

State Trauma Advisory Council Meeting Minutes

December 3, 2015
10:30 a.m. - 1:00 p.m.
SIU School of Medicine
913 N. Rutledge St., Springfield, IL 62702

Call to Order-Richard Fantus, MD at 10:30 a.m.

Dr. Fantus asked for a moment of silence for one of the members that passed, Dr. Wohltmann.

Approval of Meeting Minutes of September 15, 2015:

Dr. Fantus requested a motion to approve the minutes. The motion was moved by Dr. George Hevesy and seconded by Dr. James Doherty. Minutes are approved.

Roll Call Vote: Council Members Present: Glenn Aldinger, M.D. (proxy), Mohammad Arain, M.D., Richard Fantus, M.D., George Hevesy, M.D., Lori Ritter, R.N., Stacy VanVleet, R.N., David Griffen, M.D., Eric Brandmeyer, Mary Beth Voights, A.P.N., James Doherty, M.D., and Kathy Tanouye.

Council Members Absent: Michael Pearlman, M.D., Michael Iwanicki, M.D., William Watson, M.D.

There are five (5) remaining positions vacant. There are a total of 13 voting members and one conditional. There are 12 out of 13 members and a quorum is established. Motion passed unanimously.

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 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.

• **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's Offices and Police departments owning, occupying or managing premises where an Automated External Defibrillator (AED) is present to be liable if the defibrillator is used with an exception of willful or wanton misconduct. It also allows the Sheriff's Offices to apply for an AED grant through the Heartsaver AED Fund.

- 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.

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 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

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 were 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.

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.

TAC REPORTS:

Registry Subcommittee-JOSEPH ALBANESE, RN:

- There was an update in the Trauma Coordinator's Coalition meeting held early. Currently, there is an updated Business Objects available for generating reports.
- Currently, the RFP has been in Procurement and in hopes to post soon.
- There is a set of HSVI ICD-10 crosswalks and awaiting for the individual group to provide in order to complete as well as Trauma. However, the crosswalk for ICD-10 inclusion criteria for HSVI's deployment is on hold and will be sent out soon.
- Dr. Fantus asked that the Council be notified when the RFP is posted.

CQI/Best Practice-Mary Beth Voights, APN:

- The CQI Committee generally meets prior to the Council's. However, due to the expanded agenda time, the Committee has postponed their meeting. The Committee will meet on January 14, 2016 via teleconference at 3:00 pm. The focus will be on the legislative language changes related to QI.

Trauma Nurse Specialists -Michael Richard, RN:

- The biggest question that has been brought forth to the Committee over the past month is "How does the new examination that is being delivered in 2016 affect any of the TNS?". What type of role does this play in Illinois? TCRN is a Trauma Certified Register Nurse examination and the test has not been taken by anyone in TNS to evaluate what type of level of experience and knowledge is required in passing this exam. A lot of Directors and Trauma Coordinators are interested in obtaining an answer to this question.
- The Committee meets next week on December 11, 2015 and are electing a new Chair for the next 2-3 year commitment on a rotation basis.

EMS Advisory Council/Glenn Aldinger, MD (proxy):

- There was no proxy for the report. Jack Fleearty did inform the Council that Lifetime Achievement Awards were presented at the last EMS Advisory Council. Dr. Lumpkin, who was Director of IDPH in early 1990s, was presented an award for his role in the development of the Illinois EMS System. Leslie Stein-Spencer was presented an award for all of her work, efforts and contributions to EMS in Illinois.

Rules & Legislative Subcommittee/Stacy Van Fleet, RN:

- The Rules and Legislative Subcommittee met on November 30, 2015. The Subcommittee had intention on meeting earlier. However, due to the unfortunate, sad and untimely death of Dr. Wohltmann, the Co-Chair, the meeting was postponed.
- At the last meeting, Paula Atteberry from IDPH teleconferenced into the group and provided a briefing on the submission of bills process. It is as follows:
 1. When the Subcommittee in conjunction with the Regions, the Regionals are to bring back the rules currently under discussion for input. The preference of the Subcommittee is that the feedback is based on best practice, data, or research articles.
 2. When the rules are brought to the Trauma Advisory Council, the recommendations are voted on and sent to IDPH. Jack Fleearty, Joe Albanese, Adalisa Orantia and Legal Counsel review and ensure it is in compliance and doesn't conflict with any other rules.
 3. Once Legal Counsel approves, the bill is sent to the Governor's Office. JCAR is only taking one section of rules at a time. Trauma is considered one section. It goes through the Governor's Legal process and it takes approximately 2-3 months.
 4. After leaving the Governor's Office, it goes to the EMS Advisory Council for additional input and recommendation. It goes back to IDPH and is prepared for first notice by Jack Fleearty and Paula Atteberry. First notice is the Public Comment period and the bill is posted for 45 days. At this point, anyone is allowed to put their public comment in.
 5. After the Public Comment notice, IDPH addresses each public comment submitted.
 6. After IDPH responds, it goes to the second comment period which is then evaluated by JCAR committee whose membership is comprised of six (6) Senators and (6) House Representatives.

