

ILLINOIS EMERGENCY MEDICAL SERVICES FOR CHILDREN
ADVISORY BOARD
Meeting Minutes
June 20, 2014

Present: Paula Atteberry (IDPH), Glendean Burton (IDHS)*, Young Chung (American Red Cross), Mark Cichon (EMSC) *, Kathy Disher (DCFS)*, Darcy Egging (IL ENA)*, Susan Fuchs, Chair (Natl. Assn EMS Physicians), Jeanne Grady (IL DSCC)*, Ruth Kafenzstok (EMSC), Dan Leonard (EMSC), Evelyn Lyons (IDPH/EMSC), Maura McKay (IL AAFP), Michael Pieroni (IL State Ambulance Assoc.)*, Laura Prestidge (EMSC), Teresa Riech (IL AAP)*, Bonnie Salvetti (INA)*, Greg Scott (IEMTA)*, Kathy Swafford (ICAAP), Christine Swain (EMSC), Terry Wheat (Pediatric Rehab), J. Thomas Willis (Co-chair) (IL Fire Fighters Assn),

Excused: Kevin Bernard (EMS System Coordinator), Jessica Choi (Safe Kids IL), Joseph Hageman (ICAAP)*, Victoria Jackson (School Health Program, IDPH), Herbert Sutherland (ICEP), Michael Wahl (MCHC), Carolyn Zonia (IL SMS)

Absent: Mike Hansen (IL Fire Chiefs Assn), Roy Harley (Prevent Child Abuse Illinois), Vince Keenan (IL AAFP), Bridget McCarte (IHA), Scott Tiepelman (Region 4 Coalition)

*Via teleconference

TOPIC	DISCUSSION	ACTION
Call to Order	Susan Fuchs called the meeting to order at 10:06am	None
Introductions	Introductions were made.	None
Review of 3/7/14 Meeting Minutes	The March 7, 2014 meeting minutes were reviewed and approved. Tom Willis made a motion for approval; Mark Cichon seconded the motion. All in attendance agreed to approve the minutes.	Minutes approved
Announcements/ Updates	<p>The following announcements/updates were reviewed:</p> <ul style="list-style-type: none"> ▪ Special Thank-you to Dr. Steve Lelyveld. Sue Fuchs identified that Steve Lelyveld has retired from the EMSC Advisory Board. Steve has been an ICAAP representative to the EMSC Advisory Board since EMSC began in Illinois in 1994; he was the first Illinois EMSC Advisory Board Chair. Steve will continue to be kept on the EMSC Advisory Board meeting email correspondence since he would like to remain in the loop on EMSC activities. Thanks Steve!! ▪ Welcome new Advisory Board members <ul style="list-style-type: none"> ○ Maura McKay, DO, Illinois Academy of Family Physicians ○ Teresa Riech, MD, Illinois Chapter, American Academy of Pediatrics ▪ <i>2014 Ron W. Lee, MD – Excellence in Pediatric Care Awards</i> <ul style="list-style-type: none"> ○ Lifetime Achievement <ul style="list-style-type: none"> ▪ Harriet Hawkins, RN, Pediatric Resuscitation Educ Coord, Lurie Children’s Hospital, Chg ▪ Thelma Kuska, RN, Retired, National Highway Traffic Safety Administration ○ Clinical Excellence <ul style="list-style-type: none"> ▪ Sue Emond RN, Pediatric Emergency Department, Advocate Condell Medical Center, Libertyville ○ Community Service <ul style="list-style-type: none"> ▪ Deborah Gulson, MD, Pediatrician, Northwestern Lake Forest Hospital, Lake Forest ▪ American Academy of Pediatrics resources: <ul style="list-style-type: none"> ○ <i>Choosing Wisely Campaign</i> – Focused on encouraging physicians, patients and other health care stakeholders to think and talk about medical tests and procedures that may be unnecessary, and in some instances can cause harm. 	Send any new announcements to Evelyn Lyons for future meetings

