

CIL - CARP

CENTRAL ILLINOIS – COALITION ACTIVE IN RESPONSE PLANNING 05/09/2018 – HOSTED BY: LASALLE CO EMA / CELEBRATIONS 150

Today's agenda

- I. Welcome and Introductions Troy Erbentraut (OSF-Saint Francis)
 - a. CIL-CARP Purpose/Mission/Vision Review
 - b. CIL-CARP Advisory Committee
 - c. CIL-CARP Gap Assessment Survey
- II. "Stop the Bleed" Campaign Troy Erbentraut (OSF-Saint Francis)
- III. EMS Update Melissa Stokes (UnityPoint Health)
- I. School & Campus Safety Eric Arnold (Illinois Law Enforcement Training and Standards Board)
- I. Protective Security Advisor Program Kevin Pennell (U.S. Dept. of Homeland Security)
- I. Illinois State University Reunification Drill Eric Hodges (Illinois State University)
- I. Lunch Networking
- I. Regional Asset List Development Dawn Cook (Tazewell County EMA)
- I. CIL-CARP Website Tour Troy Erbentraut (OSF-Saint Francis)
- I. Open Forum for questions and comments

UPCOMING GENERAL MEMBERSHIP MEETING SCHEDULE

- September 12, 2018
- January 09, 2019



CAR



Housekeeping

- Please place electronic devices on silent
- Restroom
- Safety Brief
- Breaks
- Lunch
- Keep a open mind
- Please offer feedback

CARP

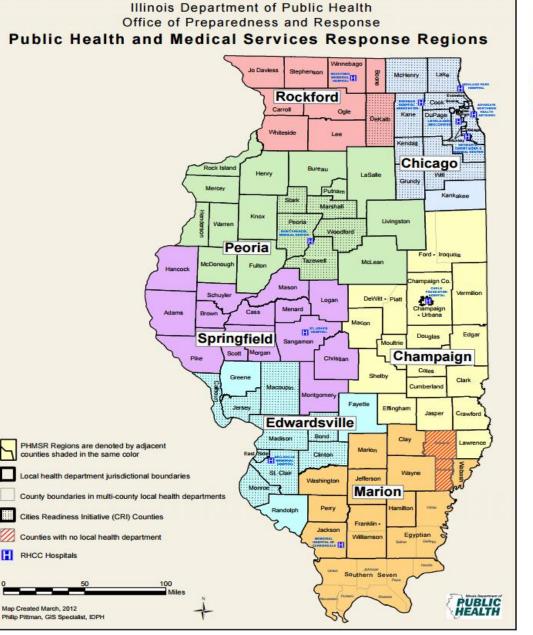
PURPOSE

Why we are here today...

- develop a regional coalition
 - Many of our goals are similar and compatible
 - Working together will enhance our abilities
 - Benefits of coalescing / greater than the cost
 - Enlarge the base of support for emergency preparedness
 - Magnify existing financial and human resources by pooling them
 - Enhance creditable and influence
 - Exchange of information / skills / experience / materials
 - Diverse range of people and organizations
 - Peer support



Region 2 / Peoria Health and Medical Response Region







MISSION

The mission of CIL-CARP is to improve an all-hazard response in the central Illinois region through effective communication, planning, and coordinated exercises. CIL-CARP encourages the collaboration between regional healthcare organizations, emergency responders, regional emergency management directors, public health and other emergency response planners while supporting the development of cooperative partnerships in order to promote the essential services they provide to the public.



VISION

To create a comprehensive and resilient response to catastrophic health events via collaborative partnerships and formal harmonization of activities among emergency management, emergency medical services, healthcare organizations, public health departments, and response agencies and entities supporting Emergency Support Function #8 (Public Health and Medical Services), as well as support an all-hazards response.



Stop the Bleed

≻Survey

➢ Funding

➤Supplies

Purchasing Power

Ideas / Suggestions



https://www.osfhealthcare.org/saintfrancis/services/emergency/osf-disaster-preparedness/cil-carp/







NEW!



Save the Date: FICEMS Meeting June 20th

The Federal Interagency Committee on EMS (FICEMS) will have its next meeting on Wednesday, June 20th, from 1pm to 4pm. The public is welcome to attend from 2pm to 4pm, while the executive session for members will take place from 1-2pm ET.

The meeting agenda, in-person and webinar registration links will be available soon. Please check <u>online</u> for the latest meeting materials.

