

## What's Next for Mission: Lifeline?

Sustainability, Future Applications &  
Transition to Project Guidance from a Regional Group

Michael W. Dailey, MD *Albany Med & REMO, Albany, NY*

# Disclosures

I have no financial disclosures.

## How We Started – Accelerator II Study Capital Region Goals

### **1. EMS First Medical Contact to Balloon (beyond Door to Balloon)**

Target:  $\geq 75\%$  cases within 90 minutes

### **2. Interfacility Transfer times for patients who present at non-PCI Centers**

Target:  $\geq 75\%$  cases within 120 minutes/DIDO within 30 minutes

### **3. Walk-in Patients (EKG within 10 minutes)**

Target:  $\geq 75\%$  cases within 10 minutes

### **4. Feedback to EMS to facilitate quality improvement**

Target: 100% of cases within 2 business days

### **5. Ensure that all true STEMI patients eligible/appropriate for PCI receive it, regardless of where they initially present for care.**

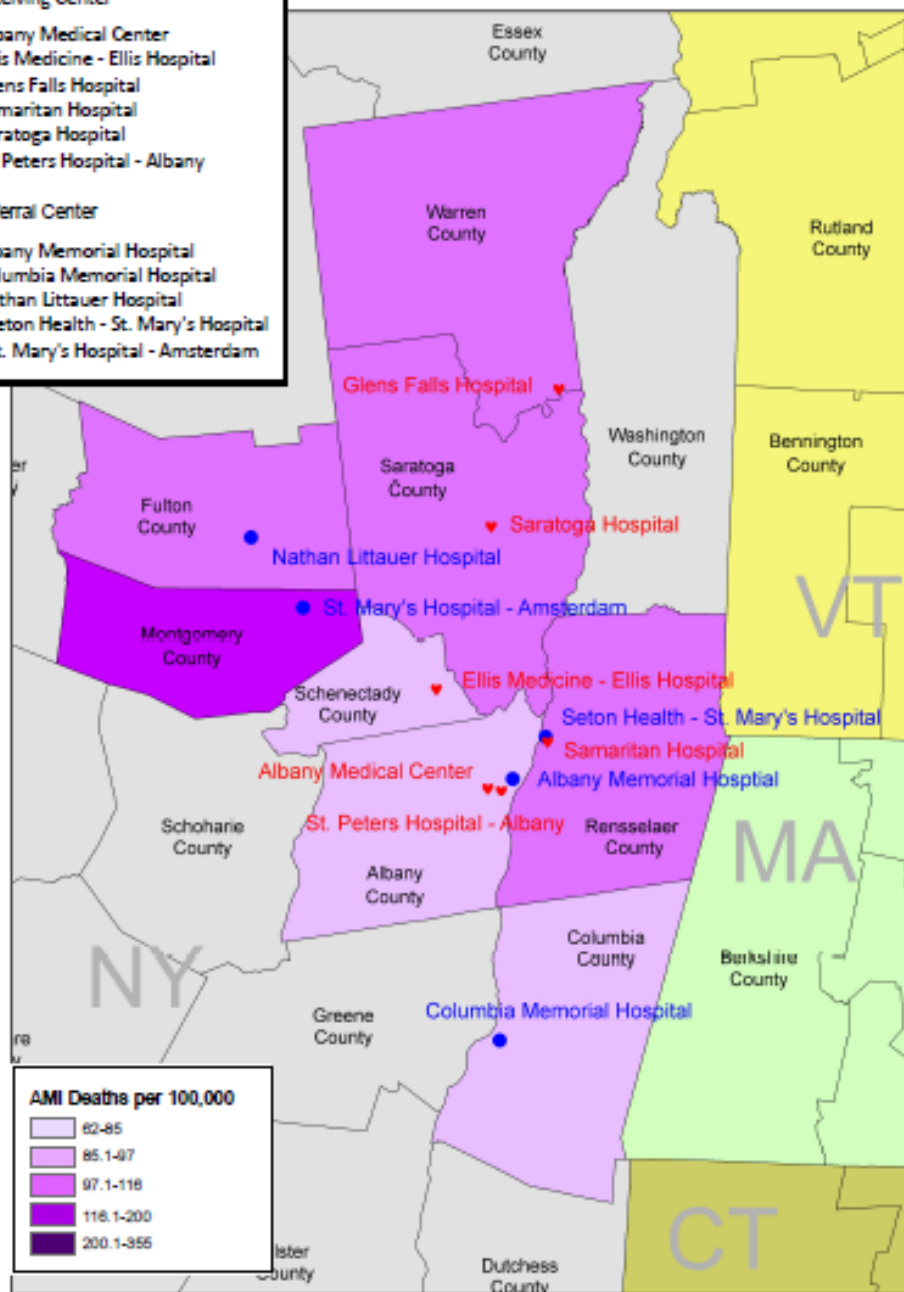
## Hospitals by PCI Status

### ♥ Receiving Center

- 1 Albany Medical Center
- 2 Ellis Medicine - Ellis Hospital
- 3 Glens Falls Hospital
- 4 Samaritan Hospital
- 5 Saratoga Hospital
- 6 St. Peters Hospital - Albany

### ● Referral Center

- 7 Albany Memorial Hospital
- 8 Columbia Memorial Hospital
- 9 Nathan Littauer Hospital
- 10 Seton Health - St. Mary's Hospital
- 11 St. Mary's Hospital - Amsterdam