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	<ul style="list-style-type: none"> ○ <i>Ten Things Physicians and Patients Should Question</i> – http://www.choosingwisely.org/doctor-patient-lists/american-academy-of-pediatrics/ ○ <i>AAP Module</i> – American Academy of Pediatrics created a #choosingwisely communication module to help physicians guide conversations with patients on tricky topics, including use of antibiotics for upper respiratory illness, and whether or not imaging is necessary in treatment of head trauma. ▪ <i>Bullying, Dating Violence and Sexual Assault</i>. Illinois Youth Risk Behavior Survey, February 2014. Ann & Robert H. Lurie Children’s Hospital of Chicago Research Center ▪ <i>The Impact of Asthma in Illinois</i>. Illinois Department of Public Health. 2014 ▪ Gov Quinn signs legislation ensuring students in all Illinois High Schools have CPR and AED training ▪ Illinois Poison Center bill signed by Governor. Sue noted that Dr. Wahl appreciates all support provided. ▪ Other organizational reports/updates <ul style="list-style-type: none"> ○ Kathy Disher reported that DCFS has formulated a statewide asthma initiative program (DAP - DCFS Asthma Project) in which there will be more intense home assessment and follow-up by DCFS nurses in homes with children who have asthma. DCFS nurses will undergo a 2-day program to become certified. ○ Dr. Chung reported on the American Red Cross annual awards that were recently presented and went well. He reminded the group that there are multiple categories of award, including a nursing specific award. ○ Terry Wheat noted that Shriner’s Hospital participated in a Region 8 exercise which involved pediatric patient identification and reunification. ▪ Educational Opportunities <ul style="list-style-type: none"> ○ <i>Integrated Public Health & Medical Preparedness Summit</i> – July 8–10, 2014, Schaumburg ○ <i>Region7 In the Midst of Chaos Disaster Conference</i> – September 19, 2014, Tinley Park ○ <i>Pediatric Trauma Society Conference</i> – November 14-15, 2014, Chicago ○ <i>EMSC Online Courses</i> - https://www.publichealthlearning.com ○ Other educational opportunities at www.luhs.org/emsc/special.htm 	
IDPH, Division of EMS & Highway Safety Report	<p>Paula Atteberry reported on the following:</p> <ul style="list-style-type: none"> ● <i>EMS Grants</i> - The EMS Grant Applications for FY15 have been submitted to their respective Regional EMS Advisory Board Chairs for review by the Regional EMS Advisory Boards via EGrAMS. All EMS Assistance Fund Grant applications must be submitted back to the Department from the Regional EMS Advisory Boards by August 1, 2014. The Department received 61 qualified EMS Assistance Fund Applications. The Department will again this year be able to award up to \$100,000 in grants. ● <i>Heartsaver AED Grants</i> - The Heartsaver AED Grant awards for FY2014 have been announced. There were 80 recipients of the Heartsaver AED Fund award totaling \$36,000. ● <i>Regulatory</i> - Administrative Rules for fee waivers, decrease in CE hours for EMTs, EMT bridge program for military, 4 year ambulance license renewal, employers to verify an employee’s license and technical clean-up have been adopted. Also, the Specialized Emergency Medical Service Vehicles (SEMSV) rule amendments went to JCAR this week. ▪ <i>Legislation</i> - <ul style="list-style-type: none"> ○ SB 3531 introduces the 3 tiered Trauma Centers - this bill did not pass out of committee ○ SB 3414 introduces a change to New Education Standards and is on Governor’s desk for signature. ○ SB3076 introduces Advance Directive DNR form name change to POLST form; also allows Advance Practice Nurses/Physician Assistants to sign DNR order form. On the Governor’s desk for signature. ○ HB5742 Stroke Legislation - Changes the recognition of hospitals to Acute Stroke-Ready Hospital or 	Share information within your organizations

