

STATE OF COLORADO

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Dedicated to protecting and improving the health and environment of the people of Colorado

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Colorado Department
of Public Health
and Environment

EMTS Section Activity Report D. Randy Kuykendall Deputy Director Michelle Reese, EMTS Section Chief Health Facilities and EMS Division April 12, 2012

This report is submitted as a record of key activities by the Emergency Medical and Trauma Services Section for the period January through March 2012.

Organizational Effectiveness – During the last quarter, there have been a number of adjustments in the staffing and function of the EMTS section due to changes in personnel, workload and efficiencies. Some long-time members of the EMTS section have accepted new opportunities for professional enhancement and we wish them the best. Dr. Holly Hedegaard retired on March 30, 2012 from the department and has accepted a position with the National Center for Health Statistics in Washington D.C. Holly's dedication to Colorado residents and the prevention of illness and injury cannot be overstated and her contributions to the EMTS community are many. Ms. Celeste White accepted a new position as a contracts auditor in the department's financial services office. Celeste's work as the EMTS Boards and Commissions Coordinator over the past 7 years is greatly appreciated and we know she will do well in her new position. Mr. Rio Chowdhury has accepted a new position within the department's Office of Communications as the department's coordinator of social media. He will be starting his new duties later in April, and although he is leaving the EMTS section after almost 8 years, Colorado's EMTS community will continue to benefit from his insight and skill on an even broader scale in the future. Ms. Krystal Banks has accepted a promotion to a position within the Prevention Services Division, effective April 23rd. We want to thank Krystal for her contributions to the trauma program this past year.

Effective March 12th, Mr. Randy Kuykendall accepted the permanent appointment of Deputy Division Director for Acute, Community and Emergency Services within the Health Facilities and EMS Division (HFEMSD). He will continue to have oversight responsibilities for the EMTS section and the Acute & Community Based Programs section. Effective April 1st, Ms. Michelle Reese was appointed permanent Chief of the EMTS Section and will continue to be responsible for administration of the section. Ms. Debbie Guenther has been appointed to a new position within the Data Program as a Statistical Analyst and will begin work towards the end of April. This position is funded through the Colorado Department of Transportation (CDOT) and will work closely with state, county and local governments in providing traffic safety data and guidance to improve traffic safety throughout Colorado.

The position of Education and Practice coordinator, which oversees EMS education and the EMPAC, is in the process of being filled. An appointment to fill this vacancy should be made in May. The position of Operations Program Manager (to be renamed to Professional Standards Program Manager) is being finalized and will be open to all applicants. The application process is estimated to begin during the latter half of April. Both the Boards and Commissions/Contract Coordinator position and the Grants/Web Coordinator positions are being updated and should be opened for recruitment by the end of April. The former Education and Credentialing

Supervisor position is being re-designed to focus on issues around both professional/air ambulance agency credentialing and regulatory development and will be posted accordingly.

Finally, as a part of the department's efforts to review, evaluate and enhance various programmatic functions, and the Health Facilities and EMS Division's commitment to identifying and implementing more efficient methods to serve our stakeholders, the EMS and trauma data program is being integrated with the HFEMSD patient safety program to create a consolidated data and patient care information work unit whose program manager will report to the Deputy Director for Acute, Community and Emergency Services. Historically, the work of the patient safety program with regard to data collection from facilities and reporting to the public has been parallel to the responsibilities of the EMTS data program in terms of both collection and reporting activities. By bringing these two work units together, the experience and technical skills of both units will be enhanced and the department's ability to provide information and data collection services to facilities, providers, and citizens will be improved. The vacancy created by Dr. Holly Hedegaard's retirement will become the program manager position for the newly consolidated work unit. The position is presently in the process of being re-written and should be posted within the next 60-90 days.

Change is inevitable and although there have been several personnel adjustments within the EMTS section and the HFEMS division over the last six months, it's important to acknowledge that for those team members who've moved on to new opportunities, these changes are positive components of their professional lives. The opportunity for newer and broader contributions to the health and safety of our community is an important part of what makes Colorado a great place to live and work. Congratulations are in order for those who've found new opportunities and although they will be missed, their contributions over the past years are greatly appreciated. It is also important to note that as the vacant positions are filled by new team members, they will bring with them fresh ideas, thoughts and energy. If there are any questions or need for additional information regarding these new opportunities within the department, please contact the HFEMS division at any time.

