

## State EMS Advisory Council Meeting Minutes

June 11, 2015

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

St. John's Hospital, 800 East Carpenter,  
Dove Conference Center (and via videoconference), Springfield, IL 62702

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

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

**Council Members Present:** Glenn Aldinger, M.D. (ICEP), Richard Fantus, M.D. (ICEP), Stephen Holtsford, M.D., George Madland, Ralph Graul, Michael Hansen, J. Thomas Willis, Leslee Stein-Spencer (ICEP), David Loria, Stuart Schroeder, Randy Faxon, Brad Robinson, Kevin Bernard, Valerie Phillips, M.D. (ICEP), Don Davids, Jack Whitney, M.D., and Kenneth Pearlman, M.D. (proxy Leslee Stein-Spencer [ICEP]), M.D.

**Council Members Absent:** Connie Mattera (excused), Doug Sears, George Z. Hevesy, M.D., and Justin Stalter

Mike Hansen requested the number of individuals for each of the site in order to keep track of the total attendance for today. This is the first meeting for videoconferencing at eight (8) different sites. Quorum is established. Members were asked to identify themselves first to make a motion or speak.

**Approval of Minutes from March 10, 2015 Meeting:** Motion for acceptance by Tom Willis, and was seconded by Dr. Whitney. Motion to approve passes. No oppositions.

Mike would like to take a moment in identify a premier and pioneer founder in EMS, Dr. Stan Zydlo. The wake was yesterday and funeral is going on at present time. He was very instrumental in forming the first EMS system in the State of Illinois Northwest Community System. He was the founder of as one of the first Project Medical Directors (PMD). Mike would like to reach out to the family and send the Council's condolences. Dr. Zydlo came before the Council two (2) years ago and was awarded a life-time achievement award. There was a moment of silence to remember all that Dr. Zydlo did for the EMS profession.

There are two (2) new members that are joining the Council today. They are from Region 2, Stuart Schroeder, and from Region 8, Dr. Val Phillips.

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

**Additions to the Agenda:** None at this time.

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

#### — **EMSC Program Updates:**

The Ron W. Lee Excellence in Pediatric Care Awards was given. The Department Director, Dr. Nirav Shah, presented the lifetime achievement award to Sally Reynolds, M.D., Pediatric Emergency Medicine at Lurie Children's Hospital in Chicago on May 27, 2015.

— **Pediatric Pre-hospital Protocols** - The EMSC Pre-hospital Committee continues to update the 22 EMSC protocols. New AHA guidelines are anticipated to be released in the Fall of 2015 and will be used to guide revisions to cardiac-related protocols.

— **Pediatric Facility Recognition** - Site surveys are being conducted in Region 2 hospitals during May and June of 2015. Hospitals in Region 8 have submitted their renewal applications and these hospitals will be surveyed in late Fall/early Winter of 2015. Regions 4, 5 and 11 will undergo Pediatric Facility Recognition renewal in 2016.

— **School Nurse Emergency Care Course** - There are nine (9) school nurse emergency care courses scheduled to run this Summer of 2015. To date, there are over 230 nurses that are registered to attend these courses. The EMSC Advisory Board still has an opening. They are looking for either a Pediatric Surgeon or a Trauma Nurse Coordinator. If anyone is interested, contact Evelyn Lyons.

- **Burn Surge Annex** - The Burn Surge Project had has several activities related to burn preparedness. There was a presentation on Illinois Burn Surge Annex conducted at the National Preparedness Summit in Atlanta, GA and was well received. Several states requested copies of the annex to assist in their State efforts. The annex outlines the State response in large scale incidents resulting in a surge of burn patients and provides guidance to local entities. There were two (2) Burn Surge Annex Tabletop Exercises that are conducted in March to test the components of the burn annex. This allowed hospitals to test and implement the annex as well as obtain feedback for process improvement and how they could manage a surge of burn in their facilities.

There was an Advanced Burn Life Support (ABLS) provider course scheduled on Saturday, June 6, 2015 at Memorial Medical Center in Springfield, IL.

- **Test Results:** For the past quarter, the Department had a 78% pass rate on the first attempt for the EMT-B, 33% pass rate on the second attempt and 28% pass rate on the third attempt. Intermediates are still at 100%. Again, the Department has very few Intermediate examinations being taken. For Paramedic, the Department had a 74% pass rate on the first attempt, 26% pass rate on the second attempt, and 26% pass rate on the third attempt.

For Trauma Nurse Specialists, the Department had a 71% pass rate on the first attempt, 33% pass rate on the second, and 25% pass rate on the third attempt. The examinations still reflect as they have in past year in that students are pretty well prepared to take the examination or they are not. For students who do not pass the examination the first time, there is only about a 30% chance of passing test attempts 2 or 3.

