

# State EMS & Trauma Joint Advisory Council Meeting Minutes

September 18, 2014

11:00 a.m. - 1:00 p.m.

Memorial Medical Center, SIU South Auditorium

801 N. Rutledge, Springfield, IL 62702

## TRAUMA ADVISORY COUNCIL MEETING

### Call to Order-Richard Fantus, MD at 11:03 a.m.

Dr. Fantus extended a thank you to Sara Fricke for making arrangements for the meeting space at the SIU Auditorium.

### Roll Call and Approval of Minutes-Richard Fantus, MD

**Council Members Present:** Mohammad Arain, M.D., James Doherty, M.D., Richard Fantus, M.D., David Griffen, M.D., Robert Hyman, EMT-P (appointment pending), George Hevesy, M.D., Lori Ritter, R.N., Kathy Tanouye, R.N., Stacy Vanleet, Mary Beth Voights, A.P.N., Christopher Wohltmann, M.D., Eric Brandmeyer, R.N., William Watson, M.D.

Quorum is established.

Approval of Minutes from March 6, 2014: The minutes for the March 6, 2014 meeting had not been provided by the Department. Jack Fleeharty will send them out to the Committee members.

### Illinois Department of Public Health Report/Jack Fleeharty, RN, EMT-P:

- **DPH Staff:** The Department would like to announce the starting of our new Ambulance Program Section Chief, Keith Buhs. Keith is an RN, Paramedic, and Firefighter with 30 plus years of experience in the EMS and Fire Services. The Department also hired an Administrative Assistant for the Division of EMS and who will start on October 1, 2014.
- **Veterans Bridge Program Curricula:** The military Bridge education program work continues progress in a coordinated effort between the Department of Veterans Affairs, three (3) Junior Colleges and IDPH. The program is being similarly modeled to that of the National EMS Academy. The requirements have significantly increased the required hours of the program. Currently, there is work being done to define the eligibility requirement policies. The goal is to have three (3) programs run the pilot courses in northern, central and southern Illinois. The group is getting very close to a consensus on the final product. The goal is to start offering the programs to the Veterans in the fall of 2015. Veterans Affairs has taken the lead on this project.
- **Scope of Practice Survey:** IDPH continues to work on the Scope of practice survey. The first survey has been completed and summarized; and a second survey was distributed with the results of the first survey. Once the results of the second survey are obtained, IDPH should be able to establish the Scopes of practice within each level of EMS licensure and work to build out the necessary educational components that will be affiliated with the medical practices that are above existing standards identified within the New Education Standards.
- **National Registry Imports:** IDPH Information Technology Staff have received some test downloads of the National Registry import files and will be testing it to determine the criteria for importing National Registry Records similar to the imports received from CTS. Additionally, IDPH has been working on several essential fixes to the GL Suites licensing software and has started a project to provide licenses to the Emergency Medical Dispatch Agencies. This work is ongoing. David Hayes with our licensing staff has been devoting much of his time and effort to these multiple tasks. IDPH will also be working to update the licensing database to move to the four-year ambulance licenses as soon as some of the other core software issues are resolved.

- **Special Programs:**

- **UPDATE ON EMS GRANTS:** The EMS Grant Applications for FY2015 have been submitted back to the Department. The Department reviewed the applications; some were sent back to the grantee for budget revisions. The final award announcement should be announced by the end of the month. The Department received 61 qualified EMS Assistance Fund Applications. The Department will again this year be able to award \$100,000 in grant money.
- **UPDATE ON HEARTSAVER AED GRANTS:** The Heartsaver AED Grant for FY2015 was announced on Monday, September 15, 2014. The grant application is available on the Department's Electronic Grants Administration and Management System (EGrAMS).

- **Regulatory:**

- The Specialized Emergency Medical Service Vehicles (SEMSV) rule amendments have been adopted.
- The Department had its first meeting with subject matter experts to begin amending the EMS rules to reflect the EMS new education standards. We plan to meet every other Thursday.
- The first meeting with stroke care subject matter experts to amend the stroke rules will be held on September 25, 2014. The Department plans to meet every other Thursday.