EMTS Operations Program

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EMS Provider Certification

During the first quarter of 2012, the certification unit has issued 1,759 EMS Provider certificates. As of March 31, 2012, there are 16,792 certified EMS providers in Colorado: 12,574 EMTs, 2 Advanced EMTs, 640 EMT-Intermediates and 3,576 Paramedics. Compared to 2011, the total count of certified providers is up by about 450 from the first quarter of 2011, with the most growth in EMTs (+300) and paramedics (+150). New and renewing certificates currently outpace expiring certificates by a ratio of almost 3:1 in the first quarter. Subsequent to an agreement between the department and the National Registry of EMTs in November, a number of providers renewing their national registry certifications in 2012 were able to indicate that they had transitioned in accordance with Registry requirements to the new National EMS Education Standards. Currently certified Colorado providers are not being required to complete a transition course since our state certification requirements already address the new standards. Additional information on this "deemed status" of Colorado providers can be found on the EMTS website. The certification unit also continues work on the transition to an online certification process via the ImageTrend licensing module. We hope to have a public implementation plan and timeline to announce by the July SEMTAC meeting. An EMS Provider's certification status can be checked via the section's website at www.coems.info. For more information concerning EMS Provider certification, contact the Certification Unit at (303) 692-2980 or Sean Caffrey at sean.caffrey@state.co.us or Mike Gullatte at Michael.Gullatte@state.co.us.

Emergency Medical Practice Advisory Council (EMPAC)

The new deadline for scope of practice waiver submissions is now effective and will continue to be the first business day of April, July, October and January. Waiver applications will continue to be reviewed quarterly at the February, May, August and November meetings. An updated waiver application with better data capture is scheduled for review and implementation in the next quarter. The EMPAC will also begin a public input and review process to update the Practice Rules (6 CCR 1015-3, Chapter 2) over the next 9 -12 months. Additionally, recruitment is currently underway to fill an EMPAC council vacancy for an EMS medical director practicing in a rural or frontier county. Applications are being sought through April 20th. If interested, please submit an application directly to the Governor's Office of Boards and Commissions and please send a copy to the EMTS section. Finally, the council has approved updated statewide guidelines for rapid sequence intubation (RSI) waivers and has convened a task force to develop appropriate standards and guidelines for pediatric airway management programs that also request the waived use of pediatric RSI.

Education and Training

A number of Colorado's EMS Education programs have recently renewed. One new EMT education center has been added for the Upper San Juan Health Services District in Pagosa Springs and a new CE group has been approved for Transcare Ambulance in Silt/Montrose. AEMT courses continue to be introduced in a number of locations across the state. The annual Colorado EMS Education Symposium is also coming up soon and will be held on May 17 & 18th in Denver.

Ground Ambulance Technical Assistance

Approximately 210 ground ambulance services are licensed by counties in Colorado. The EMTS section provides technical assistance upon request of local governments and in conjunction with the RETACs. The department recently concluded a consultation in Fremont County with a final presentation to local stakeholders on March 21st. Work continues on the consultation report for Dolores County with an anticipated final report presentation in late May or early June. The department is also assisting with a facilitation project in Saguache County subsequent to a consultation in the San Luis Valley a few years ago.

Air Ambulance Licensing

As of March 31, 2012, there are 19 Colorado licensed air ambulance services in Colorado. One new service, Airlink at Medical Center of the Rockies, was added. One service, TriState Care Flight, added aircraft and/or bases in Taos and Santa Fe, New Mexico to its Colorado license. The first quarter is also historically the busiest for air ambulance license renewals with 10 services renewing their licenses.

Emergency Medical Services for Children

EMSC is a federal partnership grant funded by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services. As a state partnership grantee, the department maintains a partnership with the University of Colorado Denver to assist with EMSC activities and to provide Joe Darmofal, the Colorado EMSC Coordinator. The coordinator also continues to be active in pediatric EMS education and outreach across the state.

EMTS Investigations

Mike Gullatte, EMTS Enforcement Coordinator

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During this period, five certifications were placed on probation, one was relinquished, two were suspended and two letters of admonition were issued. Additionally, 282 background investigations were completed on new and renewal applicants and the section concluded investigations on six written complaints. For additional information regarding EMS investigations, contact Mike Gullatte at Michael.gullatte@state.co.us.

Grants Program

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CREATE

In July, \$500,000 was set aside for the Colorado Rural Health Center to run the education portion of the grants program. As of 3/26/12, \$553,506 has been awarded. An additional \$50,000 was added to the CRHC contract out of reversions from the provider grants. Applications are accepted on a continuing basis – apply at <http://www.coruralhealth.org/programs/create/index.htm>.

