

EMS and Trauma Advisory Council

Joint Meeting Minutes

June 5, 2012

Department of Natural Resources

Springfield, Illinois

Call to order, Mike Hansen 11:00am

Roll Call & Approval of Minutes

Present for Trauma Advisory Council: Mona Aberle for Cathie Bell (no proxy submitted-no vote), Scott French, Mohammad Arain, Christopher Wohltmann, Glenn Aldinger, Stacy VanVleet, George Hevesy, George Hess, Mary Beth Voights, James Doherty, Kathy Tanouye, and Richard Fantus (Scott Tiepelman and David Griffen arrived after roll call).

Absent from Trauma Advisory Council: Dongwoo Chang, Michael Iwanicki, William Watson, and Cathie Bell.

Dr. Fantus reported the Trauma Council has a quorum.

Present for EMS Advisory Council: Glenn Aldinger, Richard Fantus, George Madland, Connie Mattera, Doug Sears, Ralph Graul, Mary Ann Miller, Mike Hansen, J. Thomas Willis, Leslee Stein-Spencer, David Loria, Brad Robinson, Lawrence Miller, Kevin Bernard, Jack Whitney, and Annie Moy (Don Davids arrived after roll call).

Absent from EMS Advisory Council: Stephen Holtsford, Melissa Dunning, Jim Rutledge, Randy Faxon, Eric Brandmeyer, and Herbert Sutherland.

Mike Hansen reported that EMS Council has a quorum.

There were no proxy rights designated.

Call for the approval of the minutes by Mike Hansen for March 15, 2012; motion to accept made by Ralph Graul and seconded by Doug Sears; no oppositions or abstentions; approved.

Minutes for December 2, 2011; motion to approve made by Kevin Bernard and seconded by Mary Ann Miller; no oppositions or abstentions; approved.

Call for the approval of minutes by Dr. Richard Fantus.

Minutes for Feb 14, 2012 conference call; motion to approve made by Dr. Glenn Aldinger and seconded by Mary Beth Voights; no oppositions or abstentions; approved.

Minutes for March 1, 2012 videoconference; motion to approve made by George Hevesy and seconded by Stacy VanVleet; no oppositions or abstentions; approved.

Scott Tiepelman and Dr. David Griffen arrived following roll call.

Illinois Department of Public Health Report, Division of EMS Report—Jack Fleeheart

- Trauma Site Survey Updates: Joe Albanese is completing contracts with out of state trauma surgeons, scheduling overdue surveys and recently added plans for trauma centers first, and reviewing trauma plans in the order they are received. Two proposed out of state Trauma Centers had their site visits in Wisconsin, one upcoming site visit in Indiana. The

annual data submission to the National Trauma Data Bank (NTDB) included most all hospitals; IDPH's project to re-platform the existing Trauma Data Base failed so IDPH had to rely on the NTDB to do the validation. IDPH apologized for problems and thanked trauma registrars for their help and feedback. Work continues on this issue.

- Update on Legislation: Trauma Fund and EMS Fund will go before JCAR this month to respectively amend trauma funds that are collected to go back to region of origin and a portion of EMS funds to be used for licensing, testing, etc. authorized by the Act. Amendments to the EMSC Rules (distributed before the last Council Meeting) will go before the Advisory Council today involving updating the ED equipment list and EDAP equipment checklist. Worked with Chapin Rose's office to amend HB 5880 (First Responder) but bill not called; SB 3261 (new educational standards) held due to regions' concerns till veto session.
- EMS Grants: \$100,000 in EMS Assistance grants were awarded in FY12; applications for FY13 grants went out February and due June 30, 2012.
- Heartsaver Grants: The State did not fund this grant; still working on FY12 issue of fund-borrowing not being replaced.
- EMS Week: May 20-26, EMSC Day was May 23-"More than a Job, It's a Calling." About 2,000 certificates were sent out by IDPH.
- EMS Run Data System: Data groups coming out of NEDARC site visit are working diligently to integrate our NEMSIS-compliant data and up to version 3.0. Paper-based submission to state's free web-based software submission is becoming more common.
- Hospital ByPass System: Monitored closely during NATO and used during H1N1 and the floods; continues to be a good surveillance tool.
- EMSC Update: Ron W. Lee Awards given out in May for excellence in pediatric care.
- Pediatric Facility Recognition: Pediatric Site Surveys for Region 4 and 5 scheduled June/July; Region 11 later this year.
- Pediatric Disaster Preparedness: EMSC is developing a Pediatric Surge Annex for the State ESF-8 Plan. EMSC's work with IDOT to complete crash data report for 2010 available on the EMSC website.
- Testing and Licensure: Passing rates; 1,000 tests in June; 11 waivers for disabilities given. 24 EMS Systems have reinstatement policies; 5 reinstatements approved. IDPH working with Illinois State Police regarding personal history reviews of candidates with prior felony conviction(s). IDPH staff spending two days per month re-writing the EMT-Basic and Paramedic Tests which need completed by January 1, 2013; June/July meeting dates/locations given.
- Hospital Preparedness Program (HPP): \$10,936,885 in grant money received; within grant language EMS is labeled a "coalition partner," so over the next five years these 151 hospitals and 11 RHCC hospitals will be able to work more closely with EMS agencies regarding disaster preparedness training opportunities.
- On-line Fee Payment System: Testing completed; renewal notices for September renewals will include statement on them that there is a fee, as well as the website address where they may initiate fee-payment process. On-line license verification piece is in testing phase, will allow hospital HR departments to utilize and will eventually be operational. Doug Sears asks about the indicator for the felony conviction; Jack confirmed it is a requirement as a result of HB5183. George Madland asked about obtaining a copy of the renewal notice that providers will be getting to make them aware of

