

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, Interim Deputy Director Health Facilities and EMS Division October 13, 2011

This report is submitted as a record of key activities by the Emergency Medical and Trauma Services section and the Health Facilities and EMS Division for the period July through September 2011.

Organizational Effectiveness – During the past quarter, several important leadership changes have been implemented by the Health Facilities and EMS Division. Division Director Nancy McDonald has appointed Jennifer McCants and Randy Kuykendall Interim Deputy Division Directors as a part of the department's initiative to improve division communications and service to the community. Mr. Kuykendall will continue to be responsible for the general leadership of the EMTS section as well as the division's community based programs section. Ms. McCants will be leading the division's responsibilities in long term care, life safety code and assisted living centers.

Ms. Michelle Reese has been appointed Interim Chief of the Emergency Medical and Trauma Services section. She will be responsible for the direct management and leadership of the EMTS section and its programs. Mr. Sean Caffrey has been appointed Interim operations program manager assuming supervision of the section's certification, air ambulance licensing and EMPAC activities. The investigations component of the section will remain under Ms. Reese's management and no appointment of a deputy section chief will be made at this time.

EMTS Operations Program

Sean Caffrey – Interim Operations Program Manager
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- **EMS Provider Certification** – As of September 30, 2011, there are 16,667 certified EMS Providers in Colorado: 12,546 EMTs, 0 Advanced EMTs, 643 EMT-Intermediates and 3,478 Paramedics. A one year average indicates that there are approximately 450 new certified EMS Providers each month. Monthly renewal notices continue to be sent via email to currently certified EMS Providers as a reminder that their certifications will expire.

The certification unit is working with the National Registry of Emergency Medical Technicians (NREMT) regarding how Colorado certified providers who wish to maintain their National Registry certifications will document their transition to the new National Scope of Practice model. No transition course for EMTs or Paramedics currently certified in Colorado will be required. However, the details of documenting appropriate education to NREMT for their recertification purposes are under development and additional information will be forthcoming in the next quarter. 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 Marilyn Bourn at marilyn.bourn@state.co.us.

- **Education and Training** – Colorado's EMS Education programs continue to implement the new national education standards into EMS education programs at all levels. Additionally, AEMT courses are currently underway with the first Colorado certified Advanced EMTs (AEMT) expected by the end of the year. For additional information, please contact Marilyn Bourn at Marilyn.Bourn@state.co.us.

Emergency Medical Practice Advisory Council (EMPAC) The EMPAC held its regular quarterly meeting on August 8, 2011. The council considered numerous waiver applications and made recommendations to the department in terms of approval. Understanding that the EMPAC is relatively new in its development, it continues to refine its activities and seek opportunities to streamline the waiver application process. The EMPAC is developing an annual calendar to consider the routine update of rules related to EMS scope of practice in an effort to ensure that Colorado remains contemporary in the level of care provided across the state.

A task force was appointed to consider and review the implications of waivers for pediatric rapid sequence intubation. It is important to note that this review is designed to serve as a model process for the routine consideration of specific procedures related to the provision of care normally considered beyond the standard scope of practice. A working group of the EMPAC is also developing a CQI guide for EMS medical directors that is scheduled for completion by the end of 2011. It is further hoped this publication will be the first installment of a comprehensive tool kit for EMS medical directors in Colorado.

The next meeting of the EMPAC will be in conjunction with the State EMS conference in Keystone, CO on November 3, 2011. For more information on the EMPAC or the Practice Rules, please contact Nick Boukas at nick.boukas@state.co.us.

