

# State EMS Advisory Council Meeting Minutes

November 18, 2014

11:00 a.m. – 1:00 p.m.

St. John's Hospital, Dove Conference Center  
800 East Carpenter, Springfield, IL 62702

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

### Roll Call and Approval of Minutes-Mike Hansen

**Council Members Present:** Stephen Holtsford, M.D., George Madland, Connie Mattera, David Loria, Greg Scott, Randy Faxon, Brad Robinson, Justin Stalter, Kevin Bernard, and Herb Sutherland, D.O.

**Council Members Absent:** Glen Aldinger, M.D. (proxy to Mike Hansen), Richard Fantus, M.D., Doug Sears, Brad Robinson (proxy to Ralph Graul), J. Thomas Willis (proxy to George Madland), Leslee Stein-Spencer, Jim Rutledge, Don Davids, Jack Whitney, M.D., Kenneth Pearlman, M.D.

Quorum is established.

**Approval of Minutes from September 18, 2014 Meeting:** Motion for approval by George Madland, and was seconded by Randy Faxon. Motion to approve passes. No oppositions.

**Correspondence:** No report at this time.

**Public Comments:** None at this time.

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

- **IDPH Staff:** The Department would like to announce the starting of our new Administrative Assistant for the Department, Tena Horton.
- **Veterans Bridge Program Curricula:** (No new information.) There was another conference call held with the Department of Veterans Affairs (VA). VA is still working on the final pieces of what the admission criteria should resemble. IDPH has not had a lot of input on that final product.
- **Scope of Practice Survey:** The first Scope of Practice Survey was sent back to the EMS Medical Directors with some clarification questions. Those findings have been sent back to the Department and we now have both surveys completed. IDPH will identify what the scopes of practice and those various licenses' categories are going to be. IDPH will probably take the project on once the Department receives the new education standards (HB3414) and they are submitted to Governors office and JCAR. Once submitted, the Department will start working that scope of practice document. The Department will have approximately 90-120 days to work on this document. Once completed, the Department will go back and pick up the education component that will go with those scopes of practice. (no new information)
- **National Registry Imports:** For National Registry import, the IDPH Information Technology Staff have that as a task to work and IDPH will need to figure why it is not importing correctly. IT staff have been pulled off of the Registry to work on Bypass and haven't had a lot of time to investigate. The other thing IDPH is looking at is the EMS four-year licenses and is a project we have scheduled in the future. IDPH has software that has been introduced and can now begin licensing Emergency Medical Dispatch Agencies. The Department has been accepting many applications for those agencies. IDPH has been giving agencies a letter of approval to operate. As soon as IDPH can get the software regression tested and completed, the Department will be able to license dispatch agencies. IDPH does have a member of their staff who is doing the regression testing. Unfortunately, the testing environment was down for almost two (2) months which was problematic.

### SPECIAL PROGRAMS:

- **Update on EMS Grants:** The Department reported last meeting that it had received 61 qualified EMS Assistance Fund applications, and will be issuing out \$100,000 grant money for those 61 grant fund applications. The Department was able to identify if approvals have been received and that the agencies have been notified.

