



Mission: Lifeline Focus on Recognition

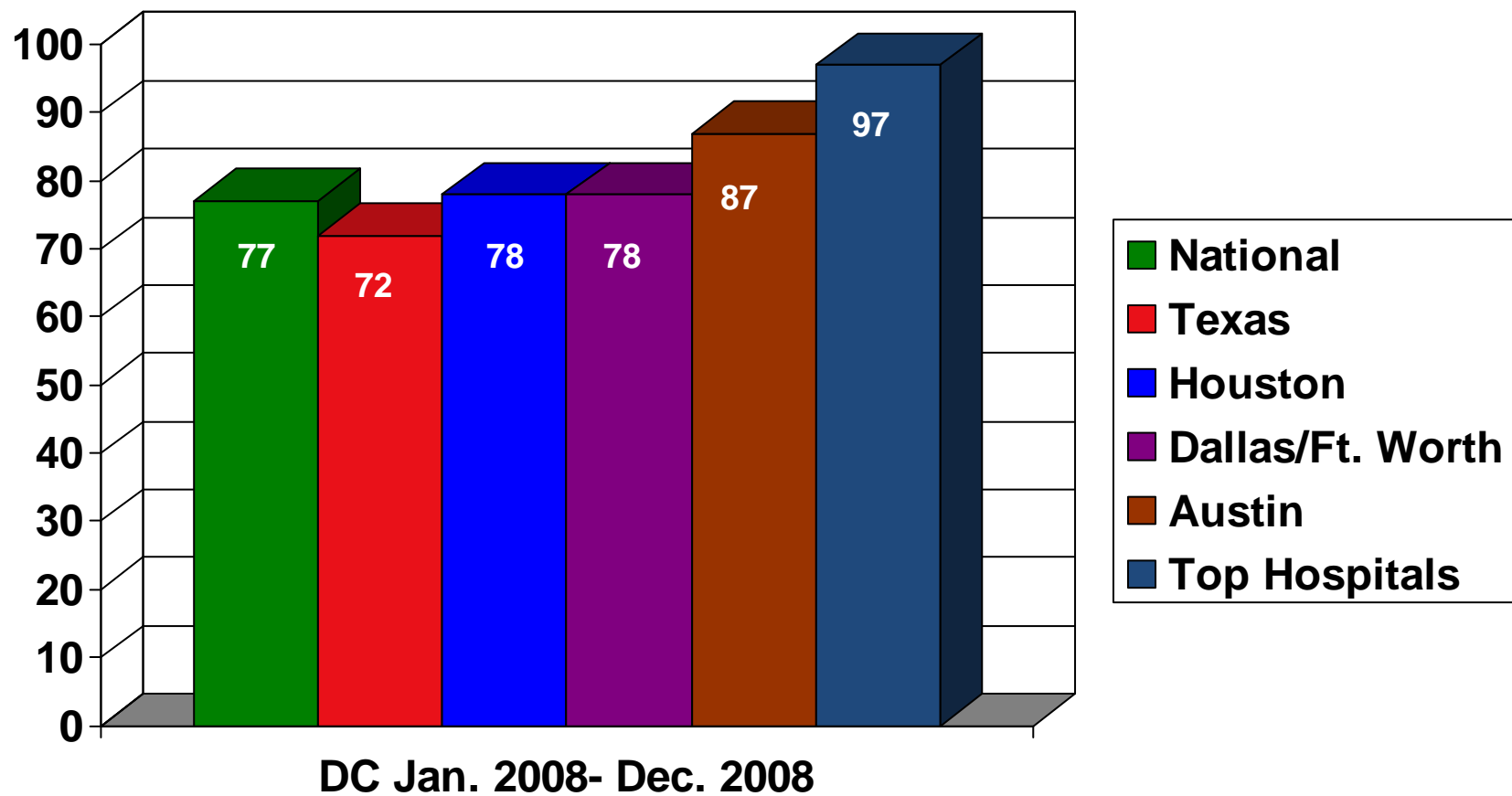
Presented By:

