

**EMS Advisory Council
Meeting Minutes
November 13, 2012, 11:00 a.m. - 1:00 p.m.
Illinois Department of Natural Resources
Springfield, Illinois 62702**

Call to order, Mike Hansen at 11:00am

Roll Call & Approval of Minutes

Council Members Present: Doug Sears, Randy Faxon, Brad Robinson, David Loria, Jim Rutledge, Mike Hansen, George Madland, Kenneth Pearlman, Ralph Gaul, Jack Whitney, Mary Ann Miller, J. Thomas Willis, Leslee Stein Spencer, Lawrence Miller, Don Davids, Jack Whitney, and Kenneth Pearlman

IDPH Staff Present: Sam Gaines and Jack Fleeaharty

Absent: Glenn Aldinger, Richard Fantus, Stephen Holtsford, Greg Scott, Kathleen Schmidt, Kevin Bernard, and Herb Sutherland

Proxy Votes: Glenn Aldinger gave proxy to Mary Ann Miller; Stephen Holtsford gave proxy to Don Davids; Kevin Bernard gave proxy to Mike Hansen; **Connie Mattera gave proxy to George Madland—stricken as George Madland is still a non-voting member.**

Mike Hansen announced that there's a quorum.

Mike Hansen asks for approval of minutes from September 6, 2012 meeting; motion made by Dr. Whitney and second motion made by Don Davids; no oppositions or abstentions; approved.

Illinois Department of Public Health Report, Division of EMS Report—Jack Fleeaharty:

Trauma Update: St. Mary's, Indiana, has been designated as a Level II Trauma Center at the end of September 2012. Trauma Plan reviews continue. IDPH continues to test for migration to web-sphere application server 6.1. IDPH continues to work with IDOT regarding data for the Crash Outcome Data Evaluation System (CODES) and Fatality Analysis Reporting System (FARS).

Update on Legislation:

- Be advised that currently the New Education Standards are not on the IDPH Spring Legislative Agenda, neither are new Trauma Rules. The Department is still working on trying to get the Education Agenda included. If it does not happen some other group such as the State Education Committee may want to find a sponsor. The Department would be happy to provide the agreed-upon language from last spring if a committee wishes to sponsor the amendment to the Act.
- The Department has submitted to the Council draft administrative code language for
 - Provisional licensure of First Responders
 - Ambulance licensing requirement changes
 - Repeal of the original First Responder language which is long outdated
 - First Responder/Emergency Medical Responder language
 - Changes to EMS Act definitions
 - Administrative Hearings changes
 - Bypass Status Review
 - EMS System Program Plan
 - Participation by Veterans Health Administration Facilities

- EMT Testing language

Jack thanks Susan Meister as key to preparing language for JCAR for the last three years.

AED's Utilization on School Property: 3500 letters were mailed out notifying and warning schools and school districts that the Department will be monitoring compliance with the "Physical Fitness Facility Medical Emergency Preparedness Act." This came as a result of a Chicago network newscast where a reporter went to several high school baseball games and found they were not compliant.

Education and Testing:

- Test writing has been completed for the Basic new exam questions and the team is now working on the Paramedic exams. The Department would like to thank the Education committee, EMS Systems, System Coordinators, Lead Instructors, and state staff who have been committed to this project.
- For the last quarter, the Department reports for new applicants:
 - 453 Basics with a 72% pass rate
 - 21 Intermediates with a 66% pass rate
 - 292 Paramedics with a 85% pass rate
 - 31 Trauma Nurse Specialists with a 62% pass rate
- We have completed History Reviews for nine persons with felony backgrounds and currently have 11 reinstatement applications in process.
- We have been notified by CTS that Lead Instructors are submitting students' names to register for exams that have not completed all of their clinical requirements. It is essential that EMS systems do not submit names for examination until all didactic and clinical requirements are met. Doing so implicates the system in the falsification of records and qualification for examination.

Veterans Affairs:

The Division of EMS is working with the Department of Veterans Affairs on evaluating the difference between the new education standards and the courses conducted by the four branches of the armed services. Upon completion, guidance will be developed to assist veterans returning to civilian life to integrate their military education toward obtaining civilian-issued EMS licenses. These reviews we hope to have completed by the first of the year.

