

# State EMS Advisory Council Meeting Minutes

November 19, 2015

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 11:01 a.m.

**Roll Call Vote:** ***Council Members Present:*** Glenn Aldinger, M.D. (ICEP), Mitch Crocetti (Rockford), Randy Faxon, Ralph Gaul, Mike Hansen, Stephen Holtsford, M.D. (ICEP), David Loria, George Madland, Connie Mattera (ICEP), Kenneth Pearlman, M.D., Bradley Perry, Valerie Phillips, M.D. (ICEP), Brad Robinson, Stuart Schroeder, Doug Sears (Rockford), Leslie Stein-Spencer, Robins Stortz (ICEP), Jack Whitney, M.D. (ICEP), and J. Thomas Willis

***Council Members Absent:*** Richard Fantus, M.D., Justin Stalter

Quorum is established.

## EMS Advisory Council Awards/Mike Hansen:

The EMS Advisory Council Awards was started a few years ago. Dr. Zydlo was the first recipient. Today, the Council is pleased to have Dr. John Lumpkin in Springfield. Dr. Lumpkin was the Director of IDPH and very instrumental with Illinois EMS. Leslee Stein-Spencer gave an overview of Dr. Lumpkin's accomplishments and the time they worked together during his term as Director. Mike Hansen presented the award to Dr. Lumpkin. Dr. Lumpkin gave a brief overview of the evolution of EMS in Illinois. The second award recipient is Leslee Stein-Spencer. Mike Hansen also presented the award to her as well. Leslee gave a short thank you speech.

## Additions to the Agenda/Mike Hansen:

Mike Hansen indicated that there was a rumor around the State that the "EMS providers are going to have to take some type of a flagger course for roadway, accidents, etc.". Is there any truth to this rumor? This should be placed at the end of the agenda. Jack Fleeharty stated he would reach out to Tom Korty at IDOT regarding this issue.

**Public Comments/Mike Hansen:** None

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

### **SPECIAL PROGRAM UPDATES:**

#### • **UPDATE ON EMS ASSISTANCE GRANT APPLICATIONS**

The FY17 EMS Assistance Fund Grant applications will be available in February 2016. Go to [idphgrants.com](http://idphgrants.com) and register to receive emails from the Office of Preparedness and Response for the availability of a new grant, including the EMS Assistance Fund Grant.

#### • **UPDATE ON HEARTSAVER AED GRANTS**

The FY16 Heartsaver AED Grant applications have been reviewed by the Department. The Department received 76 qualified applicants and awarded 33 applicants with a Heartsaver AED Grant of \$466 each; totaling \$15,378 awarded. This was the remaining amount of funds.

#### • **REGULATORY UPDATE**

- The Rural In-field Upgrade rule amendments have been adopted and are now being implemented.
- The The Stroke and EMSC rule amendments went to first notice on November 6, 2015 and will be available for public comment until December 21, 2015.
- The Department is in the process of reviewing the EMS Code to reflect the new EMS Education Standards. IDPH is currently going through the process with the Legal staff and are approximately 70% complete.

— IDPH is in the process of drafting amendments for the Regional Poison Control Center Code to comply with PA 97-135. The amendments will change the number of poison centers that can be designated by the Director from 2 to 3 down to 1 to 3 poison control centers. IDPH will also delete the need for poison control centers and EMS to have two-way communications. The amendments also change representation from a hospital administrator on the Poison Control Advisory Board to a representative of a healthcare professional society and updates the requirement of a poison control center to current national standards.

• **LEGISLATIVE UPDATE**

- The Office has requested on the legislative agenda for Spring 2016 that the State move to a 4-tiered Trauma system. IDPH will attempt to run the Multi-tiered Trauma Bill in the Spring.
- Public Act 99-0246 was passed and signed by the Governor in August 2015. This amendment exempts Sheriff Offices and Police Departments owning, occupying or managing premises where an Automated External Defibrillator (AED) is present to not be liable if the defibrillator is used with an exception of willful or wanton misconduct. It also allows the Sheriff Offices and Police Departments to apply for an AED grant through the Heartsaver AED Fund. Additionally, the Act the Sheriff Offices in each county and Police Departments to employ 100 or more to have a working AED and an AED user. Other changes to the Act that do not directly affect EMS.
- Public Act 99-0480 was passed to mandate every publicly- and privately-owned ambulances, special emergency medical services vehicles, non-transport vehicles, or ambulance assist vehicles to be able to respond to and carry opioid antagonists. This bill is treatment for heroine and opioid overdoses. The rules will be amended into IDPH laws.