- **Ground Ambulance Technical Assistance** –The EMTS section provides technical assistance for local EMS and trauma systems at the request of local governments and in partnership with the RETACs. The department is currently assisting with EMS consultative visits or system improvement grants with Dolores, Fremont and Saguache Counties and has recently concluded an EMS Consultative Visit for Kit Carson County. For more information concerning technical assistance, contact Sean Caffrey at sean.caffrey@state.co.us

- **Air Ambulance Licensing** – As of September 30, 2011, there are 20 Colorado licensed air ambulance services. Two services were added this quarter including Classic Lifeguard located in Vernal, Utah and the University of Utah Air Med program located in Salt Lake City. For more information concerning air ambulance licensing, contact Sean Caffrey at sean.caffrey@state.co.us
- **Emergency Medical Services for Children** - The department has established a partnership with the University of Colorado - Denver to assist with EMSC activities and to support Joe Darmofal, the Colorado EMSC Coordinator. The EMSC program has recently utilized \$7,500 in carryover funds to supplement pediatric EMS equipment needs in Colorado subsequent to a 2010 statewide survey of ambulance services. The EMSC Coordinator also continues to be active in EMS outreach pediatric education throughout the state. For additional information on the EMSC Program contact Joe Darmofal at Joseph.Darmofal@ucdenver.edu.

Investigations

Mike Gullatte, EMTS Investigator
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During this quarter, three certifications were placed on probation, one voluntarily agreed to a relinquishment, and three EMS Providers received a Letter of Admonition. Additionally, 239 background investigations were completed on new and renewal applicants and the Section responded to four written complaints.

Grants Program

Jeanne-Marie Bakehouse, EMTS Provider Grants Program Manager
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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 9/27/11, \$190,908 has been awarded. Applications are accepted on a continuing basis – apply at <http://www.coruralhealth.org/programs/create/index.htm>.

Provider Grants - The FY2012 cycle started in July, and approximately \$4.9 million was awarded for EMS and trauma provider grants. First quarter progress reports were due 9/30. The application and guidance is being created for FY2013, and the application will be released Dec. 15 with a Feb. 15, 2012 due date.

System Improvement Funding - Approximately \$780,000 was awarded in system improvement and additional base funding. First quarter progress reports were due 9/30.

Emergency Grants - No emergency grants were received in the first quarter of FY2012.

For more information, please visit www.coems.info/grants

Trauma Program

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Trauma Reviews/Designations - In the past quarter, the trauma program completed a total of four facility reviews.

Valley View Hospital (Glenwood Springs) (Level III)

Vail Valley Medical Center (Level III)

Both facilities passed with no deficiencies and no items met with reservation and were redesignated at Level III trauma centers.

A replacement facility review at:

St. Anthony Hospital (Level I)

The facility fully met all criteria and its designation was confirmed as a Level I trauma center in its new location.

A new facility review:

St. Anthony North Hospital (Seeking Level III designation)

The facility fully met all Level III criteria and was designated as a Level III trauma center for 18 months.

Six facility reviews are planned for the next quarter.

Trauma Consultations and Program Visits - Technical assistance visits were conducted at Rangely District Hospital and Kremmling Memorial Hospital District. In addition, staff attended the Western States Trauma Managers meeting in Utah and the National Association of EMS Officials meeting in Madison where national trauma initiatives were discussed.

Statewide Trauma Advisory Committee - The Statewide Trauma Advisory Committee had an interim meeting to discuss a re-write of 6 CCR 1015-4, Chapter Two, State Emergency Medical and Trauma Care System Standards. The initial draft of revised standards for care of head injured patients will be presented at the October 12 meeting.

The Rural Trauma Task Force's efforts have culminated in "resource tool kit" that will be available on-line for trauma nurse coordinators. Staff also prepared to present at the Colorado Trauma Network meeting with information on how to prepare for a site review.

Designation Review Committee - The Designation Review Committee did not have any interim meetings during the quarter as there were no items requiring action. Review results are discussed above.

Other Projects:

The trauma program staff is nearing completion of an update of trauma site review applications and should have the revised applications posted within a few weeks.

EMS and Trauma Data Program

Holly Hedegaard, MD, MSPH, Program Manager

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Staff in the EMTS Data Program have been working with Image Trend on the conversion to the new EMS data collection system. Implementation of the new system includes customization of Colorado-specific pick lists, migration of the current data base to the state data repository on the Image Trend servers, and interface validation to ensure that the system can both import NEMSIS-compliant data from other third-party systems and export data to the national EMS database.

