

STATE BUREAU OF EMS HIGHLIGHTS

JULY 2005

GENERAL INFORMATION

EMS ADVISORY COUNCIL

Next Meeting: November 2 ~ 4, 2005
Hilton St. Petersburg
333 1st Street South
St. Petersburg, FL 33701
(727) 894-5000

Please make hotel reservations at The Hilton by October 2, 2005 by calling (866) 454-8338 or (800) 445-8667. The group conference rate of \$93.00 (S/D + tax) is reserved under "Florida Department of Health, Bureau of Emergency Medical Services". *Reserve your room early!!*

Please join the Bureau of EMS in welcoming our new council members. Effective July 1, 2005, Secretary John O. Agwunobi, M.D., M.B.A., M.P.H., appointed the following individuals to four-year terms on the council:

PARAMEDIC (FIRE SERVICE)
Jeffrey Lindsey, Ph.D.

PARAMEDIC (NON-FIRE)
C.T. "Chuck" Kearns

EMS EDUCATOR
Linda W. Swisher, Ed.D.

PHYSICIAN
Bradley Elias, M.D.

Any questions or comments regarding the EMS Advisory Council may be directed to Desi Lassiter at the State EMS office at (850) 245-4055.

GRANTS/LICENSURE & COMPLIANCE/TRAINING & EDUCATION SECTION

Contact Scott McDermid, Program Director; state Bureau of EMS at (850) 245-4440, extension 2727 for further information.

LICENSURE

The licensure unit has converted to a computer system operated by the Division of Medical Quality Assurance (MQA). The conversion of information is complete. The new system has additional steps in the process, so please submit all licensure information, including completed application, vehicle permit information, and attachments at least 30 days prior to expiration of current license. Licenses that expire will be referred to the Bureau's enforcement section.

TRAINING AND EDUCATION

Mr. John Gosford has been representing the department on the National Scope of Practice Committee. Visit www.emsscopeofpractice.org to review the second draft. While the recommendation receipt time has passed, it is important that we all stay up to date on the progress.

INSPECTIONS

Inspections are progressing well; unannounced inspections remain at 40% of all inspections conducted. We were successful in finding EMS agencies to assist us in the development of a desk review capability for administrative records. We will report on our progress in this report. We currently have an EMS inspector position open in the Bureau. This position will be part of the inspection team lead by John Bixler. If you are aware of anyone interested in this opportunity, please contact John Bixler at (850) 245-4440, ext. 2771.

GRANTS

The 2004/2005 grant cycle award recipients have been determined. We would like to again thank all those who participated in the grant review process. We were able to fund grants from the trust fund with less than \$1 dollar remaining from the allocated grant funding amount. All of the 2004/2005 grant cycle awards are currently posted on the Bureau of EMSs website: www.fl-ems.com.

STROKE LEGISLATION

The Florida Legislature created Chapter 395.3041, Florida Statutes in the 2004 legislative session; it establishes action required by the Bureau of EMS as well as each EMS provider. Informational packages were distributed by certified mail to each EMS agency Medical Director, and a courtesy copy was distributed through regular mail to each EMS agency. Thanks to Dr. David Shatz who has prepared the sample stroke assessment tool for use by the Florida EMS Community. The sample tool has been updated and is available on our website: www.fl-ems.com.

If you have any questions, please contact: Scott McDermid, (850) 245-4440, ext. 2727 or by email: Gordon.McDermid@doh.state.fl.us.

STATEWIDE PLANNING SECTION

Contact Karen Wiggins, R.N., program director; state Bureau of EMS at (850) 245-4440,

EMERGENCY MEDICAL SERVICES FOR CHILDREN (EMSC)

- Emergency Medical Services (EMS) Week was celebrated throughout the nation May 15-21, 2005, with special emphasis given to May 18th, Emergency Medical Services for Children (EMSC) Day. In an effort to raise awareness about EMSC Day, the Florida EMSC Program provided over 7,000 “blue band-aid” stickers to various agencies/organizations to be worn in recognition of this day.
- The Spring 2005 Florida EMSC newsletter, “EMSC News,” is complete. Copies are available on the Bureau of EMS information table. Constituents are welcome to submit articles for publication at any time. For questions or ideas about the newsletter, please contact Patricia Kenyon at (850) 245-4440, ext. 2686.
- Copies of Emergency Information Form for Children with Special Health Care Needs are still available. For copies of the form contact Patricia Kenyon at (850) 245-4440, ext. 2686, or by e-mail at patricia_kenyon@doh.state.fl.us.
- For more information, or to schedule an EDPPP visit, contact Karen Wiggins at (850) 245-4440, ext. 2777, or by e-mail at karen_wiggins@doh.state.fl.us.