what it looks like; Jack states he's going to send the EMS System Coordinators and Council Members screen shots and a copy of the renewal notices informing them they will start charging fees as of September 1, 2012 and that they'll get notices with a PIN # which will be used to pay fees online.

Mary Ann Miller asks when we should we expect movement for designation of Wisconsin Trauma Centers; Joe Albanese states they're waiting for input from Dr. Gaines—should have decision in 2-3 weeks. Amy Ludford asks for list to include Wisconsin centers; Jack says Adelisa Orantia will distribute updated list out to the trauma centers when an addition is made. Amy Ludford adds that both Wisconsin Trauma Centers are listed in the Bypass System; Jack asks them to keep in mind they are also Associate Hospitals, to which the Interested Party Attendee states, no, they're not, they never got the letter; Jack confirms the letter is due from him and that he will get it to them.

Committee Reports – EMS

- Legislative and Planning—Mike Hansen. Last met on 5/17 and draft notice was given at last EMS Council Meeting re: clerical changes/amendments from 1/30; Mike Hansen would like a motion from a Council Member that was at the meeting; Mary Ann Miller motioned to approve the EMSC Rules and Regulations that were presented to the Council last meeting; Mike Hansen clarifies these changes involving oxygen delivery adjuncts as far as pediatric equipment, etc.; Connie Mattera seconds the motion to approve; no oppositions or abstentions; motion passed and will be forwarded to IDPH for administrative review.
- EMS Rules and Regulations – George Madland, The Advocate Group wants recognition as a community benefit in terms of Charity Care; the bill involving the \$1 increase of the cigarette tax has a portion for Medicare and also includes educational programs. Hospitals must be involved in EMS and choose the level of their involvement; he encourages interested parties to talk to their hospitals.
- State EMS Protocols – Annie Moy. Met April 9, 2012. 1) Protocol approved for Mark 1 left as is, although typos were identified; 2) Update to the Designated Infection Control Officer (DICO) Policy; 3) CDC Field Triage Document was discussed during the April 12, 2012 teleconference; comments withheld till later discussion. Next meeting for IPDH Protocol Committee is June 25, 2012, 1p-3p at Superior in Elmhurst.
- EMS Data – Mike Hansen. Mike says meeting monthly via teleconference consisting of four subcommittees looking at funding, objectives, etc. until all is resolved; requested volunteers.
- EMS Education – Connie Mattera, RN. June Report provided to Council Members and will be made available to others later. IL ready to be aligned to National Education Standards by Jan 1, 2013. New standards were discussed at length and progress of Lead Instructor Courses (as well as upcoming class dates/locations) were discussed by Connie (see report).

George Madland questions: If ALS-Paramedic class completed at the end of November, will they only have one month to get their application for accreditation in? Connie states, no, only new programs will be given new deadlines. Interested Party Attendee announces she was told any course that starts before January 1, 2013, will be able to take the Registry exam; Connie confirms this and emphasizes that any course that starts after January 1, 2013 will have to meet the new guidelines.

- EMS Recruitment and Retention – Greg Scott, RN. Met on April 12; the committee is awaiting the House EMS Task Force Report to identify key areas noted during hearings held across the state re: many rural issues to use for framework to identify tasks that the rural providers identified themselves. Lieutenant governor's rural listening post hosted across the state invited rural EMS providers for input. They discussed public service announcements and the development of marketing materials to assist local rural providers with recruitment efforts across the state (requires funding); the next meeting is June 14, 2012, 10:00am via conference call.
- Tactical EMS – Patti Lindemann not present; no report.
- Emerging Issues – Mary Ann Miller. They meet usually on the 4th Monday of every other month (next June 25, 10am-1pm) at Superior in Elmhurst. Current issues involve Scope of Practice, which runs parallel to the National Education Standards. They continue to monitor activities of the Mission Lifeline; STEMI movement, activity of the IL State Stroke Adv Council; Medicaid issues and work with HFS so that stretcher-van activity isn't used for patients that need EMT Basic or Advanced Life Support transportation; immunization of healthcare providers; and EMS personnel's potential involvement to prevent repeated resource use for patients needing to be continually re-admitted. Mary Ann notes there are minutes of the February 27th meeting in the packet; the April 9th meeting was held but the minutes are not yet approved (will distribute when approved) but agenda is included in the packet.
- State Stroke Advisory – Cheryl Colbenson, MD, not present; no report.