This Act also requires an establishment of a policy to control the acquisition, storage, transportation, disposal and administration of such opioid antagonists and to provide training in the administration of these opioids.

IDPH conducted a scope of practice survey with all EMS Medical Directors. This survey included intranasal Narcan at the BLS. The Department has been approving intranasal Narcan for 2-3 years for BLS vehicles. But, this will further expand that and the Department will have further discussion regarding intramuscular administration of Naloxone versus the intranasal or auto-injectors.

**TRAUMA PROGRAM UPDATE:**

- There is ongoing work with the Legislative and Planning Subcommittee to review and revise current rules. The Subcommittee met Monday, November 30, 2015.
- IDPH designated St. John’s Hospital as a Pediatric Level II Trauma Center.
- The Business Objects software utilized for the Trauma Registry Reporting System was moved to Central Management Service (CMS) supported environment providing trauma centers the capability to generate their own reports.
- IDPH continues to review and process data requests.
- IDPH has completed the contract for Trauma surgeons. Unfortunately, although they are ready for processing, the Department will not be able to move forward until there is a State-approved budget.
- IDPH continues to follow-up with the Trauma Registry Request for Proposal (RFP). It is believed that even without the State-approved budget, the Department will be able to post the RFP.

**STROKE:**

- The Stroke applications are being processed as they are received. The current stroke designation listings are on the IDPH web site as well as at through the Division’s webpage.
- The Department has a letter requesting clarification on multiple questions from the State Stroke Advisory Subcommittee. We will be responding to those questions in the near future.

**EMS PRE-HOSPITAL DATA AND BYPASS UPDATES:**

- The Department went through a bid process and purchased three (3) software modules called PHEPARMS. The EMResource module rollout will begin and user training is scheduled in December 2015. An invite will be provided. It will be followed up with a WebEOC Administrative Committee in January 2016. Finally, in March or April 2016, the EMTrack will be implemented. Steering Committees to oversee the rollout of these three (3) modules have been selected as well as the Implementation teams. The Bypass system will be the first system replaced.
- The Department is moving towards NEMSIS 3.0 on the pre-hospital data. This work is ongoing.
- The Division of EMS has been working to migrate all of its online information to the main IDPH website. This includes forms, links to laws, rules, applications and other web information. In the near future as the IDPH site is completed, our old web page will no longer be available. However, it is currently linked to the new webpage.

### **EMSC PROGRAM UPDATES:**

- ***PEDIATRIC PRE-HOSPITAL PROTOCOLS:*** The EMSC Prep-hospital Committee is finalizing revisions to the 22 EMSC prehospital protocols, as well as a new protocol that was developed title “Apparent Life Threatening Event (ALTE)”. It is anticipated that the revised protocols will be finalized very soon.
- ***PEDIATRIC FACILITY RECOGNITION:***
  - ***Region 8*** - hospital site surveys are underway and will be completed Wednesday, December 2, 2015.
  - ***Regions 4 & 5*** - hospitals will undergo pediatric facility recognition renewal in 2016. Educational sessions were conducted in both Regions in October 2015.
  - ***Region 11*** - An educational session for the Region 11 hospitals are scheduled for next year on Monday, March 7, 2016 at the First Community Medical Center.
- ***EMSC ADVISORY BOARD*** - The EMSC Advisory Board has open board positions for an EMS Coordinator and a representative from the Illinois State Police. If interested, please contact the Program Manager, Evelyn Lyons.
- ***CREATING LIQUID TAMIFLU BROCHURE*** - A revised brochure entitled “*Creating Liquid Tamiflu*” is now available for use during a pandemic flu event if insufficient quantities of liquid suspension are unavailable. The revisions are based on the “*CDC Influenza Antiviral Medications: Summary for Clinicians, February 25, 2015.*” This brochure is available on both the IDPH and EMSC websites.

### **TESTING UPDATES:**

- IDPH started re-writing the Intermediate/AEMT exam on November 5<sup>th</sup> and 6<sup>th</sup>. The Department thanked all those involved. There were 16 to 17 individuals to participate. Instructors or Coordinators are still needed to assist with the re-writing. The second scheduled meeting will be December 3<sup>rd</sup> and 4<sup>th</sup> at the DNR Building. The Department is still looking for volunteers to help write the new AEMT/EMT-I exams.
- There is no full quarterly report on examinations. The information is the same as last report.