- **Update on Heartsaver AED Grants:** The Heartsaver AED Grant for FY2015 grants have been completed as well. The Department was able to identify if approvals have been received and that the agencies have been notified.
- **Regulatory:**
  - The Department has had several meetings with subject matter experts to begin amending the EMS rules to reflect the EMS new education standards. We currently meet every other Thursday.
  - The Department has also had ongoing meetings with State Stroke Advisory Subcommittee to work through the upgrades to the stroke rules to include the comprehensive strokes centers as well as changes the name of the Emergent Stroke Ready Hospitals to Stroke Capable Hospitals. Have actually worked all the way through the bill and will have a final review with the group. IDPH will then submit to legal for their final review. Once completed, the Department will hope to work a little more on the Education section and make faster progress on it. The Department continues to meet every other Thursday.
- **Legislation:**
  - **Stroke Designations:**
    - The Department has designated two (2) more Emergency Stroke Ready Hospitals. Currently, the Department has 84 hospitals that are designated as either primary or emergent stroke ready. In the future, we will be changing titles to include comprehensive as well as the name change from emergent stroke ready.
    - The Department has started receiving applications for re-designation. It's been over a year since implementation.
- **Trauma Program Update:**
  - Conducted two (2) trauma site surveys and re-designated two (2) of the trauma centers in the State.
  - Trauma Registry moved to a new platform. The Department took over the software and had their IT develop the software to be placed on the new websphere 6.1 platform. This caused a series of complications and problems with speed issues. IT has been able to correct and modify some areas. There are still more enhancements that need to be completed in order to improve and finalize the performance. Currently, IT is addressing issues related to migration functionalities as reported by trauma community.
  - The Department is still working the Trauma Registry RFP and it is approximately 90-95% completed and hope to submit to RFP by the first of 2015.
  - Processed data request for the University of Chicago researchers.
- **EMS Pre-hospital Data and Bypass Updates**
  - **HBS:** The Department is still working on functionality requirement for the CDPH web-based import of data and reporting up to the Federal HaVBed System. This project is 85% completed and testing will continue.
  - **Pre-Hospital Database:**  
IDPH is developing a dashboard site for EMS System to use to access their System's data.  
Examples:
    - Breakdown of chief complaint, by agency.
    - Breakdown of call disposition, by agency.
    - Number of airway procedures successful versus unsuccessful EMS Systems will need to specify exactly what procedures to include i.e., airway by agency.
    - Number of venous access procedures successful versus unsuccessful (they and/or you and the REMSCs will need to specify exactly what procedures to include i.e., venous access by agency.

- Average response time / scene time / transport time, by agency.
- Demographic information.

Jack requested the Council to identify what they would like to see on the dashboard and provide feedback to the Data Committee or Dan Lee. Jack addressed questions from Council members as well as the audience.

- **EMSC Program Updates (November 2014)**

- **Pediatric Pre-hospital Protocols** - The EMSC Pre-hospital Committee continues to work on updating the EMSC pediatric pre-hospital protocols with a plan to finalize in 2015.
- **Pediatric Facility Recognition** - Site surveys are currently being conducted at Region 7 hospitals in November and December. Hospitals in Regions 2 are working on their renewal applications which are due on January 23rd and then their hospital will undergo their site visits in the Spring/early Summer 2015. Region 8 hospitals will undergo site visits in the Fall of 2015.
- **School Nurse Emergency Care Course** - An ad-hoc committee is currently revising the curriculum material for the School Nurse Emergency Care course. This is a 3-day course that is conducted by the EMSC program, and outlines appropriate assessment and triaging of emergencies in the school setting. The plan is to have a new curriculum by the Summer 2015 classes.
- **Burn Surge Annex** - An annex for the State Medical Disaster Plan (ESF-8 Plan) has been developed by EMSC. This plan outlines the state response to a large scale burn incident, and provides local guidance. Companion resources, tools, forms and protocols have also been developed and will be rolled out soon. Two tabletop exercises are planned for 2015 to test the Burn Surge Annex across the state. These exercises are scheduled as follows:

- Tuesday, March 10, 2015 (Northern Illinois)
- Tuesday, March 24, 2015 (Central and Southern Illinois)

Pediatric exercises were performed last year and these Burn Surge exercises will mirror those webinar tabletop exercises.

- **Testing Updates:** We will be conducting another review of the current tests on December 2, 2014 and December 3, 2014 for the Basic and paramedic exams. This review will be conducted by a different group of Lead Instructors and EMS Coordinators. The reviewers will look at those test questions where less than 50% of all candidates failed to answer the questions correctly, and 20% of more of high-scoring candidates selected the same incorrect answers. The Department talked about doing a peer review and will bring another group in to review examination questions.

Current test results are as follows for the quarter of 7/1/2014 to 9/30/2014:

- Basic - Pass Rate 1st attempt: 69%; 2<sup>nd</sup>: 32%; 3<sup>rd</sup>: 20%
- Intermediate - Pass Rate 1st attempt: 88%; 2<sup>nd</sup>: 50%; 3<sup>rd</sup>: 50%
- Paramedic - Pass rate 1st attempt: 75%; 2<sup>nd</sup>: 28%; 3<sup>rd</sup>: 31%

The Department mentioned at the last meeting that IDPH had deployed an online practice test which allowed everyone who registered with CTS to do a practice examination.