Old Business - EMS

- Strategic Plan Update – Jack Fleearty. They continue to work on the areas that were identified and continue to work on improvement in EMS and Trauma to stay on with what was identified in the Strategic Plan.
- EMS Task Force Report – Jack Fleearty. A report has been developed by Representative Don Moffitt's office who's working with Lisa Dugan in providing issues and have asked Jack to include his report with theirs; report pending completion.
- EMS Legislative Update – Mike Hansen. DICO (blood-born pathogens) bill never called but they continue to work with IL Hospital Assoc., IDPH's Communicable Diseases, etc. to get IL up to current standards. DUI blood draw went through House, but then the bill was "bricked" by Speaker of the House. Successful passage: private and non-private EMS vehicles may pass though toll-ways at a safe speed without paying tolls. HB 5880, Chapin Rose's Bill, and SB 3261. EMS Education saw 3261 taken over by a bill named for the tobacco tax. Will re-visit in Veto Session or will have to look at in the Fall. Jack

said website has 3261 as a health facilities act (?)...someone spoke up that the bill was “gutted” and the number was used for another. Mike spoke up that the bill passed both the House and the Senate so we’ll have to look at it.

New Business – EMS

- EMS Advisory Council Chair and Vice Chair Elections – Mike Hansen. Mike opens election process. Nominations for chair: Glenn Aldinger nominates Mike Hansen, seconded by Dr. Fantus. Motion to close nominations made by Ralph Graul. No oppositions or abstentions; approved.
- Nominations for Vice Chair: Mike Hansen recommended and motioned to nominate Mary Ann Miller as Vice Chair and was seconded by Jack Whitney. Motion to close nominations by Ralph Graul; seconded by Doug Sears. All in favor; no opposition or abstentions; approved.
- Scope of Practice – Jack Whitney, MD. Working with Jack Fleehty and tested the communications tool with the EMS Medical Directors and have developed a plan in developing the use of the survey monkey to deal with the issue of Scope of Practice.
- Open Meetings Act—Jack Fleehty. Laura Harris distributed via email the OMA document to Council Members that provides the url address where you may register for OMA Training; forward certificate to Laura Harris before the deadline. Go to: http://foia.ilattorneygeneral.net/electronic_foia_training.aspx
- Trauma Triage State Criteria – Annie Moy & Mary Beth Voights present report to board members (see report and Draft 4/12-State of Illinois Minimum Trauma Field Triage Criteria).

Draft 4/12-State of Illinois Minimum Trauma Field Triage Criteria recommendation of 10 or less Glasgow (GCS) should be safe (see draft page of report). Attempt is to adapt National CDC template to our setting, whether rural or urban. The regions should decide how best to get the right patient to the right place based on resources available. They don’t think regional borders should be a barrier anymore.

Dr. Fantus asks about confusion of brochure he received and asking definition of “region.” Mary Beth answered that since regions in Illinois are so diverse, the decision of which trauma center patient should be transported to, is a regional decision. Mary Beth provides example using CQI and Outcomes data to take patients to the right place. Dr. Hevesy expresses concerns...Mary Beth answers best to have this conversation in your region about tightening these criteria, but not loosening. Doug Sears asks if there some way to clarify language re: who gets taken to Level I trauma center? Discussion ensues. Joe Albanese supports Mary Beth and states goal is to give regions authority to utilize resources available. Specific regions need to take a hard look at their resources. Goal is to get patient to the right place the first time; funnel systems at regional level and grow outward from there. Interested Party Attendee asks question about category I and category II nomenclature. Mary Beth responds using Trauma Rules and uncoupling of the categories into a one-page document to “frame.”

Dr. Fantus requests Trauma Council motion to accept the Illinois State Minimum Trauma Field Triage Criteria. Motion by Dr. Hevesy, seconded by David Griffen. No further discussion. Roll call taken for vote. All who were present stated “yes.” Passed unanimously.

Mike Hansen requests motion from EMS Council for Illinois State Minimum Trauma Field Triage Criteria. So moved by Dr. Whitney, seconded by Dr. Aldinger. Roll call taken for vote. All who were present stated “yes.” Passed unanimously.

Jack Fleearty states EMS will move this Triage Criteria forward to their legislative liaison to adopt this as the new State Triage Guideline.