A pilot program with approximately 30 EMS agencies started in July. Agencies participating in the pilot program made suggestions for needed changes/modifications to the software. Now that the pilot period has ended, additional agencies will be brought on-board to the new system.

A series of on-line webinars on system administration and use of the software is set of October 17-28. Any agency that anticipates using the Image Trend software for their patient care reports is encouraged to participate in the webinars. Additional in-person training in late November is being considered. The in-person training will be held in a location yet to be determined in western Colorado, possibly Grand Junction. Over the next several months the EMTS Data Program will continue to work with agencies to move to the new system. It is anticipated that the conversion to the new system will be completed by March 2012.

EMTS Data Program staff analyzed data from prehospital patient care reports for a presentation at the EMS Safety Summit on use of lights and sirens and response times. Staff also prepared reports on EMS response times for each agency with a comparison to comparable agencies in the RETAC, state and nationally.

The 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, enhancement of rural trauma care and updating trauma chapter 2 rules on interfacility transfers. Additionally, staff have prepared and distributed draft annual data quality reports to each facility showing comparisons of their patient mix to that of facilities of similar trauma center designation level. Staff have also responded to multiple data requests including a description of pediatric burn patients, injury hospitalizations by race/ethnicity for teens in Denver, pediatric intubations, motorcycle crashes, older adult falls, air vs. ground transport of trauma patients, and leading causes of injury death/hospitalizations in El Paso county.

The EMTS Data Program is completing a project funded by Colorado Dept. of Transportation (CDOT) to link health data (hospital discharge, trauma registry, and EMS data) to traffic accident reports. Data will be used to inform the CDOT problem identification report that determines the geographic areas and types of motor vehicle crash events to target for prevention efforts. Because of the success of these efforts, CDOT has proposed a continued collaboration with the CDPHE through a contract to hire a data analyst in the EMTS Data Program to specifically work on motor vehicle traffic analysis needs. Once the contract is finalized, a new staff position will be hired, possibly in November-December 2011.

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 its 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 201 active APCO P25 digital trunked radio sites operating on four zone controllers and utilizing frequencies in the 700 MHz and 800 MHz bands. There is additional funded Digital Trunked Radio (DTR) remote sites through out the state that are in the planning and engineering stages for installation.

The Interoperable Emergency Communications Grant Program (IECGP) has published a web based self study radio 101 communications-training curriculum. Individuals can log onto www.co.train.org and register to take the class.

The executive board of directors has determined that there is a need to collect funds from each agency that is currently using the Digital Trunked Radio System (DTRS) at an annual fee of \$100, beginning on January 1, 2012. The collected funds will be used for legal and accounting services to establish the formula of an authority.

RETAC Program

Celeste White, EMTS RETAC Program Coordinator

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By July 1, Regional Emergency Medical and Trauma Advisory Councils submitted their statutorily required biennial plans using the new format. A group of SEMTAC members reviewed the plans using a review tool approved by the council. All plans were deemed adequate. The plans may be accessed at www.coems.info/retac by clicking Reports on RETAC Activity or by contacting a RETAC representative.

Last quarter’s statewide RETAC forum was held in Loveland, and it was at that meeting the SEMTAC review group had an opportunity to discuss individual plans with RETAC representatives. Also discussed were the RETAC opportunity paper, streamlining RETAC reporting, and the department’s commitment to visit at least one of each RETAC’s board meetings.

Dates for quarterly RETAC forums at the Residence Inn Loveland are November 30-December 1, March 7-8, and June 6-7. SEMTAC members are encouraged to attend RETAC forums and reminded that their expenses are reimbursed.

Contact <mailto:celeste.white@state.co.us> for more information.

Respectfully Submitted,

D. Randy Kuykendall

October 13, 2011