State EMS Advisory Council Meeting Minutes
June 16, 2016
11:00 a.m. - 1:00 p.m.
Memorial Center for Learning and Innovations
228 W. Miller St., Springfield, IL 62702

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

Roll Call Vote: Council Members Present: Glenn Aldinger, M.D. (ICEP), Richard Fantus, M.D. (ICEP), Stephen Holtsford, M.D. (ICEP), George Madland (ICEP), Ralph Graul (Marion), Mike Hansen (Springfield), J. Thomas Willis (Springfield), Leslie Stein-Spencer (ICEP), Kim Godden (ICEP), David Loria (Rockford), Stuart Schroeder (Springfield), Randy Faxon (Springfield), Bradley Perry (Edwardsville), Valerie Phillips, M.D. (ICEP), Mitch Crocetti (Rockford), and Kenneth Pearlman, M.D. (ICEP)

Council Members Absent: Connie Mattera (proxy to Mike Hansen), Doug Sears, Brad Robinson, Justin Stalter, Robin Stortz, and Jack Whitney, M.D.

Vacancies: EMT-B, Administrative Rep from a Resource Hospital or EMS System, Administrative Director and License Practicing Physician with Special Expertise in Surgical Care of Trauma Patients. The Council will work on filling these positions.

Quorum is established.

Approval of Meeting Minutes of March 10, 2016:
Mike Hansen requested a motion to approve the minutes. The motion was moved by Tom Willis and seconded by Randy Faxon. Minutes were approved unanimously.

Correspondence/Mike Hansen: No Correspondence.

Public Comment/Mike Hansen: No Public Comment.

Additions to the Agenda/Mike Hansen: None heard.

Illinois Department of Public Health Report/Jack Fleeharty, RN, EMT-P: Jack thank you to many of the EMS System hospital who are currently participating in a three-day Full Scale Mass Dispensing Exercise.

SPECIAL PROGRAM UPDATES:

- UPDATE ON EMS ASSISTANCE GRANT APPLICATIONS:
  The FY17 EMS Assistance Fund Grant applications were not announced this February 2016 as the Department does not have a budget appropriation.

- UPDATE ON HEARTSAVER AED GRANTS:
  The Department will not issue the announcement for FY17 Heartsaver AED Grant applications. No budget appropriation, as well.

REGULATORY UPDATE:

The Stroke and EMSC Rules amendments were approved at JCAR at the April Meeting. The changes have been filed with the Secretary of State and have required some small technical changes. Those changes were adopted on June 3, 2016 and are to be published on June 17, 2016.

- The Department continues to review the EMS Code amendments. The biggest set being worked on currently is the New Education Standards. The paperwork is completed for the Governor’s Office to review and is currently under review by the Rules Coordinator.

- EMS Rule amendments to comply with PA 99-0480 are at first notice. This is the “Opioid Antagonist Act”. This is the Act that requires Regional Emergency Medical Services (EMS) Systems to include
administration of opioid antagonists in their standing medical orders. The Act also requires EMS personnel to be educated and trained in the administration and use of opioid antagonists. The rules amendments outline the requirements to fulfill the intention of the Act.

- The Department has sent amendments to the Regional Poison Control Center Code to comply with PA 97-135. These changes were addressed by the State Board of Health Advisory Subcommittee in late May. These changes were passed at the full State Board of Health on June 14, 2016 and did pass and will go to first notice.

**LEGISLATIVE UPDATE:**
- Multi-tiered trauma level legislation did not go anywhere during Spring session. There was a call with IHA and some of the Trauma Councils legislative affairs members. IHA remains opposed to the legislation as written based on concerns of their constituent hospitals. The Division does not expect this bill to advance in 2016.

**TRAUMA PROGRAM UPDATE:**
- Reviewed data request and data sharing agreement from Indiana as drafted by DPH Legal. The Department also continues to work on data requests application with University of Miami and Cook County.

- Trauma Plan change for Centegra Huntley to transition designation from Woodstock campus to the new Huntley campus.

**TRAUMA REGISTRY UPDATE:**
- The Department continues to work towards moving the Trauma Registry to Websphere 8.5 development. A contractor was brought onboard to assist with the development and the changeover is very close.

- The Department also continues to work with Trauma Centers in trauma registry application and reports.

**NON-TRAUMA RELATED:**
- IDPH will continue to send out license renewal notifications through the U.S. Postal Service. The non-transport licenses will not be mailed out as it is not required. A listing will be provided to all EMS System Coordinators. Also, verification of non-transport licenses can be done online.