DATA

Effective with the data submission for the second quarters 2005, EMS provider agencies are no longer required to include the following DH Form 1304 data elements to meet the submission criteria for aggregate prehospital data reporting:

Part 2, #5.A. - Site of Injury

Part 2, #5.B. - Type of Injury

Part 2, #8.B. - Medication Administered

Part 3, #10. - Total Staff Hours Worked

The Florida Prehospital Data Collection and Reporting System will not be modified from the current data entry and submission routines. Providers that wish to continue reporting these data elements may do so. Provider agencies that do not report Total Staff Hours Worked must enter zero (0) hours for each of the three categories (EMTs, Paramedics, and Other) in order for the system to accept the report.

NO CHANGE:

Agencies are required to continue reporting the following data elements:

Part 1, #1. - Service Type Requested

Part 1, #2. - Incident/Patient Disposition

Part 2, #3. - Provider Impression

Part 2, #4. - Cause of Injury

Part 2, #6. - Patient's Age

Part 2, #7. - County of Incident

Part 2, #8.A. - Treatments/Procedures Administered

Part 2, #8.C. - Alert Called

Part 2, #9. - Patient's Highest Level of Care

Part 2, #10A. & B. - Return to Spontaneous Circulation for Cardiac Arrest Patients

Part 3, #11. - Permitted Vehicles

NOTE: Provider agencies that do not transport patients to their final destination will continue reporting as usual with the exception of Total Staff Hours Worked. Such providers must enter zero (0) hours for each of the three categories (EMTs, Paramedics, and Other) in order for the system to accept the report.

AGGREGATE PHEHOSPITAL DATA REPORTING

- The Data Unit continues to review and verify the accuracy of the data. Public Aggregated Data for 2003 and the first two quarters of 2004 are available for state and county on the web at: <http://clientdoh.doh.state.fl.us/IRM00prehospital/Repthome.asp>. Third and fourth quarter 2004 will be available on the web in the near future.
- The due date for the aggregate prehospital quarterly data for the reporting period of April 1, 2005 through June 30, 2005 is July 30, 2005.
- For further information, please contact the EMS Data Unit at (850) 245-4440, David Griffith at ext. 2730, Jide Thomas at ext. 2761, or Stephanie Daugherty at ext. 2747, or by email: EMSData@doh.state.fl.us.
- Additional resources are available on our Web page at <http://www.doh.state.fl.us/demo/ems/index.html>.

STATEWIDE EMS INFORMATION SYSTEM AND DATASET

- The Bureau of EMS has begun the initial planning for a statewide EMS data system to collect incident level data. The Bureau's objective is to design a patient/run level dataset that is compliant with the National EMS Information System (NEMSIS), which meets the needs of the state and enables the EMS provider community to better assess their performance.
- In June 2004, Dr. Mears, Principal Investigator for NEMSIS (National EMS Information System) met with the Bureau of EMS to discuss the NEMSIS project and to strategize initial steps in developing a Statewide Information System and dataset.

- In August 2004, the Data Unit conducted a survey of EMS Providers to evaluate the technical capabilities of all EMS providers and plan for future objectives and resource allocation. The Florida EMS Provider Agency Survey Summary Report is available on the web at: <http://www.doh.state.fl.us/demo/ems/Providers/datahome.html>.
- In September 2004, the Florida Bureau of EMS signed the NEMSIS Memorandum of Agreement to support and promote the National EMS Information Systems (NEMSIS) business model (National Highway Traffic Safety Administrations (NHTSA) Uniform Prehospital Dataset).
- In January 2005, representatives from NEDARC (National EMSC Data Analysis Resource Center) met with the Bureau of EMS and a representative of the EMS Advisory Council Ad-Hoc Data Committee to evaluate the results of the EMS Provider Survey; and to discuss important aspects of a patient/run-level data system and the process for determining a state dataset that will benefit the EMS Providers (local level) and the State of Florida.
- On June 8th, 2005, the Bureau of EMS held a Data System Development/Improvement Planning workshop. The workshop was facilitated by NEDARC staff and focused on identifying the strengths, weaknesses, opportunities, and threats associated with EMS data collection within Florida. These ideas were used to begin formulating important goals and objectives. This information will be available on the website in the near future.