Location:

DoubleTree by Hilton Washington, D.C. - Crystal City 300 Army Navy Drive Arlington, VA 22202

For questions or more information, contact Gamunu Wijetunge with the NHTSA Office of EMS at <u>gamunu.wijetunge@dot.gov</u>.

Serving Our Members and Advancing Our Profession

Dear Members:

It is a pleasure to share with you the 2017 NAEMT Annual Report. This report is a great summary of the tremendous work of our members to advance the EMS profession.

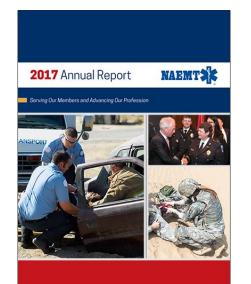
View 2017 Annual Report

Our members are educating stakeholders on the role of EMS in our nation's changing healthcare system, fueling innovations in our profession, and advocating for quality patient care. The results of our efforts in 2017 are a testament to the vitality of our organization and the dedication of our members.

On behalf of the NAEMT Board of Directors... thank you!

Sincerely,

Dennis Rowe, EMT-P President, NAEMT



Share the annual report!





The 30-day public comment period is open for feedback from the EMS community to help craft the final version Throughout the last year, the EMS Agenda 2050 project team sought input from across the nation to craft the EMS Agenda 2050, a vision for the future of EMS. The first draft of the EMS Agenda 2050, which is based on feedback generated through discussion of the initial Straw Man document, has been released for public comment.

The public comment period for this draft will be open until May 31st, 2018. EMS, healthcare and public health professionals can provide comments through the submission form available on EMSAgenda2050.org.

Following the comment period, all feedback will be reviewed to help develop a final version of EMS Agenda 2050. The final version is scheduled to be released in September at a National Implementation Forum in Washington, D.C. To aid in finalizing EMS Agenda 2050, the Office of EMS encourages the EMS community to provide comments and share the current draft with colleagues throughout public safety, public health and healthcare communities. Download the EMS Agenda 2050 draft and provide feedback at EMSAgenda2050.org.

Federal Legislation for EMS

Veteran Emergency Medical Technician Support Act of 2016

(Sec. 2) This bill amends the Public Health Service Act to direct the Department of Health and Human Services to establish a demonstration program for states with a shortage of emergency medical technicians (EMTs) to streamline state requirements and procedures to assist veterans who completed military EMT training to meet state EMT certification, licensure, and other requirements. Shown Here: Public Law No: 115-83 (11/17/2017) Protecting Patient Access to Emergency Medications Act of 2017

(Sec. 2) This bill amends the Controlled Substances Act to direct the Drug Enforcement Administration (DEA) to register an emergency medical services (EMS) agency to administer controlled substances if the agency submits an application demonstrating that it is authorized to conduct such activity in the state in which the agency practices. The DEA may deny an application if it determines that the registration is inconsistent with the public interest.

An EMS agency may obtain a single registration in each state instead of a separate registration for each location

A registered EMS agency may deliver, store, and receive controlled substances, subject to specified conditions.

An EMS professional of a registered EMS agency may administer controlled substances in schedules II, III, IV, or V outside the physical presence of a medical director if such administration is authorized under state law and pursuant to a standing or verbal order, subject to specified conditions

The bill specifies that a hospital-based EMS agency (i.e., an EMS agency owned or operated by a hospital) may continue to administer controlled substances under the hospital's DEA registration. Shown Here: Introduced in Senate (05/25/2017) Length of Service Award Program Cap Adjustment Priority Act or the LOSAP CAP Act

This bill amends the Internal Revenue Code, with respect to deferred compensation plans, to increase the limit on accruals that is required for length of service award plans (LOSAPs) for bona fide volunteers to be exempt from treatment as a deferred compensation plan.

Under current law, plans paying solely length of service awards to bona fide volunteers or their beneficiaries on the account of firefighting and prevention services, emergency medical services, and ambulance services performed by the volunteers are not treated as deferred compensation plans if they meet certain requirements.

One of the requirements is a limit on the aggregate amount of length of service awards that may accrue with respect to any year of service for any bona fide volunteer.)

The bill modifies the limit on accruals to: (1) increase the limit from \$3,000 to \$6,000; (2) provide for a cost-of-living adjustment to the limit after 2017; and (3) specify that, in the case of LOSAPs that are defined benefit plans, the limit applies to the actuarial present value of the aggregate amount of length of service awards accruing with respect to any year of service.