Future Meeting Dates – EMS

- September 6, 2012
- November 13, 2012
- March 12, 2013

Motion moved to accept by Mary Ann Miller, seconded by Ralph Gaul. No oppositions or abstentions. Approved.

- June 6, 2013 (Joint Council Meeting TBD)

Wrap Up & Call for Public Comment – EMS

No public comment(s).

Committee Reports – Trauma

- Trauma Registry – Adelisa Orantia, no report; Trauma Registry Meeting to follow.
- Trauma CQI/Best Practice – Mary Beth Voights states they must vote on 2nd part of uncoupled Triage Criteria (the surgeon activation piece). Mary Beth discussed the boxes and recommended changes. Box number 2 was the hot topic. This review panel’s recommendation is to make these the minimum: Physiological – category I; all rest of patients – category II. She strongly recommended that each facility look at its own data.

Dr. Fantus noted confusion between Category I and Category II, as far as when the clock starts moving in Category I; but he has no problem with the uncoupling. He would prefer to have additional discussion for the categorization system.

Jack Fleearty asked about including Level 3 and Level 4 trauma centers - will Level 3’s be impacted? He would prefer to review this issue. Dr. Fantus agreed because of it being regional-based.

Mary Beth says they can table it back to the Task ForceEMS and discuss at the September meeting.

- Advanced Practice – George Hevesy, MD: Jan Gillespie states that they’ve been tasked with obtaining a consensus concerning the ability of the Mid-Level Providers (MLP’s) to respond to trauma resuscitations. They’re making a recommendation for verbiage to be put into the rules. Joe Albanese asks: MLP can respond until physician arrives, but he wants to be sure the physician is still held to the 30-60 minute response time and clock is

still ticking until he/she actually shows up; and that a nurse practitioner showing up does not stop that clock. She answers it does NOT stop the clock and that they can add that to the language. Dr. Fantus calls for move to approve. Dr. Hevesy notes modification of verbiage to “MLP’s may assist with trauma resuscitations as provided by the hospital credentialing process...The MLP will not act in place of the appropriate attending physician but as a designee until the attending physician is available; and that the applicable time frame will remain in effect;” Dr. Hevesy’s motion; seconded by Dr. Aldinger; no opposition or abstentions; approved.

- Trauma Nurse Specialist – Stacy VanVleet, they’ve not met since last meeting; no report.
- Injury Prevention/Outreach – Stacy VanVleet, everything on website: www.illinoistraumanurse.org
- Legislative Rules – Chris Wohltmann, MD, no report but recommends merging of EMS and Trauma Legislative Committees. Discussion ensues. Merge legislative but keep rules separate. Motion made by Dr. Wohltmann to rename the Legislative Rules Committee the Rules Committee, seconded by Mary Beth Voights. No oppositions or abstentions. Approved name: the Rules Committee.

Old Business - Trauma

- HB 1391 – Rules language, final; went to JCAR.
- Indiana Trauma Triage update; state of Indiana spokesperson (Greg) states Indiana has voted into policy that any patient who is victim of trauma to be transported to a trauma center within 45 minutes independent of whether state lines are crossed. Jack spoke to Michelle Sadler and Cory Foster who said they may be able to help after last week’s legislative session. Jack will update.
- Trauma Systems Legislative Champion; Dr. Fantus mentions that EMS has just provided one.

New Business – Trauma

- Trauma Advisory Council Chair and Vice Chair Elections
Nomination for Chair made for Dr. Richard Fantus by Dr. Hevesy, seconded by Dr. Aldinger. Moved to close by Dr. Aldinger, seconded by Mary Beth; approved; no oppositions or abstentions. Vice Chair nomination made by Dr. Fantus for Dr. Hevesy; seconded by Dr. Aldinger. Moved to close by Dr. Aldinger, seconded by Dr. Arain; no oppositions or abstentions; approved.

Future Meetings Dates-Trauma- for 2012/2013 videoconference (SIU in Springfield, and Central DuPage Hospital in Winfield)

- September 6, 2012; conflicts w/ EMS; unresolved. Jack Fleeheart states will be worked out later.
- December 6, 2012
- March 7, 2013

Dr. Fantus moves to approve 12/6/12 and 3/7/13; Dr. Hevesy motions to approve, Kathy Tanouye seconds; no oppositions or abstentions; approved.

- June 6, 2013 (Joint Council Meeting TBD)

Call for Public Comment – Trauma

- Mike Hansen asks for suggestions on how to use dedicated funding source 1(0-70 million) to push into the Strategic Plan; get ideas to them.

Mike Hansen makes a motion to adjourn EMS; Mary Ann moves to adjourn; seconded by Dr. Whitney. No oppositions or abstentions; approved.

Adjourned at 1:13pm, by Dr. Fantus.