**EMS PRE-HOSPITAL DATA AND BYPASS UPDATES:**
- Work continues to increase hospital awareness and utilization of the new bypass system (EMResources). Training was provided in February of this year, and a refresher will be provided at next week’s Integrated Preparedness Summit in Schaumburg. So far, the software has worked very well and is compatible with Chicago’s system. We have utilized the system on a few occasions for additional reporting during special events (i.e., Marathons, large public events, and pediatric bed shortages).

- The Department continues to work on deployment of WebEOC and EMTrack software, as well. There is hope to roll out EMTrack out to the hospitals on June 28, 2016. EMTrack Phase II will include EMS Providers who want to participate and Phase II will be the reach out to other healthcare entities.

- The Department will no longer accept paper-based submissions of pre-hospital data starting July 1, 2016. Paper forms completed for care rendered through June 30, 2016 should be submitted to the Department as timely possible. Any providers needing assistance with utilization of the Department’s free web-based software should contact Dan Lee. About 50% of the EMS System Coordinators are signed up to use a secure EMS System website that includes a dashboard and data download tool.

- All run reports after November 30, 2016 must be NEMSIS Version 3 compliant. The Department recommends entities start their conversion early so validation can be completed timely.
EMSC PROGRAM UPDATES:

• **Ron W. Lee, MD - Excellence in Pediatric Care Awards** - This award is presented annually to individuals and organizations that have gone above and beyond in addressing the emergency care needs of children. There are 3 categories of awards: Lifetime Achievement, Clinical Excellence and Community Service. The following individuals received awards during EMS Week:
  - Lifetime Achievement - Leslie Livett, RN, MS (EMS/Trauma Nurse Coordinator at Presence Saint Joseph Medical Center in Joliet) received this award at a ceremony on May 19th.
  - Clinical Excellence - Stathis Poulakidas, MD (Burn/Trauma Surgeon at Stroger Hospital of Cook County in Chicago) received this award during a ceremony on May 16th.
  - Community Service - The Lake Zurich Fire Department received this award during the Lake Zurich Board meeting on May 16th.

• **Pediatric Facility Recognition - Updates:**
  - Two hospitals were newly designated. Congratulations to AMITA Health Adventist Medical Center Bolingbrook in Bolingbrook and Northwestern Medicine Valley West Hospital in Sandwich. Both were newly designated as EDAP hospitals.
  - **Regions 4 & 5** - 22 Hospitals in Regions 4 & 5 are currently undergoing their hospital site visits in May and June. This includes new applications from 2 hospitals seeking pediatric designation.
  - **Region 11** - Renewal applications are in the process of being submitted. Their site surveys will take place in late Fall/early Winter.
  - **Regions 1, 9 and 10** - Hospitals in these regions will undergo renewal in 2017.

• **School Nurse Emergency Care (SNEC) Course** - This summer, eight (8) School Nurse Emergency Care courses have been scheduled in various locations throughout the State. This course provides school nurses with emergency care and disaster preparedness education and resources.

• **Burn Surge Project** - A new full-day training course was piloted on Saturday, April 23, 2016 at Loyola Medical Center. The course is titled “Illinois Burn Disaster Training Course: Management of Burn Patients at Non-Burn Hospitals” and was supported through Illinois HPP funding. This training targets hospitals that typically do not care for burn patients, and provides physicians and nurses with fundamental burn concepts as well as advanced care of the burn patient. The training is a mix of lectures and skill stations, and is based on a course developed by the University of Michigan. Fifty-four physicians and nurses participated in the April 23rd course, including instructors and observers who provided feedback that will be used to modify and finalize the curricular materials. The Burn hospitals will offer this training to non-burn hospital personnel. During a disaster event that results in a large number of burn patients, trauma centers and other non-burn hospitals may need to serve as burn surge facilities and manage burn patients during such an event. The IHPF ESF-8: Burn Surge Annex is the State’s plan that addresses how the care of burn patients will occur during a burn mass casualty incident. The Annex identifies that Level I and Level II trauma/non-burn hospitals will need to admit and care for burn patients and serve as burn surge facilities. If any questions concerning Burn Surge Project, contact Evelyn Lyons at Loyola Medical Center.