5 year extension of the ambulance Medicare **add-ons through December 31, 2022**, **retroactive to January 1, 2018**.

AAA's preferred method of Cost data collection **that provides flexibility to the Secretary of HHS in developing the system.** Consultation with the industry is required so that it strikes the appropriate balance between obtaining meaningful data while not overly burdening or onerously penalizing the ambulance services. The penalty for failing to report required data would be a reduction in payment up to 10% for the year following the year in which the data should have been submitted. AAA objected to the house proposed penalty of up to a year of Medicare payments clawback or withholding of payments. A clause is included to wave the penalty in cases of hardship.

A "pay-for" for the 5-year extension of the add-ons with a 13% cut to nonemergent dialysis transports – the AAA had objected to the offset and pushed for a cut targeted to just those entities which abuse the dialysis transport benefit. We were successful in reducing the initial cut from 22% to 13%. The AAA is actively working on other pay-for options that would replace the 13% cut with something targeting dialysis fraud and abuse.



Updated Scope of Practice updates 12/17/17:

- Use of Albuterol by First responders
- Use of ODT Zofran by EMTS

State has proposed that all paramedic programs achieve accreditation status-Meeting June 7th, 2018 at ICEP in Downers Grove from 12:30-2:30

CE Hours for recertification are categorized to match the National requirements

5-year strategic Plan for IDPH EMS- May 31, 2018 10:00 ICEP Downers Grove

The 2018 theme EMS STRONG is "Stronger Together"

The theme days for 2018 are:

Monday - Education Tuesday - Safety Tuesday Wednesday - EMS for Children Day Thursday - Save-A-Life (CPR and Stop the Bleed) Friday - EMS Recognition Day



Questions? Melissa Stokes

Melissa.stokes@unitypoint.org





The Office of Infrastructure Protection

National Protection and Programs Directorate Department of Homeland Security

Protective Security Coordination Division Overview

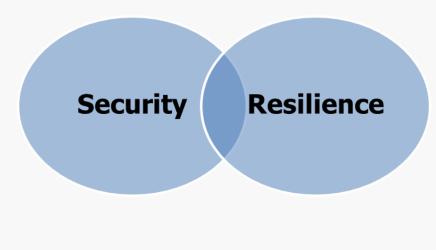
Central Illinois Coalition Active in Response Planning (CIL-CARP)

05/09/2018



Office of Infrastructure Protection

- <u>Mission</u>: To lead the national effort to mitigate risks to, strengthen the protection of, and enhance the all-hazard resilience of critical infrastructure
- IP builds partnerships across the critical infrastructure domain, leads related preparedness activities, and serves as an information-sharing conduit between the private sector and public entities





Critical Infrastructure Sectors

- Chemical
- Commercial Facilities
- Communications
- Critical Manufacturing
- Dams
- Defense Industrial Base
- Emergency Services
- Energy
- Financial Services
- Food and Agriculture
- Government Facilities

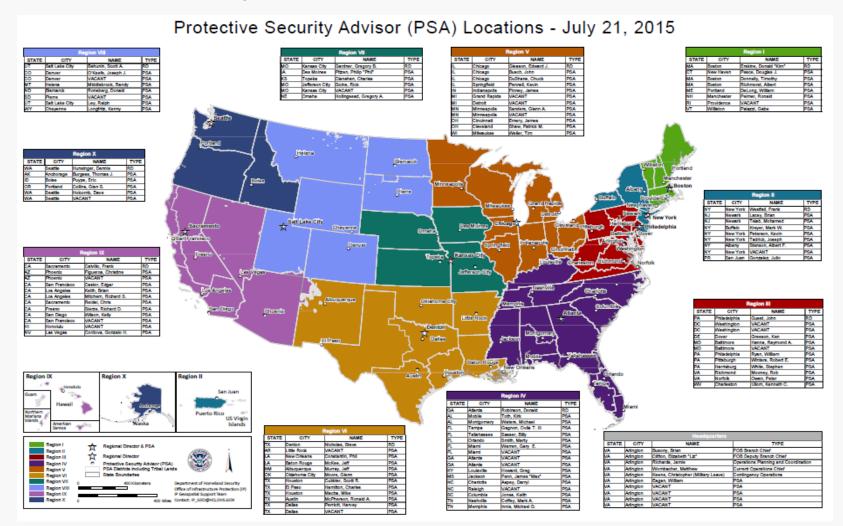
- Healthcare and Public Health
- Information Technology
- Nuclear Reactors, Materials, and Waste
- Transportation Systems
- Water and Wastewater Systems