7. If it passes through the JCAR as final approval, it is prepared and adopted and published by the Secretary of State offices.
 8. This entire process takes approximately 9-12 months. Therefore, the need to complete these rules in a timely fashion is really imperative.
- EMSC has asked the Subcommittee to review and has placed some recommendations into the Trauma rules to require the Level I and II Trauma Centers to either be recognized as PCCC or EDAP. All Trauma Centers are in Illinois except for one and are currently going through the process are all EDAP or PCCC. EMSC will also ask that the Subcommittee review the Blood and Alcohol Draw policy and possibly turning it into a more prevention. Also, the Subcommittee will need to look at the emergency medicine requirement sections.

Audience Question: Were the Trauma attending response to the OR and as well as the response of being in the OR versus in the OR suite area address?

Answer: The Trauma attending response was addressed. The two references which were pointed out were the Residency rules were cited as well as Best Practice Suggestions from American College of Surgeons.

Injury Prevention and Outreach/Lori Ritter, RN:

- The Injury Prevention Committee met last month and finalized their plans for the “Distracted Driver” program. The Committee is working with the Trauma Nurse website to publish all of the material online. There is a large amount of material and it may take a little while to upload. It is a wealth of information from Public Service Announcements on which it has canned text in place to develop a classroom presentation.
- The Committee will meet next month to try to establish a new project. Requests suggestions for projects to work from Council members. Also, Committee is always looking for new members.

Illinois Burn Advisory Subcommittee/David Griffen, MD:

- The Burn Advisory Subcommittee is chaired by Art Sanford from Loyola and facilitated by Amy Helms and Julie Matson of OSF. The Subcommittee met on September 28, 2015 and the minutes were distributed to the Council.
- There is an extensive improvement plan which was reviewed and updated at the meeting.
- The next meeting is scheduled for Monday, December 7, 2015.

TAC Old Business:

- **TIERED TRAUMA SYSTEM LEGISLATION:** Members of the Illinois Hospital Association were introduced. IHA discussed their concerns regarding proposed trauma legislation. Their membership is concerned about the potential changes to the Level II baseline criteria and what the new core requirements will be. They also want clarification on Level III designation criteria. IHA has concerns that the reimbursement model of existing trauma hospitals they have negotiated with HFS may be disrupted during the four-year pilot reimbursement program that will end July 1, 2018. The concern is in relation to IDPH designating additional centers that would be reimbursed from projected HFS Medicaid trauma funds. The Department has been working with IHA to negotiate an equitable solution so that the implementation of an expanded trauma system does not interfere with their current evaluation of the pilot reimbursement models.
- Dr. Fantus made a recommendation that the Council to move the process under the auspices of a Legislative and Rule Subcommittee to create either another smaller committee under this group to address questions to meet the target goal of January 2018 to have a new legislation in place. IHA is an integral component of the working group under the Legislative and Rule Subcommittee.
- It was brought to the Council’s attention that a new Co-Chair needed to be appointed in order to move the process forward. Motion to create a working group under the Legislative and Rule Subcommittee was made. Dr. Hevesy moved the motion as stated including IHA representatives. Seconded by Dr. Doherty. Roll vote was taken. Passed unanimously.

- Recommendation for Co-Chair of the Legislative and Planning Subcommittee to replace Dr. Wohltmann. Dr. Doherty was nominated by Kathy Tanouye. Dr. Doherty agreed.
- IHA were thanked by Dr. Fantus for their presentation to the Council.
- The Southside Trauma Desert will be meeting in Region 11 and is a closed meeting.
- Dr. Hevesy has added a protocol previously discussed in past meetings regarding “The Statewide Head Injured Trauma Patient”. An algorithm has been added for people that were on anticoagulants. Julie Matson was given credit for her organization. Comments will be welcomed at the next meeting after Council review.

TAC New Business:

- Dr. Griffen memorialized the void left by the untimely passing of Dr. Christopher Wohltmann and his contributions to Trauma Council, his region and trauma medicine in Illinois. Since Dr. Wohltmann’s position is vacant, Dr. Griffen nominated Dr. Jarrod Wall as the new Trauma Surgeon for the TAC. Recommendation given to IDPH.
- Winfred Rawls, Deputy Director of IDPH/Office of Preparedness and Response, wanted to mention before the Council that the Department is looking for a new Chief Medical Officer. Dr. Craig Conover previously held this position. The candidate must be a licensed practicing MD with a background in Epidemiology and Disease Surveillance, etc. Anyone interested needs to contact Deputy Rawls. The position is posted on CMS website.

Adjourned: 11:54 am