**Section 515.210 EMS Regional Plan Development**

a) *Within six months after designation of an EMS Region, an EMS Region Plan addressing at least the information prescribed in* Section 515.220 *shall be submitted to the Department for approval. The plan shall be developed by the Region's EMS Medical Directors Committee with advice from the Regional EMS Advisory Committee; portions of the plan concerning trauma shall be developed jointly with the Region's Trauma Center Medical Directors or Trauma Center Medical Directors Committee, whichever is applicable, with advice from the Regional Trauma Advisory Committee, if such Advisory Committee has been established in the Region.* (Section 3.25(a) of the Act)

b) *Portions of the Plan concerning stroke shall be developed jointly with the Regional Stroke Advisory Subcommittee* as identified in Section 515.5004*.* (Section 3.25(a) of the Act) The Director will coordinate with and assist the EMS System Medical Directors and Regional Stroke Advisory Subcommittee within each EMS Region to establish *protocols* related to the *triage, treatment, and transport of possible acute stroke patients* by licensed emergency medical services providers. (Section 3.30(a)(9) of the Act)

c) The Regional Stroke Subcommittee shall provide updates to the Regional EMS Advisory Committee at the Regional EMS Advisory Committee's regularly scheduled meetings. The Plan shall also be updated at least annually to consider the most current nationally recognized standards of stroke care and to incorporate each Comprehensive Stroke Center, Primary Stroke Center or Acute Stroke-Ready Hospital into the Region Plan.

d) *A Region's Trauma Center Medical Directors may choose to participate in the development of the EMS Region Plan through membership on the Regional EMS Advisory Committee, rather than through a separate Trauma Center Medical Directors Committee. If that option is selected, the Region's Trauma Center Medical Director shall also determine whether a separate Regional Trauma Advisory Committee is necessary for the Region.* (Section 3.25(b) of the Act)

e) *In the event of disputes over content of the Plan between the Region's EMS Medical Directors Committee and the Region's Trauma Center Medical Directors or Trauma Center Medical Directors Committee, whichever is applicable, the Director of the Illinois Department of Public Health shall intervene through a* review in accordance with Section 515.230. (Section 3.25(c) of the Act)

f) If after six months a Plan or portions of a Plan are not submitted, the Director will contact the EMS Medical Directors to seek input as to disputes, problems, or issues concerning areas not developed in the Plan. If necessary, the Director will contact members of the Regional EMS Advisory Committee to seek input into portions of the Plan that are not agreed upon. After consulting with the Committee and reviewing the plans submitted by the surrounding Regions, the Director will develop proposed policies and procedures for the Region. The Committee shall approve these policies within 30 days or submit its own policies to the Director for approval. If the Committee has not submitted a complete Plan after 30 days, the Region will implement the policies and procedures developed by the Director in its EMS Region Plan.

g) *Every 2 years, the members of the Region's EMS Medical Directors Committee shall rotate serving as Committee Chair, and select the Associate Hospital, Participating Hospital and vehicle service providers* that *shall send representatives to the Advisory Committee, and the EMS Personnel and nurse who shall serve on the Advisory Committee.* (Section 3.25(d) of the Act) Each System in the Region must have at least one representative on the Committee.

h) *Every 2 years, the members of the Trauma Center Medical Directors Committee shall rotate serving as Committee Chair, and select the vehicle service providers, EMS Personnel, emergency physician, EMS System Coordinator and TNS who shall serve on the Advisory Committee.* (Section 3.25(e) of the Act) It is recommended that the committee chair be held by Trauma Center Medical Directors of the Level I Trauma Centers in the Region.

(Source: Amended at 40 Ill. Reg. 8274, effective June 3, 2016)