NEMSIS UPDATE

- As of February 17, 2005, fifty-two states and territorial EMS offices have committed to conforming to the NHTSA dataset.
- As of March 2005, there were two states (North Carolina and Mississippi) participating in the Pilot National EMS Database project and had submitted sample data to the pilot database. A web-based reporting environment is being created to test sample reports from the pilot database. Sample Reports should be available within the next couple of months. At least three additional states (Minnesota, Nebraska, and Missouri) will possibly be joining the pilot over the next few months.
- NEMSIS plans to slowly migrate the pilot database to a live national EMS database over this year. There are 35 known NEMSIS MOU states which have state data systems in development, in implementation, or are active.

Once the national EMS database is live, NEMSIS will begin working with these states to accept data into the National EMS Database.

- The NEMSIS Data Dictionary for the Demographic and EMS Dataset is available in a PDF format in the Data Elements section of the NEMSIS website: www.nemsis.org. Data Elements recommended for the National EMS Dataset are marked as ***National Element*** in the top right corner of the data element page. The XML schema for reporting the prehospital dataset electronically is also available at the Data Elements section of the NEMSIS website.

CERTIFICATION & ENFORCEMENT SECTION

Contact Emily Hauge, program director; state Bureau of EMS at (850) 245-4440, extension 2759 for further information.

CERTIFICATION/RE-CERTIFICATION

- June 30 was the last day to renew your paramedic or EMT certificate. **Any cardholder who is performing duties as an EMT or Paramedic as defined in Chapter 401, Florida Statutes, and has not recertified, is guilty of a misdemeanor.**
- Over 1,100 certificateholders are in the process of being audited. The selected certificateholders had 30 calendar days to submit their documentation. Certificateholders, who failed to respond to the request, or did not document eligibility, in accordance with Chapter 401, F.S., and Chapter 64-E, F.A.C., for recertification at the time of application were referred to the Investigations Section for administrative action.
- In keeping with the Secretary's directive to have all licensing operations under one division, the Certification Unit moved to Medical Quality Assurance (MQA). The staff's phone numbers, faxes and emails remain the same. MQA accepts personal checks as well as money orders and cashiers checks. Their walk up window accepts cash; however, same day service for such requests as a duplicate certificate or a renewal application is not available. Applications will be processed off-site and returned to the Bureau; within three business days.

- As a result of rule revisions, the Bureau in the coming weeks will have revised initial, re-exam and renewal applications to reflect the rule changes. The Statement of Good Standing also was changed.
- Email continues to be the most efficient way to communicate with the certification section. For any questions regarding certification or recertification email or call Dave Jacobsen at David.Jacobsen@doh.state.fl.us, telephone (850) 245-4440, ext. 2724.

INVESTIGATIONS

- Half the investigations staff moved over to MQA CSU effective on Monday, May, 23 2005 in order to continue investigating complaints against individuals.

Addendum

Office of Injury Prevention

Contact Lisa VanderWerf-Hourigan, Manager, Office of Injury Prevention; Division of Health Access and Tobacco at (850) 245-4440, extension 2776 for further information.

FLORIDA INJURY PREVENTION ADVISORY COUNCIL APPOINTED

- The members of The Florida Injury Prevention Advisory Council and the Goal Team Leaders were appointed by Secretary Agwunobi. See below list:
- The organizational meeting of the Florida Injury Prevention Advisory was held on June 6-7, 2005 in Tampa. Work continued on the development of the 2006 Action Plan.

Advisory Council

Individual	Organization/Field	Category Represented
JoAnn Chambers-Emerson	Tampa General Hospital/Poison Control	Injury Prevention Specialists and Health Educators
Pamela Martin	Florida Department of Financial Services	Lay Persons and Injury Victims/Survivors
Marilyn (Mimi) Sutherland	Jackson Memorial Hospital	Hospitals and Trauma Centers
Joe Alan Nelson, D.O.	Florida EMS Medical Director	Physicians, Nurses, and EMS Providers
Karen Liller, Ph.D.	University of South Florida	University System, Research Facilities, and Area Health Education Centers
Stephen Oelrich	Alachua County Sheriff	Law Enforcement
Diane Clark	Operation PAR / Behavioral Health	Injury Prevention Advocacy Groups and Non-Profit Agencies
George (Ed) Rice	Florida Department of Transportation	Key State Agency
Janet Lehman	Department of Elder Affairs	Key State Agency

Belinda McClellan	Agency for Health Care Administration	Key State Agency
Lorraine Allen	Department of Education	Key State Agency
Susan Littnan	Citrus CHD	Department of Health/CHD
Jan Davis	Sexual Violence Prevention/Division of Family Health	Department of Health

Goal Team Leaders:

Individual/Organization	Goal
Office of Injury Prevention	Goal 1: Establish a sustainable infrastructure to provide leadership and to coordinate, monitor, and evaluate strategic plan implementation.
Steve McCloskey, Duval CHD and Florida Public Health Association	Goal 2: Increase public and private funding for injury prevention.
Deborah Mulligan, M.D., Director, Institute for Child Health Policy, Nova Southeastern University	Goal 3: Build the capacity of communities to reduce and prevent injuries to high-risk groups and effectively address injury prevention priorities.
David Summers, St. Mary's Trauma Center	Goal 4: Increase state-of-the-art knowledge and skills in the injury prevention workforce.
Gillian Hotz, Ph.D., University of Miami School of Medicine	Goal 5: Increase the use of evidence-based injury prevention interventions statewide.
Steve Dearwater, Jackson Memorial Hospital	Goal 6: Increase the quality and availability of statewide and community-specific data for planning, surveillance, and evaluation.
Karen Liller, Ph.D., University of South Florida College of Public Health, and Virginia Noland Dodd, Ph.D., University of Florida	Goal 7: Build capacity and resources statewide for evaluation of injury prevention initiatives and interventions.
Pamela Martin, Florida Department of Financial Services	Goal 8: Strengthen advocacy and public policy to reduce and prevent injuries.

2004-2008 FLORIDA INJURY PREVENTION STRATEGIC PLAN

- The plan was printed and hard copies were distributed to all stakeholders. The plan will also be available electronically.
- For more information, please contact Jane Parker at (850) 245-4440, ext. 2774.

STATEWIDE INJURY SURVEILLANCE DATA SYSTEM

- **Florida Injury Prevention Advisory Council and Goal Teams Meeting**
 - Goal Team #6 (Increase the quality and availability of statewide and community-specific data for planning, surveillance, and evaluation) met for the first time at the Florida Injury Prevention Advisory Council and Goal Teams Meeting on June 6–7, 2005 in Tampa.
 - In attendance were Goal Team Leader Steve Dearwater (University of Miami), Joe Nelson, D.O. (State EMS Medical Director), Belinda McClellan (Agency for Health Care Administration), Barbara Mabee (Pinellas County Health Department), Bonnie Rice (All Children’s Hospital), and Michael Lo (OIP assigned staff).
 - Progress of 2004 Action Plan strategies for Goal 6 were reviewed and evaluated and 2006 Action Plan strategies were devised.

- **EMS Data System Development/Improvement Planning Workshop**
 - Representing the Office of Injury Prevention were Lisa VanderWerf-Hourigan (OIP Manager) and Michael Lo (Injury Epidemiologist).
 - Patient/run-level EMS data would be invaluable to informing injury prevention efforts, in addition to benefiting the EMS provider community through uniform collection of statewide data to inform planning efforts and to justify future funding for EMS.
 - Please support this effort as we join the rest of the nation in implementing the NEMSIS data system standard in Florida.

- For more information on statewide injury surveillance initiatives, please contact Michael Lo, Injury Epidemiologist, at (850) 245-4440, ext. 2729.

FLORIDA SPECIAL NEEDS OCCUPATIONAL SAFETY PROGRAM

- Grant from the Florida Department of Transportation (FDOT) provides loaner car seats/restraints for children with acute special health care needs.
- Current operational sites are: St. Joseph’s Children’s Hospital of Tampa, Miami Children’s Hospital, Arnold Palmer Hospital for Children and Women in Orlando, The Children’s Hospital of Southwest Florida in Ft. Myers, and All Children’s Hospital in St. Petersburg.

- During the second quarter of the grant year (January 2005-March 2005) Tampa evaluated 6 children, Miami evaluated 11 children, Orlando evaluated 15 children, and Ft. Myers evaluated 7 children.
- For more information, please contact Jane Parker at (850) 245-4440, ext. 2774.

FLORIDA BICYCLE HELMET PROMOTION PROGRAM

- Grant from the Florida Department of Transportation (FDOT) that targets low income, rural, and underserved communities, with the intent to increase bicycle helmet use among children.
- Grant for October 2004-September 2005 was funded in late-January 2005, and this office has identified 40 community partners to participate in this years grant.
- We will conduct three train-the-trainer bike helmet fitting trainings during July 2005, this year's community partners will be required to attend this training in order to receive the helmets.
- We will submit a purchase order to Bell Sports Inc. on July 1, 2005, we anticipate purchasing over 11,000 bike helmets that will be distributed throughout the state by this years community partners.
- For more information, please contact Ralph Salvas at (850) 245-4440, ext. 2688.

