

**Illinois Emergency Medical Services for Children
ADVISORY BOARD
Meeting Minutes
December 3, 2021**

Present: Christine Bishof (ISMS)*, Lydia Edokpayi-Aluyi (IHA)*, Susan Fuchs, Chair (Natl. Assn EMS Physicians)*, Jeanne Grady (IL DSCC)*, Sheree Hammond (DCFS)*, Kelly Jones (EMSC/IDPH), Evelyn Lyons (EMSC/IDPH)*, Theresa Martinez (Pediatric Rehab representative)*, George Paul (ICEP)*, Bradley Perry (EMS System Coordinator)*, Teresa Riech (ICAAP), Bonnie Salvetti (ANA-Illinois)*, Anna Sherry (Lurie/Pediatric Preparedness)*, Kendra Smith Cole (IL EMSC Family representative), Michael Wahl (Illinois Poison Center)*

Excused: Angelica Hernandez (School Health Program, IDPH), Amy Hill (SafeKids)*, J. Thomas Willis,

Absent: Lavanya Boddu (IAFP), John Collins (Illinois EMT Assn), Joseph Hageman (ICAAP), Mike Hansen (IFCA), Denise McCaffrey (Prevent Child Abuse-Illinois), Kimberly Pate Godden (ISAA), Paola Smith (ARC), Kathy Swafford (ICAAP)

Guests: Joyce McNamara (IDPH REMSC), Jason Keggs (Medical Director, Office of Preparedness & Response, IDPH)

*Via WebEx/teleconference

TOPIC	DISCUSSION	ACTION
Call to Order	Susan Fuchs called the meeting to order at 10:03am. This meeting is being held virtually due to Covid-19 restrictions. All were welcomed.	None
Introductions	Introductions were made.	None
Review of 9/17/2021 Meeting Minutes	The September 17, 2021 meeting minutes were reviewed and approved. Christine Bishof motioned for approval; Theresa Martinez seconded the motion. All in attendance were in agreement to approve the minutes.	Minutes approved.
Announcements/ Updates	<p>The following announcements/updates were reviewed:</p> <ul style="list-style-type: none"> ▪ <i>IDPH COVID-19 Youth & School Resources</i> – https://dph.illinois.gov/covid19/youth-school.html ▪ <i>Illinois COVID-19 Statistics</i> – https://dph.illinois.gov/covid19/data.html ▪ <i>SIDS of Illinois, Inc.</i> Receives IDPH funding to provide Safe Sleep education. www.sidsillinois.org ▪ <i>2021 National EMS Education Standards</i>, NHTSA Office of EMS. (NOTE: individual pediatric sections have been removed, with pediatric education components now incorporated throughout the standards). https://www.ems.gov/pdf/EMS_Education_Standards_2021_v22.pdf. ▪ <i>EIIC Trauma Improvement Sprint</i> (can assist trauma centers prepare for new ACS pediatric verification standards), on 2/23 & 3/2/2022. Register at https://emscimprovement.center/collaboratives/pwdc/trauma/. NOTE: Illinois is proposing a requirement in the rules that all trauma centers must participate in the pediatric facility recognition program. ▪ Update on Illinois EMSC State Partnership 4-year grant cycle 4/1/2018 – 3/31/2022 <ul style="list-style-type: none"> ▪ 4/1/2022 – 3/31/2023 grant (5th supplemental year of funding) will transition to IDPH <ul style="list-style-type: none"> ○ Focus on 9 HRSA/EMSC Performance Measures ○ Explore development of data/epidemiology capabilities within Division of EMS 	Board members are asked to share this information within their respective organizations and communities, as applicable.