- **Practice Test Results:**
  - 317, took the exam
  - 156, passed the exam
  - 111, failed the exam and
  - 50, still need to re-take the exam.

The Department had three (3) lead instructor workshops that were conducted by Connie Mattera. The number of attendees is as follows: in Mount Vernon, IL, on September 29, 2014 approximately

60 attendees; in Downers Grove, IL, on October 3, 2014 approximately 75; and in Springfield, IL on October 10, 2014 approximately 60. IDPH is awaiting confirmed numbers from Connie Mattera.

The Department extends their gratitude to Connie Mattera for doing these lead instructor workshops. These workshops had a very good turnout and identified some problematic areas. The Department will provide follow-up with the EMS Systems in these areas. The Department also continues to see more and more educational programs sign up for Co-AEMSP accreditation.

One area noticed during the last Education Committee meeting was that some education programs are not administering summary examinations. They are only conducting quarterly and chapter examinations. The Department will follow-up and address these issues.

— **Licensing Updates:**

➤ New License Processed YTD:	5,183
➤ Renewals Processed YTD:	7,759
➤ Reciprocity Processed YTD:	431
➤ Total Licenses Issued YTD:	13373 (per GLS Report)
➤ Targeted Rate:	16,000 (annually)

**Question from audience:** Can the Department capture how many licenses that were not renewed?  
**Jack's response:** Would have to ask the Department's IT to create a custom built report in order to address this issue. This would be for retention purposes.

— **GL Suites:**

- As of 11/13/2014, we do not have total functionality of the TEST system after it crashed over two months ago. Currently on TEST, we are unable to process credit card transactions and some baseline functionality is not working.
- We continue to work with GLSOLUTIONS on the Initial Transaction Card Letter request along with the ability for ECRN, EMD, LI, PHRN and FRD applicants to pay online using Pin Number from the Initial Transaction Card Letter.
- Waiting for IT resources to be allocated to diagnose NREMT Import File issues.
- GLSOLUTIONS continues to work on Provisional FRD/EMR enhancements.
- GLSOLUTIONS is making progress with the new EMD Agency License request. Was able to print an EMD Agency License certificate on 11/12/2014. Further testing will continue.
- We continue to work with GLSOLUTIONS to correct the LAPSED vs. EXPIRE statuses for ECRN, EMD, LI, and PHRN. The fix implemented on TEST was working prior to the TEST system crashing. Implementation to the LIVE system cannot take place until full regression testing can be completed.

**Question from audience:** Did not hear an update on the status of Rural Infield Upgrade.

**Jack's Response:** The Rural Infield Upgrade was mentioned at the last Council meeting two (2) months ago. The upgrade was in legal and has moved to the Governor's office 2 to 3 weeks ago. The two (2) house bills were rolled up into one package. Unable to determine whether these bills will go out with the new Governor and transition team coming in. May have to wait for his legal team to review them and give their approval.

**Question from audience:** On the draft rules, these were initially presented to the Council for review after going through Legal. Is this still the procedure?

**Jack's Response:** Once rules are reviewed by IDPH Legal and approved through the Governor's office, the rules become official draft rules by the Department. Once the rules clear the Governor's

office, they are submitted to the Council for 90 days. During the 90-day period, the Council can provide recommendations. Changes are considered and the rules are then submitted to JCAR. Discussion on how administrative rules are processed.

Mike Hansen states “Show for the record, there are three (3) more in attendance, Dr. Holtsford, Dr. Sutherland and Kevin Bernard”.

### **Committee Reports:**

#### **Mobile-Integrated Healthcare-George Madland:**

The Committee has not met since April 2014. The next meeting will be November 26, 2014 at ICEP in Downers Grove. The Committee will need to get back together to determine what will be the next phase to their project. IDPH has reviewed in two (2) stages and have some questions and changes. The Committee should address what they want to do next and how does it stand within the system. Jack gave an overview of scope of practices and where they lie within the Mobile-Integrated Healthcare Guidelines.

— ***Mobile-Integrated Healthcare Guidelines:*** The IDPH 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.

#### **EMS Education-Connie Mattera:**

The Committee has met on October 27, 2014. Written report provided to members containing 2 pages of a table that looks at cost analysis. Four (4) workshops were conducted. Out of the three (3) sites many indicated that they did not write their own education blueprints. One of the issues may be that we are not testing across the entire curriculum.