SAFE KIDS FLORIDA

- Currently, there are eleven local coalitions covering Escambia, Santa Rosa, Alachua, Bradford, Columbia, Dixie, Gilchrist, Levy, Suwannee, Union, Flagler, Volusia, Seminole, Orange, Pinellas, Hillsborough, Manatee, Sarasota, Lee, Palm Beach, Broward, and Dade counties, and six state chapters in Duval/St. Johns, Osceola, Brevard, Leon, Polk, and Indian River counties.
- On May 14, 2005, this office assisted the Tallahassee SAFE KIDS chapter with the annual Southwood Kids Fest event. More the 300 bike helmets were fitted and distributed during this all day event.
- This office plans to conduct a SAFE KIDS Florida coordinators meeting on August 1, 2005. All eleven local coalition coordinator's and six chapter coordinators will be invited to attend. Bike safety education and National SAFE KIDS updates will be discussed during this meeting.

- The SAFE KIDS Florida Advisory Board will meet August 2, 2005, in Tampa. FedEx, Kinko's and Florida's Pinch-A-Penny paper will be making presentations to the board about their organizations, their interest in partnering with Florida SAFE KIDS Advisory Board and assisting with our injury prevention interventions.
- For more information, please contact Ralph Salvas at (850) 245-4440, ext. 2688.

THE CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC) INJURY CAPACITY BUILDING GRANT

- The Office of Injury Prevention applied for Part A - Integrated Core Injury Prevention and Control Program and the Bureau of Brain and Spinal Cord Injury applied for Part D - Traumatic Brain Injury Service Linkage Program.
- The grant is proposed for five years August 1, 2005–July 31, 2010. Part A will be \$120,000 per year and Part D is \$ 50,000 per year.
- Awardees should be notified by July 1, 2005.

SUICIDE PREVENTION EFFORTS

- Legislative bills, SB 210 and HB 449, relating to suicide prevention, died in committees. The bills would have established a Statewide Office of Suicide Prevention, created a statewide coordinator position and established the Suicide Prevention Coordinating Council.
- The Florida Task Force on Suicide Prevention, chaired by Mr. Jim McDonough, Director of Office of Drug Control, has applied for the Substance Abuse and Mental Health Services Administration (SAMHSA) State Youth Suicide Prevention and Early Intervention Grant. The grant award is expected to be approximately \$400,000 for three years for 14 states.
- The Florida Task Force on Suicide Prevention rolled-out the Florida Suicide Prevention Strategic Plan on March 30. A meeting is being planned in the early fall at Camp Blanding to create an action plan for the strategic plan.
- For information on the above or a copy of the Florida Suicide Prevention Strategic Plan, please contact Lisa VanderWerf-Hourigan at (850) 245-4440, ext. 2776.

Office of Trauma

Contact Susan McDevitt, R.N., Executive Community Health Nursing Director, Division of Emergency Medical Operations, at (850) 245-4440, extension 2760, for further information.

LEGISLATION

House Bill 497

Creates the Anjelica and Victoria Velez Memorial Traffic Safety Act. This Act requires traffic citation forms to include a check box indicating a failure to stop at a traffic signal; revises the penalty for a moving violation of a traffic control signal steady red indication and of a traffic control device when a driver fails to stop at a traffic signal; provides for distribution of moneys collected; requires the Department of Highway Safety and Motor Vehicles to identify a person who has committed a second moving violation of a stop light or of a traffic control device and require such person to complete a driver improvement course; provides for cancellation of license for failure to complete said course; assigns a point value for the conviction of a moving violation of a traffic control signal steady red indication or of a traffic control device; provides for distribution of funds to trauma centers; authorizes trauma centers to request that such funds be used as intergovernmental transfer funds in the Medicaid program; provides for audits and attestations; provides an appropriation. Bill was submitted to Governor and approved on June 10, 2005. The bill will become effective October 1, 2005.

House Bill 1697

Any person electing to appear before the designated official or who is required so to appear shall be deemed to have waived his or her right to the civil penalty provisions of s. 318.18. The official, after a hearing, shall make a determination as to whether an infraction has been committed. If the commission of an infraction has been proven, the official may impose a civil penalty not to exceed \$500, except that in cases involving unlawful speed in a school zone or, involving unlawful speed in a construction zone, or involving a death, the civil penalty may not exceed \$1,000; or require attendance at a driver improvement school, or both. If the person is required to appear before the designated official pursuant to s. 318.19(1) and is found to have committed the infraction, the designated official shall impose a civil penalty of \$1,000 in addition to any other penalties and the person's driver's license shall be suspended for 6 months.