TOPIC	DISCUSSION	ACTION
	<ul style="list-style-type: none"> ▪ <u>Stroke Program</u> - Currently there are 162 Acute Stroke Ready Hospitals, 83 Primary Stroke Centers, 60 Comprehensive Stroke Centers. This includes 19 new designations. ▪ <u>Trauma Registry</u> - The Trauma Center Fund Distribution amount this fiscal year is \$1.3 million (54% less than last year's distribution due to decrease in the collected traffic fines caused by pandemic lockdown). The IDOT grant application for the Trauma Registry Maintenance cost of \$112,500 has been approved for FY22, and FY23's grant application for the same amount has been submitted. ▪ <u>Regional EMS Coordinators</u> - Regional staff are: working with their Coalition (RHCC leads) in monitoring resource needs of hospitals including ventilators, PPE, or staffing applications through IEMA; fielding question regarding the vaccine mandates or testing requirements for healthcare workers within the hospitals and EMS Agencies; attending meetings and coordinating with State Emergency Response Coordinators and LHDs <p><u>Other Updates</u></p> <ul style="list-style-type: none"> ▪ Ashley Thoele, MSN, MBA, RN (Division Chief, EMS & Highway Safety) is currently also serving as Interim Deputy Director, Office of Preparedness & Response since Andrew Friend left for another position. ▪ An Illinois EMSC Newsletter will be rolled out in 2022, titled <i>The Bear Facts</i>. 	
<p>Federal EMSC Updates</p>	<p>Sue Fuchs reviewed the following</p> <ul style="list-style-type: none"> ▪ 2021 PedsReady Assessment of all hospitals with Emergency Departments in U.S. <ul style="list-style-type: none"> ○ Survey completed August 31, 2021 ○ Illinois response - 97.3% (179/184 hospitals participated) – however a few surveys are incomplete ○ National response: 3,664/5,146 ED's participated (These are preliminary findings) ○ Data report is pending from NEDARC and will be shared with each state soon. ▪ 2021 PedsReadiness Assessment of all EMS agencies in U.S. that respond to 911 calls <ul style="list-style-type: none"> ○ This survey will roll out in January 2022, however its challenging to conduct this survey annually. ○ 2021 survey results indicate that 127/572 surveys were completed (22.2%). Previous findings: <ul style="list-style-type: none"> ○ PM 02 - Presence of a Pediatric Emergency Care Coordinator (PECC) <ul style="list-style-type: none"> ○ Federal Goal: <i>By 2020, 30% of EMS agencies have a designated individual who coordinates pediatric emergency care; by 2023 – 60%; by 2026 – 90%</i> ○ Illinois status <ul style="list-style-type: none"> • 2021 = 26.4%; 2020 = 25.7%; 2017 = 23.4% ○ PM 03 - Process that requires EMS providers to demonstrate correct use of pediatric-specific equipment <ul style="list-style-type: none"> ○ Federal Goal: <i>By 2020, 30% of EMS agencies have a process that requires EMS providers to physically demonstrate correct use of pediatric-specific equip; by 2023 – 60%; by 2026 – 90%</i> ○ Illinois status <ul style="list-style-type: none"> • 2021 = 34.4%; 2020 = 29.5%; 2017 = 29.4% 	<p>FYI</p>

TOPIC	DISCUSSION	ACTION
Pediatric Preparedness Workgroup	<p>Anna Sherry provided the following workgroup report:</p> <ul style="list-style-type: none"> ▪ Update on <i>Pediatric and Neonatal Disaster/Surge Guide</i> – This document was approved at the October meeting of the Pediatric Preparedness Workgroup. Currently undergoing final formatting. Key changes were reviewed. Mike Wahl motioned to approve the document, Christine Bishof seconded the motion. All in agreement to approve the document. ▪ Update on <i>Pediatric and Neonatal Care Guidelines</i> – Work on guidelines is progressing. Several SME’s (i.e. perinatal experts) are helping with content. Resources are undergoing review and being placed in APA format. ▪ Update on <i>Use of the SNS Ventilators in the Pediatric Patient</i> document – Work continues on the quick reference tables. Next step is to group similar ventilators, and then modify training scenarios. ▪ <i>Disaster Mental Health Response for Children</i> educational module – Enlisted the assistance of NAMI Chicago (National Alliance on Mental Illness) as subject matter experts as this module was revised. Key revisions were reviewed with the board. George Paul motioned to approve the module, seconded by Mike Wahl. All were in agreement to approve the module. ▪ <i>Guidelines for the Nurse in the School Setting</i> – Evelyn walked thru the revisions made to the document. Changes were made to be consistent with the updated SNEC curriculum. Bonnie Salvetti motioned to approve the document and Theresa Martinez seconded the motion. All were in agreement to approve. 	<p>Approved documents will be posted on the Lurie website and shared with stakeholders after all final editing is completed.</p>
Facility Recognition & QI Committee	<p>Sue Fuchs and Evelyn Lyons provided the following updates:</p> <ul style="list-style-type: none"> ▪ Current participation in facility recognition (106 hospitals) <ul style="list-style-type: none"> ○ PCCC/EDAP level = 10; EDAP level = 84; SEDP level = 12 ▪ <u>Regions 4 & 5 renewal</u> – All approved except one hospital pending follow-up in January 2022. ▪ <u>Region 11 renewal</u> – Approval letters sent out for all but two hospitals pending additional documentation. ▪ <u>Regions 1 & 10 renewal</u> – Hospitals submitting post-survey responses; some approval letters sent out. ▪ <u>Region 9 renewal</u> – Scheduled surveys completed on November 16, 2021. Two hospitals requested postponement until 2022. All EDAP surveys were conducted virtually; the one PCCC survey was done as a modified in-person survey with no clinical unit inspections. Post-survey letters will be sent out. ▪ <u>Regions 3 & 6 educational sessions</u> – Educational sessions held in October. Their renewal applications are due on January 21, 2022. The survey venue will be dependent on how the pandemic evolves. ▪ Review of additional proposed PCCC/EDAP/SEDP rules – Evelyn reviewed each of the additional proposed revisions that the Facility Recognition & QI Committee recommended to the PCCC, EDAP, and SEDP sections of the rules. American Red Cross PALS course will be accepted; arterial lines added to the PCCC required supplies; planned verbiage for LPN pediatric education requirements. George Paul motioned to approve the proposed changes; Mike Wahl seconded the motion. All were in agreement. These changes will be submitted with other proposed EMS rule changes thru the IDPH legal process. ▪ Regional QI Committee reports/updates – Kelly provided the following regional reports: <ul style="list-style-type: none"> ○ Region 1 – Began a head injury project to assess PECARN compliance in two age groups. Peds census has been about normal however an increase in pediatric cardiac arrests has been seen. ○ Region 2 – Focus on Transfer appropriateness. Great participation this past quarter. Over 88 responses received! A summary indicates a very high number of transfers in the region due to lack of available pediatric beds at regional hospitals with the next most common reason for 	<p>FYI</p> <p>The PCCC/EDAP/SEDP proposed rules will be added to other EMS rule changes that the Division of EMS is developing for IDPH Legal review.</p>

