advisory Councils Legislative Subcommittee to look at updating some of the existing rules and needed changes to the trauma center code.
- EMS/EMSC may go to JCAR on 9/13/11.

George Madland and Jack clarified that the fees will not be instituted until automated and online payment system is in place. IDPH is working with GLSuites and discussed the process of the collection of fees. In addition, IDPH is working with the State Treasurer's Office to set up credit card company accounts. Results expected by mid-October; and production by first of year. There will be an informational letter regarding the new process from CTS or IDPH stating the fees, web link, and payment options.

Darlene Thorpe talked about changes on all forms. Notification will go to EMS Systems regarding when all new forms have gone through CMS (possibly within 4 months). IDPH's goal is to post forms to our IDPH website.

Randy Faxon added that EMS Systems will verify CPR card and CEU's; therefore, reducing burden on Regional Coordinators. ECRN licensure will have no CTS testing; testing will be done through the EMS System and forwarded. ECRNs will get notice that there is a renewal application for licensure and it will provide information include the URL.

EMSC Report

• Region 2

Surveys for PCCC, EDAP and SEDP recognition were completed in May and June Region 8

- Region 8
 - o PCCC, EDAP and SEDP applications were received
 - o Surveys will be scheduled in November/December 2011/January 2012
 - Renewal educational session is scheduled for October 24 in region 5 and October 25 in region 4.

- o Region 4 and 5 renewal applications will be due sometime in February 2012
- Region 4 and 5 surveys will take place in late spring and early summer
- Current participation in facility recognition (107 hospitals)
 - \circ PCCC/EDAP level = 10; EDAP level = 81; SEDP level = 16
 - If you would like to be a surveyor, contact Evelyn Lyons
- Several School Nurse Emergency Courses were held around the State. These courses were well received. This year we were able to do 2 courses in Southern Illinois.

Mike Hansen talked about NEDARC/NEMSIS meetings in Springfield. NEDARC will send IDPH a report toward the end of November regarding their observations.

Introduced Ms. Karen Jacobson, Director of NEMSIS (National EMS Information System), Technical System Center. She defined federal grants and the makeup of NEDARC. Information on a national level is available at <u>www.nemsis.org</u>. There are three methods by which data is being submitted to the State Repository: 1) key data; 2) bubble format; and 3) 3rd party software (xml files). The number of records in the systems: 35% are bubble sheets; 23% are key data; and 42% 3rd party formats (xml files). EMS Data Subcommittee will need to continue to meet. Data set Version 3 is to be released at the end of October.

Mike Hansen discussed rural EMS issues. Greg Scott, Laura Kessell-Lieutenant Governor's Office, Christina Rogers-World Affairs Team has been working to improve services in rural areas with volunteers and shorter responses. They have worked with Jack Fleeharty and the Lieutenant Governors' Chairs. This Council will meet quarterly and they request that EMS form a subcommittee and participate in conference calls or meetings to work on issues (Greg Scott is citizen member on this council). Jack met with this Council in July and gave a presentation. He was also was asked to help with the application process of those wanting to be a member. Rep. Moffitt and Rep. Dugan's offices created an EMS Task Force. Jack and Mike Hansen encourage a larger attendance throughout these fall meetings. This is an effort to bring EMS and rural issues to the forefront and bring funding sources to EMS.

Jack spoke about working on a Retention & Recruitment Committee. There is a rural staffing analysis demonstration project that consists of six volunteer EMS Systems and will be starting up next month. Greg Scott and Kathie Wagle will be sharing the final data.

COMMITTEE REPORTS – EMS Legislative & Planning – Mike Hansen No meetings.

EMS Rules & Regulations – Mike Hansen

No meetings.