Provider Grants and System Improvement Funding Requests

FY2012 third quarter progress reports were due 3/31. Enough funds were reverted in the past quarter to allow for some new awards to be given in the provider grant program, to agencies that were not initially funded the first time around, as well as some additional funds to the CREATE program for the current fiscal year. The FY2013 applications were due on Feb. 15, 2012, and 150 applications (both provider grants and system improvement funding requests) were received requesting just over \$8 million state dollars. For provider grants, financial waiver review was held on March 2. Seven applications did not pass financial waiver review and will not continue through the scoring process. For provider grants, RETAC hearings are being held in March and April, and SEMTAC hearings will be held May 16-17. System improvement requests will be heard and scored by the Public Policy and Finance Committee on April 11, 2012 in Glenwood Springs. Public notice for both provider grants and system improvement funding requests will go out in late June with purchase orders and contracts following in July and August.

Emergency Grants

Two emergency grants were received in the third quarter, and both were funded. Glade Park Volunteer Fire Department, vehicle, \$21,000. K-9 Search and Rescue, vehicle, \$41,336.

Trauma Program

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Trauma Reviews/Designations

In the past quarter, the Trauma Program completed a total of eight facility reviews including triennial reviews at:

Wray Community District Hospital (Level IV): The reviewers recommended designation with a plan of correction. The Designation Review Committee (DRC) is scheduled to review the facility report and make a recommendation regarding designation to the department at the April DRC meeting.

Yuma District Hospital (Level IV): The reviewers recommended designation with a plan of correction. The DRC is scheduled to review the facility report and make a recommendation regarding designation to the department at the April DRC meeting.

Animas Hospital (Durango - Level IV): The reviewers recommended designation with a plan of correction. The reviewer's findings will be presented at the May meeting of the DRC.

Presbyterian/St. Luke's (Denver - Level IV), Longmont United Hospital (Level III) and Good Samaritan Medical Center (Lafayette - Level III): These facilities passed their site reviews with no deficiencies and no items met with reservations and were re-designated by the department.

St. Anthony Hospital (Lakewood - Level I) and Denver Health Medical Center (Level I): All state criteria were fully met at these facilities, and staff is requesting a recommendation from the SEMTAC on the continued designation of these facilities as Level I trauma centers.

Seven facility reviews are planned for the next quarter.

Trauma Consultations and Program Visits:

Technical assistance visits were conducted at Kit Carson County Memorial Hospital (Burlington), Melissa Memorial Hospital (Holyoke) and Lincoln Community Hospital (Hugo).

Statewide Trauma Advisory Committee (STAC):

The committee continues to work on the re-write of 6 CCR 1015-4, Chapter Two, State Emergency Medical and Trauma Care System Standards. Interfacility consult and transfer requirements for neurotrauma clients, as well as resource and personnel expectations for level III facilities opting to keep and treat moderate to severe traumatic brain injured patients, continued to be discussed. Expectations regarding spinal cord, chest and abdominal injuries are to be addressed next.

Designation Review Committee (DRC):

The January and February 2012 meetings were cancelled due to lack of agenda items. The March agenda items were deferred to the April meeting due to lack of a quorum. Staff will be requesting replies regarding attendance to pre-empt future quorum issues.

Trauma System Rapid Planning Event (RPE):

The RPE tasked with developing recommendations to move the trauma system forward got underway with meetings on March 5 -7th. Background and resource documents presented to the team members have been placed on the EMTS Section's web page, see www.cotrauma.info and select the link to Colorado Trauma RIE. The RPE will continue on May 9-11th with outcomes and recommendations to be presented to the SEMTAC at the July meeting.

Communications Program

Bill Voges, Communications Program Coordinator

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The EMTS Section continues to support the implementation of the Statewide Digital Trunked Radio (DTR) system. Since the statewide communications plan has been finalized, the communications program staff continues to educate and inform EMS system users in "best practices" on how to integrate DTR into their daily operations. Staff has also continued their work to identify the various mechanisms being used to maintain hospital-to-field communication throughout the state and enhance inter-agency interoperability capabilities, although this has proven to be a significant effort.

Located throughout the state, the infrastructure currently consists of 207 active APCO P25 digital trunked radio sites operating on four zone controllers and utilizing frequencies in the 700MHz/ 800MHz bands. There are additional funded Digital Trunked Radio (DTR) remote sites throughout the state that are in the planning and engineering stages for installation.

During the May 2011 Consolidated Communications Network of Colorado meeting, the executive board and regional directors conducted a vote (23 in favor and 4 not in favor) for CCNC to become an authority. Since that time there has been proposed legislation and currently House Bill (HB 12-1224) has been approved through the Senate.

Narrowbanding of the VHF (150.000 - 174.000 MHz) and UHF (450.000 - 512.000 MHz) frequency spectrum is fast approaching the Federal Communications Commission's (FCC) Narrowband mandate deadline of January 1st 2013.

