



## Illinois Medical Emergency Response Team

### Illinois Nurse Team

#### Upcoming Training Sessions:

May 5 or 6  
Deployment Operations Course  
NIPSTA  
Glenview, IL

June 23 or 24  
Deployment Operations Course  
NIPSTA  
Glenview, IL

July 14 or 15  
Deployment Operations Course  
ILEAS Training Center  
Urbana, IL

September 8 or 9  
Deployment Operations Course  
Cook County Homeland Security  
Oak Lawn, IL

**AND MORE!!!**

#### In This Issue:

Message from the Medical  
Director, pg.1

Update Your Response Bag pg. 3

Training Update, pg. 3

HIPPA in Disasters, pg. 4

Solar Eclipse, pg. 5

**Spring 2017**

Dear IMERT Members:

Some of you may have attended workshops and outreach engagements on Crisis Standard of Care (CSC) over the past two years sponsored by the Illinois Department of Public Health (IDPH) and the Chicago Department of Public Health (CDPH).

For those of you new to the idea, what is Crisis Standard of Care?

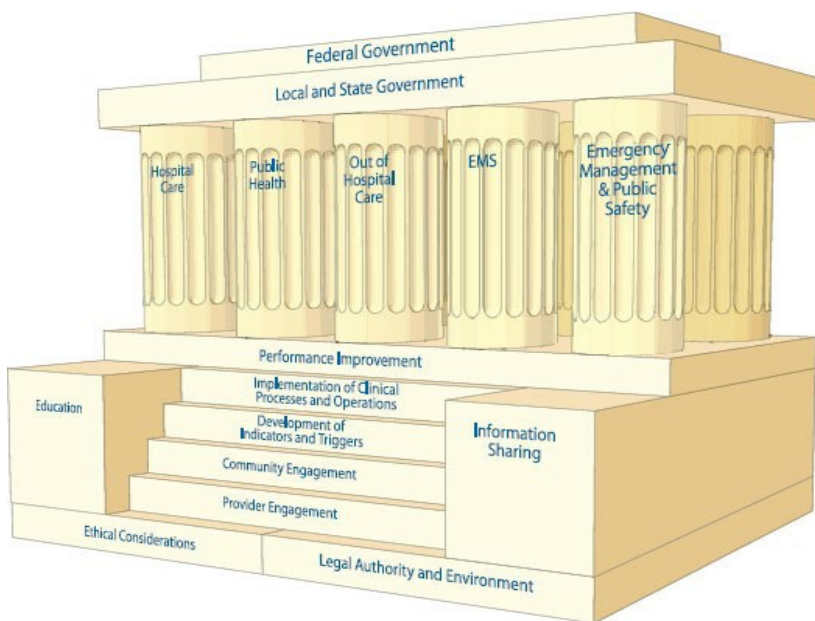


In a nutshell: How do we (you and your community) mitigate a catastrophic situation where we have severe shortage or complete lack of resources? How do we “triage” or “reuse” limited resources? For example, ONE dialysis machine for 20 dialysis patients.

Can it happen? It's more a matter of when. Think of Hurricane Katrina when a whole regional healthcare system became compromised. Think a catastrophic earthquake (“no notice event”) in a large geographical region of Southern IL and all public safety and healthcare resources are limited or nonexistent for a period of time. Think an emerging highly infectious disease with massive number of patients and fatalities (“slow-onset event”).

The multi-year project to examine CSC that Illinois public leadership has embarked on stems from the Health and Human Services sponsored Institute of Medicine 2009 publication “Crisis Standards of Care: A Systems Framework for Catastrophic Disaster Response” at <http://www.nationalacademies.org/hmd/Reports/2012/Crisis-Standards-of-Care-A-Systems-Framework-for-Catastrophic-Disaster-Response.aspx> and “Crisis Standard of Care: A Toolkit for Indicators and Triggers” 2013 publication at <http://www.nationalacademies.org/hmd/activities/global/crisisstandardsofcaretoolkit.aspx>.

(cont pg. 2)



Pictures provide a great deal of information. This diagram was created by Dr. Daniel Hanfling, one of the co-chairs of the Institute of Medicine's (IOM) publication who has been contracted as a facilitator for Illinois and Chicago's CSC Planning Committee.

Notice that the foundation of this concept is ETHICS and LEGAL considerations. The Illinois project has engaged state experts in medical ethics and legal authority in these challenging scenarios.

The IOM describes three phases of the Concept of Operations of CSC. Most are familiar with the first two. In summary they are:

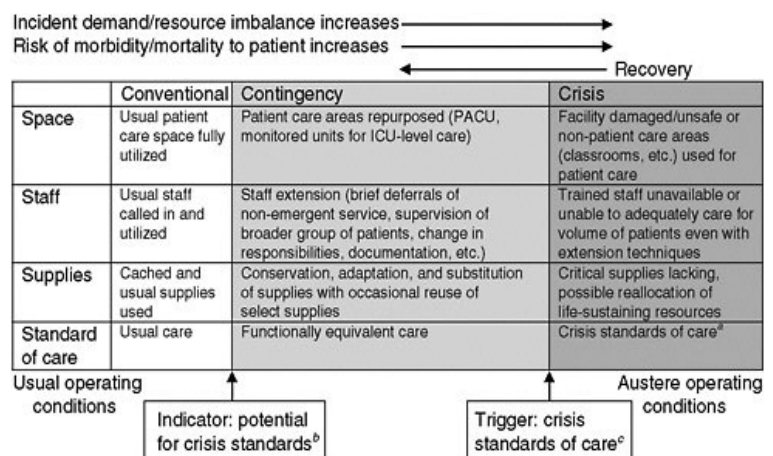
**Conventional:** Our day to day operations.

