

# North Regional Time Sensitive Emergency Committee (NRTSEC)

## Meeting Minutes

March 18, 2016

### Opening

The regular meeting of the North Regional Time Sensitive Emergency Committee (NRTSEC) was called to order at 1003 on March 18, 2016 at Kootenai Health by Chair Chris Way.

### Present

Chris Way, Julie Hoerner, Nicole Wheaton, Shelly Mattson, Kenneth Baker, Ross Crawford, Veronica Mitchell-Jones, Ben Suttlemyre, Steve Isaakson, Wanda Wilkerson, Nick Mechikoff, Dershi Bussey, Ken Mills, Caryl Johnston, Sue Donaghue, Eric Chun, Tom Nickol, Bill Holstein, Ann Ealy. On the phone: John Minden, Jamie Karambay, Mike Taylor, Stu Willis, Ken Gramyk, Nicole Noltensmeyer.

### Approval of Agenda

Motion to approve agenda made by Nick Mechikoff, seconded by Dr. Chun. Approved unanimously.

### Approval of Minutes:

Motion to approve minutes from January 29, 2016 as written by Dr. Chun, seconded by Dershi Bussey. Approved unanimously.

### Open Issues

1. Bylaws Update/Changes – Chris Way

As mentioned at previous NRTSEC meetings, there is a need to change the bylaws to add Panhandle Health District to the membership of TSE and QA/QI committee, as well as direction on how to replace an officer if they leave mid-term. Julie has taken another role that does not allow her to continue as secretary. Bylaws had been sent out prior to the meeting with the proposed changes and approved by a majority of the Bylaws subcommittee. A motion to approve the Bylaws with the proposed changes was made by Dr. Nickol, seconded by Dr. Chun. No further discussion. Approved unanimously.

2. TSE State-wide Meeting Update - Chris Way

The State Council met last week. The focus of the meeting was on forming survey teams to survey other institutions for designation. For level I and 2 trauma, the state will be using out of state surveyors. A small stipend is offered but surveyors are responsible for their own travel and lodging. Chris noted that

KH has turned in app for Level II Trauma designation – hand delivered to the statewide meeting. A decision on designation should occur at the next state council meeting, April 11th. St Als was approved as a Level II Stroke and Trauma Center. EIRMAC approved as a Level II trauma center. A few critical access hospitals have applied for level IV designations.

The state council also discussed development of some statewide QI measures – no decisions have been finalized.

The state council is exploring reducing the number of l meetings with conference calls in between. No final decision made yet.

3. TSE Program Update – Nicole Noltensmeyer (via phone). – no further updates

### **Old Business**

1. EMS Survey/Meeting – Chris Way

Sent out and most groups in the room have responded. 10 question survey (Trauma, STEMI and Stroke). Final question was “what do you as an EMS agency need from the TSE”. Results will be presented at the next meeting after they are collated. Chris invited all to a Regional EMS meeting immediately following this meeting at the EMS office. Lunch served.

2. Update on TSE Applications – Chris Way

KH turned their Level II trauma application in (as above). Awaiting response at next statewide mtg.

3. CARES Network – Chris Way

State TSE council appointed a subgroup to evaluate the CARES program (Cardiac Arrest Registry to Enhance Survival) The database contains approximately 75% EMS info and 25% hospital information. Provides excellent data return on outcomes. Ada County is currently using it and demonstrated it at the subgroup. It requires about 10-15 minutes data entry per cardiac arrest for EMS, 3-5 minutes data entry for hospitals per cardiac arrest. The sub group’s recommendation to the State is for the State to fund the subscription for \$15k per year to be used statewide. This database could be influential in how we impact outcomes on our out of hospital cardiac arrest victims in the state. The letter that the subgroup sent to the State is included with these minutes.

4. TSE Powerpoint – Chris Way

Edits are being made with Dr. Karambay, and it is close to finalization. Once completed it will be sent out for use in educating our state about TSE.