RETAC Program

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Third quarter activity reports are being submitted by the RETACs, and describe a great deal of activity toward biennial plan goals in each region. Projects include regional medical direction, multi-casualty incident and various EMS trainings, Colorado Department of Transportation occupant safety grants, Hospital Preparedness Program activity, and EMTS system support activities unique to each region. Go to www.coems.info/retac for links to individual RETAC websites for details.

The quarterly RETAC forum scheduled for March was canceled due to date conflicts with the Trauma Program Rapid Planning Event. The next RETAC forum will be held June 6-7 at the Residence Inn Loveland. SEMTAC members are encouraged to attend.

EMS and Trauma Data Program

Steve Boylls/Jesse Hawke

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The EMTS Data Program has continued working with *ImageTrend* on the conversion to the new EMS data collection system. The primary focus over the past quarter has been setting up agencies with access to the *ImageTrend* software. We have begun working with agencies using third party vendor software and have established Web access and a process for submitting their XML data to the *ImageTrend* database. Several on-line webinars on system administration and use of the State Bridge and Field Bridge software are scheduled for April 11th, April 18th, and May 2nd. In addition, Report Writer training is scheduled for May 13th and May 20th. To date, 68 agencies are beginning to use the software for submission of their patient care reports. Additionally, EMTS Data Program staff continues to migrate the legacy data to the state database on the *ImageTrend* servers. Currently, 2007-2011 data (approximately 1.5 million records) have been migrated to the new database. Over the next several months the EMTS Data Program will continue to work with agencies to complete the conversion to the new system. We will continue to assist agencies that choose to use the *ImageTrend* software and also provide technical assistance to agencies using other third party vendor software. It is anticipated that the entire conversion to the new system will be completed by end of April 2012. We continue to receive positive feedback and comments regarding the use of the *ImageTrend* software. Please contact Steve Boylls at (303) 692-2994 if you have questions pertaining to access, training or any other general questions about the *ImageTrend* system.

The Data Program has provided the results from analysis of trauma registry data for several task forces/projects of the State Trauma Advisory Committee, particularly those working on trauma benchmark reports. Currently, a presentation is being prepared for the Annual Rocky Mountain Trauma & Emergency Medicine Conference in June. This presentation will focus on the benchmarking process being utilized by the State Trauma Advisory Committee as well as results obtained from an examination of data from elderly patients with rib fractures. Staff has also responded to multiple data requests from the community, including examinations of cardiac arrest patterns in the San Luis Valley region and STEMI/Stroke patterns in the Southwest region.

As mentioned earlier, the process of hiring a statistical analyst to analyze motor vehicle traffic data is currently underway. This is in response to a contract established with the Colorado Department of Transportation (CDOT) in November 2011, and guarantees the continued successful collaboration between CDOT and CDPHE. In the meantime, EMTS Data Program staff has been analyzing and generating reports from various data sources for inclusion in the Fiscal Year 2012 Problem Identification report distributed by CDOT. This report focuses on factors associated with motor vehicle crashes and helps to identify problem areas/populations to assist in directing the efforts of the Office of Transportation Safety at CDOT as well as the Injury, Suicide and Violence Prevention Unit at CDPHE.

Medical Direction Program

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Statewide EMS Regional Medical Direction Program

The statewide regional EMS Medical Direction Program continues to develop and mature. Most of the RETACs are actively developing their programs. We are continually getting positive feedback from the regions and most feel that they have a good foundation of communication now amongst the agency medical directors in their regions.

The latest major development has occurred in the Western RETAC region. On February 24, 2012, Dr. David Dreitlein of Montrose Memorial Hospital brought together the majority of the EMS agency medical directors and service directors from the WRETAC to discuss forming a Regional Medical Direction Program that will formally be named the Western Colorado EMS Leadership Council and will meet twice a year. The near term goals of the Council will be to:

1. Develop a functional line of communication
2. Develop Standardized Regional Protocols
3. Evaluate disaster / mutual aid protocols
4. Begin development of a QI process for the region

The Foothills and Mile-High RETAC program continues to move forward. They have recently hired Nick Boukas to be the coordinator for the combined program. They have completed their protocol revisions and are now working on evaluating the data that is obtained from the agencies in their region and determining how to "clean the data" so that they can begin to develop some QI projects.

San Luis Valley is still working to find a replacement for Dr. Jay Mathers, who will be vacating his position in August.

A written summary of activities from all of the RETACs will be submitted at the SEMTAC meeting on April 12.

Respectfully Submitted,

April 12, 2012