TEST RESULTS FOR 2016:

• EMT Basic: 722 candidates took the exam. First attempt pass rate of 78%
  - Intermediate: 6 candidates took the exam. First attempt pass rate of 100%
  - Paramedic: 199 candidates took the exam. First attempt pass rate of 88%
  - TNS: 43 candidates took the exam. First attempt pass rate of 40%

  **Year to Date**

  - Twenty eight (28) reinstatement applications approved
  - Fifteen (15) waivers for candidates with a history were granted
  - Fourteen (14) additional exams waivers were approved
  - Ten (10) special examination accommodations were approved
  - Reinstatements (15)
  - Miscellaneous waivers (3)
EMS LICENSING:
- New License Processed YTD = 24,444
- Renewals Processed YTD = 3,509
- Reciprocity Processed YTD = 202

AMBULANCE COMPLIANCE PROGRAM UPDATES:
- Revised special events form in conjunction with the State Terrorism Incident Center (STIC), awaiting STIC’s final approval.
- Critical Care Application Guide developed, awaiting final approval.
- SEMSV Application Guide developed, awaiting final approval.
- MERCI radio guidebook update in process.
- MERCI radio communications problem continue to be evaluated in the City of Chicago.
- All non-transport provider numbers have been changed to reflect the new alpha numeric provider number including “N.T.” after the agency number.
- We continue to conduct all non transport licensing via email with EMS systems. We do not mail non transport licenses.

DEPARTMENT ITEMS IN PROCESS:
- The Department continues to update and revise their forms. If newly-revised forms are needed, go to the IDPH web site at [http://www.dph.illinois.gov/topics-services/emergency-preparedness-response/ems/licensing](http://www.dph.illinois.gov/topics-services/emergency-preparedness-response/ems/licensing).
- POLST form revisions were completed and are now on the IDPH website, as well. The Spanish version is being revised by Publications.

REMINDERS:
Any newly-appointed EMS Council members who have been recently appointed must complete their Open Meetings Act Training by June 30, 2016. (This is a one-time training).

TRAUMA ADVISORY COUNCIL/RICHARD FANTUS, MD:
- The Council met last week. No funds are available for a new Trauma Registry. CQI Committee worked on areas in the rules to try to coordinate into a generic performance improvement plan.
- TNS testing closed for the year.
- The Legislative Planning Committee had a very interesting conference call with IHA on trying to move ahead on the multi-tiered Trauma System Bill 2460 which has stalled. The final decision is to try and come up with concrete definitions of what a level II and level III would look like with a multi-tiered system. It was a deliverable which was requested by IHA.
- There was a motion to look at changes to the rules language. Three items were submitted and have passed unanimously.
- A recommendation was passed for no more mandatory blood alcohol testing for drivers at a Trauma Center.
- Discussion on the language of competency or requirements in the rules regarding Emergency Department Physicians Staffing by those who are not board-certified. There are still several that have fulfilled an alternative pathway into staffing a certain number of CME hours and will require up-to-date ATLS. No change in existing language.
- Discussion pertaining to a Resident who fulfills the in-house Trauma Surgeon requirement. Recommends changing language to the Resident/Attending Trauma Surgeon be in the Operating Room within 30 minutes and at bedside. The language will stay the same for now.
- Injury Committee is looking into heroin dependency.
- The Burn Subcommittee informed the group about annex documents and a tabletop drill in Loyola in May 2016.
• There is a new business request regarding record retention for number of years for Trauma Centers and Regional committees to maintain minutes and PI before destroying. Need a legal opinion from IDPH.
• Council made mention of Dr. David Boyd to receive Lifetime Achievement Award in Springfield.

COMMITTEE REPORTS:

**MOBILE-INTEGRATED HEALTHCARE/GEORGE MADLAND:**
• Applications were made and are progressing under Jack Fleeharty and Keith Buhs. The Committee felt what would become important was the ability to collect data and report this data. Recommendation is that EMS Systems could collect and store data. The Mobile-Integrated Data Group was established and met on June 9, 2016 with an attendance of 13. The Group consisted of data experts which were representatives from different data companies that service providers in the State. The Data Group agreed:
  1) There is value in data collection for EMS Providers to be able to examining other individual programs and how they performed.
  2) IDPH would have this type of data readily available for non-emergent patient contacts.
  3) Identified four (4) data points that would be able to take care of this.
  4) Write validity rules which would be of value to Dan Lee of IDPH.

Minutes have not been completed for dissemination. There is no set next meeting until there is a product available which would work. The Data Group would like to invite Keith Buhs to represent IDPH at the next meeting, and/or Dan Lee.

Brief discussion on data collection.

**EMS DATA/MIKE HANSEN:**
An EMS Data meeting was held at the State level. The Committee has been working with Dan Lee (IDPH). Jack reported most of the information regarding NEMSIS 3 transition. Reminder, November 30, 2016 is the deadline for NEMSIS Version 3.