#### **Test results for April, May & June of 2015:**

- EMT Basic: 600 candidates took the exam 400 passed. First attempt pass rate of 77%
- Intermediate: 10 candidates took the exam 4 passed. First attempt pass rate of 57%
- Paramedic: 198 candidates took the exam 102 passed. First attempt pass rate of 72%
- TNS: 74 candidates took the exam 61 passed. First attempt pass rate of 86%

#### **Year to Date:**

- Twenty five (25) reinstatement applications approved.
- Forty one (41) waivers for candidates with a history were granted.
- Fifty-four (54) additional exams waivers were approved.
- Fifteen (15) special examination accommodations were approved.

## **EMS LICENSING:**

- New License Processed YTD = 5,449
- Renewals Processed YTD = 7,936
- Reciprocity Processed YTD = 446

## **AMBULANCE COMPLIANCE PROGRAM UPDATES:**

- The Department continues to produce, update and revise forms specific to EMS provider and vehicle licensing. All forms should be taken from the updated website where the most up to date documents can be found.
- MIH “application booklets” are being accepted for review for participation in the pilot program. There are currently four (4) programs that have been applied and have been approved.
- Systems participating in the infield upgrade option should submit a policy to their State Regional EMS Coordinator for review. Providers should forward a system modification form and roster to the EMS System. The EMS System will forward these documents with a letter of recommendation to IDPH for documentation purposes.
- Due to software issues, IDPH cannot enter new transport providers into the database. Therefore, any new transport providers since February 2015 are able to provide service with an approval letter from IDPH. The approval letter from IDPH acts as their license until further notice.
- Stretcher van licensing is near completion in the database. Once we are given final approval from our IT staff, letters will be sent out to all providers that bill for stretcher van services. At this point, IDPH will begin the licensing process in conjunction with Health and Family Services who carry the Providers List for stretcher van fees. HFS pays stretcher van fees to these providers.

## **REMINDERS :**

- Paper form Membership applications have been returned to Tena Horton. Governor-appointees will have to verify their information online. Tena will contact each council member as their applications are completed online.
- Certificate of liability forms are required for any council members who seek mileage reimbursement.

**STRATEGIC PLAN UPDATE:** From the last Joint Meeting, the Advisory Councils were interested in a strategic plan update. The Department will develop a Powerpoint presentation at some point in the future and conduct it via webinar. All of the objectives will be covered.

## **COMMITTEE REPORTS:**

### **Mobil-Integrated Healthcare/George Madland:**

- All meetings for the rest of the year were canceled. MIH is regrouping and will begin a new schedule in 2016 for both of the subcommittees.
- Everything has been the same regarding MIH. There are some formatting and verbiage updates to the application. It has been sent out again to everyone requesting them to delete the old version. There are four (4) programs that have applied.
- One topic of discussion was data collection and the ability to review the data and understand the relative benefits or the downside. This group has not engaged in this project as yet. But, it is a goal.
- The other area being reviewed is legal definitions that have moved forward with MIH. The group is exploring different technologies that can assist field- and in-hospital personnel with current patient groups.
- The Committee has been supported of the Task Force with Representative Smiddy and has written him a couple of letters indicating the group’s concerns with a much broader representation of the pre-hospital environment. The Task Force has responded back to the affirmative and everything is frozen in Springfield right now. They would probably revisit this again in the Spring of 2016 and welcomed our group’s input.

### **Emerging Issues/George Madland:**

- The Committee did not meet. A new schedule will come out in 2016.

*Question: IDPH indicated that MIH is in phase II in looking at QA data. How long does the Committee anticipate it to be before data is collected and evaluated? At some point, the Department may wish to review the application for revisions.*

*Answer: Twelve months would be considered fair. The issue is reimbursement. Some communities are moving forward with MIH. But, the Committee will need to revisit the process of data collection.*

*Question: Does the twelve months consist of final approval or being able to get an aggregate amount of data?*

*Answer: The Committee is looking at the aggregated amount of data in order to begin to look at the pilot programs that have applied.*

### **EMS Data/Mike Hansen:**

The Department alluded to the EMS Data Committee is working at NEMSIS 3.0 and is meeting today at 1:30 pm. The other issue the Council tasked the group to review is to ensure NEMSIS 3.0 data points are starting to meld with standard of care. Compass.com looks at performance standards from an EMS perspective and eventually EMS will be required to review the data for the four (4) questions on their website. As long as Compass.com is available, the Committee will review today to ensure the Council has the data elements for collection.