Update on EMS Grants: Granted approximately \$100,000 in EMS Assistance grants, Awardees were notified.

Heartsaver Grants: 2012 grants (approximately 141) are being reviewed and approved; there may still be room for more AED grants to be issued (approximately 71).

EMS Run Data System:

- As of a week ago, the State has received 340,169 run reports from 331 transport provider agencies for state fiscal year 2012 (7/1/2011 – 6/30/2012).
- Information about data quality and the Illinois Pre-hospital Data Program was presented at the 2012 National Association of State EMS Officials Annual Meeting. Contact Dan Lee for a copy of the presentation.

Hospital Bypass/Resource Reporting System:

- Region 11 continues to use the bypass system to provide situational awareness during special events such as last week's pre-election, election-day, and post-election activities.
- Several key system enhancements, as well as some routine maintenance, continue to get sidelined due to IT staffing shortages.

- We continue to monitor for hospital name changes--EMS agencies and hospitals are encouraged to send change information to Dan and we will do our best to promptly process the updates.

EMSC Update:

National Pediatric Readiness Project

In 2013, the Federal EMSC program will conduct an on-line survey of all hospitals across the country to assess whether they have certain resources in place to meet the needs of children. Illinois hospitals have been scheduled to receive their surveys in April 2013. Illinois EMSC will forward more information as it is released from the federal program.

Pediatric Facility Recognition

- Region 11 hospitals are currently undergoing pediatric site survey visits in November and December.
- Hospitals in Regions 1, 9 and 10 will undergo site surveys in 2013.

Pediatric Education

An online EMSC educational module that addresses Pediatric Seizures is now available on the EMSC website. 1.5 continuing education hours have been approved for this module.

2011 Broselow tape

EMSC recommends that healthcare practitioners use the latest version (the 2011 Edition A tape); however, a recent evaluation of the tape was conducted and identified some areas where the tape differs with PALS guidelines. EMSC will be sending out a letter to all hospitals and EMS System Coordinators that outlines these variations (see Evelyn for any further questions).

Licensing Fee Implementation:

- IDPH is rolling out a “fix” so systems will not have to collect/deal with fees associated with new licenses/transaction cards for the five licensee groups that do not test. Our software vendor is working on the glitches. George Madland asks, “Along with National Registry?” Jack: for now National still needs to come in on a T-card, but in the future IDPH will be able to import National Registry.
- On-line fee payment problems: people going to test and asking system coordinators for PINs, but their file haven’t been imported yet—have them call the licensing at IDPH.
- System Coordinators or Trauma Course Coordinators should not provide students who have tested through CTS with PIN numbers. Multiple users have attempted to go online with incorrect PIN numbers. The student needs to contact the State or wait for their notification letter.
- Approximately 16 new PDF fill-able forms are out on the Web. The Department will select a date on which it will no longer accept forms that have been modified by a system or are not State-approved. IDPH will notify the EMS Systems of this date through correspondence.

Hospital Preparedness Program: The Hospital Preparedness Program (HPP) requires hospitals to contact the ambulance providers and establish MOU’s as part of a coalition partnership. EMS companies may find hospitals engaging in conversations regarding MOU’s they have not previously had. Some hospitals have had these MOU’s in place for years.

Investigations:

The Department has been engaged in multiple investigations, of which many are still open and ongoing.

Correspondence—Mike Hansen: Letter of Support for Rural EMS Network; Mike sent out a letter on behalf of the State EMS Advisory Council supporting Peggy Jones. Peggy is developing a grant to develop a Rural EMS Network (caucus or coalition).

Mike Hansen: The EMS Stakeholders Report will be released soon, likely during the veto session. There is going to be a press conference highlighting this report on December 4, 2012 at the Capitol Rotunda in Springfield at 1:00pm. Mike is asking for EMS people to attend; he is developing a Speakers’ Panel and wants to make an emphasis that we’re looking for dedicated funding and support of EMS legislation. This is one of our first public EMS efforts from a press conference standpoint. Mike thanks Alex at the AHA and Peggy who

got this coalition going. Mike states the release of the report is up to Representative Moffitt; will be released during veto session, but he's hoping see a copy beforehand. Interested party attendee said that she spoke to Representative Moffitt and report should be released in the next two weeks.