The Department processed:

- Reinstatement Applications: 11
- Felony Exceptions Granted: 19
- Additional Three (3) Tests Attempts: 24
- ADA Special Accommodations: 9
- Given Permission to Test Under Age of 18: 5

New reports were ran for EMT-B test results running back to previous years just to see where the Department stood. A question was asked by Council what was the overall status whether the profession is gaining EMT's or losing EMT's. In 2007, the Department had 2503 EMT-B's. In 2008, the Department had 2873 EMT'Bs. In 2009, the numbers went up to 3328. In 2010, the Department had 3704. In 2011, the numbers started to decline to 3314 and in 2012, it dropped to 3123. In 2013, the numbers were 2607 and in 2014, it declined even more to 2272. The Department has seen a decline below the 2007 numbers. There was a steady increase for over about five (5) years and then the Department started to see a decline again in EMT-B numbers.

For Paramedics in 2007, the Department had 914 and the number increased by 2010 to 1,042. In 2011, the Department had a 1,015. In 2012, the number slightly increased to 1,049, and then there was a small decline in 2013 of 940. In 2014, the number increased to 1,038. Of interest, for the Paramedics, the Department is running pretty steady with their numbers and are three (3) tests less than what they had in 2010. While the Paramedics seeking new examinations, have stayed at a plateau. However, the Department has seen an increase in EMT-B's that are testing.

- **LICENSING UPDATES:**

The Department has processed to date:

New License Processed YTD:	2,354
Renewals Processed YTD:	4,140
Reciprocity Processed YTD:	201

The Department had a three-to-five-week backlog. The staff worked overtime and currently, the backlog is only one-to-two weeks for issuance of new licenses.

The Department continues to work with a vendor on the GLSuites licensing system. GLSuites is problematic and a developer is coming the week of June 15, 2015 for two (2) weeks. The developer is coming out of Seattle, WA to actually work directly with the staff to complete the National Registry import, add more licenses to the online renewal process, and complete other outstanding issues. The Department continues to enhance the system. Also, a team has been put together and is working on a new RFP to go out and look for a licensing system for both personnel licenses, as well as ambulances. The Department is working to get the stretcher van licensing capabilities and Emergency Medical Dispatcher Agency (EMD) capabilities completed.

The Department has made form revisions to include: Transport Provider Applications, Non-Transport Provider Applications, Non-Transport Inspection Forms, Transport Inspection Forms and are working on the Federal specifications under the Star of Life and Aircraft Inspection Forms. Some of these forms are already in Publications and will be made available.

The Department continues to work on Ambulance compliance standards. One of the goals this year is to identify core build standards and adopt a new build standard for ambulances and hope to pick out optional equipment from NFPA, GVS, CAMTS or AMD standards. Keith Buhs is working with the Department and Emerging Issues is working on this effort with Keith as well.

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

The Department upgraded the system a few months ago and can actually submit all Federal HaVBed data up to the Federal government electronically in real-time. The Department coordinated efforts to integrate the City of Chicago and went to a company's module called Intermedix. Intermedix does all of Chicago's HaVBed reporting in this system. The Department is now able to pull data from this system. An RFP went out on a three (3) different types of software. One being a platform for web-based disaster management software including a new hospital bypass system and then patient tracking system. Bids have all come back in and teams have evaluated and are moving forward on completing the procurement.

— **PRE-HOSPITAL DATABASE:**

Dan Lee has been working hard on this project and created a dashboard. Some EMS System Coordinators have had a chance to preview the dashboard. Hopefully, this tool will provide a good clean snapshot of ambulance companies, response times and types of care. Feedback is being received on the dashboard.

The Department continues to move to NEMSIS Version 3. The Department also continues to try to get ambulance companies to move to the web-based application. There are only 2% of paper submitters for EMS data collection currently.

— **SPECIAL PROGRAMS:**

- **Update on EMS Grants:** The fiscal year 2016 EMS Assistance Grant Fund application was put out and is back and since then been sent out to the Regional EMS Advisory Board Chair and the EMS System Coordinators for review. The grants are completed through a grants management system EGRaMs. The grants are submitted to the Department and then sent to Regional Chair. The Regional Chairs and Coordinators review the grants and prioritize them. They are then sent back to the Department for a final review and approval. Once the final review is completed, the grants are awarded. The goal is to have the awards back by August 7, 2015.
- **Heartsaver AED Grants:** The Department awarded \$33,086 from the FY15 Heartsaver AED Grant Fund. Seventy-one qualified applications were received and awarded. The fund is all but depleted at this point and no foreseen appropriation for 2016. There may not be any AED grants awarded for FY2016 based on current budget projections.