### **EMS Education/Connie Mattera, RN:**

- The Committee met on October 26, 2015 at multiple sites via videoconference. The quarterly test report presented by IDPH reflected all examinations are performing as designed. The major points discussed at the meeting were CE recommendations that were approved by the Council. IDPH has been reviewing the recommendations and making final revisions. The document should be posted to the State as an approved recommendation.
- The Committee has been requested to compile a CE tally form. So that folks who are looking at our submissions for relicensure have an easy way to be able to look at not only the numbers of hours accrued but the method by which were accrued. Many EMS systems have this done in an electronic format for their own system. But, others are still manual. Independent renewals would like to have a form. A subcommittee is in the process of creating this form.
- The Committee has also been asked to conduct a CE analysis around the State to query the current state of affairs in terms of how CE's is being conducted. The subcommittee is chaired by Mike Dant. This subcommittee is reviewing the bridge curricula. As soon as the Subcommittee sees it scope of practice reach the different levels, there will be bridge programs established as template education programs that can be rolled out to system.
- The Committee is currently working on updating their orientation document for EMS Coordinators.
- The Committee has a group that is working on a model online technology on how to do distributive or distance education. They are looking at best practice models on a national basis to see what would work best for Illinois.
- The Committee has been requested to revisit the ECRN education testing credentialing and CE models. The current models are inconsistent and need to be aligned with other education in the State.
- The Committee has been asked to address competency testing at the PHRN levels. All of the current programs accredited by CoAEMSP are under letter of review are having to give policies on advance placement within their programs.

- The Committee is currently in the process of putting together lesson-plan workshops.
- The Committee has been working with the POLST Committee to start creating a model education plan for the new POLST form which is due out in January 2016. IDPH was asked if the Department has an estimated publication date of the new form. The Department indicated that there is no date at this time. The Department informed the Committee to continue working on their education model.
- The Committee offered options to find resources for workshops, seminars or webinars.
- The next meeting is scheduled for January 25, 2016. The first IC-1 course is confirmed for April 21-24, 2016 in Belleville, IL. The Committee is reaching out to northern and central sites inquiring if anyone would like to host the IC-1 course in 2016.
- IDPH had a brief discussion regarding the format of the CE Relicensure Recommendations. The Department also discussed two (2) areas of competency testing which are lacking, as the State does not have a standardized First Responder examination.

Connie Mattera gave her proxy to Dr. Holtsford.

**EMS Recruitment and Retention/Stuart Schroeder:**

- The Committee had a brief meeting. The biggest problem being reviewed is retention. The work force in the rural area is not any younger. The Committee needs to meet more frequently to prepare for the Spring. The billboard ads are still up. Another video ad was run and was very effective. They received some interest until individuals realize it is free (voluntary).

**State Stroke Advisory Subcommittee/Randy Faxon:**

- The Subcommittee met on November 4, 2015. The Subcommittee is waiting on the Public Comment on the amended rules. The group had renewal questions on the Stroke licenses for the hospitals. The Subcommittee is awaiting response from IDPH.
- The Subcommittee voted in new officers. The new chairman is Dr. Chris Richards. Elizabeth Kim is leaving and moving to California. The Subcommittee thanked Elizabeth for all of her hard work. The vice-chair is Amanda Conn and the Secretary is Tracy Love.

**Tactical Report: None**

Mike Hansen congratulated Dr. Lumpkin and Leslee Stein-Spencer for their EMS Advisory Council Awards. American Heart Association had their efficacy group meeting two (2) weeks ago and looking to push ahead on STEMI legislation.

**OLD BUSINESS:**

- The Council would like to keep MIH issues on the agenda in order to provide any updates.
- The Council is looking at Illinois Fire Chief Association and others group are developing their agendas for legislation.
- American Heart Association is working with the EMS Alliance and is looking at a dedicated funding source.
- Federal legislation information has been included in the packets. Could possibly get funding for HR745 and HR2366. No Congressmen have signed on as co-sponsors for these bills. The Council is working with the AHA to draft a format letter to send out to EMS personnel to pursue congressional legislative personnel.

**NEW BUSINESS:**

- Mike Hansen would like to form another EMS committee under the EMS Advisory Council. The new committee would be “Heart Attack Systems of Care” and will hopefully get concurrence for regional plans for STEMI and heart attacks throughout the State.
- The chair entertained a motion for a formation of a new committee. A motion was made by Brad Robinson and Tom Willis seconded the motion. Motion passed unanimously.
- Executive summary for standards for cardiac care from the American Heart Association was provided for review.

**FUTURE MEETINGS:**

- Future dates will be discussed offline with IDPH. Announcement to follow. The Council would like to have their future meetings at MCLI.

**Approval of Meeting Minutes of September 15, 2015:**

- Mike Hansen requested a motion to approve the minutes. The motion was moved by Tom Willis and seconded by Ralph Gaul. Minutes are approved.

IDPH thanked all those involved in the coordination of the Council meetings.

Motion to adjourn by Dr. George Hevesy and seconded by Tom Willis.

***Adjourned:*** 12:28 pm