

**ILLINOIS EMERGENCY MEDICAL SERVICES FOR CHILDREN
ADVISORY BOARD
Meeting Minutes
December 1, 2017**

Present: Paula Atteberry (IDPH)⁺, Christine Bishof (ISMS)*, Young Chung (American Red Cross)*, John Collins (IEMTA), Darcy Egging (IENA)*, Dylan Ferguson (EMS Coordinator)*, Jack Fleearty (IDPH)⁺, Susan Fuchs, Chair (Natl. Assn EMS Physicians), Jeanne Grady (IL DSCC)*, Angelica Hernandez (School Health Program, IDPH), Evelyn Lyons (IDPH/EMSC), Lubna Madani (IAFP)*, Theresa Martinez (Pediatric Rehab representative), Kimberly Pate Godden (ISAA)*, Laura Prestidge (EMSC), Kristen Tindall (IHA)*, Michael Wahl (IHA/MCHC), J. Thomas Willis (IL Fire Fighters Assn). **NON-BOARD MEMBER ATTENDEES:** Emily McDowell (UnityPoint Health – Trinity, Rock Island)⁺

Excused: Jean Becker (IDPH School Health Program), Mark Cichon (Loyola), Amy Hill (SafeKids), Ruth Kafensztok (EMSC), Teresa Riech (ICAAP)

Absent: Frances Collins (DCFS), Joseph Hageman (ICAAP), Mike Hansen (IFCA), Kevin Katzbeck (Family representative), Denise McCaffrey (Prevent Child Abuse-Illinois), Bonnie Salvetti (ANA-Illinois), Kathy Swafford (ICAAP)

*Via teleconference

⁺Via video-conference site

TOPIC	DISCUSSION	ACTION
Call to Order	Susan Fuchs called the meeting to order at 10:04am.	None
Introductions	Introductions were made.	None
Review of 9/8/2017 Meeting Minutes	The September 8, 2017 meeting minutes were reviewed and approved. Tom Willis made a motion for approval; Mike Wahl seconded the motion. All in attendance agreed to approve the minutes.	Minutes approved
Announcements/ Updates	<p>Susan Fuchs reviewed the following announcements/updates:</p> <ul style="list-style-type: none"> ▪ <i>REMINDER</i> – Board members need to complete their Ethics Training and submit the signed <i>Acknowledgement of Participation</i> page to Evelyn.Lyons@illinois.gov ▪ Board vacancies - Trauma representative, ICEP representative ▪ Other organizational reports/updates <ul style="list-style-type: none"> ○ DCFS – no report ○ IHA – Mike Wahl noted that IHA is working with ICEP to develop statewide opiod prescribing guidelines for emergency departments. A 5-person workgroup developed the guidelines which then underwent a review process by stakeholders. The guidelines will be finalized soon, and the hope is that IDPH will approve for their logo to be placed on the guidelines document. ○ SafeKids – Evelyn read a written report from Amy Hill. Currently 7 coalitions in the state - a Decatur coordinator is needed. Safe on the Road program – Distributed 1,100 child safety seats with 12 partner organizations at 17 sites and taught 17 free workshops for community members and health care providers; Kicked off Buckle Up for Life program funded by Toyota with 4 car seat workshops at Casa Central in Humboldt Park; Provided 75 free car seats to Head Start families at these events. Applied for a grant from Motorola for safety devices for kids with special needs-particularly hearing impaired and autism spectrum. Partnered with Goldfish Swim School on Sensory swims at 4 Chicagoland locations - these events target children on autism spectrum. Received funding from AAP for a pilot safe sleep initiative. Received funding from Safe Kids Worldwide for a small carbon monoxide prevention grant. Cut the ribbon on 11/28 at a 	<p>Evelyn will ask the state trauma program to share info re the trauma rep vacancy; ICEP will also be contacted since they have a board meeting next week.</p> <p>Send any new announcements to Evelyn Lyons for future meetings</p>

