

Item	Discussion	Decision/Responsible Party
<b>Meeting Minutes</b> <b>Wednesday, August 17, 2016</b> <b>11:00 p.m. – 3:00 p.m.</b> <b>Normal Fire Department</b> <b>Normal, IL</b>		
<b>Call to Order</b>	Called to Order at 11:10 am	Dr. Chris Richards
<b>Minutes Approval Vote</b>	May 18, 2015, Minutes reviewed Motion – Dylan Fergusson Second – Maureen Mathews None opposed-Minutes Approved	
<b>IDPH Update</b> <i>(standing item)</i>	<p>Five hospitals are still working on the ESRH Designation with IDPH. JCAR has passed the new rules and regs, the form for application for CSC, PSC, ASRH not completed (need to add the section on fees)-once this is completed, the forms will be released to publication and fees will be collected. Fees will be collected in 3 year increments related to the application-meaning that if a hospital is re-applying for ASRH, then will pay \$750.00 for the 3-year designation (each year is \$250.00). IDPH is accepting applications for CSC, but Jack recommends waiting until the new application is on the website.</p> <p>IDPH has hired a new State Stroke Coordinator, starts September 1<sup>st</sup>.</p>	Jack Fleeharty
<b>Regional Update</b> <i>(standing item)</i>	<p>It is the regional reps responsibility to share information with the state committee, and take information back to their region. Moving forward each region will be asked to report updates at each State meeting.</p> <ol style="list-style-type: none"> <li><b>Region 1:</b> Tracy reports that Sue Thompson has now resigned. Region 1 will need to look for a new rep. Tracy is in Region 1 and reports that the region protocols are complete, and that there is a QI project on-going to evaluate the capabilities of the hospitals in the Region. More to come when complete.</li> </ol>	Regional Representatives

2. **Region 2:** Missy Mallory: Video presented at last meeting on Train the Trainor for EMS Stroke Education. Missy is resigning her position at the end of the year, and reports she has been with the committee since its inception, and she has had a very positive experience throughout. She has a recommendation for the person to replace her, and she will work with her Region committee on this and give this committee the recommendation at the next meeting.
3. **Region 3:** Randy Faxon reports there is a new candidate for Region rep being decided at this time.
4. **Region 4:** Alison Kennedy: her Region is trying to collaborate with resources and education opportunities at this time.
5. **Region 5:** Danielle Barker: her Region is re-evaluating protocols and trying to regroup the committee. They are having an EMS event next Monday, August 22, 2016. They have had 2 patients speak with EMS on positive experiences post tPA
6. **Region 6:** Erin Eddy: they have had their second meeting and are getting a sense of membership and community education and awareness. October 29<sup>th</sup> is work stroke day, and they are considering Friday Night Lights campaign for education opportunity. They are trying to address the CSC resource when their region does not have a CSC in it. She also has questions about PT/PTT time as part of acute stroke abstraction. Questioning this on data metrics list. Jack reports IDPH looks to national standards and will support practice based on this. Jack reports that this committee could make recommendations for QI measures for performance levels. Dylan reports ESRH shows need to maintain levels with blood coags in administrative rules-this committee could be subject matter experts on changing the administrative rules. Jack reports could eventually phase out the ESRH through IDPH designation when more hospitals move

to ASRH certifications through TJC, DNV/etc.-this committee may need to address this at some point. Allison reports her Region does not have CSC's but she invites CSC's in which pts transfer to come to their committees. Jack explained that the EMS Medical Directors control the transport patterns of the Regions. The Regional Stroke Committees need to advise the EMS Medical Directors.

Mary Kelly discussed the "Primary Plus" as a PSC capable of intervention, but not a CSC. Erin discussed would like to have guidelines for education content so in the state of Illinois we can say there is some standardization of content. Region 2 rolling out education as a "Moodle" platform-could roll out state wide.

7. **Region 7:** Dee Behrens: SMO updated-using Cincinnati. Meeting in August, AHA helping with understanding the law, rules and regs. They are providing EMS education.
8. **Region 8:** Andrea White: 4 hospitals are applying for CSC, all are PSC in the region except 1. Mobile CT unit in Region 8-possibly starting soon with a pilot program. SMO's are up to date, Jack reports this will have to be regulated through IDPH and other programs to use the mobile CT unit.
9. **Region 9:** Lynn Klassman (not rep but from the Region) reports their region has a lot of data, and they are deciding on using GWGTG for Region data because they are spending too much time manually gathering data. There is a quality group in the region. Transport/routing agreements approved and was a very difficult process due to wording of protocols. 6 EMS systems can choose based on resources-goes live in December.

10. **Region 10:** None Present-Open Position
11. **Region 11:** Chris Richard (not rep but from Region) did RSAS for the Regional Protocol, EMS medical directors are deciding now-4 CSC in the Region, trying to balance EMS resources and wanted more specific guidelines and less than 15 minutes for transport from PSC to CSC for bypass. Stroke severity scale is utilized- and deciding on plan for Regional Protocol based on good data, interhospital transport for LVO, Triage protocol for LVO  
 Jack reports public dash boards through Dan Lee, Regional committees could work with EMS committee to get real numbers for transports and capture transport times and age ranges, etc.