If the person is required to appear before the designated official pursuant to s. 318.19(2) and is found to have committed the infraction, the designated official shall impose a civil penalty of \$500 in addition to any other penalties and the person's driver's license shall be suspended for three months. If the official determines that no infraction has been committed, no costs or penalties shall be imposed and any costs or penalties that have been paid shall be returned. Moneys received from the mandatory civil penalties imposed pursuant to this subsection upon persons required to appear before a designated official pursuant to s. 318.19(1) or (2) shall be remitted to the Department of Revenue and deposited into the Department of Health Administrative Trust Fund to provide financial support to certified trauma centers to assure the availability and accessibility of trauma services throughout the state. Funds deposited into the Administrative Trust Fund under this section shall be allocated as follows:

- (a) Fifty percent shall be allocated equally among all Level I, Level II, and pediatric trauma centers in recognition of readiness costs for maintaining trauma services.
- (b) Fifty percent shall be allocated among Level I, Level II, and pediatric trauma centers based on each center's relative volume of trauma cases as reported in the Department of Health Trauma Registry.

Bill was approved by the Governor on June 8, 2005. The bill will become effective October 1, 2005.

STATE TRAUMA SYSTEM PLAN

Annual report for 2005 being prepared with an anticipated completion date of July 2005. Executive Summary through June 30, 2005, prepared and distributed.

TRAUMA SITE SURVEY

The following facilities were reviewed:

- West Florida Regional Medical Center Level II April 4
- Shands at the University of Florida Provisional Level I May 2 & 3
- Orlando Regional Medical Center Level I June 6 & 7

The following facilities will be reviewed in the 3rd and 4th Quarters:

- St. Mary's Medical Center Level II July 11
- Delray Medical Center Level II July 12
- Shands Jacksonville Medical Center Level I August 1 & 2
- Halifax Medical Center Level II August 3
- Jackson Memorial / Ryder Trauma Center Level I September 12 & 13

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|-----------------------------|----------|-----------------|
| • Miami Children's Hospital | Peds | September 14 |
| • Tampa General Healthcare | Level I | October 24 & 25 |
| • St. Joseph's Hospital | Level II | October 26 |

LETTER OF INTENT

In accordance with section 395.4025(2)(a), Florida Statutes, the Letter of Intent, DH Form 1840, will be mailed to all licensed acute care hospitals on July 29th, to apply to become a trauma center. A hospital that is currently approved and seeks to add another level of service must also submit a Letter of Intent as provided by the statute and rules.

As a result of legislation from Legislative Session 2004, the Department of Health may only consider applications from hospitals that are located in trauma services areas where there is no existing trauma center.

Submission of a Letter of Intent does not, however, obligate a hospital or trauma center to submit an application. For the department to consider the Letter of Intent, the Letter of Intent form must be completed and returned to the department. Letters of Intent postmarked earlier than September 1, 2005, or later than midnight, October 1, 2005, shall not be accepted by the department. Facsimile transmissions of Letters of Intent will be accepted until an original is submitted. No later than October 15, 2005, the department will send a copy of the approval standards and an application packet to all facilities submitting Letters of Intent.

If you have any questions concerning the Trauma Site Survey or the Letter of Intent process, please call Bernadette Behmke at (850) 245-4440, ext. 2756.

RULE DEVELOPMENT WORKSHOP

Amended rule became effective June 9, 2005. The amendments eliminate obsolete language in 64 E-2, Florida Administrative Code (F.A.C.). A rule hearing was conducted in Tallahassee on February 23, 2005. Comments were received from affected parties and changes were made accordingly. The Notice of Change was published in the Florida Administrative Weekly on March 18, 2005. The rule was adopted on June 9, 2005.

TRAUMA SYSTEM PLAN IMPLEMENTATION

The State Trauma System Plan Implementation Committee met on April 14, 2005. The committee addressed the following items:

- Comprehensive Assessment of the Existing Trauma System conducted by the University of South Florida – recommendations were reviewed
- Section 64-2, Florida Administrative Code Revisions
- Proposed Trauma Related Legislation – SB 1284, HB 497, and HB 1697
- HRSA Hospital Preparedness Burn Grant
- Three Year HRSA Grant (2005-2008) – Over/Under Triage Study
- Trauma State Plan Timeline Update through March 31, 2005 reviewed
- Five Year Trauma System Plan (2006-2111) reviewed/revised

TRAUMA AGENCIES

Accomplishments include the following:

- Powers, Benefits, and Responsibilities of a Trauma Agency and minimum staffing requirements for trauma agencies being used as educational materials for potential new trauma agencies.
- Ongoing contact with local governments interested in becoming a trauma agency.
- Approval of position paper on minimum staffing for trauma agencies.

