

MISSION: Lifeline™



CAPITAL AREA TRAUMA
REGIONAL ADVISORY COUNCIL

QI Subgroup Report January 26, 2011

Active QI Group Members

- ➔ Anne Robinson, Seton Med Ctr Austin, Co-Chair
- ➔ Barbara Borman, Seton Med Ctr Austin
- ➔ Karla McKinney, UMC Brackenridge
- ➔ Tina Olivarez, UMC Brackenridge
- ➔ Stan Lundrigan, Seton Med Ctr Williamson
- ➔ Lily McAteer, Seton Med Ctr Hays
- ➔ Jennifer Blakely, Westlake Med Ctr
- ➔ Anna Pachenik, Volunteer
- ➔ Furqan Shah, Volunteer
- ➔ Loni Denne, AHA Staff
- ➔ Carol Winick, AHA Staff
- ➔ Louis Gonzales, ATCEMS OMD, Co-Chair
- ➔ Becky Goad, Heart Hosp of Austin
- ➔ Missi Johnson, Heart Hosp of Austin
- ➔ Ronda Mackey, St. David's HealthCare
- ➔ Brett Steffen, St. David's HealthCare
- ➔ Peggy Cook, St. David's South Austin Med Ctr
- ➔ Melissa Juarez, Scott & White Round Rock
- ➔ Ed Piker, ATCEMS
- ➔ Terri King, WCEMS
- ➔ John Moseley, San Marcos/Hays Co EMS
- ➔ Expanding to others

QI Subgroup Report

Update & 2011 Goals

1. Evaluate/Measure EMS ECG interpretation accuracy
2. Develop Best Practices document for Hospital Multidisciplinary STEMI meetings
3. Evaluate progress of participation in AR-G
(continued)

QI Subgroup Report

Update & 2011 Goals

4. Draft database needs, expectations and requirements document
5. Assist other groups in the development of a Regional Hospital and EMS inventory List
6. Define a regional process for STEMI patient feedback (to transferring hospital and EMS)

QI Subgroup Report

1. Evaluate/Measure EMS ECG Interpretation Accuracy

- Joint Process Improvement initiative¹
- Prospectively collect 2 data points²
- STEMI ECGs from EMS to PCI Hospitals
 - ML regional definition for STEMI ECG
 - feedback for potential confounders
- Define accuracy and identify potential educational improvements

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➔ 2. Multidisciplinary STEMI Meeting Best Practices¹

- Presentations from each PCI hospital
- Draft list of potential best practices
- Next - categorize into²
 - **Required** - must be included for all
 - **Highly Recommended** - a near term goal for all
 - **Consider** - proven beneficial to some

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3. Evaluate Participation in AR-G

- Initially presented at October 2010 meeting
- Updated as of January 2011
- Results are:

PCI Hospital AR-G Status Survey (n=11) Oct. 2010

Signed Contract with NCDR

- 8 Hospitals

Identified Staff for Data Entry

- 10 Hospitals

Currently Entering AMI Patient Data

- 5 all AMI
- 1 some AMI

Data entry start dates for remaining 5 Hospitals:
9/30/2010 - 1/1/2011 plus 1 unknown

Reasons for not entering data

- Lack of staff resources or Cost (3)
- Hospital decision or No response (2)
- Access to data/records or Software obstacle (2)
- Transition to new Hospital Network (1)

PCI Hospital AR-G Status Survey (n=10) Jan. 2011

Signed Contract with NCDR

- 8 Hospitals
- 1 unknown

Identified Staff for Data Entry

- 9 Hospitals
- 1 Unknown

Currently Entering AMI Patient Data

- 8 all AMI
- 1 unknown

Data entry start dates for remaining 2 Hospitals:
2/15/2011 - 6/15/2011

Reasons for not entering data

- contract processing delays

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Other 2011 Goals - No Updates

- 4. Draft Database Needs & Expectations
 - Completed 2010¹
 - Next Step - Regional Source & Funding for Database
- 5. Assist other ML subgroups to develop Hospital & EMS inventory
- 6. Define Regional Process for Feedback

Next QI Group Meeting
February 9, 2011
8:00 – 9:30 am
AHA

Questions?