TOPIC	DISCUSSION	ACTION
	<p>transfer being surgical intervention. As a Region, they are looking at hospitals with inpatient pediatric capability and whether these sites are being utilized fully. Consider improving processes related to transport and/or adding pediatric inpatient beds in the region. Also, congrats to Stefanie Clarke as she transitions into her new APN role. She has stepped down as the PQC for CHOI and as Region 2 co-chair. Welcome to Kelsey Haage who is taking on both of these roles.</p> <ul style="list-style-type: none"> ○ Region 3 – Their region reports high pediatric inpatient census. This region is also preparing for their facility recognition renewal. There are no updates on their regional project. ○ Region 4 – Continues to work on their respiratory project. Evaluating whether to transition to a new project or if there is a need to continue current project. Currently there are no trends noted and regionally still looking to improve reassessment. ○ Region 5 – They will have all data gathered for the 2021 pediatric safety equipment utilization project in December. Once compiled, the data will be shared in chart/graph format. As a region, the hospitals are starting to brainstorm ideas for developing a pediatric safety program. They are also doing a spot audit on pediatric respiratory illnesses. ○ Region 6 – Their region met on 11/9/21. Overall, the region continues to see a large volume of respiratory cases (mainly RSV/COVID). Many hospitals are transferring outside of region with delays in finding higher level of care. Continue pediatric abuse documentation, DCFS reporting, CANTS form completion. Each hospital is to submit data to Eliza to create graphs/charts for renewals. Working on facility recognition renewal applications - due January 2022. ○ Region 7 – Continues to monitor blood pressure and pain QI. The region is trying to set up a group google drive for all to record their respective hospital's data. ○ Region 8 – The region wrapped up their pediatric behavioral health project and presented to the committee. Decided to work on pediatric head injury as the next regional project - look at assessment of GCS and neuro checks, as well as tracking whether protective equipment was used to prevent head injury. The goal - obtain 6 months of data and then develop community education on use of safety devices and assessment education for nursing. Then compare pre and post data. ○ Region 9 – Completed 2021 QI project on child abuse screenings. Though region feels N for their project was too low to determine accuracy of data, they concluded the scores below 90% were significant enough for the PQC's to go back and audit child abuse screenings within their ED's for accuracy and completion. Their 2022 QI project will focus on pediatric pain, assessing for pain scores on arrival, after pain intervention and at discharge. Also determine if correct pain scales used. Each hospital will audit 50 pediatric patients for CY 2022 Quarters 1 & 2. Hospitals report increased number of pediatric patients seen in ED, higher pediatric acuity and challenges due to lack of PICU bed availability across Chicagoland, resulting in longer length of stays. ○ Region 10 – Just ended their sepsis project due to low data collection after a year. New QI project will focus on head injuries, looking primarily at documentation re patient condition, GCS scoring, and child abuse screening. Had noted larger volumes of head injuries in the region and an increase over the last quarter in head injuries/falls, DCFS requests for exams, respiratory illness, suicide attempts, and younger patients presenting for psychiatric evals. Still seeing a handful of Covid + pediatric patients at each site that require hospitalization. Lovell VA was able to host an ENPC class for the first time, and attended by 4 Navy nurses. 	FYI