Committee Reports:

Legislative and Planning: No report, per Mike Hansen,

EMS Rules and Regulations: No report, per George Madland.

State EMS Protocols: Annie Moy is not present to report.

EMS Data: Mike Hansen on behalf of Dan Lee. Working groups looking at IL Data Improvement Work Plan; telephone conference with Jack and Dan; still revising; you've seen the draft dated July 2012.

EMS Education: Connie Mattera not present but Old Business reporting will include update.

EMS Recruitment and Retention: No report, Greg Scott is absent, although committee materials were included in packets.

Tactical EMS: Mike and Dr. Pearlman state they'll discuss whether it will remain as a committee report with Patti Lindemann.

Emerging Issues: Mary Ann Miller reports they last met on October 29, 2012; an agenda is in the packet, as well as minutes from the June 25, 2012 meeting. The Committee is 40 strong, represents EMS from all over Illinois, and discusses the charges given to them by the Council. They looked at the Rules regarding Pediatric Transportation and there seems to be controversy over transporting infants who weigh less than 5.5 pounds. Mary Ann notes issues with car seats and Pedi-mates, as well as the Baby Pod that costs \$5,500 – \$6,000. The Committee is asking if Evelyn (Lyons) may look for more fiscally-responsible recommendations to transport infants under 6 pounds.

Jack addresses the Council: IDPH has questions about these things, too, especially the variations across the State during ambulance inspections. IDPH was hoping we could work with EMSC regarding the NHTSA report's standards and how to upgrade the safety standards for transporting infants.

Education issues will be discussed in Old Business.

They're awaiting the EMS Task Force Hearing Report and encouraging press conference attendance. Our legislators needed to hear who is EMS; EMS has so many facets (not just the 911 call).

The Committee is following the Smart Bill for Medicaid in Illinois (working with OIG and HFS); new Administrative Rules have been published in the Illinois Register; hospitals and providers need to be informed. There is a new form to be completed by the physician to certify that a patient medically meets the requirements to be transported via a BLS ambulance. Mary Ann answers an attendee's inquiry and says she'll send the 11 Rules to Laura (Harris) who will forward to the interested party email list.

The Committee continues to follow a mission lifeline; Art Miller from AHA leads the STEMI work; Dr. Colbenson's group for Stroke legislation; discussing scope of practice with Dr. Whitney, Chair of the EMS Medical Directors' Committee; and finally, with Annie Moy's advisement, working with factions in infection control regarding disinfection, cleaning, immunizations, and designations of infectious control officers—attempting to develop better State guidelines in alignment with federal guidelines. A lack of communication has been identified and they're working on guidelines.

The Committee is collecting data regarding discussed drug/equipment shortages. Seven states are using expired drugs; they are awaiting the Ambulance Standards. Jack takes the floor: This was a topic discussed at NASEMSO; their work group hasn't garnered support from the private/municipal industry. Currently, the recommendation is to extend Triple K 1822 F-Series Spec till 2016 until the State decides which standard they will adopt. Mary Ann resumes: The Committee tackled armed emergency personnel discussion; no agreements yet. The next meeting is December 17, 2012, 11am to 1pm, at Superior Ambulance in Elmhurst. Lunch is provided and parking is free. Mary Ann invites attendance.

EMS Medical Directors: No report, per Dr. Jack Whitney.

State Stroke Advisory: Dr. Cheryl Colbenson reports that the last meeting was September 25, 2012; discussed dates/times for 2013 meetings and identified member changes. Dr. Mark Albers gave a presentation about Acute Stroke Capable and Comprehensive Stroke Centers. Joint Commission gave their presentation on their certification process. They finished their first revision of the Draft Rules. Their next meeting is November 15, 2012, 11am to 3pm at the Morton Fire Department.