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ACC/AHA STEMI Updates Coming Soon

 ACC/AHA STEMI and PCI Focused updates will be released in a few weeks at Scientific Sessions

Percent of Heart Attack Patients Given PCI Within 90 Minutes of Arrival



Mission: Lifeline Involvement

Certification

Examples



Recognition

Examples



Participation

Participation Requirements- STEMI Referral Center

- Recognized hospital champion.
- There should be on-going multidisciplinary team meetings to evaluate outcomes and quality improvement data. Operational issues should be reviewed, problems identified, and solutions implemented.
- Participate on the local Mission: Lifeline Stakeholder group to contribute to the development of the regional STEMI System of Care plan.
- Commitment to the Emergency Department having adequate staff, equipment, and training to perform ED rapid evaluation, triage, transport and treatment for STEMI patients.

Participation Requirements- STEMI-Referral Center

- ➔ Commitment to develop and/or refine ED triage for rapid reperfusion, either transfer protocol or fibrinolytic, to be in compliance with the regional STEMI systems of care plan.
- ➔ Commitment to develop a plan with EMS to ensure inter-hospital transfers receive priority response.
- ➔ Participate in data collection, quality improvement efforts and feedback loops to ensure optimal STEMI patient care is delivered.

Participation Requirements- STEMI-Receiving Center

- ➔ **Recognized hospital champion.**
- ➔ **There should be on-going multidisciplinary team meetings to evaluate outcomes and quality improvement data. Operational issues should be reviewed, problems identified, and solutions implemented.**
- ➔ **Participate on the local Mission: Lifeline Stakeholder group to contribute to the development of the regional STEMI System of Care plan.**
- ➔ **Commitment to the ED and Cardiac Cath Lab having adequate staff, equipment, and training to perform rapid evaluation, triage, and treatment for STEMI patients.**

Participation Requirements- STEMI Receiving Center

- ➔ Commitment to developing and/or refine ED and cath lab triage and transfer receiving protocol to be in compliance with the regional STEMI systems of care plan.
- ➔ Commitment to develop a plan with EMS to ensure inter-hospital transfers and fibrinolytic ineligible patients receive priority response and are communicated en-route to bypass non-PCI capable ED where appropriate.
- ➔ Participate in data collection, quality improvement efforts and feedback loops to ensure optimal STEMI patient care is delivered.

Mission: Lifeline Recognition

- ➔ Is the second level of involvement an organization can achieve within Mission: Lifeline

- ➔ Like participation and certification, the program is divided into 4 areas:
 - EMS
 - STEMI Referral Hospitals
 - STEMI-Receiving Hospitals
 - STEMI Systems

Mission: Lifeline Recognition

All areas must achieve the following:

- ➔ 85% or greater composite score with no single measure below 75% on the following achievement measures for specified periods of time
- ➔ Bronze = 90 consecutive days,
Silver = 12 consecutive months,
Gold = 24 or more consecutive months
- ➔ Annual award period for consideration =
January - December
- ➔ Annual award submission period =
January 1st - March 31st following year

Mission: Lifeline Recognition

Hospitals will need to participate in ACTION Registry-GWTG in 2009 for at least 90 days in order to be considered for at least the Bronze level of achievement.

Mission: Lifeline Recognition

Timeframes:

- ➔ Referral and Receiving Center Recognition Programs will be available for launch in October 2009.
- ➔ EMS Program is estimated to be available in 12-18 months*.
- ➔ Systems Program is also estimated to be available in 12-18 months** .

Mission: Lifeline Recognition

The Process:

Hospitals fill out appropriate paperwork and submit it during the submission period.