TRAUMA TRANSPORT PROTOCOLS

- 39 TTPs for EMS providers have been approved with the licensure renewal process. No adverse outcomes noted. North Central Florida Trauma Agency developed a uniform trauma transport protocol for all EMS providers in their region.

If you have any questions concerning the Trauma System Plan Implementation, Trauma Agencies, or Trauma Transport Protocols, please call George Schaffer at (850) 245-4440, ext. 2775.

TRAUMA REGISTRY

- The trauma registry data has been collected for the complete calendar year 2004 and is being verified and prepped for the production of an annual report.
- An application has been submitted to the American College of Surgeons for the complete National Trauma Data Bank (NTDB) data set to be used for comparing and benchmarking Florida trauma center performance. The registry staff will also be submitting Florida Trauma Registry data to the NTDB for use at the national level.

- HRSA Trauma-EMS project is adding 2004 data from providers and preparing to work with a consultant on completion and verification of a final method and report.
- Quarterly reporting of Quality Indicators has been transferred to the registry staff. The reports for 2004 have been compiled and placed in a usable format for feedback to trauma centers. Registry staff is working on proposed uniform reporting formats and definitions for implementation in July 2005.
- An on-site process for verification of registry data accuracy has been created, as well as a supporting data entry and report program. Development began in April and was completed with utilization on two site surveys.
- A trauma center registry staffing survey was completed in April 2004 and will be compared with data quality for feedback to trauma centers upon completion of the annual report data.

If you have any questions concerning the Trauma Registry, please call Brent Mason at (850) 245-4444, ext. 3286.

VENTILATOR DEPENDENT PATIENT PROJECT UPDATE

- AHCA developed and submitted a \$3.5 million legislative budget request for 2005 – 2006.
 - ◆ Outcome: the legislative budget request was vetoed.
- Ventilator dependent draft standards reviewed with AHCA, FHCA and FHA, 1/05 – 3/05 and 5/05.
- Performance Improvement Grant submitted 10/04 was denied 11/04 for \$10,000 project implementation. Performance Improvement Grant drafted 6/05.
- Reviewed Christopher Reeves, \$200,000 grant application 2/05 and 5/05 with BSCIP staff for potential funding.

BRAIN INJURY ASSOCIATION OF FLORIDA UPDATE

- 10,000 posters and the fact sheet have been distributed to the acute care hospitals, year to date, public health departments, EMS providers and school systems. Because of the education programs, there was a decrease of 1,400 patients admitted to hospitals from 6/04 – 12/04 and 800 patients from 1/04 – 6/05.

HEALTH RESOURCES AND SERVICES ADMINISTRATION GRANT

- HRSA grant for the project "Reaching Florida's Providers Regarding TBI", received May 2003 for \$150,000 annually. Mild Traumatic Brain Injury video is being developed for nurses, physicians and health care professionals, projected date for completion 3/05.
- The curriculum goals/objectives and evaluation process for Continuing Education was implemented 10/04 and program evaluation was implemented 12/04 - 02/05 and 3/05 - 6/05.
 - ◆ Outcome: a total of 2,500 RNs have been educated from 3/05-6/05.

MASS CASUALTY EVENTS AND MILD TRAUMATIC BRAIN INJURY

This project created an interactive CD-ROM training package to train 5,000 hospital staff in the diagnosis and treatment of mild brain injury. Program evaluation for content, objectives and resources was implemented 6/05. Year to date 1,200 emergency room nurses from acute care hospitals and trauma centers have been trained.

BURN CARE AND BURN CAPACITY

- Florida currently has 20 designated trauma centers (including designated pediatric trauma centers) and four burn units that total 60 beds statewide. Current burn bed occupancy rate is 98%, in an emergency this number of burn beds (including beds in trauma centers) can be expanded to 240.

Accomplishments

The trauma and burn care initiative accomplishments have included the following:

- 21 trauma centers and 254 EMS Providers have received a burn care curriculum.
- 21 burn care contracts for supplies and education have been executed.
- Program evaluation implemented 11/04 and 02/05.
- 2005 HRSA Hospital Preparedness Grant recipient of \$11.5 million for Trauma and Burn care 11/04.
- 2005 HRSA grant implemented for non-trauma hospitals. The Burn Care Task Force approved 30 non-trauma center acute care hospitals based on population, number of licensed acute care beds, JCAHO survey, AHCA inspections, and results of a survey for licensure, life safety, risk management, and complaints. The following is a breakdown of burn care dollars to be received by non-trauma acute care hospitals. *Trauma Carts*: Developed based on ATLS guidelines for the ability to surge to 50 patients per center.