An invitation went out on November 10, 2014 to develop groups to look at whether the testing items are easy, medium or hard levels of questions. The Committee continues to look at “pass” versus “not pass” rates. Quizzes given by pen/pencil versus computer and how it seems to affect scores. Areas will be cited if tests are only on pen/pencil. Another problem is students that are five (5) months out from the academic content they will fail as it is taking a long time to get the students into Continental Testing. Also, it was identified that some courses do not have cumulative final examination. If this is the case, these locations will be cited. Report reviewed.

A thanks was given to Jack and Stu Thompson for the data presented. First attempts are passing and the Committee will now take a look at a remedial testing program. A discussion on taking a refresher course after three (3) testing attempts.

Received positive feedback on workshops; more workshops are promised. Five (5) possible subject matters were presented to vote on; subject matters were evenly split. Some topics to cover are Curriculum Design and Preceptor Education. Future workshop dates will be published. A meeting will be set with Dr. Scott Warren to work on National EMS practice modules.

#### **EMS Recruitment and Retention-Greg Scott:**

Short verbal report; no written report. Next meeting scheduled for November 20, 2014.

Committee has been focused on Public Service Announcement (PSA) You Tube. Working on a Billboard Campaign which received a small grant from Illinois Critical Access Hospital Network. Committee is searching for an additional grant funding to put other billboards up across the rural areas targeting the importance of educating the community about EMS. The Committee is also putting together a 30-second sound bytes for radio PSA and is wanting to roll out in early 2015.

#### **Emerging Issues-George Madland:**

Meeting minutes from August 25, 2014 were approved. Subsequent meetings held on November 3, 2014 and the next meeting is scheduled for December 22, 2014. Topics discussed were the scope of practice and how it affects EMS, Mobile-Integrated Healthcare and also IDPH Education Examinations. Discussion on

importance of the selection of students and as well as retention. The Committee also discussed the possibility and reality of Google Glass in the ambulances. Currently, there is no verbiage in the EMS Act. The Subcommittee was formed and has met twice to discuss the BLS Required Equipment on ambulances and non-transporters and are working with IDPH.

The Committee discussed the success of the Blood Borne Pathogen Law and the work done by Pete Dyer and Keith Buhs and the influence that it carried on the EMS community. The group had an EMS Alliance Report concerning legislation which was presented by Kent Adams. They also had an AHA Report from the American Heart Association presented by Art Miller on the ongoing STEMI initiatives and data will be reported back to the involved regions following the "Get with the Action Guidelines".

#### **State Stroke Advisory Subcommittee/Kevin Bernard:**

The State Stroke Advisory Subcommittee presented a verbal report as the group had just met a couple of weeks ago. They will be working to approve their last meeting minutes. The 2015 meetings and locations have been established. The election of officers was accomplished with no changes in leadership. The Subcommittee encourages EMS to continue to work on changing the administrative rules. Also, the Subcommittee wants IDPH to continue to designate hospitals with stroke care capabilities until the new administrative rules are adopted. Current list is located on the EMS website. Discussion on comprehensive stroke centers, establishment of transport protocols, destination determination, and assessment tools.

#### **Illinois EMS Alliance/Alex Meixner:**

Alex Meixner was not present. The Illinois EMS Alliance just finished their advocacy group session in Chicago this week. A teleconference was held yesterday where the Group is seeking support of the Alliance for next year's legislative agenda. The AHA is going to be focusing on systems of care for STEMI patients similar with what was done with stroke patients. AHA indicated that EMS is going to be one of their focus areas in the upcoming year. It is one of their top priority issues in trying to support EMS initiatives. National is putting a lot of emphasis on key components of EMS and its systems of care. Alex Meixner is going to be a Regional Vice President for AHA which will oversee Indiana and Michigan. He hopes to work together across state lines on some of these initiatives where there may be similarities in Indiana.

There is a lot of interest in individuals wanting to be on the EMS Alliance committee and this lead to a lot of amendments. Greg Scott reached out to the 2 co-sponsors to put some emphasis on getting this approved during the veto session. The group is also looking at supporting AHA with STEMI. Alliance saw the successes and difficulties in Region 8. Legislation needs to get involved with this process. The dedicated funding source has not been forgotten that is needed in EMS. Hoping with new Governor that there may be some discussion about different initiatives under his control. Gaming is another aspect of that.