Illinois Heart Rescue Project Report—Dr. Eric Beck: Dr. Beck is one of 40 champions that represent EMS providers, nurses, physicians of emergency medicine, etc. that take on cardiac arrest in the State. This five-year project is funded by a \$2.5 million grant. Its goals include improvements regarding the increasing of bystander CPR to better than 30%, improve the return of spontaneous circulation in the field to 20% or better, and reaching a neurologically intact survival from hospital discharge to 10%. The Data Collection piece uses CARES (Cardiac Arrest Registry to Enhance Survival) which uses NEMSIS fields that are operable with the State dataset. The grant is divided into: the community sphere, the pre-hospital component, the hospital sphere, and the data sphere. This is a performance-improvement grant; not research. This Project has support from Governor Quinn, Director Hasbrouck, Mike Hansen, etc. www.illinoisheartrescue.org is the website if you'd like to participate. IDPH EMS reporting system has data that can help guide their efforts if IDPH chooses to participate. They are working with Dan Lee to acquire data to help communities. They are currently advertising for a program manager position and working on a webinar for EMS providers and Hospitals.

Old Business:

OMA Training Due by December 31, 2012; Jack asks Members to send OMA certificates to Laura.

Illinois EMS Education Standards: Mike Hansen states the bill lost its “wheels.” At the last meeting and other meetings Greg Scott and Connie Mattera have looked at how we may transition these standards in the State of Illinois. The consensus is we need a graduated effort to roll this out. Mike states we're moving that we would launch the Paramedic Level first (2013). By 2014 we would launch the EMT Level. Year 3, to launch the EMR (First Responders). Year 4, to launch the Advanced EMT Level (currently the EMT-Is). Year 5, (2017) we would phase out Intermediate Levels; they'd all revert to the Advanced EMT Level. All currently licensed individuals would have two years to transition to the new standards. Mike asks for the Council's concurrence to discuss a graduated transition of licensing levels. Jack takes the floor and states: we can't roll anything out without passing a bill. Even if we can get a bill passed in Spring of 2013, Administrative Rules have to be written; it'll be February 2014 at the earliest to legally implement. Mike says there's no problem with it taking till 2018 as long as graduated approach is taken. Interested party attendee took the microphone and stated at a conference she heard Paramedics will need an extra 100 hours to transition. We need to be sure we're saying what is right and not perpetuating rumors that aren't correct. Interested party attendee asks Jack: if systems wanted to start transition, can they? Jack says they've tried to find a work-around to begin transitioning; the biggest impact is on reciprocity persons. We're going to be asked if we've adopted the National Standard and we'll have to say, “No.” George Madland asks Jack if, like Michigan, if the State can submit a letter to the National Registry. Jack said he met with the National Registry Director of CoEMSA and National Registry—they are holding fast to their deadline. Jack suggests we want to keep the language generic in the Act so we don't have to rewrite legislation when the curriculum changes again in ten years. Mike states that scope of practice needs to be incorporated into this. Jack says we hope to have scopes of practice ironed out before the bill would ever make it before the Legislative Assembly.

Mike calls for a decision by the Council as the next meeting isn't till March 12th, 2013. Dr. Whitney motions that Emerging Issues tackles this with Legislative Planning at the December 17, 2012 meeting (then send it to the Council for ballot). The motion seconded by Randy Faxon; no opposition; no abstentions; approved.

Peggy Jones takes the floor: There will be 15 awardees for the HRSA grant; we will hear more between January and April of 2013. The grant is provided a summary of the good we can do in the State to remodel EMS in dealing w/ recruitment and other issues. Mike thanks Peggy.

New Business:

- EMS Data Improvement Work Plan—Mike already discussed this earlier, but Mike would like Dan Lee to talk about this later after it's been vetted through IDPH.
- POLST Drafts: Mike says the group has provided a new POLST form that will replace the pre-hospital and hospital DNR forms. Dr. Gaines takes the microphone and states **there will not be a POLST form**. IDPH won't be producing a POLST form, but has created a POLST-compliant IDPH DNR Advanced Directive that meets the legal requirements; it will be sent to the EMS Council when it's approved. The POLST Committee does, however, have the ability to do the education and has requested grant funding.