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	<p>Comprehensive Stroke Center as known nationally. The bill is on the Governor's Desk for signature.</p> <ul style="list-style-type: none"> ▪ <i>Stroke Designations</i> – Julie Havens has completed providing designations and certifications for 68 hospitals to date. Of those, 47 hospitals are Primary Stroke Centers and 21 are Emergent Stroke Ready Hospitals. A list of designated hospitals can be found on the EMS website. ▪ <i>EMS Data</i> - Upgrades continue on Hospital Bypass system; recent upgrades include a new GIS mapping function. IDPH is working to finalize improvements to add data fields for use during events or disasters. ▪ <i>EMS Systems</i> – <ul style="list-style-type: none"> ○ EMS System meetings were held April – June in Mt Vernon, Decatur and Downers Grove with the EMS System Coordinators to provide Department updates. ○ Scope of practice survey was sent out and returned. The Department with assistance of Dr. Jack Whitney has completed a review of the first survey. A smaller second survey was sent to EMS System Medical Directors and reviewed by the group and redistributed. ○ Testing results findings have been shared with the EMS medical directors and system coordinators at their respective meetings. IDPH in conjunction with CTS will deploy an online 100 question exam to assist students in preparation for the State test. The first exam and analysis will be provided for free. Repeat exams will cost \$10/each. CTS will handle the website and administration of this practice exam, as a means to help students prepare in advance to see what areas of an exam they may need to prepare for. 	
Advisory Board Member Updates	<p>Evelyn Lyons reported:</p> <ul style="list-style-type: none"> ▪ Review of Advisory Board bylaws – Changes from the March meeting to the bylaws were reviewed. A motion to approve the bylaws was made by Dr. Chung, and seconded by Terry Wheat. All agreed to approve the bylaws. ▪ Open board positions are: Illinois Hospital Association, parent representative, pediatric surgeon or trauma nurse coordinator. Dr. McKay will check with her hospital contacts for a potential IHA representative; Sue Fuchs noted that she may have a parent representative to serve on the board. ▪ Meeting attendance – To ensure compliance with Illinois EMS Administrative Code, representatives need to be able to participate in minimally 2 meetings per year (3-4 meetings/year is desirable). 	<p>Advisory Board bylaws approved.</p> <p>Contact Evelyn with recommendations for any open positions.</p>
Pediatric Preparedness Workgroup	<p>Laura Prestidge reported on the following:</p> <ul style="list-style-type: none"> ▪ Pediatric & Neonatal Surge Annex update – The Annex was tested during two tabletop exercises in March (March 5th exercise involved hospitals in northern Illinois; March 25th exercise targeted hospitals in central/southern Illinois). Laura reviewed key strengths and weaknesses identified through these exercises, which have assisted in further modifications to the annex. In addition, components of the annex were tested in a Region 10 exercise. An issue noted was little use of the pediatric specialists since hospitals seemed to rely on their routine processes, and disregarded the inject that indicated normal processes were not functional. This is an area that needs further emphasis in future exercises. ▪ Draft Burn Surge Annex project update –The final meeting of the planning committee was conducted on June 4th. Good feedback and recommendations were received on this annex, and are being incorporated into a final draft. Next steps are to bring info regarding the burn surge annex to each regional meeting. In addition, 2 Advanced Burn Life Support (ABLS) Live courses were conducted with a total of 79 participants (Maywood for northern trauma centers; Peoria for central/southern trauma centers). 200 slots 	<p>Send any comments/suggestions to Laura lprestidge@lumc.edu</p>