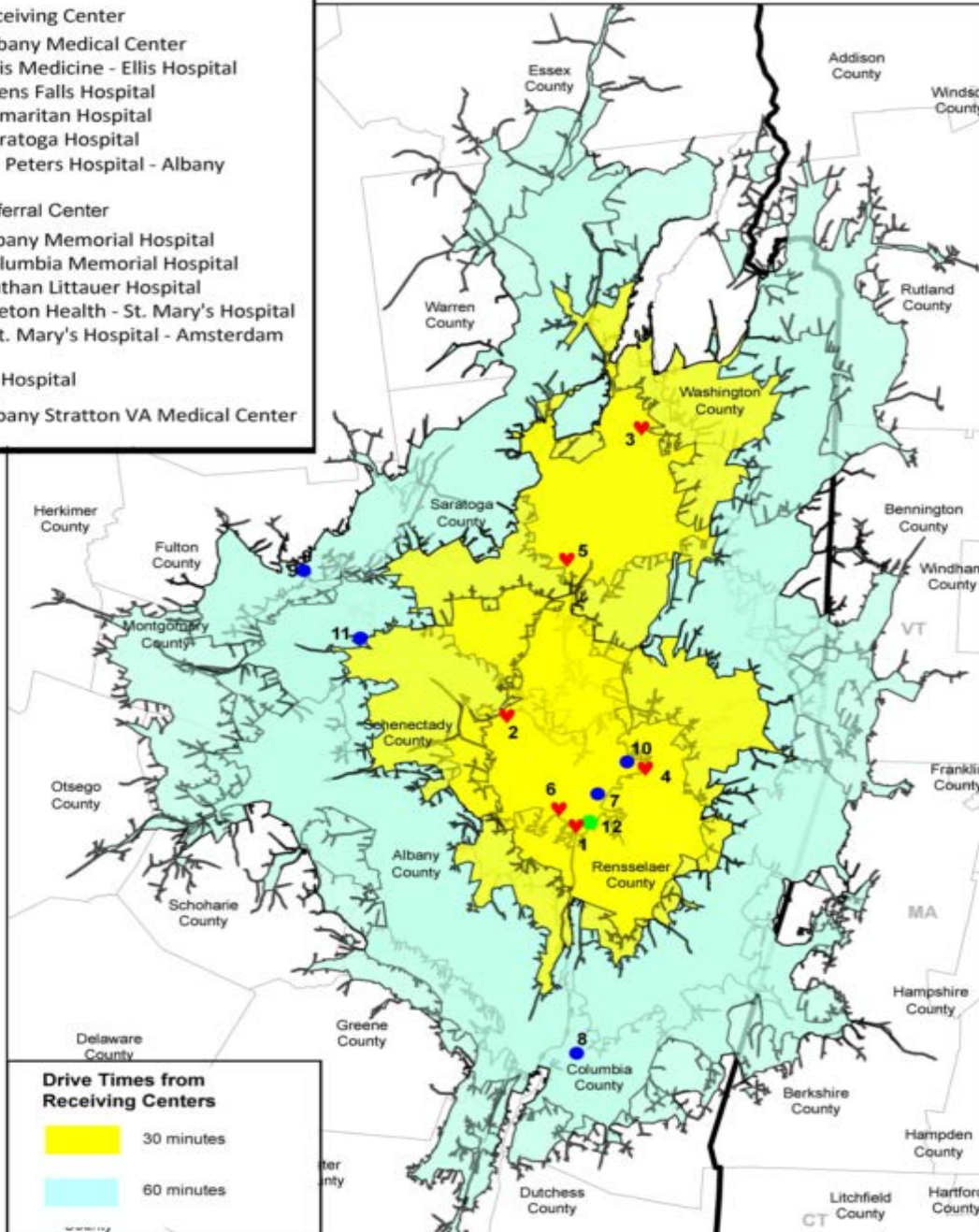


Local Landscape –

Receiving and Referring Centers  
in Capital Region &  
Age-Adjusted AMI Deaths per  
100,000 by County (2002 –  
2010)

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  - 11 St. Mary's Hospital - Amsterdam
- VA Hospital
  - 12 Albany Stratton VA Medical Center



Local Landscape –

Receiving and Referring Centers in Capital Region & 30 Minute and 60 Minute Drive Times from Receiving Centers

## Transition from Acute Intervention to Sustainable Infrastructure

PHASE I: INTENSIVE INTERVENTION VIA ACCELERATOR II	PHASE II: SUSTAINABLE AND REGIONAL LEAD QUALITY IMPROVEMENT EFFORTS
<ul style="list-style-type: none"> <li>• Local Leadership and National Advisors</li> <li>• Regional Protocol Development               <ul style="list-style-type: none"> <li>• E.g. transfer protocol, EMS protocol</li> </ul> </li> <li>• Convening reoccurring meetings at regional &amp; individual hospital level</li> </ul>	<ul style="list-style-type: none"> <li>• Collaboration with REMO meeting structure</li> <li>• Continuous Quality Improvement loop</li> <li>• Integration into Systems of Care Model that can be utilized for other acute disease states               <ul style="list-style-type: none"> <li>○ Stroke, Cardiac Arrest, Etc.</li> </ul> </li> </ul>

## Why EMS as the Sustainability Mechanism?

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## EMS Role and Impact on STEMI Care in Capital Region

- EMS partners are a critical first line for a large number of our regional STEMI cases