- **Legislation:**

The following bills were passed this summer:

- SB 3414 Illinois can adopt the New Education Standards.
- SB 3076 Changes the Advance Directive DNR form name to the POLST form. This bill also allows Advance Practice Nurses and Physician Assistants to sign a DNR order form.
- HB 5742 - Changes the recognition of hospitals to Acute Stroke-Ready Hospital and Comprehensive Stroke Centers as they are recognized nationally. It also allows the Department to charge fees and establish a state stroke registry.
- HB 4523 allows an ambulance, alternate response vehicle, specialized emergency medical services vehicle, or vehicle service provider who serves a population of 7,500 or fewer to upgrade the level of service of the provider vehicle utilizing EMS System personnel and equipment.

- **Stroke Designations:**

- The Department continues to designate hospitals with stroke care capabilities. To date, the Department has designated 82 hospitals. Of these designated hospitals, 48 are Primary Stroke Centers and 34 are Emergent Stroke Ready. A list of designated hospitals can be found on the EMS website.

- **Trauma Program Updates:**

- Trauma/HSVI registry has moved to the new environment (Websphere Application Server 6.1) and the old portal is no longer accessible. A big "thank you" to the Trauma Registrars who volunteered as testers of the Trauma/HSVI registry during its development.
- The Trauma Community and Trauma Coordinators Handbook are in the process of being moved to the new environment.
- Trauma and IT staff have been working on some issues related to the move. So far, hospitals have been reporting positive comments on the performance of the registry. Some problems reported by trauma centers may be related to technical requirements.
- Our current recommendations for the Trauma Registry are:
  - Java 6 (Update 45 or higher), Internet Explorer 9 or higher, Windows Vista or Higher (Windows 7, Windows 8)
- Trauma Center Fund amount of \$4.9 million has been distributed to in-state trauma centers and to hospitals in EMS regions without in-state trauma centers.
- Trauma and IT staff continue to work on RFP for the new Trauma Registry.
- Fulfillment of data requests have been delayed due to changes in program priorities.
- Trauma site surveys have been scheduled in October and November and hospitals have been notified.

- **EMS Pre-hospital Data and Bypass Updates:**

- The number of items tracked in HBS, as well as the reporting frequency, has been temporarily increased to improve understanding of the spread of Enterovirus D68 and its effects on Illinois hospitals.
- Enhancements are in the works that will allow for collection of bed, other resource totals and surge counts, in addition to the availability of counts that are currently collected. Unlike availability information, total and surge counts are generally static and so their addition to the system should impose only a minimal reporting burden. Look for this to go into production some time during the next quarter.
- Hospitals located within Chicago are transitioning to a new Chicago-Department-of-Public-Health-based hospital-status-reporting-system. IDPH is currently working with CDPH and their new system's software vendor to get HBS and the CDPH system talking to one another. Similarly, IDPH is working toward functionality that will allow for the automated transfer of Illinois' hospital bed and other resource data directly to the ASPR Secretary's Operations Center.

- **Pre-hospital Database:**

- Annual reporting volume in the current NEMESIS Version 2 system is at a record high, with close to 900,000 records in the database for 2013 and on track to match that in 2014.
- The NEMESIS Version 3 dataset was established and disseminated by this Council's Data Committee in December of last year. The data validation rules associated with that dataset should be available for submitters and their software vendors before the end of the year, in the form of a Schematron file. The State's transition to Version 3 is expected to begin in 2015 and progress throughout the year.
- National Highway Transportation Safety Administration grant funds were awarded to IDPH for fiscal year 2015 through the Illinois Traffic Records Coordinating Committee, for the purpose of improving access to pre-hospital data by EMS Systems and the general public. IDOT has been very good to work with, and has provided grant funding on several occasions to support data collection projects. The Department appreciates IDOT's efforts to support the Department's projects and to help upgrade our systems.