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	<p>new playground at Catholic Charities Chicago Lawn Head Start – funding from Bank of America.</p> <ul style="list-style-type: none"> ▪ Educational Opportunities <ul style="list-style-type: none"> ○ <i>Pediatric Emergency Medicine Network</i>. Educational web based tools by AAP. Need to establish an account to access the site but it is free to join. Visit: http://moodle.pemfellows.com/ ○ <i>EMSC Online Courses</i>, University of New Mexico, Department of Emergency Medicine, http://hsc.unm.edu/emered/PED/emsc/training/course.shtml ○ <i>EMSC Online Courses</i> - https://www.publichealthlearning.com ○ Other educational opportunities at www.stitch.luc.edu/emsc 	
<p>IDPH, Division of EMS & Highway Safety Report</p>	<p>Jack provided a Division of EMS report:</p> <ul style="list-style-type: none"> ▪ <i>Update on EMS grants:</i> FY2018 EMS Assistance Fund Grant awards/denials have been sent to all applicants. This year the Department received 30 EMS Assistance Grant applications and awarded 22 grants in the amount of \$65,000. ▪ <i>Heartsaver AED:</i> The Heartsaver AED grant will not be available for FY2018 due to lack of funding. ▪ <i>EMS Week:</i> Please remember that the Department accepts Hero award applications at any time throughout the year. ▪ <i>Regulatory Update:</i> The EMS New Education Rule amendments were approved by the EMS Advisory Council and will be moved to first notice for public comment. The draft of the EMSC Rule amendments were approved by this board and are now with legal for review. ▪ <i>Legislative Update:</i> The Department has drafted proposed rules for PA100-0108 (HB2661) which states that EMS may transport a police dog injured in the line of duty to a veterinary clinic or similar facility if there are no persons requiring medical attention or transport at that time. These amendments have been sent to legal for review. The Department also drafted proposed rules for PA 100-0255 (HB1952) which provides that an ambulance assistance vehicle provider may submit a proposal to the EMS Medical Director requesting approval of specified ambulance assistance vehicle provider in-field service level upgrades. ▪ <i>Trauma Updates:</i> MercyHealth Rockton Avenue Campus (formerly Rockford Memorial Hospital) has been designated as a Pediatric Level II Trauma Center. ▪ <i>IDPH Stroke Updates:</i> To date, there are 154 hospitals in Illinois with one of 3 stroke designations (ASRH = 79; PSC = 65; CSC = 10). As of 9/6/2017, the Stroke fee fund is \$78,591.35. ▪ <i>Prehospital Data Program:</i> The statewide migration from Version 2 to Version 3 of the NEMESIS national standard for EMS data continues, with 300 EMS agencies currently submitting Version 3 data and almost 300,000 Version 3 run report records in the state database at this time. Currently there is a backlog of approx 250,000 records sent to the state and awaiting processing. The EMS Division has purchased additional hardware to improve processing speed, so the backlog should be cleared within the next few weeks. Illinois plans to participate in a pilot of a CDC NIOSH surveillance system tracking exposure, injury, and death data among Illinois EMS crewmembers. ▪ <i>Bypass and Bed Availability Reporting:</i> A Burn Surge View has been migrated out to all EM Resource regions at the request of the Burn Surge Advisory Group. This supplements the Pediatric Surge View migrated out in April. Expanded use of EM Resource to capture EMS availability-vs-capacity information during the August solar eclipse worked well and may be used as a pilot for implementing similar reporting capabilities throughout the state. 	<p>FYI</p>