Courtesy of DHS

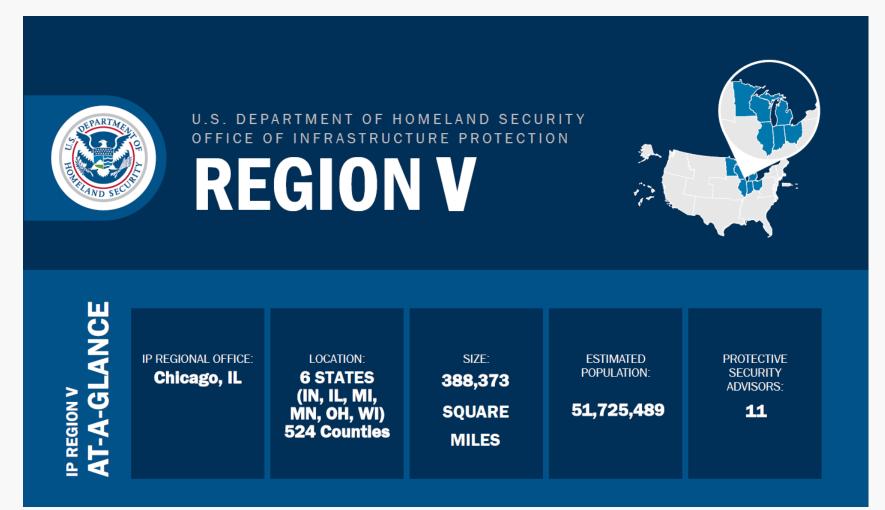


Protective Security Advisor Locations



Homeland Security Courtesy of DHS

IP Regionalization





Protective Security Advisors

- PSAs are field-deployed personnel who serve as critical infrastructure security specialists
 - Regional Directors (RDs) oversee and manage the PSA program in their respective region
- State, local, tribal, and territorial (SLTT) and private sector link to DHS infrastructure protection resources
 - Coordinate vulnerability assessments, training, and other DHS products and services
 - Provide a vital link for information sharing in steady state and incident response
 - Assist facility owners and operators with obtaining security clearances
- During contingency events, PSAs support the response, recovery, and reconstitution efforts of the States by serving as pre-designated Infrastructure Liaisons (IL) and Deputy ILs at the Joint Field Offices



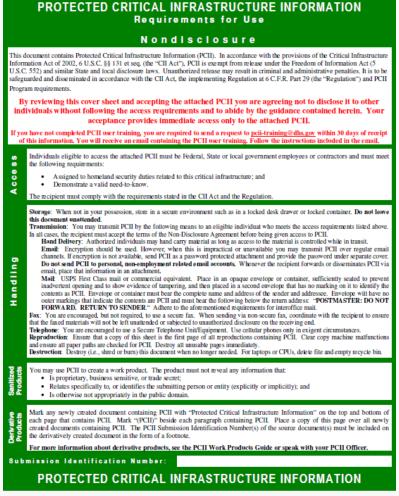
Security and Resilience Challenges

- A majority of critical infrastructure is privately owned
- DHS has limited legal authority to regulate security practices of private industry
 - Exceptions: National Protection and Programs Directorate Office of Infrastructure Protection (high-risk chemicals), Transportation Security Administration, and United States Coast Guard
- DHS; Sector-Specific Agencies; other Federal entities; the private sector; and State, local, tribal, and territorial governments all have roles and responsibilities in critical infrastructure protection



Protected Critical Infrastructure Information

- Established under the Critical Infrastructure Information Act of 2002
- Protects voluntarily submitted critical infrastructure information from:
 - Freedom of Information Act
 - State and local sunshine laws
 - Civil litigation proceedings
 - Regulatory usage
- Provides private sector with legal protections and "peace of mind."