State EMS Protocols – Annie Moy

Group met June 27, 2011. BLS protocols are in alignment; no additional amendment needs. One protocol mentioned that every EMS System should have is a DICO (Designated Infection Control

Officer), New protocol is DICO (Designated Infection Control Officer Change will happen with systems; there are needs to look at IL hospitals. Discussion across Council and interested parties held regarding the DICO. OSHA standards were discussed by Mary Ann Miller to define 1 or 2 designated individuals to receive feedback from hospital that has the source patient so as not to communicate outside and staying within HIPAA standards. George Madland needs to know how that needs to change and Connie can send what she has as of now to see if your system is in compliance. Herb Sutherland discussed with council and interested parties the policy regarding exposure. Jack said it is the resource hospital that has to be the advocate and communication piece, the resource hospital is the primary avenue for ambulance and hospitals. Discussion about the DICO already mandated via the Code and how a source patient could be gone or even out of the state before information is collected. Annie Moy will take the information back to the group. Discussion held among council members and interested parties regarding OSHA requiring training, the high cost of training and how many and what type of exposures (mainly bacterial) we have in Illinois and how to reduce these exposures.

State-wide Mark I protocols are being reviewed and updated with Duodote antidote. Mike Wahl from Poison Control was consulted and recommended covering all age groups. We added frail elderly as a category along with pediatrics.

Trauma Field Triage needs EMS physician input. Concern was expressed as to why the entire document was not accepted.

EMS Data – Mike Hansen

Based on the recent meetings earlier this week, Mike asked for individuals to be on the EMS data committee and to review the findings from NEDARC once it's been evaluated by IDPH.

EMS Education – Connie Mattera, RN

Annie Moy – nothing report this time.

EMS Recruitment and Retention – Greg Scott

Minutes were distributed from the 9/14/11 meeting. Mike Hansen looked at proposal of legislation code and statue that has been silent for years regarding establishment of 16 year age limit for First Responders – discussed at length, that the local EMS System has been driving up the age limit to 18 years of age. The Committee was to set the age requirement; but system notification department is only issuing First Responder licenses to age 18 years of age and above. Recommendation is that the EMS Council remain silent on the age.

Tactical EMS - Patti Lindemann

No report provided as there has not been a meeting.

Emerging Issues - Mary Ann Miller

Meetings are every other month on the 4th Monday at 10am. Past meeting minutes were distributed. The next meeting is scheduled for 10/24/11 from 10am-1pm at Superior Ambulance. Please RSVP if you'll be there.

Reviewed legislation – DUI language passed through the House but failed at the Senate. Illinois Ambulance Association will have appeal language to HFS to help capture fund for medicaid patients (HB 3635).

First meeting of the State Stroke Subcommittee should be in the next couple of months and it still needs two positions filled.

MERCI Radio Communications issues were discussed and a meeting with Jack is scheduled.

Region 8 STEMI plan discussions.

EMSC rules and mandated designation of resource hospital as an EDAP hospital was discussed. Introduced Bridget McCarte – she discussed the rewrite of EMSC regulations to align Illinois standards with Federal EMSC grants. New rules mandate each resources hospital become an EDAP which is a large concern – "mandate" is the concern. For the rural hospital staff to maintain current certifications is also a big concern. The requirements regarding dedicated hospital personnel are another concern – requiring a physician and also dedicated clinician.

Jack Fleeharty provided that the Federal grant requirement under HRSA.

Clarification of EMSC Guideline Rules

- The original Federal Grant Guidance that was established required resource hospitals to attain and maintain one of the levels for pediatric recognition. These requirements were prior to the Federal EMSC performance measures.
- There is in place, Federal EMSC performance measures which require that every state has to have an EMSC facility recognition program in place by 2017. Currently, the states that have this in place are California, Oklahoma, Tennessee and Illinois

Educational Requirements:

- There has been no change in the educational requirement. The requirement has always been 16 hours of pediatric education for physicians and mid-level practitioners and 8 hours for nurses every two years. EDAP and SDEP have not changed requirements for education.
- According to the data provided by the IL Hospital Association, Illinois has seen a considerable decline in mortality of pediatric patients and that our decline in pediatric deaths in significantly higher than the national average. According to data from the IL Hospital Association, the hospital ratio of deaths pre-EDAP status was an average rate of 290 deaths per 21,249 patients with a ratio of 13.6 per 1,000 inpatient injury related admissions and following the facility recognition EDAP status there was significant decrease showing that of 29,875 patients there were only 321 deaths with a ratio of 10.7 per 1,000 inpatient injury related admissions. During this study from 1994 to 2009, we saw a decrease of 3.1%.