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	<ul style="list-style-type: none"> ▪ <i>EMS Licensing YTD:</i> New licenses processed (5,392); Renewals processed (7,045); Reciprocity processed (400). The Department currently has 64,441 licensees in the system. ▪ <i>Ambulance Compliance program:</i> The Section Chief position in the Ambulance Compliance program is still vacant. ▪ <i>Other:</i> The Department is witnessing a lot of EMS Providers moving between systems. Jack encourages EMS Coordinators and Medical Directors to work together to ensure a smooth transition. The Department is also finding providers who do not have FCC licenses to operate on MERCI as part of the application review process. This has caused delays. ▪ <i>Meetings:</i> The Division of EMS facilitated 3 educational meetings for EMS System Coordinators, Trauma Coordinators, and staff educators. The meetings were well attended. ▪ <i>EM Track:</i> In June, the department sponsored additional training for EMS Systems and EMS providers on utilizing the EM Track software. During the summer floods, some nursing homes had to evacuate and the software can be helpful in such situations. ▪ The Division continues to work on multiple investigations and complaints. Jack thanks the EMS Coordinators and Medical Directors who help to resolve some of the issues that are identified. 	
Federal EMSC Updates	<p>Sue and Evelyn reviewed the following:</p> <ul style="list-style-type: none"> ▪ The new EMSC/HRSA State Partnership Competing Continuation NOFO was recently released with a due date of 1/8/2018. It was anticipated for release 2 months ago, so this delay will impact on the start date of the grant which will now be April 1, 2018. This requires each state to find funding to bridge the one month gap since the grant cycle typically begins on March 1st. Sue reviewed each of the 7 grant objectives and 6 activities that need to be addressed through the new grant, which will run over a 4 year cycle from 4/1/2018 – 3/31/2022 ▪ National EMSC Survey/Assessment of EMS agencies in Illinois – this survey is being conducted across the country to identify state baseline information for the new EMSC Performance Measures. <ul style="list-style-type: none"> ○ Every state is required during the current grant year to conduct a survey of EMS agencies to obtain info related to access to a pediatric care coordinator and conduction of pediatric skill competency. ○ Illinois was assigned to complete the survey over a 3 month timeframe from September thru November. 329 EMS agencies were selected thru sampling to participate in the assessment. ○ Federal EMSC charges each state to minimally obtain 80% survey completion. As of November 30th, Illinois had 280 EMS agencies complete the survey (85.1%). Special thanks to all the assistance from the EMS System Coordinators in encouraging their agencies to complete the survey. ▪ National EMSC Quality Improvement Collaborative <ul style="list-style-type: none"> ○ This is a new collaborative through National EMSC plans, which will run from 1/2018 – 12/2019. This collaborative is aimed at improving hospital pediatric readiness scores by 10 points in the states that participate. Several hospitals in Illinois volunteered to participate in the collaborative as a training site or participant hospital. The project will work with hospitals on the following key areas of focus: Recording pediatric patient weight in kilograms; Developing a notification process for abnormal vital signs; Integrating inter-facility transfer guidelines; Establishing disaster plans that include children. 	FYI