— **REGULATORY:**

- **Rural Upgrade Amendments:** The Rural Upgrade Rule Amendments are at first notice for review and comment by Public until June 22, 2015. The Board approved these amendments at the last meeting. The Department has had several meetings with subject matter experts to amend the new EMS rules to reflect the new EMS education standards. The Department has been meeting every Thursday and hope to have these rules to the Board by the September 15, 2015. May not be able to obtain this goal as these rules will have to go to Legal once completed by the Committee. The first round of rule writing has been completed and the committee is now working on a secondary and final review.

Brad Robinson, Rosemary McGinnis and Connie Mattera have been the team that has been working with the Department. They have been diligent and have met for four (4) hours every Thursday. They have been working on this project since September 2014. The Department sends it “Thank You” for their input and they have been “real champions”.

- **EMS Week:** EMS Week for 2015 was from May 17, 2015 to May 23, 2015. EMSC Day was May 20, 2015. The Department issued over 1,500 Years of Certificate Awards this year. The 2015 Hero went to a Mr. Bill Stajura who works at Chicago’s Midway International Airport. Mr. Stajura quickly realized a co-worker was choking and performed the Heimlich maneuver multiple times to dislodge a piece of meat and thus, saving the co-worker’s life. There were two (2) EMS Week Instructor of the Year Awards presented. One went to Peggy Jones from St. James Hospital in Pontiac (please congratulate her) and the other to David Chase from North Lake County EMS System at Vista Health in Waukegan.
- **Trauma:** The Department is scheduled to complete one trauma level survey in June 2015 and two (2) pediatric levels site visits in July 2015. The Department doesn’t see many level II pediatrics join the Trauma arena. These level II’s are located in Evansville, IN.

Additionally, The Department continues to review and process Trauma data requests for researchers and is ongoing. Adelisa Orantia continues to help Trauma Centers to help build reports as requested when they are using their own data to do quality assurance studies. The Department continues to work with IT to try to complete NTDB validation and was unable to make the deadline due to inability to complete the mapping. The Department believes that they will be able to make the secondary data numbers. They have been working on the RFP for almost a year to go out for a new Trauma Registry. The RFP is completed and will go to Procurement for final review. The Department is also trying to bring in another developer for a few months on contract in order to continue to improve performance on the Trauma Registry and keep it stable until a new vendor can be selected and a new Trauma Registry in place.

No questions.

#### **COMMITTEE REPORTS:**

##### **— Trauma Advisory Council-Richard Fantus, M.D.:**

- In addition to the IDPH Report, the Council is looking for to the RFP coming out and having a new Trauma Registry due to implementation process. If everything goes well, the Council will start with Trauma admissions starting in January 2017 since there is a significantly time to build out and educate everyone.
- **CQI Best Practice:** The Committee started work after the June 2014 combined EMS & Trauma Advisory Council Meeting that approved the State-wide minimum trauma triage criteria down in Springfield three years ago. The Committee was trying to wait to see if there would be a level III Trauma system with a multi-tier trauma initiative. With that fizzling out for the time being, the Committee continued on and developed a category I and category II process of what patients need to be seen and in what period of time at both levels. This was a three-year work in progress that came through and was voted on the last Trauma Advisory Council Meeting which was held on June 4, 2015

and was approved. Some of the highlights that are different on the existing categorization and surgeon activation and evaluation criteria are: Mirrors the 2012 Minimum State Triage Criteria, Category I and Category II Trauma Surgeon's response for isolated injuries is 12 hours, and remain a unique population was not added under Category I or II. But, if the patient did not have any of the above and were anti-coagulated patients with evidence of head trauma, they were added into a new unique population that required being seen by the Trauma Surgeon. This has separate language and was approved. Additionally in the prior ones, the Committee had "unrestrained rollover patients" under Category II and it was removed. As far as looking at all transfers to a higher level of care, most of this change to "should be in route to receiving center within two (2) hours of arrival to the Emergency Department with language added "delay of transfer to perform unneeded tests should be avoided".

- ***Trauma Nurse Specialists*** did not have a meeting; but, will have a meeting this week.
- ***Rules and Legislative Subcommittee:*** The Rules and Legislative Subcommittee would like to thank Chief Hansen and the Legislative Committee of the EMS Advisory Council for sharing their tool which is an Excel spreadsheet that outlines all the Bills that are germane to Trauma. The Subcommittee started a parallel process with those legislative initiatives that are germane to the Trauma community and they are set out on a list serve with links embedded within it so a Bill can be slipped electronically. One of the initiatives is to try to make the Trauma Fund sweep-proof. The Subcommittee is looking into rewriting the rules for this special fund.