**EMSC Program Updates:**

- ***Pediatric Pre-hospital Protocols*** - The EMSC Pre-hospital Committee is in the process of updating the EMSC pediatric pre-hospital protocols and hope to have them finalized in early 2015.
- ***Pediatric Facility Recognition*** - Site surveys are in the process of being scheduled for Region 7 hospitals in November and December. Hospitals in Regions 2 and 8 will undergo their renewal process in 2015.
- ***School Nurse Emergency Care Courses*** - Eight (8) School Nurse Emergency Care courses were conducted over the summer months. Two-hundred ninety (290) school nurses from across the state participated in these courses.
- ***EMSC Advisory Board*** - The EMSC Advisory Board has an open board position for a trauma representative (either a pediatric surgeon or trauma nurse coordinator). If interested, please contact Evelyn Lyons.

**TAC Committee Reports:**

- Registry subcommittee, Joe Albanese: IDPH took over production work on the re-platformed registry several months ago. With assistance of the Trauma Registrars, the Department was able to identify multiple problems with the registry including issues with browser settings, duplicate registry numbers, and browser connectivity issues. The Department has worked through the majority of these issues and the new registry on the 6.1 websphere platform is in production and will continue to monitor and trouble shoot issues as they are identified. Work on the RFP for a new registry is about 90% complete and will resume once the production registry issues are resolved. The recommendations from the registry subcommittee include a unique registry number. The committee commented on multiple recommendations to be included in the RFP regarding functionality of the new registry. Anyone interested in joining the subcommittee or has recommendations about the registry should contact Kathy Tanouye.
- The Committee's recommendations include a registry number that follows a patient throughout the continuum of care; having the registry to accept a patient data import from a third party vendor; and additionally maintaining inclusion data elements that track kinetic injuries such as hip fractures, etc.

The Committee would also like to see diagnosis codes and activation criteria. The Committee will discuss further at its next meeting.

**CQI/Best Practice/ Mary Beth Voights:**

The CQI Committee has updated its best practice documents with current references and will post it to the portal once it receives final approval. Work continues on the tool that tracks triage efficacy, and the Committee is currently working on draft 4. The goal is to develop consensus on trauma activation criteria. Field triage activation was approved back in June. There is no consensus at this time. Therefore, the Committee will work on it and bring it back to the council.

**Trauma Nurse Specialist/ Stacy Van Vleet:**

Committee has met twice to review needed changes to the curriculum. Hope is to have the curricula updated prior to courses next September. The committee will review question performance with Dr. Rogers with CTS.

**Rules & Legislative Subcommittee/ Stacy Van Vleet:**

The Rules and Legislative Subcommittee is looking at several legislative issues. Lack of trauma surgeons was not addressed at this time. The Committee is looking at trauma surgeon requirements for board certifications and CME's for ED physicians and trauma surgeons. There was a discussion on the specialties as identified by ACS recommendations. The Committee is looking at trauma centers' capabilities for dialysis. Not addressing the requirement for Organ procurement since that is addressed by other hospital legislation. The Committee is discussing the alcohol drug evaluation criteria and determine if it needs to be removed.

**Injury Prevention and Outreach:** No report.

**Illinois Burn Advisory Subcommittee/ David Griffen M.D.:**

The Burn Advisory Subcommittee is a formal committee tasked to provide oversight to burn related care in the State including burn preparedness. On Monday, September 29, 2014, the first meeting will be held and will include individual representatives of burn hospitals, EMS, trauma centers and non-trauma hospitals. As the Committee's work proceeds the Trauma Advisory Council will be updated.

**TAC Old Business:**

**Indiana Trauma System update/ Jim Doherty M.D.:** Three centers in Northwestern Indiana have gained level 3 trauma center status. A lot of impact has not been observed as Illinois is still receiving some of the major trauma from Indiana.

**Burn Surge Annex:**

Information was distributed to the Council to provide an update to the burn surge annex. It provides information regarding a multi-state planning effort to identify available burn beds in Illinois and within a multi-state region. The annex is part of the State Disaster and Medical Response Plan. The plan includes guidance documents and referral plans. The annex was distributed to council members for their knowledge. Hospitals that participate in the HPP program also have access to the plan.