<b>EMS Advisory Council</b> <i>(standing item)</i>	Covered Earlier in the meeting	Jack Fleeharty
<b>Education Work Group</b> <i>(standing item)</i>	Create over-arching goals-RSAS education, go back to education sub-committee to draft education for EMS and present to the committee in November. Course is already developed-will send a link to this group, sample curriculum to the Region leaders, post on IDPH website. Dylan will have CME application and send to Jack for state level education.	Dylan Fergusson
<b>Membership Update</b>	Several new positions – what is process for sending applications? <ul style="list-style-type: none"> <li>• 3 comprehensive (CSC) positions – admin, nurse, physician           <ul style="list-style-type: none"> <li>– Plan is to have Dr. Richards as chair send a letter to have Maureen Mathews moved from nurse from a PSC to nurse from a CSC since she is already a vetted member</li> <li>–Plan is to have Dr. Richards as chair send a letter to have Dr. Shyam Prabhakaran moved from physician at a PSC moved to Physician providing advanced stroke care at a CSC since he is already a vetted member</li> <li>–Mary Kelly asked to apply for the administrator from a CSC position</li> </ul> </li> <li>• Acute stroke ready (ASRH) – admin, nurse, physician –</li> </ul>	ALL

this is where we need more interest

–Plan is to have Dr. Richards as chair send a letter to have Tracy Love moved from nurse from a non-PSC moved to nurse from a ASRH

–Plan is to also have Dr. Richards send a letter to IDPH to ask to have Paula Porter moved to a nurse from a PSC instead of a nurse from a ASRH (she covers both in her position)

- Need Region 1, 3, 10, and 11 rep
- Need a Fire Chief or designee from rural region-Dylan is recommending Tom Willan for this position
- Need an EMS from a municipality (as opposed to private)
- Now will need a physician from a PSC

**PA 096-0514**

**Draft Administrative Rules**

Discussed earlier in the meeting

Jack Fleeharty

**Annual Meeting and Committee Requirements**

Dates discussed for next year's meeting:

- Wednesday February 8<sup>th</sup>
- Wednesday May 10<sup>th</sup>
- Wednesday August 9<sup>th</sup>
- Wednesday November 8<sup>th</sup>

ALL

The plan is to keep the meetings in Bloomington/Normal to remain central in location. Tracy will contact the Normal Fire Station to see if we can keep this location for meetings.

Officers nominated for next year. Tracy reports she wants to stay on this committee, but would like to step down from Secretary position. Discussion around replacement, and officers for next year.

The nominations currently are:

Dr. Chris Richards-nominee for Chair of Committee

Allison Kennedy-nominee for Vice Chair of Committee

Maureen Mathews-nominee for Secretary

Discussion was also on reviewing the grid for mandates of the

committee. Votes at the next meeting will be on the State Wide Stroke Screening Tool for EMS and a vote on Certifying Bodies who can certify facilities in the state of Illinois for ASRH, PSC, and CSC.

**Public Comment**

Discussion was about EMS law vs. inpatient practice. Jack reports in administrative law, this covers Emergency/EMS rules and regulations...may have broader reach to the hospital in the future-but calls upon the hospital licensing act. This does reach the community through education and care. Peggy reports she currently requires 4 hours community education from the ICAHN hospitals. Jack states the healthcare regulators have a division chief of healthcare regulations (EMTALA issues)-Jack will ask if he can come to the November meeting.

ALL

Mary Kelly wanted to look at inter-facility transfer protocols and what happens with transfers (who, why, how...) Jack reports critical care transport protocols exists for helicopter and group transport. One person reports that her transfer is 60 minutes from the time of acceptance at a facility until the patient reaches that facility. Discussion continues on region making decisions on transport protocols. Inter-facility transport could be part of data, recommend development of a Quality Sub-Committee within this committee.

Dr. Richards presented a few slides on stroke severity scales- including LAMS scale, RACE, and 3ISS

**Open Meetings Act**  
*(standing item)*

Any new member after January 1<sup>st</sup> 2015 will have 90 days to complete the OMA training.

**Meeting Times**

Meeting location for 2016:  
Normal Fire Department  
11a-3p

- November 16, 2016

**Adjourned at 2:10**

<b>Name</b>	<b>Position</b>	<b>Attended</b>
Stein-Spencer, Leslee	Fire Chief from a region >200,000 population	Called In
Faxon, Randy	State EMS Advisory Council Rep	Yes
Peggy Jones	Acute Stroke Patient Advocate	Yes
Chris Richards	EMS Medical Director	Yes
Dylan Ferguson	EMS System Coordinator	Yes
	EMS Rural Fire Chief	
Kelley Walsh	Private ambulance provider rep	Proxy: No
	Representative from a Municipal EMS Provider	
	Hospital Administrator/Designee from a CSC	
Smith, Deborah	Hospital Administrator/Designee from PSC	Yes
	Hospital Administrator/Designee from a ASRH	
	Physician Providing Advanced Stroke Care at a CSC	
Prabhakaran, Shyam	Physician Providing Stroke Care at a PSC	Proxy: No
	Physician Providing Stroke Care at a ASRH	
	Registered Nurse from a CSC	
Mathews, Maureen	Registered Nurse from a PSC	Yes
Love, Tracy	Registered Nurse from a ASRH	Yes
	Region 1	
Missy Mallory	Region 2	Yes
	Region 3	
Allison Kennedy	Region 4	Yes
Danielle Short	Region 5	Yes
Erin Eddy	Region 6	Yes
Dee Behrens	Region 7	Yes
Andrea White	Region 8	Yes
Deborah Brunelle	Region 9	Proxy: Dee Behrens
	Region 10	
	Region 11	