

In a Heartbeat Executive Committee Conference Call
September 21, 9:00-10:00 AM
Teleconference Minutes

ATTENDANCE:

Executive Committee members in attendance: Dr. Gus Lambrew, Dr. Bud Kellett, Dr. Guy Raymond, Ms. Debra Wigand, Ms. Kim Tierney, Dr. Steve Diaz, Ms. Darlene Glover.

Not able to attend: Dr. Larry Hopperstead, Dr. Dennis Shubert, Dr. Paul vom Eigen, Ms. Deborah Care Johnson.

MQF staff: Mr. Christopher McCarthy, Ms. Tish Tanski

MINUTES:

The minutes of August 20, 2006 were approved.

DYNAMIC WORKGROUP REPORTS:

Metrics and Data: Dr. Bud Kellett reported that the PCI Center teleconference was held on September 11, with two of the centers participating. The group discussed the pros and cons of developing protocols, and areas of agreement relating to treatment. Dr. Kellett will prepare a summary to discuss with all members of the subcommittee. Dr. Kellett also reported that the workgroup had begun its discussion of data elements, and would continue that discussion at its next meeting. Executive Committee members discussed how to measure symptom onset, and agreed to develop a common definition.

AMI Community Engagement: Ms. Debra Wigand reported that the AMI Community Engagement Workgroup had met on September 18, and had completed its review of existing resources in Maine, current messages, and research on changing patient behavior. Research indicates that 66% of time lost from symptom onset is due to patient delay. The workgroup is developing a set of short term strategies that can be implemented quickly, and will also recommend a longer term process. Short term strategies will include:

- A focus on patients at risk and those that surround them;
- Tailored messages that convey urgency and importance;
- Early symptom recognition, and quick action (calling 911);
- Distribution information through existing resources, and organizations/venues used by the target populations;
- Delivery through organizations/venues used by the target population;
- Development of a slide show ;
- Development of a speakers bureau;
- Sponsoring a contest for school aged children; and
- Use of the internet for viral marketing (an email that participating organizations and individuals can forward to their mailing lists.

Ms. Wigand also reported that the workgroup hoped to get information on the cost of a call to EMS, since one element of patient delay is reluctance to call EMS. Ms. Darlene Glover suggested that the message include an emotional appeal to convey that the cost of calling 911 is less than the cost of loss of function or life.

Dr. Lambrew expressed concern that the messages used not emphasize neck or head pain over chest pain. He also suggested that the workgroup consider a joint effort with EMS. Ms. Wigand thanked Dr. Lambrew for the suggestions, and indicated a difficulty in getting EMS representation on the workgroup even though invitations had been extended. Dr. Diaz offered to contact another EMS representative to participate in the workgroup.

Heartbeat AMI Response and Treatment (HART): Dr. Steve Diaz reported that the HART committee also met on September 18. There is a draft PowerPoint presentation on 12 lead training, which is still in the discussion stage. The Group also agreed on guidelines for Emergency Medical Dispatch coaching. Those guidelines include coaching to use aspirin unless it is contraindicated. It could take a year for those guidelines to be incorporated into the training for dispatch.

OTHER BUSINESS:

Stakeholder meeting on November 9: Mr. Christopher McCarthy reviewed plans for the stakeholder meeting on November 9. The keynote speaker is Dr. James G. Jollis, Co-director of the RACE program, Duke University, North Carolina. The purpose of the meeting will be to roll out treatment and transfer protocols, data elements and metrics, the data collection and dissemination process, the EMS12 lead training program, quality tool, and EMD guidelines, and the community engagement strategies. The meeting will also include presentation and discussion of next steps. Invitees include Emergency department physicians, emergency department and PCI Center staff, regional and field staff of Maine Emergency Medical System, hospital administrators and QI professionals, nurse/nurse administrator associations, healthy Maine Partnerships and Healthy Communities. Planned videoconference sites include Calais, Norway, Presque Isle and Rockland. MQF is applying for continuing medical education credits from ANA, HCQCB and MMA Faculty Disclosure Form. The Executive Committee suggested adding transferring cardiologists and internists to the list of invitees.

Data collection and dissemination: Christopher McCarthy reported that MQF is developing a request for proposals for a third party to bid on data collection and dissemination and asked Executive Committee members for any comments. Executive Committee members did not have any suggestions during the phone call. Mr. McCarthy encouraged them to email him with any ideas that might arise after the call.

NEXT MEETING

Tuesday, October 17, 9-10:00AM by conference call.