**TAC New Business:**

**Election of Officers- Chair/Vice Chair/ Kathy Tanouye:**

Elections for Chair, Dr. Fantus has accepted a nomination as Chair and Dr. Hevesy has accepted a nomination as Vice Chair. Mary Beth Voights made a motion to nominate Dr. Fantus as Chair and Dr. Hevesy as Vice Chair. This motion was seconded by Dr. Glen Aldinger. Kathy Tanouye asked for votes in favor, all replied aye; all opposed, no one opposed. Motion passed for nominations of Chair and Vice Chair.

**Proposal to Amend Bylaws for Telecommunications: Mary Beth Voights:**

Mary Beth Voights proposed changes to the bylaws to continue to allow attendance by videoconference. Mary Beth explained the bylaw amendment to section 4.1 and 4.2 that included Roberts Rules for identification of speakers and the requirement that two-way communications and connectivity must be maintained for teleconference or videoconferencing to be a valid means to conduct the meetings.

Motion to approve was made by Dr. Wohltman and seconded by Dr. Griffen. Dr. Fantus called for a roll call vote. Motion passed to amend the bylaws.

Mary Beth Voights proposed the changes to the bylaws that bring the teleconferencing and video conferencing of the meetings into compliance with the Open Meetings Act regarding notice and that one of the sites must be a state office and be opened to the public. Motion to accept the change was made by Dr. Aldinger and was seconded by Dr. Hevesy. Dr. Fantus called a roll call vote. Motion passes to amend the bylaws accordingly. Quorum was present.

Dr. Fantus checked with all present to see if there were any other issues regarding the different areas of the Council's agenda. Dr. Fantus did ask the Department if there was a time frame for when the RFP for the Trauma Registry will go out for bid. The Department was unable to provide any type of firm date.

Dr. Fantus asked for a brief overview of where the multi-trauma level legislation was at. The Department advised that its goal will be to run the legislation again in the Spring, if approved on the Spring legislative session. Dr. Fantus suggested that the Council meet in Springfield so members might be able to support the multi-tiered trauma center legislation with the legislators. Mike Hansen suggested that the Trauma Advisory Council may wish to seek support of the EMS Alliance on the bill.

Questions about the burn surge annex document can be obtained through Evelyn Lyons or from Jack Fleeharty.

Council Members were reminded to give Jack Fleeharty their Ethics Committee's forms.

Future Meetings: December 4, 2014 - videoconference

Adjourn: Motion to adjourn. Approved. Meeting was turned over to the EMS Advisory Council.

### EMS ADVISORY COUNCIL MEETING

Call to Order-Mike Hansen at 11:00 a.m.

Roll Call and Approval of Minutes-Mike Hansen

Council Members Present: Glen Aldinger M.D., Kevin Bernard, Don Davids, Richard Fantus M. D., Randy Faxon, Ralph Graul, Mike Hansen, David Loria, George Madland, Kenneth Perlman M.D., Greg Scott, and Doug Sears.

Council Members Absent: Stephen Holtsford (proxy to Don Davids) Connie Mattera (proxy to Mike Hansen), Brad Robinson (proxy to Ralph Graul) Jim Rutledge (proxy to Kevin Benard) Leslie Stein Spencer (proxy to Kenneth Pearlman M.D.), Herb Sutherland M.D. (proxy to Jack Whitney M.D.) and J. Thomas Willis

Approval of Minutes from March 4, 2014 Meeting: Motion to approve by Glen Aldinger M.D., and was seconded by Kevin Bernard. Attendance for Brad Robinson needs corrected. Department will note. Motion to approve passes.

Committee Reports:

- Rural Retention and Recruitment: Greg Scott wanted to remind everyone of the Illinois EMS Summit on November 19, 2014 at the Northfield Inn. Flyers should be distributed later this month.

Committee has a You Tube video for retention and recruitment. The Committee is concerned with the workforce challenge with the loss of a couple of providers. The videos will be distributed to career counselors in the high schools. The Committee is working on a billboard campaign and a sixty-second radio Public Service Announcement.