Applications are reviewed and approved



Recognized hospitals will be invited to recognition dinner at Sessions 2010 and will be recognized in the US News and World Report Ad

STEMI Referral Center Recognition

Achievement Measures:

1. Percentage of STEMI patients with a door-to-first ECG time <10 minutes
2. Percentage of reperfusion -eligible patients receiving any reperfusion (PCI or fibrinolysis) therapy
3. Percentage of reperfusion -eligible patients with door-to-needle time within 30 minutes

STEMI Referral Center Recognition

Achievement Measures:

4. Percentage of reperfusion -eligible patients transferred to PCI center with door-in- to door-out time within 45 minutes
** Facility goal to make first door-to-balloon (first device used) time within 90 minutes (taking into consideration transport time)*
5. Percentage of STEMI patients receiving aspirin within 24 hours
6. Percentage of STEMI patients on aspirin at discharge

STEMI Referral Center Recognition

Achievement Measures:

7. Percentage of STEMI patients on Beta Blocker at discharge
8. Percentage of STEMI patients with LDL > 100 who receive statins or lipid lowering drugs
9. Percentage of STEMI patients with LVSD on ACEI/ARB at discharge
10. Percentage of STEMI patients that smoke with smoking cessation counseling at discharge

STEMI Referral Center Recognition

Reporting Measures:

1. STEMI Referral Center ED door-to-balloon (first device used) time within 90 minutes (including transport time)

- It is recommended that a multidisciplinary STEMI team, including EMS, should review hospital specific STEMI data (both achievement and reporting measures) on an on-going basis.

STEMI-Receiving Center Recognition

Achievement Measures:

1. Percentage of STEMI patients with a door-to-balloon (first device used) within 90 minutes, non-transfer
2. Percentage of STEMI patients with first medical contact to balloon inflation (first device used) within 90 minutes, non-transfer

STEMI-Receiving Center Recognition

Achievement Measures:

3. Percentage of reperfusion -eligible patients receiving any reperfusion (PCI or fibrinolysis) therapy)
4. Percentage of STEMI patients receiving aspirin within 24 hours
5. Percentage of STEMI patients on aspirin at discharge

STEMI-Receiving Center Recognition

Achievement Measures:

6. Percentage of STEMI patients on Beta Blocker at discharge
7. Percentage of STEMI patients with LDL > 100 who receive statins or lipid lowering drugs
8. Percentage of STEMI patients with LVSD on ACEI/ARB at discharge
9. Percentage of STEMI patients that smoke with smoking cessation counseling at discharge

STEMI-Receiving Center Recognition

Reporting Measures:

1. In-hospital mortality
2. Percentage of STEMI patients with a first medical contact to balloon inflation (first device used) within 90 minutes, transfer
3. Percentage of STEMI patients with a door-1-to-balloon (first device used) within 90 minutes, transfer
4. Percentage of STEMI patients with a door-2-to- balloon (first device used) within 90 minutes, transfer

EMS Recognition

Achievement Measures:

1. Percentage of patients with non-traumatic chest pain > 35 years treated by EMS for whom prehospital 12-lead electrocardiograms were obtained
2. Percentage of STEMI patients with time from first prehospital medical contact to balloon inflation (first device used) within 90 minutes (within 30 minutes for administration of fibrinolytic therapy)

EMS Recognition

Reporting Measures:

1. Time from symptom onset to EMS dispatch
2. Time from EMS dispatch to vehicle arrival at hospital door
3. Time from first medical contact to balloon inflation (first device used)

EMS Recognition

Reporting Measures:

4. Percentage of suspected cardiac patients > 35 years treated by EMS for whom 12-lead electrocardiograms were obtained
5. Percentage of patients with STEMI treated by EMS for whom 12-lead electrocardiograms were obtained
6. Percentage of patients with field diagnosis of STEMI and field activation of the Cardiac Catheterization Laboratory for intended primary PCI

STEMI System Recognition

PLEASE NOTE: The system measures are currently being finalized by the Mission: Lifeline Advisory Working Group.