**Contingency:** Think of the recent Ebola preparedness. Think of the impact it had on local public health, EMS, public safety and hospitals.

**Crisis:** Think of a catastrophic earthquake along the Southern IL New Madrid fault where all access has been disrupted and the regional healthcare delivery systems collapsed.

There are NO simple or one package fits all answers to Crisis Standard of Care management but this project is to provide some guidance to regional, state and local stakeholders on how to approach such situations.

Look forward to more information as this project moves forward over the next few years. You may also check out the upcoming Illinois Public Health Association Conference 2017 (<http://preparednesssummit.illinoisstate.edu/>) where there will be a preconference workshop on June 12 on this important issue.



Thank you.  
Dr. Moses Lee (IMERT Medical Director)

## UPDATE YOUR RESPONSE BAG

With the seasons changing from Winter to Summer, please remember to update your response bag for warm weather operations.

This should include removing all of your cold-weather gear from your bag and adding the following items:

- Sunscreen
- Sun hat/sun protective gear
- Light-weight/dry-fit clothing for off-duty wear

It would also be a good time to check any perishables you have in your bag and refresh any that may have expired.

For a guide on what should be in your bag, visit the IMERT website's Team Member section.

---

## Training Calendar

We have just posted our training schedule for the 2017 calendar year. As you know, in order to be eligible for deployment you need to attend a face to face training at least once a year, so it is important that you attend if you are able.

- May 5 or 6 at NIPSTA in Glenview, IL
- June 23 or 24 at NIPSTA in Glenview, IL
- July 14 or 15 at ILEAS in Urbana, IL
- August 4 or 5 at NIPSTA in Glenview, IL
- September 8 or 9 at the Cook County DHS in Oak Forest, IL
- Nov 10 or 11 at ILEAS in Urbana, IL

To register, go to the IMERT website and look under [courses](#) for the date you are available to attend.



IMERT team members attending a Deployment Operations Course session at ILEAS where members can view and gain experience with IMERT's equipment package and warehouse space.

## HIPPA AND DISASTERS, What Health Professionals Need to Know

For families searching for loved ones in a declared disaster, HIPPA privacy rules can add another obstacle to overcome. The HIPAA Privacy Rule protects the privacy of patients' health information (protected health information), but during a state of emergency can be balanced to ensure that appropriate uses and disclosures of the information still may be made when necessary to treat a patient, to protect the nation's public health, and for other critical purposes.

Updated guidelines have been issued on how patient information may be shared under the HIPAA Privacy Rule in an emergency situation, and to serve as a reminder that the protections of the Privacy Rule are not set aside during an emergency.

The full guide can be accessed here at <https://imert.org/wp-content/uploads/2017/03/HIPPA-and-disasters.pdf>

This guide addresses what information can be disclosed and under what circumstances. Covered entities can disclose needed patients' protected health information (PHI) without individual authorization:

- If necessary to treat the patient or a different patient or if the information would help treat a different patient
- To a public health authority, as outlined below
- At the direction of a public health authority, to a foreign agency acting in collaboration with the public health authority
- To persons at risk of contracting or spreading a disease or condition (if authorized by other law)
- With certain people involved with patient's care/ responsible for the patient
- When there is imminent threat to public health/ safety

NOTE: This guide does NOT replace the advice of your facility Privacy Officer and/or legal counsel who should be involved in planning for information release prior to an event, developing policy before a disaster that guides staff actions during a disaster, and during an emergency when contemplating disclosures.



# SOLAR ECLIPSE

On August 21, most of the state will experience a solar eclipse, with far southern Illinois in line with the path of totality, experiencing complete darkness for close to 3 minutes. Thousands of people are expected to flock to the Carbondale area. Emergency management and healthcare providers have already started planning for the influx of observers.

The Sun can be viewed safely with the naked eye only during the few brief seconds or minutes of a total solar eclipse. Partial eclipses, annular eclipses, and the partial phases of total eclipses are **never** safe to watch without taking special precautions. Do not attempt to observe the partial or annular phases of any eclipse with the naked eye. Failure to use appropriate filtration may result in permanent eye damage or blindness!

It is never safe to look directly at the sun's rays – even if the sun is partly obscured. When watching a partial eclipse you must wear eclipse glasses at all times if you want to face the sun, or use an alternate indirect method. This also applies during a total eclipse up until the time when the sun is completely and totally blocked.

You can purchase an inexpensive pair of eclipse glasses from a variety of vendors including Amazon and Walmart, however there are many alternative methods available. The safest and most inexpensive of these methods is by projection, in which a pinhole or small opening is used to cast the image of the Sun on a screen placed a half-meter or more beyond the opening. Projected images of the Sun may even be seen on the ground in the small openings created by interlacing fingers, or in the dappled sunlight beneath a leafy tree. Binoculars can also be used to project a magnified image of the Sun on a white card, but you must avoid the temptation of using these instruments for direct viewing.

First and foremost: Check for local information on timing of when the total eclipse will begin and end. [NASA's page of eclipse times](#) is a good place to start.

