



**NORTHWEST  
COMMUNITY  
EMERGENCY  
MEDICAL  
SERVICES  
SYSTEM**

Northwest Community Hospital  
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Date: March 31, 2017

**System Memo: # 364**

To: All System Members

From: Connie J. Mattera, M.S., R.N., EMT-P  
EMS Administrative Director

Matthew T. Jordan, MD, FACEP  
EMS Medical Director

RE: **Updated Policies: B1 Bypass; C2 Continuing Ed**

Updates to two policies have been approved by the Advisory Board with discussion and approval by the Chiefs and EMS Coordinators. Education Comm also approved C2. **Please distribute to all EMS personnel.**

#### **B1: Bypass – Take away points:**

- Region IX approves the concept of partial bypass based on specific limited resources
- Adds current IDPH Rule language: (Source: Amended at 40 Ill. Reg. 8274, effective June 3, 2016)
- Defines EMTALA requirements preventing diversion of ambulances once on hospital property
- Brings policy language into compliance with current IDPH law and Rules
- Adds specialty capabilities that may have resource limitations, e.g., (stroke, PCI/STEMI Receiving Center, Level III Neonatal Intensive Care Unit (NICU) and Emergency Departments Approved for Pediatrics (EDAP)
- Adds examples of internal disasters that may cause a hospital to go on bypass, including lockdown situations
- Adds very specific limited resources that would allow a hospital to go on “partial bypass” per se, for Stroke Centers, Trauma Centers, and STEMI centers
- Updates how and where to notify IDPH of daily bed reporting, peak census, and bypass status
- Emphasizes the steps hospitals should take to avoid declaring bypass
- Allows stricken hospitals to consult the IDPH Daily Hospital Resource Availability Tracking System to see how their neighboring hospitals are doing. Defines when phone calls shall be made.
- Allows use of mass notification systems such as Everbridge to contact hospitals and providers
- Defines a Patient Distribution Plan and expands the sections on when hospitals may continue to receive patients while on bypass- especially those patients that Lutheran General will take.
- Adds Dr. Jordan’s contact info; adds IDPH Region IX EMS Coordinator Joyce McNamara contact information
- Updated Bypass Notice form adding Dispatch Centers and updating numbers for ABMC and NCH
- Updated Peak Census /Pre-Alert Bypass form and Bypass worksheet

#### **C2 Continuing Education**

- Defines CE hours by type and number per year from IDPH Rules, adding emphasis on peds CE
- Expands the drivers of CE content for our System
- Modifies # of instation classes a member primary in this System must complete annually from 8 to 9
- Adds previous agreements about student: instructor ratios for skill classes to policy; adds option of using a Peer Educator to conduct second skill station without needing additional classes scheduled
- Adds options for making up completely or partially missed classes
- Expands number of classes for which credit questions can be submitted from 2 to 4 and adds hardship language that may extend those limits
- Redefines grading fees and late fees, allows electronic submission of credit questions, and provides hardship language that would result in waiving the fees
- Provides options for making up skill component of missed classes
- Adds section on Advanced Airway competency assessments, previously agreed to in Jan 2017
- Expands substantially additional options for accruing CE hours and how to verify attendance
- Redefines CE hours that can be awarded for System Entry based on the new exam/lab process
- Adds stroke units at ABMC and NCH for those wishing discretionary clinical time