Merging Issues: No report today.

Old Business/Mike Hansen:

Illinois EMS Summit

Illinois Department of Public Health Report-Jack Fleeharty, RN, EMT-P

- State EMT Testing Results: Mike requested a report from the Department on the testing results. Jack gave an update on recent testing scores. EMT basic testing summary shows a 77% first attempt passing score on the EMT basic exam, 26% on the second attempt, and 22% on the third testing attempt. Analysis demonstrates that if students do not score well on the first examination, they also likely to score poorly on repeated examinations. On the second attempt, at least 50% of the students fail.

Paramedic exam testing summary shows a 58% first attempt, 30% second attempt, and 28% third attempt. These are the same findings as the basic. Students who fail the first attempt only have about a 50% chance of passing the second or third attempt.

IDPH did a study and analyzed the CoAEMSP-accredited programs or programs with an IOR and compared them to the non-CoAEMSP programs. The Department did not find any significant difference between student performances on the examinations. Additionally, the Department has some EMS Systems who

have scores in the 80-90%. The Department has some CoAEMSP programs whose students are performing very well. However, there are some programs that the students are performing poorly on the examinations.

The Department has produced a student test exam that is available for free for students applying for the state exam. The second attempt is \$10.00, and the examination has 100 questions. This examination was piloted.

IDPH will continue to analyze the examinations along with their results. Some programs have gone to the National Registry examinations with no better results than when their students went to the State examination. All test questions have been validated.

The State is continuing to see more and more Paramedic programs seeking CoAEMSP accreditation. Overall, this should improve EMS education. The Department will begin working with individual programs in the future if their student pass rates continue to be low. The Department believes the adoption of the New Education Standards will be helpful in getting programs to update teaching programs. The Department is also sponsoring three (3) lead instructor workshops throughout the State. If a program is not getting good results, the Department encourages attendance of their lead instructors at one of these workshops.

- **Legislative Update:** SB 3432 bill through the Illinois Fire Chiefs Association. This bill addresses infectious disease standards to match the federal standards of 48 hours notification and to match the CDC standards for airborne and blood borne standards.

The Bill that found funding for the Illinois Poison Center through 2018 has been passed. Mike would like to thank everyone who supported the bill to find funding to keep the Poison Control Center viable through 2018.

Dr. Michael Wall presented a plaque to Mike Hansen in appreciation to the EMS Advisory Council for supporting the legislative efforts.

Mike is working with the legislative agenda for the EMS Alliance. Please bring issues to Mike that might need to be addressed to the EMS Alliance.

Senate Joint resolution that creates the Responder Roadway Safety Task Force went through the Senate and to the House. It was held up at the House. Greg Scott believes the resolution will come out of the House during the veto session this fall. Greg and Mike would like for anyone who can to support this resolution.

- **Temporary Ambulance License Plates:** Mike would like to see progress so vehicles can be provided ambulance license plates on a temporary basis. Jack provided a lengthy explanation about the challenges of getting temporary vehicles that meet the licensing, insurance and inspections in order to meet the current commercial vehicle licensing standards.

Mike would like to know if the Department can pull a list of all of the companies who have a reserve ambulance based on a regional basis.

#### New Business

- **Rural In-field Upgrade Rules:** Mike requested an update of where the rural in-field upgrade rules are at. Jack advised those rules were at our legal counsel. Mike wanted an assurance from the Department that rules are addressed chronologically.
- **Mobile-Integrated Healthcare Guidelines:** The Department has received the integrated healthcare packet from the Subcommittee and will review the information as soon as possible. The Department is unable to provide a completion review date. Greg Scott offered assistance from the Council. Should the Department require help with any tasks, the stakeholders could provide assistance.

Future Meetings: The next meeting will be scheduled in November. The actual date is to be determined. Mike will work with IDPH to establish the date.

Adjourn: Motion to adjourn by Don Davids, and seconded by Greg Scott. Meeting adjourned.