

***In a Heartbeat* Executive Committee**

**Monday, February 12, 2006, 4-5pm
Teleconference Minutes**

Attendance

Members in attendance: Mr. Jay Bradshaw, Dr. Steve Diaz, Ms. Darlene Glover, Ms. Karynlee Harrington, Dr. Larry Hopperstead, Dr. Bud Kellett, Dr. Gus Lambrew (Chair), Dr. William Phillips, Ms. Christine Quirion, Dr. Guy Raymond, Dr. Paul vom Eigen, and Ms. Debra Wigand.

Not able to attend: Ms. Deborah Carey Johnson and Ms. Kim Tierney

MQF staff: Ms. Carrie Hanlon and Mr. Christopher McCarthy

Minutes

The Committee approved the December meeting minutes.

Staffing Update

Ms. Carrie Hanlon reminded the Committee that she had assumed Ms. Tish Tanski's role as *In a Heartbeat* Project Coordinator, as Ms. Tanski's contract ended in 2006. Ms. Karynlee Harrington reminded the Committee that Dr. Shubert had stepped down as Director of MQF at the end of the year, but continues to serve as a consultant during this time of transition. Ms. Harrington noted that she is looking into the possibility of hiring an interim Director to provide clinical expertise a few days a week until a full-time Director is hired. She explained that until Dirigo Health Agency's sustainability plan is cemented, she does not feel comfortable launching a national search for a full-time Director. She added that there continues to be widespread support for MQF, and that that support can only be sustained if stakeholders are able to articulate the value proposition of MQF.

Committee Composition

Ms. Hanlon reminded the Committee that at its previous meeting in December, concerns were expressed regarding the need to have more ED nurses and hospitals represented among Committee members. She noted that as a result of this meeting MQF reached out to Christine Quirion, ED Nurse Manager at The Aroostook Medical Center about joining the Committee and Ms. Quirion expressed her interest in joining. The Committee welcomed Ms. Quirion and agreed that she would be an asset to the group.

Funding Clarification

Ms. Hanlon explained that MaineHealth, Central Maine Medical Center and Eastern Maine Medical Center pledged \$10,000 each to *In a Heartbeat* specifically for the Community Engagement Workgroup's activities. In response to a question from Dr. Bud Kellett regarding funding for the EMS 12-lead ECG program, Dr. Steve Diaz noted that MaineHealth had pledged an additional \$10,000 to EMS for the 12-lead ECG program. Dr. Diaz and Mr. Jay Bradshaw added that EMS may need to reach out for additional funding for this program.

Workgroup Updates

Heartbeat AMI Response & Treatment (HART)

Dr. Steve Diaz reported that the EMS QI and 12-lead ECQ training programs are being reviewed by EMS committees to determine if they the programs have adequate staffing, resources, and products. Dr. Diaz stated that the programs would first be reviewed by the EMS Education Committee, then the Operations Committee, with the Board of Directors reviewing them in March. Given this timeline, he explained that HART would forego a February meeting, and reconvene in March.

Dr. Diaz and Mr. Jay Bradshaw stated that two minor changes to the QI tool suggested by David White of EMS and Mr. Chris McCarthy would be made.

Mr. Bradshaw also reported that the EMS Paramedic Interfacility Transfer (PIFT) module is in place, and agreed to email the Committee a link to the EMS website, where documents about the PIFT protocol are available. He noted that both paramedics and services must be PIFT certified, and that approximately 15-18 services are already certified.

AMI Community Engagement (ACE)

Ms. Debra Wigand stated that the ACE Workgroup had established a regular monthly meeting, with its next one occurring February 20. She reported that the Workgroup decided to coordinate press for Heart Month (February) to raise awareness about heart attack symptoms and the need to call 9-1-1 immediately after symptoms begin. Ms. Wigand explained that the Governor signed a proclamation declaring February as American Heart Month, and MQF released a press release for Heart Month, along with a template press release for organizations to personalize and send out to their own interested parties. She added that MQF was also coordinating a series of Heart Month op-eds for major newspapers, with Mr. Bradshaw, Dr. Diaz, Dr. Gus Lambrew, and several Healthy Maine Partnership Directors (Ms. Carol Bell, Ms. Dona Forke, and Ms. Connie Putnam) contributing articles.