STEMI System Recognition

Achievement Measure:

1. **Percentage of STEMI patients with first medical contact to balloon inflation (first device used) within 90 minutes, non-transfer**

STEMI System Recognition

Reporting Measures:

1. Survival to hospital discharge of all STEMI patients (EMS and STEMI-Receiving Center to monitor jointly)
2. Percentage of STEMI patients with a first medical contact to balloon inflation (first device used) within 90 minutes, transfer
3. Percentage of STEMI patients with a door-1-to-balloon (first device used) within 90 minutes, transfer

Mission: Lifeline Recognition

Additionally, all system components (EMS, referral and receiving centers) must achieve bronze levels before the system can be recognized.

Pathway to Certification

- ➔ Continuing negotiations with the Society of Chest Pain Centers
- ➔ Joint Commission viable possibility, but more distant future
- ➔ States may potentially be a certifying body

Action Registry GWTG Updates

Carol Winick

VP of QI

South Central Affiliate

American Heart Association

How To Get Started

 Addendum

Cost for Action Participation

- ➔ *There is no cost for participating in AR-G with NCDR as their vendor; that being said there is a \$1,000 fee for the “first” registry that a hospital participates in; so if the hospital is participating in another registry such as Cath-PCI; AR-G would be free; if they aren’t participating in another registry; initial administrative fee would be \$1,000 for set-up. If they are a current CAD-GWTG hospital, NCDR will waive the administrative fee through Dec. 31st 2009.*
- ➔ *If a customer goes through a vendor such as Lumedx, Outcome, etc.; there is a cost. Outcome’s cost is \$1,810. For the other vendors they would need to contact them directly*

Support for all Participants

- Service Center
- Clinical Staff support
- Recorded Webinars
- Documents available at ncdr.com, Log in, ACTION Registry-GWTG, Resources, Documents v2.0
- DCRI provides support for the Quarterly Reports
- AHA Staff

Documents Available

NCDR™ Documentation (v2.0) - ACTION Registry® - GWTG™ - Microsoft Internet Explorer

Address: https://tigger.acc.org/WebNCDR/ACTION/Resources/Documents_V2.aspx

NCDR™
National Cardiovascular Data Registry

www.ncdr.com

Quality Improvement. Quantified.™

Administration | Reports | Data | Resources | *Control* | Search **GO**

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- [DQR Companion Guide](#)
- [ACTION Data Dictionary Full Specifications](#)
- [ACTION Training 8/1/2008](#)
- [NCDR Weight Conversion Chart](#)
- [ACTION STEMI Referenced Dosing Guide 2008](#)
- [Contact Us](#)
- [ACTION Registry-GWTG Instructions for Completing the Data Collection Form](#)
- [DQR Training New User](#)
- [ACTION Site Report Glossary](#)
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- [ACTION Operational Reports Quick Reference Card](#)
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- [Understanding Composites & Thresholds](#)
- [NCDR Height Conversion Chart](#)
- [ACTION NSTEMI Referenced Dosing Guide 06/23/2008](#)
- [ACTION Program Summary](#)
- [FAQ for Recruitment to ACTION GWTG 06/02/2008](#)
- [ACTION Completeness Assessment Thresholds](#)
- [DQR Training Experienced User](#)
- [ACTION Interpretation Manual](#)
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v2.0 Documents:

Documentation	Download	Last Updated
		Internet

Limited Form

- The Limited Form Development is not final
- Approximately 170 fields, some optional (Section K)
- Available to all ACTION Registry-GWTG participants.
- Strongly encourage participants to use full data set, especially PPCI capable centers.
- Availability date is to be determined.
- The form specifications will be made available to all vendors.
- The Limited Form will contain all of the elements required to calculate recognition measures. The certifications measures are under review.

Vendor Updates

- Outcomes Science Inc. is a certified vendor
- Lumedx is currently going into certification process
- Cedaron and Quantros have contracted, no updates on software
- DCRI tool will remain available for data entry
- NCDR is building a tool, expected available this fall.