• Both metropolitan Chicago Healthcare Council and IL Hospital Association have positions on the EMSC Advisory Board and are allowed to provide input to the state's EMSC program and are aware of any proposed changes to the state's EMSC program during the development stages.

New Business – EMS

• EMS Medical Directors Committee

This was established a couple years back. Dr. Whitney, this team, is looking for members. This has been an under-utilized recently. This group is open to accept and review other applicants to divide the work which is coming in now. Mike Hansen explained that the medical directors look at EMS Scopes of Practice.

- Proposed Rules
 - o Section 515.620 Felony Convictions

This was passed in January 2010 - past felonies must be reported, personal history review is completed, Illinois state police background check is required. IDPH just needed a formal process in the Rule to review these applicants.

• Felony Conviction Rule

Motioned by George Madland and seconded by Dr. Whitney and Doug Sears to approve the proposed rules. All those in favor – Yes; Opposition – None; Abstentions – None. The proposed Felony Conviction Rules were approved by the Council.

• Correspondence Received

• Expanded Scope & EMS Scope of Practice Model

Discussion ensued regarding clarification of the Scopes of Practice and needed changes in correlation to the New Education Standards. Concern was voiced that while the New Education Standards have been looked at the Scopes of Practice issues need to be addressed. Dr. Jack Whitney is addressing some concerns regarding proposed Scopes of Practice changes. There were recommendations that more EMS System Medical Directors become involved as clarification of the Scopes of Practice are addressed in the future. There is no intent to strip EMS Systems of their current practices at this time and this issue will require considerable further discussion.

Old Business

- National Trauma Triage Guidelines
- Correspondence Received
 - Field Triage Criteria

There was considerable discussion by the Council members regarding the CDC triage guidelines. Using the word preferential in the triage guidelines was a concern. Mike Hansen had stated the triage guidelines were brought to the Council by the Trauma community. Dr. Sutherland felt additional input was needed from a physician from a Level II Trauma Center. There was also concerns about the CDC documentation being distributed to the Council members.

• EMS Task Force meetings:

District	Date	Location	Time
Pihos	20-Sep	ICEP Conference Center - 3000 Woodcreek Drive Suite 200 Downers Grove, IL 60515	1 PM - 3 PM
Osmond	22-Sep	University Center of Lake County - 1200 University Center Dr. Grayslake, IL 60030	2 PM - 4 PM
Burke, K. & Cunningham	12-Oct	Moraine Valley Community College	
Cavaletto & Bost	14-Oct	Kaskaskia College Salem Education Center -1475 W. Whittaker Salem, IL 62881	10 AM - 12 PM
Hatcher	17-Oct		
Hammond	19-Oct		
Tracy	1-Nov		
Brady	14-Nov	Heartland Community College, Jonathan M. Astroth Community Education Center Auditorium - 1500 W. Raab Road Normal, IL 61761	10 AM - 12 PM
Brauer	17-Nov	Illinois State Capitol - Committee Hearing Room 114/118	10 AM - 12 PM
Derrick Smith	21-Nov		
Dugan	30-Nov	Kankakee Public Library 4th Floor conference center - 201 E. Merchant St. Kankakee, IL	4 PM - 6 PM
Reboletti	1-Dec	Superior Ambulance Facility - 395 W. Lake St. Elmhurst, Il 60126	TBD

Hearing Dates as of 9/12/11

Unes	6-Dec	
Moffitt	TBD	

Mike Hansen reviewed recommendations that were being made to the EMS Task Force regarding potential funding and allocation of those funds.

Future Meeting Dates

- December 2, 2011
- March 1, 2012
- June 5, 2012 Joint Meeting with Trauma Advisory Council

Call for Public Comment

Questions arose regarding funding for travel for participants. Jack said that we currently inspection 4,000+ ambulances in the state; we are going to a more regionalized inspection program at CMS garages throughout the state. IDPH hopes to get three more ambulance inspectors soon. Win Rawls handed down a Directive to do regional ambulance inspections.

Motion to adjourn by Mike Hansen; seconded by Dr. Sutherland. Meeting was adjourned at 2:30p.m.