Courtesy of DHS



Examples of Critical Infrastructure Information

- Protected information defined by the Critical Infrastructure Information Act includes:
 - Threats Actual, potential, or threatened interference with, attack on, compromise of, or incapacitation of a critical asset
 - Vulnerabilities Ability to resist threats, including assessments or estimates of vulnerability
 - Operational experience Any past operational problem or planned or past solution including repair, recovery, or extent of incapacitation
- Any information normally available in the public domain will not be protected

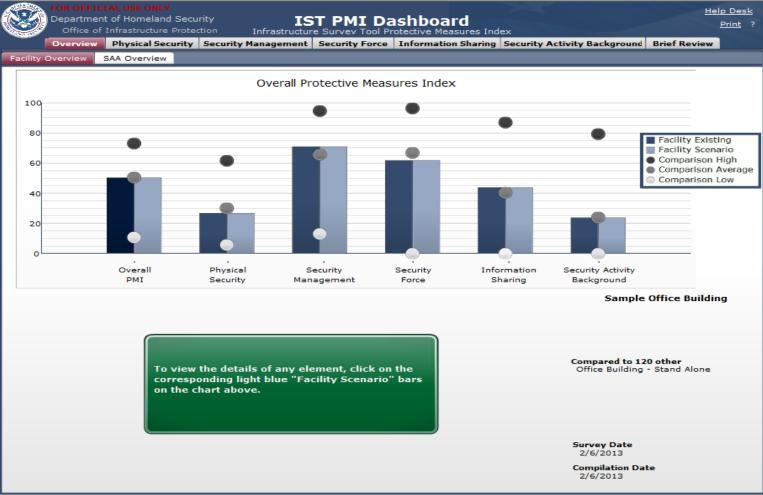


Site Assist Visit

- Establishes and enhances DHS's relationship with critical infrastructure owners and operators, informs them of the importance of their facilities, and reinforces the need for continued vigilance
- During an Assist Visit (SAV)visit, PSAs focus on coordination, outreach, training, and education
- SAV visits are often followed by security surveys using the Infrastructure Survey Tool (IST) or Rapid Survey Tool (RST), or delivery of other IP services



Infrastructure Survey Deliverables





Counter-IED Training & Awareness



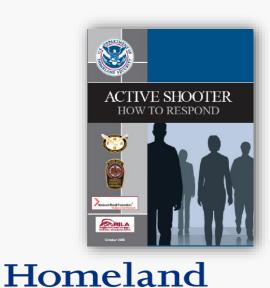
Courtesy of DHS OBP



- Diverse curriculum of training designed to build counter-IED core capabilities, such as:
 - IED Counterterrorism Detection
 - Surveillance Detection
 - Bomb Threat Management
 - Vehicle-Borne IED (VBIED) Detection
 - Protective Measures
 - IED Search Procedures
- Increases knowledge and ability to detect, prevent, protect against, and respond to bombing threats

Training and Outreach Materials

- DHS materials consist of three products:
 - Basic Guide Book.
 - Pocket Emergency Measures Guide.
 - Break Room Poster.
- To download these materials visit:
 - www.dhs.gov/activeshooter



Security





Online Training

- DHS released "Active Shooter, What You Can Do" (IS-907), an online training course available through the Federal Emergency Management Agency Emergency Management Institute:
 - <u>http://training.fema.gov/EMIWeb/IS/IS907.asp</u>
- The self-paced course takes approximately 45 minutes to complete.
- Upon completion, participants can take a short online "final exam" that is instantly scored. A certificate is provided to participants who finish the course and pass the final exam.



How Can You Help?

- Engage with PSAs and other partners on critical infrastructure protection programs and initiatives
- Encourage participation in efforts to identify, assess, and secure critical infrastructure in your community
- Communicate local concerns related to critical infrastructure protection
- Enhanced security and resilience depends on developing and strengthening partnerships between all entities with a role in critical infrastructure protection



Be Involved

- PSA Contact Information Name:
 - Kevin Pennell
 - Phone: 217-836-2631
 - E-mail: <u>kevin.pennell@hq.dhs.gov</u>
- National Infrastructure Coordinating Center (NICC) Contact Information
 - E-mail: <u>NICC@dhs.gov</u>
 - Phone: 202-282-9201.
- Websites:
 - DHS National Protection & Programs Directorate (NPPD)
 - <u>http://www.dhs.gov/about-national-protection-and-programs-directorate</u>
- DHS-NPPD Office of Infrastructure Protection
 - http://www.dhs.gov/office-infrastructure-protection





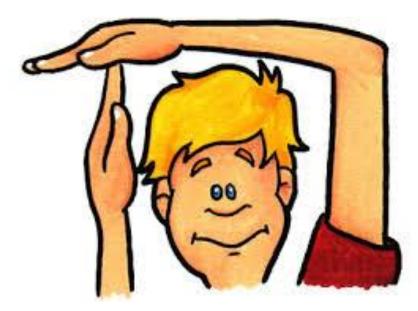
Homeland Security

For more information, visit: www.dhs.gov/critical-infrastructure





Lets take a break...