\$800,000 allocated at \$26,998.80 per community non-trauma center acute care hospital. *Burn Care Supplies and Equipment:* The list of burn care supplies and equipment was approved by the Burn Care Task Force, Burn Care Chairman, and Trauma Medical Director. The Statewide Advisory Committee allocated \$4.7 million for burn supplies and equipment and burns training. Of this, \$3,600,000 is being allocated for burn care supplies and equipment. Each community non-trauma center acute care hospital will receive an offer of \$120,000. *Training and Education:* Of the \$4.7 million for burn care, \$1,100,000 will support burn education at the 30 community non-trauma center acute care hospitals. Each community non-trauma center acute care hospital will receive an offer of \$36,667. The target audience for the burns training includes a core group of physicians (general surgeons, orthopedics, and plastics), nurses (from the E.D., O.R., I.C.U., and Med./Surg.) and respiratory therapists.

- 2005 HRSA grant implemented for Trauma Hospitals. 21 trauma centers received \$252,000 for ICU surge capacity. Trauma Carts developed for the ability to surge to 50 patients per center.

DISASTER PLAN

- Division of Emergency Medical Operations, Disaster Operational Plan, Office of Trauma – completed 8/30/2004, approved 12/04, and implemented 3/05 and 5/05.
- Continuity of Operations Plan for Office of Trauma reviewed and revised 6/05.

SENATE INTERIM REPORTS

2004-108 November 2003 – Review of Trauma Care Planning and Funding in Florida

Recommendation

- The department should consider a regional approach to trauma planning which integrates with domestic security regions.

Outcome

- Included in the Trauma System Study, 395.402(2) (e) F.S completed 03/05. Will be discussed at the Trauma State Implementation meeting on 7/05.

Recommendation

- The department should update the state plan more often than five years, if circumstances dictate the need.

Outcome

- Included in the annual evaluation guidelines; completed 3/05, 395.402(3)(a-k).
- State Plan being revised for 2006-2011 - will be discussed at the Trauma State Implementation meeting on 7/05.

Recommendation

- The department should update the current state plan to include results of action plans in order to attain a state plan which is more operationally oriented.

Outcome

- Trauma system study 395.402 F.S. completed 2/05.

Recommendation

- The department should conduct an outcome evaluation to determine the short and long-term differences of trauma care versus traditional emergency room care.

Outcome

- Trauma System study completed 2/05, 395.402(3)(a-k) F.S.
- Outcome evaluations for effectiveness will be developed based on study and implemented 6/05.

Recommendation

- The department should propose statutory changes to eliminate obsolete language and to update chapter 395, Part II, F.S., as necessary.

Outcome

- Rule development completed 11/04, Rule adopted 6/05.

2004-148 December 2003 – Hospital Response Capacity

Recommendation

- Consider adoption of the seven statutory designated Regional Domestic Security Task Force regions as the statutorily required State Trauma Regions. Maintain the 19 statutorily designated “Trauma Service Areas”.

Outcome

- Incorporated in trauma system study, 395.402(2) (e) F.S completed 02/05. Will be discussed at the Trauma State Implementation meeting 7/05.

Recommendation

- Monitor the ongoing drafting process of the Florida Hospital Disaster Response Plan to assure a timely and complete plan is prepared and disseminated. Draft to be completed 6/05.

Outcome

- Mass Casualty meeting held on 5/04 and 5/05 in Washington, D.C.

Recommendation

- Review Domestic Security State Working Group and Oversight Board prioritization of HRSA grant allocations to assure focus on maximization of trauma, burn and emergency response capability across the state.

Outcome

- Hospital Surge capacity completed per trauma center 12/03; revised 7/04 and 6/05. HRSA burn care grant submitted 9/03; Hospital Preparedness grant for \$3.8 million (bombs, burns, blasts) on 7/04, for \$11.5 million for 2004, projected 2005 budget \$15 million.

Recommendation

- Continue to monitor ongoing issues related to trauma center funding. While these funding issues are largely operational in nature, (i.e. specialty staffing), the result of reduction in the number of trauma centers due to the lack of such funding may result in reduction in available emergency response capability.

Outcome

- Veto of the \$20,700,000 to the 20 trauma centers and existing hospitals with a Level I trauma center application completion date of 7/04.
- \$300,000 money allotted for comprehensive trauma assessment study completed 2/05.
- HB 497 and HB 1697 passed 6/05.

If you have any questions concerning the Ventilator Dependent Patient Project, HRSA, Mass Casualty Events and Mild Traumatic Brain Injury, Burn Care, the Disaster Plan, or Senate Interim Reports please call Susan McDevitt, Florida Department of Health, (850) 245-4440, ext. 2760.