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	<p>were also purchased for online ABLS training – 66 registrants are still pending completion. Work is proceeding on burn cache recommendations for hospitals/EMS. Also, grant funds were approved for us to purchase a large quantity of Acticoat (antimicrobial burn dressing) for placement at 3 hospitals with burn units (Loyola - Maywood, OSF St. Anthony - Rockford, Memorial Medical Center – Springfield). These facilities have agreed to make this item available in the event of a large burn incident in their region or adjoining regions; they will also put in place a rotation process to swap out supplies as they near expiration. Lastly, Dan Leonard is finalizing a burn data report as part of this project.</p> <ul style="list-style-type: none"> ▪ The Pediatric Resource Directory has been updated; the May 2014 version is on the EMSC website. ▪ JumpSTART training – The March pediatric tabletop exercises showed a gap in JumpSTART training. New instructor courses are scheduled in Regions 1, 3, 4, 6, 7 & 10; Pending dates for Regions 2, 5, 8 & 9. ▪ Emergency Preparedness Planning Guide for Day Care Centers – CDPH released a day care center preparedness resource that they adopted from Seattle. Laura and Evelyn plan a conference call with Anne Wharff (oversees day care center program at IDHS) to follow-up on the state project. Anne would like to ensure a basic template/consistent approach that all day care centers could use statewide. 	
National EMSC Assessments	<p>Evelyn reviewed a slide set developed by the National EMSC Data Analysis & Research Center that provides an overview of the Pediatric Readiness project, and contains slides in which state specific information can be reported on. However this slide set is very lengthy, so work is proceeding to streamline it for presentations. For more info related to the Pediatric Readiness project, their website is www.PediatricReadiness.org.</p>	FYI
Facility Recognition Committee	<p>Sue Fuchs and Evelyn Lyons reported:</p> <ul style="list-style-type: none"> ▪ The Facility Recognition Committee and QU Subcommittee will be integrated into one committee. Over the last few years, they have each been doing very similar work. This will assist in streamlining efforts. ▪ Surveys in Regions 3 & 6 were recently completed. ▪ Renewal applications from Region 7 hospitals have been received and will be undergoing review. Their site visits will take place in late fall/early winter. ▪ Region 2 - an educational session will be conducted on Thursday, Sept 11th at OSF Saint Francis, Peoria. ▪ Proposed changes to PCCC/EDAP/SEDP regulations – Recommended revisions to the rules were reviewed by Paula. She noted that all of these changes have been approved by the Facility Recognition Committee, however further discussion is still needed for the NP/PA credentialing sections. Dr. Chung asked if an NP meets the alternate criteria, will they always have physician oversight with pediatric/emergency medicine boarded physicians? Discussion identified that this should not be an issue since these hospitals will also need to meet the physician qualifications requirements. A motion to approve these rule changes (pending the APN/PA sections) was made by Tom Willis, and seconded by Terry Wheat. All in attendance agreed to approve these rule changes. ▪ Current participation in facility recognition (110 hospitals) <ul style="list-style-type: none"> ○ NOTE: Two new EDAPs recognized in Evansville, IN (Illinois EMS Region 5) ○ PCCC/EDAP level = 10; EDAP level = 87; SEDP level = 13 ○ Note: In 2012, there were approximately 1 million ED visits for 0-15 years of age. 77.8% of these visits took place in a PCCC, EDAP or SEDP. Of the 1 million, approximately 30,000 required admission with 94.0% of these admissions taking place in a PCCC, EDAP, or SEDP facility (Source: Illinois Hospital Assn Compdata) 	<p>The proposed changes to the PCCC, EDAP, SEDP rules were approved (pending the additional changes to the NP/PA credentialing sections).</p>

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	<p>Sue reviewed the following Regional QI updates:</p> <ul style="list-style-type: none"> Region 1: The pediatric sepsis indicator is being expanded to include all critically ill children. This will increase the number of patients monitored and the scope of the record review. Region 2: Work continues on reporting measures for cases of child abuse and neglect, as well as cases of sexual abuse. Efforts are being made to notify primary care physicians when their patients are seen as abuse/neglect cases in the ED. Separately, the region is beginning preparation for the facility renewal process in 2015. Region 3: Data being collected (10 records/month) for an indicator regarding long bone fractures and pharmacological/non-pharmacological pain management. Planning underway for a May ENPC course. Region 4: Guidelines previously developed in working with coroners in Region 4 were used by one facility to address visitation issues in the ED. A monitor of prehospital management of pediatric patients continues. Discussion took place re communication in transfer cases to St. Louis children's hospitals. Region 5: Data collection continues regarding pain management. In addition, in follow up to issues with the placement of psych transfers, the regional committee is considering inviting representatives of the state's Screening, Assessment and Support Services (SASS) program to an upcoming meeting. Region 6: An indicator is being developed regarding psych transfer patients. Region 7: The region is preparing for upcoming renewal of facility recognition. Also, data are being collected for an indicator regarding trauma and protective equipment. Unclear if patients are receiving safety equipment education, and there are plans to offer safety prevention information in waiting areas. Region 8: An online survey of providers was conducted regarding child abuse screening. A total of 239 responses were received. Among the findings were the following: 76% of providers had an abuse/screening tool available, 76% screened every pediatric patient, 75% were confident in identifying abuse and neglect, and 81% were confident in reporting abuse and neglect. Educational efforts will follow, with plans to repeat the survey in 60 days. Region 9: Work continues with a monitor tool for neonatal and infant fever. The monitor captures data regarding time to first broad spectrum antibiotic, whether the source of the fever was identified, and whether an LP was performed. Some facilities have reported very low numbers of patients, so the monitoring period was extended through May 2014. Region 10: Region continues work on a monitor regarding abdominal pain management and appendicitis for children age 5 years and older. Pain management, interventions, and the use of CT vs. ultrasound are included in the monitor. Separately, following up with DCFS in cases of child abuse and neglect was discussed. Region 11: Results from the monitor regarding psych evaluation showed a variety of findings related to the diversity of Chicago hospitals participating. The responsiveness of the state's Screening, Assessment and Support Services (SASS) program had an effect on the management of psych patients. SASS was contacted and will likely send representatives to the August meeting. Separately, the region is considering a review of sexual assault cases and appropriate referral to law enforcement. 	FYI
EMSC Targeted Issue Grant	<p>Dan Leonard and Evelyn Lyons reported on the <i>Facility Recognition/Categorization Toolkit</i>:</p> <ul style="list-style-type: none"> As previously reported, HRSA has requested that the toolkit be streamlined further before publication. They recommended putting the strategic planning and data components into free-standing documents. Dan has developed a separate data chapter, and Evelyn is working on the toolkit. 	FYI