Additionally, the Subcommittee is working with the American College of Surgeons' legislative office and the State Affairs office that assists individual states with different legislation that is germane to the Surgeons' initiative and trauma is one major one. The Subcommittee partnered with these offices. Dr. Fantus recently reached out to Joe today to try and get a legislator. There is a summit at ACS headquarters in late August to go over designation of trauma centers based on need nationally.

Several other trauma-related legislative activities required letter writing and bill slipping.

- ***Injury Prevention and Outreach:*** The theme for 2015 is "Distracted Driving".
- ***Burn Advisory Subcommittee:*** The Subcommittee met at 2 meetings and had tabletop exercises earlier this year. They are working on an Education Task Force to get education out to the communities.
- ***New Business:*** There was a request that has been five (5) years since the Public and the Strategic Plan for Trauma was published based on an ACS review which dates back many years. Not much has done with the Strategic Plan and a request was to look at and see what can be done moving further.

One other thing that was failed to be mentioned under Registry, there have been some issues with data submission which Jack and Adelisa have been working hard to get it resolved. There was a request from the Trauma community that IDPH write a letter to hospital CEO's regarding that the Department is not enforcing the deadlines. No questions.

— **Mobile-Integrated Healthcare-Valerie Phillips, M.D.:**

The Department of Public Health, Division of EMS & Highway Safety staff members distributed to all of the EMS Systems a copy of the final documents that are embedded in the State program. At this point, a lot of areas throughout the State that have interested parties are starting to fill out the Community Needs Assessment and then their own Resource Assessment and work their way through the plan. The proposed plan from IDPH was that they areas submit their application to their EMS System and then onto the IDPH Regional EMS Coordinator for review. IDPH and Dr. Phillips will develop a tutorial for Regional EMS Coordinators to have a little more background. This project is only a pilot. The Committee is to meet again on June 24, 2015. More details need to come forward about what the quality reviews and quality improvement data points are going to be, what the patient care reports are going to look like for providers that have electronic patient care reports and those providers that don't. After these issues are tackled, there is the longer term plans about expanded MIH out of a pilot eventually and what are the other capabilities the Committee needs to look at. No questions.

- **EMS Data Subcommittee-Mike Hansen:** No report. The Subcommittee has been in conversation and will be holding a meeting in July 2015. Some items need to be worked out with Dan Lee regarding Nemsis Version 3. The Subcommittee would like to see everyone onboard by September 30, 2016. A couple of maps were developed in correlation with ideas and data from the American Heart Association, Illinois EMS Alliance and other data entities. The Subcommittee is reviewing these maps for average/median EMS response times by county (data for 2013/2014).
- **EMS Education Committee-Mike Hansen:** Committee provided a lot of information in the packets. The Chair commended the Committee's efforts. The Committee is starting to rollout some of the EMS educational standards targeting continuing education and hope to bring information before the Council for the next meeting.
- **EMS Recruitment and Retention: Mike Hansen:** With the defection of Greg Scott to the South, the Council is looking for a possible new Chair. Mike Hansen has reached out to Stuart Schroeder replacement and requested his acceptance. Stuart Schroeder accepted the position as new Chair for this Committee. No report.
- **Emerging Issues Subcommittee-George Madland:**
  - On February 23, 2015, the Subcommittee had a report on Mobile Integrated Healthcare. The Subcommittee discussed the status of EMS examinations. The Equipment Subcommittee is working with Keith Buhs from IDPH to develop new equipment lists. Also, on their agenda, was the discussion regarding KKK specifications for ambulances. The Subcommittee is in contact with EMS Alliance and their group who reports to them. Their association continues to be a good partner to Illinois EMS. Art Miller helped with Mission Lifeline and the Subcommittee awarded their people with bronze and silver recognition.
  - On Rural Recruitment and Retention, Greg Scott was unable to provide a report.
  - One issued hashed out was the measles outbreak and how the community is dealing with it. Also, during public commentary, the Subcommittee discussed the Narcan BLS non-transport and the movement for a BLS non-transport to have Narcan. They also discussed the survey of a possible "scope of practice" and that this may very well be included.
  - The next meeting is June 22, 2015 at 10:00 am and is at the Superior Ambulance Company in Elmhurst, IL. No questions.
- **State Stroke Advisory Subcommittee/Kevin Bernard:** No report.
- **Illinois EMS Alliance/Mary Ann Miller:** EMS Alliance provided an thorough presentation regarding their efforts to strengthen the EMS programs in Illinois.
- **American Heart Association/Art Miller:** Mike Hansen offered Art Miller to talk about AHA Mission Lifeline. On the EMS side, there were 19 total awards in 2015. On the hospital side, there were a total of 28 awards. The goal is to try to increase these awards. Three gold award winners were on the EMS side.
- **Old Business:**
  - The Mobile-Integrated Healthcare was previously addressed by IDPH.
  - Regarding the Division of EMS & Highway Safety Five-Year Strategic Plan dated 2010, the Council would like to see a planning phase within IDPH to revisit and update the plan as it is entering its fifth year. IDPH indicates that before moving into a new planning phase the Council needs to summarize what has been accomplished and what is still open tasks. Many of these tasks are complete