ISU Reunification Drill

Eric Hodges – Illinois State University

University Lab Schools Relocation & Reunification Plan & Full-Scale Exercise





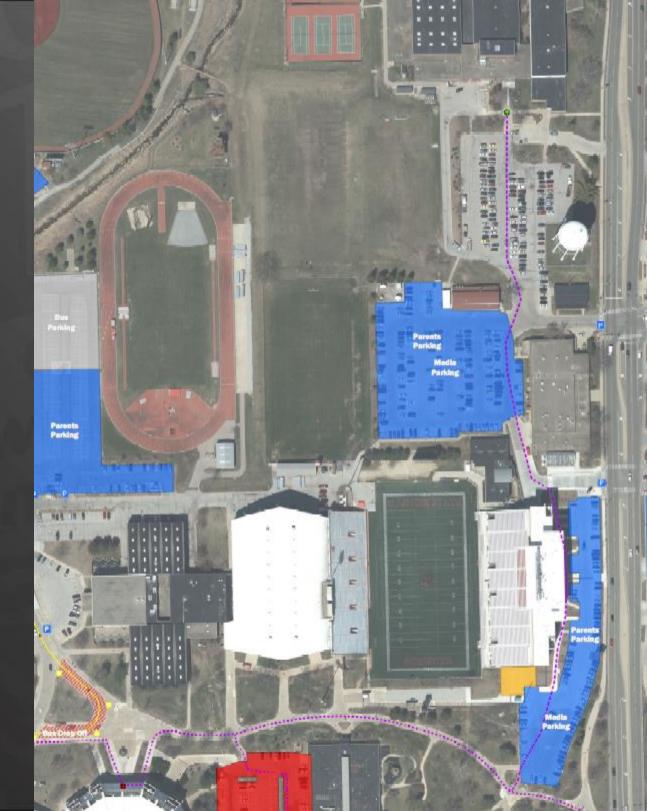
PLAN OVERVIEW



RELOCATION - METCALF



RELOCATION: U-HIGH



PREPARING REDBIRD ARENA

Dismiss Event in Progress

Setup Directional Signs

Prepare Video Board

Setup Spaces

Lock Unused Doors

TRAFFIC & PARKING

Protect College Ave.

Task ISU Parking, Grounds & TON Streets

Agents at Lot Entrances

Direct Media

Direct Responders





REUNIFICATION ROLES

Greeters	Check-In Station	Check-In Supervisor		
Check-In Runner	Reunification Command Center	A/V Room Operator		
Parent Waiting Area Supervisor	Student Waiting Area Supervisor	Donation Management Coord.		
Food Unit Leader	Coroner Liaison	Coroner Escort		
Check-Out Supervisor	Check-Out Runner	Counseling/Support Room		
AFN Supervisor	Medical	School Liaison to EOC		
Athletics Liaison/Runner	Sidewalk Direction	Traffic Direction		
Traffic Direction Supervisor	Parking Lot Attendant	Parking Lot Supervisor		

REUNIFICATION OVERVIEW



 Upper Bowl Seating

Parent Check-In

- Confirm Authorization to Release
- Student Name on Video Board
- Parent Waiting Area

Student/Parent Check-Out

Student
Directed to
Floor to Meet
Parents

STUDENTS

- Upon Entry into Redbird Arena, Teacher leads Students to Upper Bowl (East)
- Seating assignments vary by school
- Teachers Remain with Students Until Released

PARENT GREETING STATION

- Greeters at SW Loading Dock Entrance Explain Process
- Complete Box 1

BOX 1 Check-In Details					
Completed by: Parent/Guardian	1. Student Last Name	First Name			
	2. Student Last Name	First Name			
	3. Student Last Name	First Name			
	Name of Person Picking up Student(s):				
	Relationship to Student(s):				

CHECK-IN

- Parents Visit Check-In Table (Alphabetical)
- Confirm Name on Emergency Card (Box 2)
- Wait in Lower Bowl (West)