Ms. Wigand also reported that ACE is in the process of coordinating a pilot to spread consistent messages about heart attack signs and call 9-1-1 via community presentations in Southern, Central, and Northern Maine. She noted that the pilot is scheduled to begin this spring, with an evaluation in the summer, and a statewide launch in the fall.

Metrics and Data

Dr. Bud Kellett explained that data from five places (EMS, transport, hospital, the ED, and cath lab) will enable the project to identify STEMIs in Maine and determine how many patients appropriate for reperfusion are actually getting it. Mr. McCarthy explained that in response to strong messages from the Maine Hospital Association regarding the added burden of data submission, the Metrics and Data Workgroup was working to pare down its list of *In a Heartbeat* data elements, as well as utilize data elements hospitals already submit to others. He stated that the Metrics and Data Workgroup is working to map its data elements into three categories:

1. Core (essential to identify STEMIs)
2. Quality improvement
3. “Nice to know” (interesting, but non-essential for identifying STEMIs)

Mr. McCarthy noted that data will not be able to be extracted from the quality improvement organization, but that the CMS CART (CMS Abstraction and Reporting Tool) may be one way for *In a Heartbeat* to utilize data already submitted by hospitals. He added that the Workgroup is considering quarterly data submission with aggregate system-level reporting by, the selected vendor for the *In a Heartbeat* database, the Maine Health Information Center (MHIC). He noted that MHIC will also be able to run quality improvement reports and/or other ad-hoc reports for hospitals.

Mr. McCarthy reported that linking between the various data sources (EMS, hospitals, etc) is a key objective of the Workgroup and at times, a challenge. He noted that patient identifiers are not on EMS run sheets, but hospitals do use a form that incorporates both EMS and patient information. He stated that the EMS run sheets include symptom complex data, which *In a Heartbeat* will be able to use if the cardiac checkbox is used.

Mr. McCarthy explained that MQF would need to complete an application to an IRB for the three PCI centers and send a letter to every hospital’s privacy officer(s). He noted that MQF will need to complete a business agreement (BA) with every hospital, as well as a BA with EMS.

As an aside, Mr. McCarthy noted that the STEMI wall chart drafted last year had been tabled. Dr. Bill Phillips expressed interest in utilizing the wall chart at CMMC, with other members indicating initial support for the idea. Dr. Phillips asked whether the wall chart could be revisited, to which Dr. Kellett agreed. Dr. Lambrew recommended Ms. Hanlon email the wall chart back out to the Committee so that it might consider its use by the project or at CMMC. Ms. Hanlon agreed to do so.

In a Heartbeat Logo

Ms. Hanlon reported that the ACE Workgroup had raised questions about whether there were plans to create an *In a Heartbeat* logo. She noted that the ACE pilot and statewide “Train the Trainer” project would include the dissemination of handouts and magnets, and uncertainty existed about what, if any, logo(s) should appear on those materials. The Committee agreed that *In a Heartbeat* should have a logo. Given MQF’s concerns relative to cost, Ms. Darlene Glover suggested that MQF hold a contest for the creation of a logo, with a prize going to the winning submission. Mr. McCarthy added that LifeFlight had donated a free helicopter ride for another possible ACE project (a student competition to create short videos promoting call 9-1-1), and that the helicopter ride might be a possible prize for a logo contest. Ms. Hanlon pointed out that the immediate concern was what logo to put on any materials distributed for the ACE pilot, slated to begin in the spring. The Committee agreed that MQF should create a couple of simple logos for the Committee to consider for the pilot.

York Hospital

Ms. Hanlon explained that Dr. Lawrence Petrovich had written a letter to MQF on behalf of York Hospital that expressed the hospital's interest in participating in *In a Heartbeat*. She noted that Ms. Harrington responded to the letter, informing Dr. Petrovich that his interest would be shared with the Executive Committee. Dr. Lambrew suggested that MQF invite Dr. Petrovich to join the Metrics and Data Workgroup, and the Committee agreed. Dr. Kellett added that he would be willing to discuss the Workgroup with Dr. Petrovich. Ms. Harrington agreed to send Dr. Petrovich a letter inviting him to join the Metrics and Data Workgroup.

2007 Meeting Schedule

The Committee agreed to continue to meet every other month in 2007, with the next meeting in April. Ms. Hanlon agreed to email the Committee possible April meeting dates.

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