especially on the EMS side. Certainly, it is known that the Trauma Registry has not been completed. IDPH recommends that the Department will complete a summary and submit to Council in a report.

- EMS Legislation of all of 6000+ bills that introduced. The Council was tracking from 28 up to 35 which dealt with EMS; some were approved quickly. Representative Moffat's bill HB220 looking at Fire Protection District a rescue tax passed both houses. Governor has signed it and it is already a Public Act 0004. The Council worked on and supported HJ001 which was a continuation from last year. Representative Willis' bill HJ001 Emergency Responder Task Force passed both the House and the Senate. It is waiting for adoption and then going into their calendar for Task Force.
- EMS Legislation has been working with the Trauma Advisory Council and is looking at some things that have come up with bills concerning the South Side of Cook County, which is referred to as a "Trauma Center Desert". There were quite few bills that came up on the House and Senate side that needed some work from the Trauma Advisory Council. The bills are moving forward on the Trauma side as there will be more SB1692's Senator Van Pelt regarding Rapid Treatment Emergency Centers. The Council had spoken with the lobbyists and the representatives to about that there is current language for bill and should be partnering with IDPH.

No questions.

- There was a discussion on students being forced to take the EMS State Examination versus National Registry Examination. IDPH received clarification from Legal. According to the law, an individual once completed their course has the option of taking either the Illinois State Examination or the National Registry and this is current law.

— **New Business:**

- There are two (2) rule changes for EMSC and Stroke. Dr. Whitney reviewed the amendments. The Council reviewed Section 515 Comprehensive Stroke Center and Acute Stroke Ready Hospital; the Emergent Stroke Ready is changing. The floor was opened to any comments regarding Title 77 Part 515 dealing with Stroke Data Collection Fund and all the changes.

Motion for acceptance by Dr. Whitney, and was seconded by Kevin Bernard. No further discussion. Motion to approve rules and regulations for EMS Service, Trauma Center, Comprehensive Stroke Center, Primary Stroke Center and Acute Stroke Ready Hospital. No oppositions. Motion is passed.

- IDPH gave a brief overview of the EMSC administrative rule changes such as EDAPs, training education, changes titles of NP, PA, Mid-Level Practitioners, etc. Motion for acceptance by Dr. Holtsford, and was seconded by Don Davids. IDPH provided clarification that a nurse with a valid Registered Nurse (R.N.) license from another state can obtain an Illinois ECRN license without holding and Illinois R.N. license. Motion to approve Title 77 Part 515 EMS Service, Trauma Center, Comprehensive Stroke Center, Primary Stroke Center and Acute Stroke Ready Hospital. No oppositions. Motion is passed.
- Jack Fleeharty was asked by Dr. Nirav Shah, Department Director, to extend to the Council his apology for not being able to attend today's meeting due to a conflict. IDPH is hopeful he may attend Joint Advisory Meeting on September 15, 2015. If not, the new Assistant Director, Michelle Gentry-Wiseman who is very engaged in EMS services, may attend in his place.
- Elections of the Chair and Vice-Chair. The Council is looking to take separate nominations for Chair and Vice-Chair. Dr. Aldinger nominated Dr. Holtsford for Vice-Chair of the Council, and was seconded by George Madland. Motion by Dr. Aldinger for Dr. Holtsford for Vice Chair; no other nominations. No oppositions. Motion is passed.

- Motion by George Madland; and was seconded by Don Davids for Mike Hansen to be Chair of the Council; no other nominations. No oppositions. Motion is passed.

— **Future Meetings:** The EMS & Trauma Joint Advisory Council meeting is scheduled for September 15, 2015. The next EMS Advisory Council meeting is scheduled for November 19, 2015.

— **Adjourn:** Motion to adjourn by Kevin Bernard, and seconded by Ralph Graul. No oppositions. Meeting adjourned at 12:48 p.m.