BOX 2 Check-In Confirmation					
	Name on Release Form? (circle one) Yes No				
Completed by: Check-In Staff	Photo ID/Driver's License Checked				
	or ok to verify at Check-Out by student /				
	Confirmed by Check-In Staff				

CHECK-IN STATION

please watch for your han

A4 STATE

Ford

VIDEO BOARD

- Student Name Digitally Sent to A/V Room by Check-In Table
- 2. Student Name Added to Video Board
- 3. Student Name Removed when Check-Out Complete



REDBIRD ARENA



Jeremy Longname Jeremy Longname

Jeremy Longname Jeremy Longname Jeremy Longname Jeremy Longname Jeremy Longname Jeremy Longname Jeremy Longname Jeremy Longname Jeremy Longname

URNAME, PLEASE REPORT HOUT TABLE AT THE OF SECTION ???

i'm lovin' it'

WHEN YOU SEE YOUR NUK TO THE CHECKOUN BOTTOM OF SKI

Redbirde

JILL

BASKE

1968

REUNIFICATION

- When Teacher/Student Sees Name on Video Board, Student Heads to Arena Floor
- School Staff on Concourse to Assist/Direct

CHECK-OUT

Final Sign-Off on Reunification Card

BOX 3 Check-Out Confirmation					
	Name of Person Picking Up is same as Box #1 above 🔲 Yes				
y: Staff	Photo ID/Driver's License Checked				
eted b c -Out	or verified as in Box #2 above by student /				
Completed by: Check-Out Staff	Confirmed by Check-Out Staff				
BOX 4 Release Signature					
Completed by: Parent /Guardian	Requester Signature				
	Destination/Phone				
	Date : Time:				



ON-SITE SERVICES



BEFORE EXERCISE

- Orientation session for parents week-of exercise
- Training session for all Players
- Training session for Veoci operators
- Training session for Reunification Command Center staff
- School assembly for students/actors

DAY OF EXERCISE

- Approximately 180 parents and 180 students participated (out of 600)
- 30 Controllers, Evaluators, Safety Officers
- 50 Players (School Staff)
- 90 Observers
- Several media outlets

OVERHEAD POSITIONS

Controllers

- Exercise Director
- Lead Controller
- Greeting Station
- Check-In Station
- Check-Out Station
- A/V Room
- Command Center
- AFN, Medical, Counseling
- Parent Area
- Student Area
- Observer
- Lead SimCell
- Simulator

Evaluators

- Lead Evaluator
- Greeting Station
- Check-In Station
- Check-Out Station
- A/V Room
- Command Center
- AFN, Medical, Counseling
- Parent Area
- Student Area

SOFRs/Other

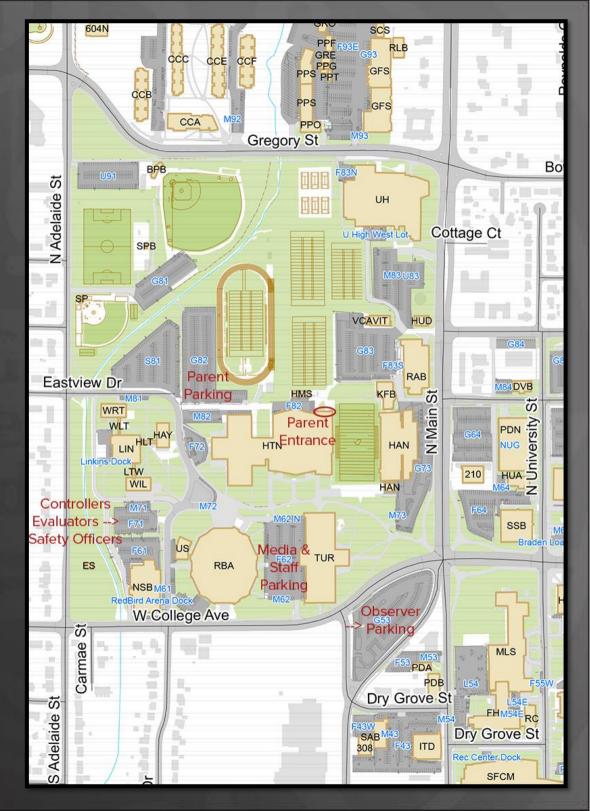
- Lead SOFR
- SOFR-Arena Floor, Parents
- SOFR-Concourse, Students
- SOFR-Lower Level
 - 2 EMTs
- Media Liaison
- Veoci Tech Support
- Videographer
- Photographer
- Check-In/Out/Eval Stations