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Data Initiatives	<p>Ruth Kafensztok reported:</p> <ul style="list-style-type: none"> ▪ <i>EMS Data Reporting System</i> - 2012 IHA inpatient/outpatient data underwent review; pending follow-up with IHA re a technical issue. 2012 Traffic Crash and Trauma Registry updates have been completed in our local testing site and submitted to IDPH for the web application update ▪ <i>Traffic Crash "Quick Facts" Fact Sheets</i> - Work on Calendar year 2012 fact sheets began this quarter, and requires further edits, submission/approval by IDOT and then web publishing. ▪ <i>Data Quality Studies</i> - Studies reported on last quarter continue. EMSC objectives in this area have been to support IDOT's CODES program by devising a strategy to obtain missing information on selected key data elements for fatal crash records based on data potentially available in health/medical databases. ▪ The FY15 IDOT grant application has been submitted to IDOT, and is currently under their review. ▪ Ruth reviewed the Draft PICU/NICU report, based on findings from a survey conducted of hospitals throughout the state (including St. Louis, MO hospitals in the Illinois perinatal system). A challenging aspect of this project is that the numbers for some items changed during the course of the survey. ▪ Dan reviewed an ad-hoc analysis that looked at 4 years of data related to Opioid use that showed increased use in rural and urban sectors of the state. This stemmed via a query from Mike Wahl. ▪ Dan also reviewed an EMS response time map developed by Dan Lee, IDPH. 	FYI
Publications Update	<p><i>Pediatric Publications Update</i></p> <ul style="list-style-type: none"> ▪ Husain A, Fuchs S. <i>A National Effort Requiring Local Solutions: Regionalization of Pediatric Emergency Care</i>. Clinical Pediatric Emergency Medicine. 2014; 15(1):79-88. Sue noted that this publication includes the pre/post EDAP mortality data from Dan Leonard's data analysis. ▪ Paper accepted for publication; pending revisions: <i>Emergency Department Management of Pediatric Unprovoked Seizures and Status Epilepticus in the State of Illinois</i>. Journal of Child Neurology. Taylor C, Piantino J, Hageman J, Lyons E, Janies K, Leonard D, Kelley K, and Fuchs S. ▪ Per Joe Hageman, Stephanie Carapetian will submit a Febrile Seizures paper to Clinical Pediatrics. 	FYI
School Nurse Initiatives	Chris Swain reported that 8 School Nurse Emergency Care (SNEC) courses are scheduled this summer. The first course took place this week. In addition, she is coordinating the activities of the SNEC Revision Committee which has been reconvened to review and revise the SNEC curricular materials.	FYI
Pediatric Prehospital Committee	Sue Fuchs and Evelyn Lyons reported that the committee is moving along with revisions to the 2010 pediatric protocols. The initial focus has been on the cardiac related protocols; AHA guidelines are being used in this process.	FYI
EMS Region 4 Coalition	Scott was unable to attend. He had sent a written report that the annual Region 4 pediatric conference went well. Also pediatric QI efforts continue thru Sue Laughlin and the Regional Pediatric QI committee.	FYI
Upcoming meetings	<ul style="list-style-type: none"> ▪ The next meeting is scheduled from 10am – 12pm on Friday, September 19, 2014 at the Illinois Hospital Association <p>Future meetings</p> <ul style="list-style-type: none"> ▪ Friday, December 19, 2014 at Illinois Hospital Association 	A meeting reminder will be emailed to all board members
Adjournment	Meeting was adjourned at 12:00pm.	None

Meeting minutes submitted by E. Lyons