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Pediatric Preparedness Workgroup	<p>Laura reviewed the following:</p> <ul style="list-style-type: none"> ▪ <i>Pediatric Care Medical Specialist (PCMS)</i> – The PCMS team is a new team within the Illinois Medical Emergency Response Team (IMERT), and will provide remote pediatric consultation during a disaster. An in-person orientation that Laura coordinated in September resulted in several new physician and advanced practice nurse team members. ▪ <i>DRAFT Evacuation Guidelines</i> – The NICU Evacuation Guidelines are undergoing revision. The scope of the document will expand to address evacuation of all level nurseries, PICU, pediatric inpatient units.. ▪ <i>Disaster Mental Health module</i> – The new site code for the module has been obtained, and the updated module will be posted on the UIC Learning Management system soon. ▪ <i>At-Risk Populations Annex Steering Committee</i> – EMSC has been charged with this new initiative which requires development of another annex to the ESF-8 Plan. In the past, EMSC has developed the Pediatric & Neonatal Surge Annex, Burn Surge Annex and the Catastrophic Incident Response Annex. This annex will address a variety of vulnerable populations (ie pregnant women, chronic medical/mental health conditions, homeless, limited English proficiency, etc). A steering committee was convened on 11/29 with good discussion and identification of a framework for the annex. Future meetings to be scheduled. 	FYI
EMSC Data Initiatives	<p>Evelyn noted that updates that Dan Leonard had made to the EMS Reporting System are still pending upload to the IDPH website by IDPH IT. It was reported at the September meeting that Dan’s position was terminated by Loyola effective September 30th. He sent an email with appreciation for everyone’s assistance over the years, and wishes all the best to the board and those he has worked with on EMSC activities.</p>	We wish Dan the best in his future endeavors.
Facility Recognition and QI Committee	<p>Susan Fuchs and Evelyn Lyons reported on the following:</p> <ul style="list-style-type: none"> ▪ There are two new SEDP recognized hospitals <ul style="list-style-type: none"> ○ OSF Holy Family Medical Center, Monmouth (Region 2) ○ Franklin Hospital, Benton (Region 5) ▪ Region 9 – Site surveys are currently underway thru December 6th. ▪ Regions 3 & 6 renewal applications are due 1/26/2018. Their educational sessions were held: <ul style="list-style-type: none"> ○ Region 3: 9am-12pm on Friday, October 27th at Memorial Medical Center, Springfield ○ Region 6: 9am – 12pm on Tuesday, October 17th at Carle Foundation Hospital, Urbana ▪ Interfacility Transfer Workgroup project – Anne Porter and Bev Weaver (Facility Recognition & QI Committee), continue work on this project. They drafted a <i>Pediatric Interfacility Transfer Feedback Guidelines</i> document re communication/quality improvement information sharing between referral and receiving hospitals. Hopefully they will be available to present their work at the next board meeting. ▪ Current participation in the pediatric facility recognition program (111 hospitals) <ul style="list-style-type: none"> ○ PCCC/EDAP level = 10; EDAP level = 88; SEDP level = 13 ○ Note: In 2015, there were approximately 950,000 ED visits for 0-15 years of age. 78.7% of these visits took place in a PCCC, EDAP or SEDP. Of the 950,000, approximately 27,000 required admission with 95.3% of these admissions taking place in a PCCC, EDAP, or SEDP facility (Source: Illinois Hospital Assn Compdata) ▪ Susan Fuchs reviewed the following Regional QI updates: <ul style="list-style-type: none"> ○ Region 1: Work continues on improving pediatric pain management. They recently began focusing on staff education to identify remaining barriers to pain intervention. In 2018 they aim to develop 	FYI

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	<p>regional pediatric sepsis protocols and continue to improve pediatric disaster/reunification processes.</p> <ul style="list-style-type: none"> ○ Region 2: There are no new updates since their region has not met since the September committee meeting. Their focus continues on the pain management project. ○ Region 3: They are working on staff education for JumpStart Triage. Efforts include education sessions, disaster simulations with a pediatric component, and incorporating JumpStart as part of yearly competencies. ○ Region 4: The region is wrapping up the Special Needs Tracking & Awareness Response System (STARS) project, which is hosted by SSM Cardinal Glennon Children's Medical Center, and trains first responders, families, and local hospital ED staff in the management of special-needs children. Their 2018 focus will be to conduct an area-wide sexual assault project. ○ Region 5: They are working on a project to evaluate pediatric psychiatric care issues in the ED. ○ Region 6: Their region has finalized their head concussion family education materials, and is also working on interfacility transfer forms and feedback process. ○ Region 7: They are working on a pain management project, including use of pain medications and timeliness of treatment and reassessment. They have seen improvements except for waiting room patients, and will focus on that population. Also the region is planning its annual pediatric conference at Presence St. Joseph's Med Center on January 20, 2018. ○ Region 8: They wrapped up the project related to treatment of fever within 30 min and appropriate reassessment. Their 2018 focus will address the pediatric psychiatric population and assure obtaining vital signs, and provision of medication and nutrition needs. ○ Region 9: They are working on a head injury project using the PECARN algorithm to assess CT appropriateness CT, and have been undergoing site surveys. In 2018, they will focus on sepsis. ○ Region 10: Region 10 is working on a pediatric triage assessment monitor, and whether the ESI category has been correctly assigned. They are also continuing their work on co-sleeping. ○ Region 11: Region 11 continues work on pediatric sepsis. Their educational session was conducted on 11/14/2017 regarding child abuse and human trafficking. In 2/2018, they begin a focus on sepsis and will also work on education related to the Stop the Bleed campaign. 	FYI
<p>Update on Illinois EMSC Partnership Opportunity</p>	<p>Work continues to ensure a smooth transition of the EMSC program to Lurie Children's, and includes working with the Lurie web folks to ensure a new website is developed. A training session will be held on 12/14 at Lurie's to review how EMSC staff can populate a web shell with EMSC web resources, etc. In addition, work has begun on developing the state partnership grant application.</p> <p>At Loyola, the multiple datasets that were used for the IDOT grant projects will need to be destroyed since the projects are no longer continuing. MOUs with each of the data owners/sources are being evaluated to assure proper procedures are followed.</p> <p>Evelyn reported that she discussed with Mark Cichon at Loyola the EMSC Fund account of \$67,685 (comprised of donations, contributions, school nurse balance funds), which has remained dormant for the past 10 years as an emergency fund for EMSC. He was unable to attend today's meeting, but he conveyed that he wants to ensure that all EMSC expenditures are cleared before proceeding with spending these funds. At the</p>	FYI