Currently, through a review process with State legislation, for Mobile-Integrated Healthcare. Some states are very progressive in looking at this process. Some common identifiers were identified as to why the other states were very successful in this process and the Alliance will try to emulate. Funding for MIH will need some discussion with Medicaid. Looking at Medicaid to provide some financial support for some of the activities that will be taken on with MIH.

EMS Alliance is working out issues dealing with Caucuses with State legislators to see if funding is available for their activities through various other aspects within the State. Discussion will continue during the EMS Summit tomorrow.

#### **Old Business**

##### **Illinois EMS Summit/Greg Scott:**

Brief update and request to reach out to local elective officials as being sponsors for the Roadway Safety Task Force. Discussion on limited efforts on acquiring funding by House Task Force. Press conference will be held on Thursday, November 20, 2014 at the Capital from a rural health standpoint.

The Summit has been scheduled for November 19, 2014. It is the Illinois EMS Summit that is sponsored by the Lieutenant Governor Sheila Simon. This is the second annual summit. It will be held at the Northfield Inn and Suites Conference Center in North Springfield. There were 100 attendees last year and this year's

target goal is 150 attendees. As of November 17, 2014, there were 150 registrants. Dr. Eric Beck will present on MIH from a National level. The Illinois State Ambulance Association will present “EMS Reimbursement Issues”. Lieutenant Governor Simon will present. Representative Don Moffitt will be giving an update on some of the activities of the Task Force Report. Lieutenant Governor Simon and Representative Moffitt will be recognized for their leadership and support. There will be breakout sessions as well.

Mike Hansen informed the Council that EMS testing results will be included in Jack Fleeharty’s IDPH Report until 80% passing rate on first attempt.

Request to Committee to put their Ethics statements into Tammy Moomey in OPR.

### **New Business**

#### **Ebola Briefing/Jack Fleeharty:**

The Ebola Guidance Document was submitted to the State Regional Coordinator and EMS Medical Directors last week. The State had requests from three (3) providers to strip out vehicles and run the vehicles on a waiver. The Department reviewed the CDC guidance documents and researched other studies. There are two (2) initiatives in Illinois. One is that there will be Ebola treatment centers that are identified. The centers are trained up and must meet the PPE requirements. The CDC then certifies them as Ebola treatment centers.

The Department knows that they need to identify Ebola evaluation centers which could be any comprehensive hospital that has isolation capabilities. Another piece for the Department is to provide the ability for Regions to identify some providers who would want to set up one of the Ebola isolation vehicles. The majority of the vehicle may be stripped out which is not a requirement, and is ***optional***. If the vehicle is stripped down, there needs to be a waiver from the Department which approves and allows for this procedure to take place. There was an extensive discussion on the purpose of the waiver and concerns regarding isolation treatment centers. Brief discussion regarding dedicated funding from coalition for EMS.

#### **EMS Legislative Initiatives for 2015/Mike Hansen & Greg Scott:**

Request from a board standpoint some ideas for legislation or opinion on some legislation that has been discussed that may be coming through the Alliance or through the American Heart Association. What is the “flavor of the Council” with supporting some new STEMI legislation in the State of Illinois. Connie Mattera informs the Council that AHA will be reissuing all of their guidelines in the Fall of 2015 with emphasis on quality CPR or real-time CPR feedback devices. Time should be spent on guideline rollouts and find funding or resource for equipment. Other states have found funding through a big foundational grant. Discussion on where legislation should be focused as to where the system is broken. Council continues to look for EMS funding. Medicaid reimbursement rates are also being looked at to help out? What legislative initiatives may be needed for MIH funding?

Council advised to look for untapped revenue sources. Discussion to find funding on education and hiring of EMS personnel which would make an impact in Downstate Illinois.

**Future Meetings:** The meetings are secured for next year. The dates are March 10, 2015, June 11, 2015, September 10, 2015 and November 19, 2015. All meetings will be held in Springfield, Illinois. Brief discussion on videoconferencing and its downfall. Request for bylaw change in 2015.

**Adjourn:** Motion to adjourn by Greg Scott, and seconded by Connie Mattera. Meeting adjourned.