- 1. Process students at a rate of 150 per hour, from greeting through check-out, as outlined in the Relocation and Reunification Plan
- 2. Address all access and functional needs students and special cases within 2 hours, each according to Relocation and Reunification Plan
- 3. Establish and utilize radio communications as prescribed in the Relocation and Reunification Plan

LOGISTICS

- Parking Assignments
- Full Timeline
- Briefings
 - Students
 - Parents
 - Players
 - Observers
 - Media
 - HotWash



CONTROLLER / EVALUATOR / SOFR BRIEFINGS

- Pre-Exercise Briefing
- Day-Of Briefing



Reunification Full-Scale Exercise

Controller/Evaluator Handbook April 6, 2018

The Controller/Evaluator (C/E) Handbook describes the roles and responsibilities of exercise controllers and evaluators, and the procedures they should follow. Because the C/E Handbook contains information about the scenario and about exercise administration, it is distributed to only those individuals specifically designated as controllers or evaluators; it should not be provided to exercise players. The C/E Handbook may supplement the Exercise Plan (ExPlan) or be a standalone clocument.



AFN & SPECIAL SCENARIOS

- Parents on-site, but not students
- Students on-site, but no parents
- Parents on-site, but students transported from scene
- Parents on-site, but students deceased
- Students injured at Arena
- Students ill at Arena
- Students need their meds at Arena
- Parents/students want counseling prior to departure

- Neighbor attempting to pick up student
- Parent forgot ID
- Deaf student
- Blind student
- Student utilizing wheel chair
- 18-year-old student
- Students/Teacher arriving late
- 2 parents arrive at different times

ACTORS WITH SPECIAL ROLES

- Each actor pre-identified
- Each actor contacted prior to exercise
- Provided a role-player card at check-in

[03-Curt Richardson, Unit 5 Administrator] Your student's name is Taylor Richardson. Staff will approach you during the exercise to escort you to meet with the Coroner. You won't know why they're taking you there. Feel free to role play a bit and ask the staff where you're going, why, etc. It's okay (and probably good) if other parents around you hear what's going on. Don't put up too much of a <u>fuss, but</u> play it out in a realistic manner. You'll visit with the Coroner; it will be somewhat artificial and then you'll head to the Counselor's room. You only need to stay there for a couple minutes before your part in the exercise is done. You're welcome to join the other Observers in the upper bowl west side.

OTHER EXERCISE ITEMS

- SimCell/MSEL
- Photo and Video
- Everyone completes Feedback form

Inject #	Actor Card #	Assigned To	From	То	Means	Description	Expected Action	EEG #	EEG Critical Task #
1	n/a	Lead Controller (Derek)	Lead Controller (Derek)	Parent Area Controller (Phil, Sherry)	Radio	Escort parents to South Loading Dock; direct them into Arena and to Greeters Station	N/A	N/A	N/A
2	n/a	SimCell Simulator (Dennis)	EOC	RCC	Phone	This is an exercise message. This is the Emergency Operations Center. The Incident Commander at the school has advised that the school has finished evacuating everyone they can see. There are stil people trapped. When they're free and if they're ok, Command will send them your way.	Ithat attendance will	1	1.5.3
3	9,10	Student Controller (Julie)	Teacher (Ms. Shannon Maney)	Student Actor (Paul Africano)	Verbal	"Paul, what happened there?" pointing to a simulated injury on his arm.	Short conversation ensues; Teacher asks Runner to escort Paul to Nurse's area	2	2.2.2



















WRAP-UP

- Initial Feedback
 - Veoci Worked Well
 - Everyone Engaged
 - Concerns with Scenario
 - Significantly Matured our Capability
- After-Action Report
- Future Exercise







School & Campus Safety

Eric Arnold – Illinois Law Enforcement Training and Standards Board



Regional Asset List Development

Dawn Cook – Tazewell County Emergency Management Agency





https://www.osfhealthcare.org/saint-francis/services/emergency/ osf-disaster-preparedness/cil-carp/



CIL – CARP Gap Assessment

Agency Affiliation

List the top 3 PLANNING GAPS for CIL-CARP

1	 	
2		
2		
3	 	



Thank you!

Please provide feedback

Building a coalition for us, not a one size fits all