TOPIC	DISCUSSION	ACTION
	<ul style="list-style-type: none"> ○ <i>Region 11</i> – Just completed an educational session on TCH and pediatric edibles that was presented by the Illinois Poison Center. This was very well received. The region continues to examine pediatric sepsis and have scheduled their 2022 meetings. 	
Pediatric Prehospital Committee	<p>Sue Fuchs reviewed the following:</p> <ul style="list-style-type: none"> ▪ Federal Performance Measure 01 related to EMS agencies submission of NEMSIS data. This PM is now fully met by our state. 100% of Illinois EMS agencies have capabilities to submit NEMSIS version 3.4 data. The percentage of EMS agencies that have recently submitted data has decreased somewhat due to the pandemic. It is typically over 90%, however recent months have been 87.3%. ▪ Pediatric Prehospital Toolkit – contains a number of EMS resources, guidelines and education. https://emscimprovement.center/domains/prehospital-care/prehospital-pediatric-readiness/pprp-toolkit/ ▪ We are looking at ways to increase participation in the 2022 EMS PedsReady survey starting in January. ▪ The committee is also identifying avenues for increasing the number of Pediatric Emergency Care Coordinators (PECC) at EMS agencies throughout the state. ▪ On November 3 & 4, 2021, the first Midwest EMSC Pediatric Prehospital Symposium was conducted. This was a collaboration between state EMSC Managers in IL, IN, MI, MN and WI. The webinar based educational venue was conducted in the evening and aimed at EMS PECCs. There was good attendance (534 attendees on November 3rd, and 487 attendees on November 4th). There were 108 Illinois participants that attended both sessions, with smaller numbers that attended only one evening. Speakers covered a variety of topics including pediatric trauma, child abuse, respiratory conditions, toxicology issues. 	FYI
Other/ Publications/ Presentations	No updates	FYI
Education	<p>The online School Nurse Emergency Care (SNEC) Course rolled out in early August</p> <ul style="list-style-type: none"> ▪ Evelyn noted that there have been 361 registrants, with 54 nurses successfully completing the course, with a few participants from other states (49 IL, 1 CT, 1 DE, 1 GA, 1 NC, 1 VA). A few participants have failed the post-test, and a remediation process that was developed is being utilized. <p>Status on online educational modules</p> <ul style="list-style-type: none"> ▪ Sue noted that the Pediatric Seizure module and the Pediatric Rapid Response Team module are being updated. Pediatric modules can be accessed via the links below <ul style="list-style-type: none"> ○ UIC Public Health Learning: https://www.publichealthlearning.com ○ TRAIN Illinois: https://www.train.org/illinois <p>Educational Opportunities</p> <ul style="list-style-type: none"> ▪ <i>Region VII Pediatric Priorities Conference</i>. January 21, 2022. Rock Run Convention Center, Joliet. Agenda and Registration: https://pediatricpriorities.org/ ▪ CDC Pediatric mTBI Guideline (HEADS UP to Healthcare Providers online training now available on CDC Train) https://www.cdc.gov/traumaticbraininjury/PediatricmTBIGuideline.html ▪ <i>EMSC Improvement & Innovation Center (EIIC) Toolkits</i> (multiple resources, guidelines, educational videos, action plans, etc) 	FYI

TOPIC	DISCUSSION	ACTION
	<ul style="list-style-type: none"> ○ Pediatric Readiness Hospital Toolkit, https://emscimprovement.center/domains/pediatric-readiness-project/readiness-toolkit/ ○ Critical Crossroads: Pediatric Mental Health Care in the Emergency Department https://emscimprovement.center/education-and-resources/toolkits/critical-crossroads-pediatric-mental-health-care-ed/ ▪ <i>Pediatric Emergency Medicine Network</i>. AAP educational web based tools – free access after establishing an account. Visit: https://moodlemedce.com/pem-education/ 	
Next Meeting	<p>Next meeting is scheduled 10:00am - 12:00pm on Friday, March 25, 2022 via WebEx.</p> <p>The 2022 meeting dates are listed below. NOTE: meetings after March may be held in-person at the Illinois Health & Hospital Association depending on COVID restrictions (Naperville/Springfield video-conference sites; Rock Island).</p> <ul style="list-style-type: none"> ○ Friday, March 25, 2022 (Via WebEx) ○ Friday, June 3, 2022 ○ Friday, September 23, 2022 ○ Friday, December 2, 2022 	A meeting reminder will be sent to all board members.
Adjournment	With no further business, a call for adjournment was made. George Paul motioned for adjournment and Christine Bishof seconded the motion. All were in agreement and the meeting was adjourned at 11:43am.	Meeting adjourned.

Meeting minutes submitted by Evelyn Lyons