**EMS EDUCATION/CONNIE MATTERA, RN:** No report.

**EMS RECRUITMENT AND RETENTION/STUART SCHROEDER:** No report.

**EMERGING ISSUES/GEORGE MADLAND:** No report.

**STATE STROKE ADVISORY SUBCOMMITTEE/RANDY FAXON:** No report.

**TACTICAL EMS:** No report.

**AHA/MISSION LIFELINE/JULIE MIROSTAW & ART MILLER:**
AHA appreciated the update on Stroke rules from IDPH. There is an ongoing issue with STEMI. AHA purposely did not call its STEMI bill and is holding it for now in order to meet with the groups who are opposed of the bill. It is the intention to move forward with a Heart Attack or Acute Cardio event unsure of the name at present. Discussion on forming a smaller working group in the near future.

AHA Awards were presented to 21 hospitals in 2016.

EMS Awards were presented to 21 EMS Systems in 2016.

**OLD BUSINESS:**
• **EMS STRATEGIC PLAN UPDATE:** IDPH continues to work on this plan.
**IMPACT/Kim Godden:**
Recap on HFS as they are rolling out their next phase of IMPACT for provider enrollment. It is their expectation that every EMT and Paramedic in the State will have to enroll separately as a rendering provider and receive a Medicaid Recipient number. Then, the agency that the provider is employed by will have to place the recipient number on each claim submitted. If not enrolled or not accepted for enrollment, the agency would not be paid for the transport. A letter was sent to HFS inquiry as to the requirements for this enrollment. HFS responded and indicated that 911 Dispatchers will not currently require enrollment. HFS indicated that they are not required to follow the EMS Act for any requirements for this enrollment. Representative Ron Sandack has called a meeting for next Wednesday, June 22nd with the Inspector General and the Director of HFS to further discuss this issue. The meeting is open to any group. The enrollment should be completed by the August 31st. However, an extension will be requested as HFS does not have a mechanism up on their website at this time.

**Legislation/Kim Godden:**
There is a piece of Federal legislation in place right now regarding the prescription or utilization of certain classes of drugs under standing orders. There has been much discussion at the State and Federal about opioid abuse. The DEA has reviewed the current regulations and has determined that the current law does not allow for certain classes of drugs (i.e. Fentanyl, morphine, etc.). These drugs can or should be administered under standing orders. DEA has indicated to EMS Community that unless we can fix these orders, they will have to start enforcing this law. This means they would require that EMTs and Paramedics obtain prior authorization to utilize these drugs.

Requested if the EMS Advisory Council would like to send a letter to the Illinois Congressional Delegation requesting them to sign on or any individual organizations could send letters to encourage additional sponsorship to the legislation. These are HR4365 and SB2932. Kim will provide a template letter to Tena Horton (IDPH) for dissemination.

Motion by Kim Godden to move forward; seconded by Leslie Stein-Spencer. Motion passed unanimously.

**NEW BUSINESS:**
- Trauma Bill 2460 passed the Senate; and has stalled and shelled out.
- Alliance Bill SB2947 (Criminal Code) changes were made to the EMS personnel at the State. Passed unanimously; at Governor’s Office for approval.
- EMS Act SB2704 some language needed to be clarified with CMS. What is considered clinical observation and what is considered medical monitoring. Passed unanimously; at Governor’s Office for approval.
- Epinephrine vials SB3335 passed unanimously; at Governor’s Office for approval.
- Ambulance Reimbursement SB2957 out of the Committee in the Senate. Legislation agreed with Governor/HFS to allow Federal match for non-emergent reimbursement rate. Meeting scheduled next week to discuss the language.
- AED HB6062 for more additional AED’s in the State. Never left the Judiciary Committee. Julie Mirostaw spoke with Dan Burke regarding this bill and had asked him to hold it. This bill allowed employers with more than 1,000 employees to create their own standards for training for AEDs.
- STEMI 2591/5620 discussed earlier by Julie Mirostaw, AHA.
- Free-standing Medical Center HB4388 passed unanimously; at Governor’s Office for approval.

**Elections:**
Motion from the floor for Chairman position. Glenn Aldinger nominated Mike Hansen; seconded by Leslie Stein-Spencer. No other nominations. Motion passed unanimously. Mike Hansen will remain Chair for another year.

Motion by Mike Hansen for Dr. Stephen Holtsford to be the Vice-Chair; seconded by Tom Willis. No other motions. Motion passed unanimously. Stephen Holtsford will remain Vice-Chair for another year.

David Loris, Representative for Region 1, has been reappointed.
No other new business.

**FUTURE MEETINGS:**
- Future meeting dates are September 22\textsuperscript{nd} (JAC) and the Council will present a Lifetime Achievement Award will be given to Dr. David Boyd; and November 17, 2016. The Council will start reviewing dates for 2017.

Motion to adjourn by Dr. Aldinger and seconded by Randy Faxon.

*Adjourned: 12:14 pm*