## New Business

a. Secretary election – Committee

Chris presented a description of the role and asked for nominations. Hearing none, a decision was made to table the election for the May meeting.

b. STEMI Process Example – Chris Way

Chris presented a powerpoint from Kate Barnes is director of Cardiac Services at at St. Lukes who created this presentation to show how a process improvement plan made a significant differences for patients. The presentation was given at the State TSE meeting, outlining a watershed case in which the patient’s arrival to the Cath lab was delayed due to multiple factors. The powerpoint outlined an actual scenario and the various process and communication issues for a STEMI patient. Through that scenario, a multifacility/multidisciplinary team was able to streamline and standardize a process, regardless where a patient presents, who picks them up and where the patient will be going. Standardized treatment protocols and checklists were created. Following the standardized process, another patient presented through the same process and went from walking into ED to PCI of 90 minutes, when it took hours in the past. (the powerpoint is attached to these minutes. Chris brought this back to our region as a possibility through our QI subcommittee to standardize our regional processes, and an excellent example of how a region can come together to create better outcomes for our patients. Stu Willis mentioned that we have a similar process with developed protocols in Boundary and Bonner County with KH Cardiologists to facilitate timely STEMI transports directly to the Cath lab at KH that perhaps could use as a springboard for regional development. Chris requested the protocols be sent to him so we can share that with the QI committee.

c. QI Process/Tools – Nick Mechikoff

Chris introduced Nick as the chair of NRTSEC QI committee. His subcommittee met by conference call a few weeks ago. He presented some QI reporting forms (both prehospital and hospital) His team will be looking at cases that touch multiple hospital/agencies in our region so we can look for system challenges to improve, and how agencies work together. They will be starting with trauma. The subcommittee will be meeting on the opposite months of NRTSEC at the same time. Nick will send electronic copies to submit with minutes. The group will plan to review 2 cases per meeting. Dershi will be helping to identify cases for review. Chris asked that people could submit cases to the QI team for review, and encouraged looking at both cases that didn’t go well as well as ones that go “swimmingly well” to glean as much learning and engagement. Those who have been involved in the cases will be invited to present at the case review. CEUs

will be offered for EMS personnel (Not nurses, sorry!). Dershi will see if we can have MD CEs and Nursing CEs developed. A recommendation was made for the state council to look into certifying CEUs for the future.

d. EZ I/O Trainer – Chris Way

EMSC bought each region an EZ I/O trainer to use for training. It is currently in Chris' office for borrowing or utilization. Stu clarified that it was for both adult and Peds. Chris stated anyone who wanted to use it could contact KCEMSS to borrow it.

e. CEO Meeting – Chris Way Chris presented info on TSE to the region's hospital CEOs. He received commitments from all the facilities in the north, who have agreed to become Level 4 designated at some point. Latah County was also included.

f. Grand Rounds – Caryl Johnston

Through the Northwest Hospital Alliance regional nurse leaders group and NIC, grand rounds are being presented quarterly. Cases are regional in nature and usually involve a patient who touches multiple hospitals and/or EMS agencies. Caryl will invite everyone March 22<sup>nd</sup> at KH or on video conferencing at other hospitals (a flyer is attached to the minutes and was distributed at the meeting). The case presentation involves a STEMI. The groups is looking towards developing regional standards. Chris will be presenting on TSE at their grand rounds.

g. TSE Talks – Chris Way

Chris stated if anyone would like him and/or Casey to come to talk with any of your agencies about TSE, please let them know.

### **Other Business**

-Discussion about whether KH is ready for April 1<sup>st</sup> go-live of new state trauma levels. KH requests May 1<sup>st</sup> for a little more time. Julie will send to the group, the multi colored copy of the activation levels for others to use (attached to these minutes).

-Bill H brought up logistics of moving patients from one place to the next, especially linen and equipment and asked if we could work together to ensure a timely exchange. Chris stated this is not a TSE issue, but rather more of a linen service(s) issue. This was seconded by Bonner Co EMS. Caryl volunteered to work on this issue re: to common contracting between organizations, GPOs etc.

-Nicole reminded that if there were any facilities who were working on their designation applications and had questions or needed help to please contact her.

### **Action Items for Next Meeting**

-Secretary election

**-Stu to provide to Chris the STEMI protocol for boundary/Bonner Co.**

-Chris to provide CARES support letter to submit with these minutes.

**-Nick will provide electronic copies of Quality improvement reporting forms.**

-Julie will send out the STEMI/PCI pdf presentation in the minutes.

-A copy of the approved Bylaws will be posted on the Region 1 section of

### **Adjournment**

Motion to adjourn by Bill H, seconded by Dr. Nickol Meeting was adjourned at 1116 by Chris Way. The next general meeting will be **May 20, 2016 at 10:00 in Kootenai Health Boardroom (Kootenai Services Building).**

Minutes respectfully submitted by:

Julie Hoerner, NRTSEC Secretary

DRAFT