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	<p>last meeting, it was requested to submit recommendations for use of the funds. The following was submitted:</p> <ul style="list-style-type: none"> ○ Maintain as an emergency account and move to IDPH or Lurie’s ○ Utilize funds as one-month bridge for new EMSC Partnership grant ○ Payment of annual UIC Learning Management System fee (\$5,000) ○ Purchase Broselow tapes for distribution (particularly target rural/volunteer EMS agencies and CAH hospitals) ○ Purchase PEPP manuals for distribution <p>Tom Willis asked if the UIC LMS fee can be prepaid so that several years can be paid for. Evelyn will check with UIC on this.</p> <p>Sue Fuchs asked if the board was in agreement with the above recommendations or if anyone had other recommendations for use of the funds. There were no further recommendations. John Collins made a motion to send a letter to Mark Cichon from the board asking for his consideration of the above recommendations; Theresa Martinez seconded the motion. Sue Fuchs will draft a letter from the board</p>	<p>Evelyn will check with UIC if the LMS fee can be prepaid so that several years can be paid for.</p> <p>Sue Fuchs will draft a letter from the board re the use of funds recommendations.</p>
Education	<p>Planning activities will begin for the Summer 2018 School Nurse Emergency Care (SNEC) courses.</p> <p>Online EMSC educational modules now include: Pediatric Seizures, Pediatric DKA and the Pediatric JumpSTART Triage interactive module. All have received updated site codes for continuing education hours.</p>	FYI
Publications/ Presentations	<p>An EMSC poster “Accessing Pediatric Experts During Disasters: A State Pediatric Team Model” was presented at the National Healthcare Coalition Preparedness Conference in San Diego this week.</p>	FYI
Other	<p>Jack noted that HPP carryover funding was secured to purchase pedimates for EMS agencies, particularly in rural areas. However due to HPP requirements, IDPH would have to annually track and inventory these items. There is a possibility of funding another entity to purchase/distribute the items. Further discussion is needed.</p>	Evelyn will followup with Jack on this topic.
Upcoming meetings	<p>The 2018 meeting schedule was reviewed. NOTE that meetings will be on THURSDAYS. All meetings will be from 10:00am – 12:00pm at the Illinois Health & Hospital Association, with video and teleconference capabilities.</p> <ul style="list-style-type: none"> ▪ Thursday, March 29, 2018 ▪ Thursday, June 28, 2018 ▪ Thursday, October 4, 2018 ▪ Thursday, December 6, 2018 (Note: UnityPoint Health – Trinity location will not be available) 	A meeting reminder will be sent to all board members
Adjournment	<p>With no further business, the meeting was adjourned at 11:20am.</p>	None

Meeting minutes submitted by E. Lyons