Mike thanks Leslee (Stein Spencer) and Dr. Gaines for getting the original orange form passed. The Committee has done a great job from an educational standpoint; the draft in the packet is the educational piece that would go out to EMS personnel; the Committee is asking for comments. Jack states the draft needs some revisions; Mike agrees. Randy Faxon asks what kind of timeline before the form is official; Jack says it's in publications; hopefully soon after the Director approves around December 15, 2012. Jack states the POLST Committee has done a nice job. Jack says in the next few weeks we'll send it out and then it will get posted to the website. We'll have to produce the form in Spanish, too.

- EMS Administrative Draft Rules
 - FIRST SET:
 - Section 515.715 Provisional Licensure for First Responders and Emergency Medical Responders
 - Section 515.830 Ambulance Licensing Requirements

Question posed by a Member not present: On page 12, "with a paper back up;" meeting resistance from computerized-users; Jack says the goal is that there will be at least 10 paper forms in case electronic method fails. Leslee says they are electronic but keep a paper back up. Mike reiterates that it's fine to have a back up but shouldn't be mandated to be paper. Discussion and complaints are presented. Jack reiterates that if electronics fail, we'd have the paper back up. Mike states we'll leave that in place.

Question posed by another Member not present: On page 13 it states the Illinois Poison Control telephone number is to be displayed; why? Jack says so that it doesn't have to be looked up; it was always on the inspection form, it just wasn't in the Rules before.

Question asked about the Complaint number being posted visible to patient. Jack states to ask IDPH Central Office for stickers if need be; Mary Ann Miller said they've designed their own. Jack is going to follow up regarding whether IDPH's sticker is the only permissible form.

George Madland asks about page 14; "personnel requirements;" Was transport left off? Jack says we can add, "during response AND transport..." but language has been that way for 30 years and two meant two for the entire trip. Discussion ensues. No changes recommended.

Mike Hansen asks if the Council wants to accept and adopt the First Set of EMS Administrative Draft Rules? Motion made by Leslee, seconded by Brad Robinson. No oppositions; no abstentions.

○ SECOND SET:

- Section 515.720 First Responder (Repealed)
- Section 515.725 First Responder/Emergency Medical Responder; First Responder-AED

Don Davids motions to accept and adopt the Second Set of EMS Administrative Draft Rules. Ralph Graul seconds the motion. No abstentions; no oppositions.

○ THIRD SET:

- Section 515.100 Definitions
- Section 515. 180 Administrative Hearings
- Section 515.315 Bypass Status Review
- Section 515.330 EMS System Program Plan
- Section 515.470 Participation by Veterans Health Administration Facilities
- Section 515.530 EMT Testing

Mike asks the impetus of including 515.180, page 22; why did we need? Jack states: this is a procedural change based on our ability to process administrative hearings; IDPH Legal asked us to incorporate this language. George Madland asks about language on page 37; Jack replies that each system has their own policy regarding how long a student has to complete clinical once the exam is taken. Jack says he agrees there should be some limitation, but each system determines this and the State would not be opposed to set a minimums and limitations. 67 EMS systems would have to weigh in on their own specific policies.

Randy Faxon, page 37E; Jack clarifies and states it's the same language.

Motion made by Dr. Whitney to accept and approve the Third Set of EMS Administrative Draft Rules, motion made to second by Mary Ann Miller. No oppositions; no abstentions. Motion approved.

Doug Sears sees mistake on FIRST SET, page 15; section H3: EMS System Plan...says reference to G4, but G4 has been struck from the DRAFT. Jack looks at and wonders if H4 was struck by accident??? His guess is that G4 should stay. Jack said he'll get with Paula Atteberry before it goes to JCAR.

Irene Wadhams talks about issues in Danville about the Veterans hospital transport confusion: does a Veterans hospital have to belong to a system for a provider to transport patients to them? Discussion ensues about providers being able to transport veterans to Veterans hospitals (that are not in an EMS system). Jack reminds all that a patient can choose in Illinois where they want to go. Dr. Lawrence Miller says they can sign an AMA form. Brad Robinson says their patient can sign an AMA stating patient ignored medical control, etc.

Future Meetings (Mike Hansen states he's heard requests to have meetings on Thursdays only):

- March 12, 2013
- June 6, 2013 (tentative until further notice, will probably be moved to September for JOINT)

Wrap Up & Call for Public Comment: None expressed.

Mike Hansen adjourns that meeting at 1:15pm.