- Based on 2016 data preview reports:
  - Approximately 67% of STEMI cases were **direct presenters** to PCI Centers Via EMS
  - Including transfer cases, EMS involvement in approximately 75-80% of all regional STEMI cases
- Continuing multidisciplinary regional discussions at REMO meetings



## Sustainability via Regional Quality Improvement Resources

- Ongoing Regional Collaboration & Discussions
  - Regional Emergency Medical Organization
- Implementation of Protocols & Guideline Adherence Tracking
  - Regional Transfer and Transport Protocols
  - GWTG-CAD Regional Benchmarks & Reports
- Continuous Quality Improvement via Case Feedback
  - Hospital-Hospital-EMS Feedback Loop
- Education Opportunities
  - Hospital Lead EMS Training Opportunities
  - Community Outreach



## Sustainability via AHA Resources

- Monthly Northeast Acute Cardiac and Cerebrovascular Network Calls
  - Opportunity to Learn from Other Hospital in the NE
  - Expansion to Additional Acute Cardiac and Stroke Care Systems
- Periodic Regional Data Review Calls with AHA
  - Continue to Review Mission: Lifeline Regional Reports as a Group
- National AHA/ASA Webinars & Education Opportunities
  - Topic Specific Webinars led by Expert Advisors in Cardiac & Stroke Care
  - Online Lifelong Learning Center through AHA/ASA Professional Education
- ML Community Network
  - Connect to Colleagues Nationwide to Discuss ML Relevant Topics
- AHA/ASA field staff (Mission: Lifeline Directors)

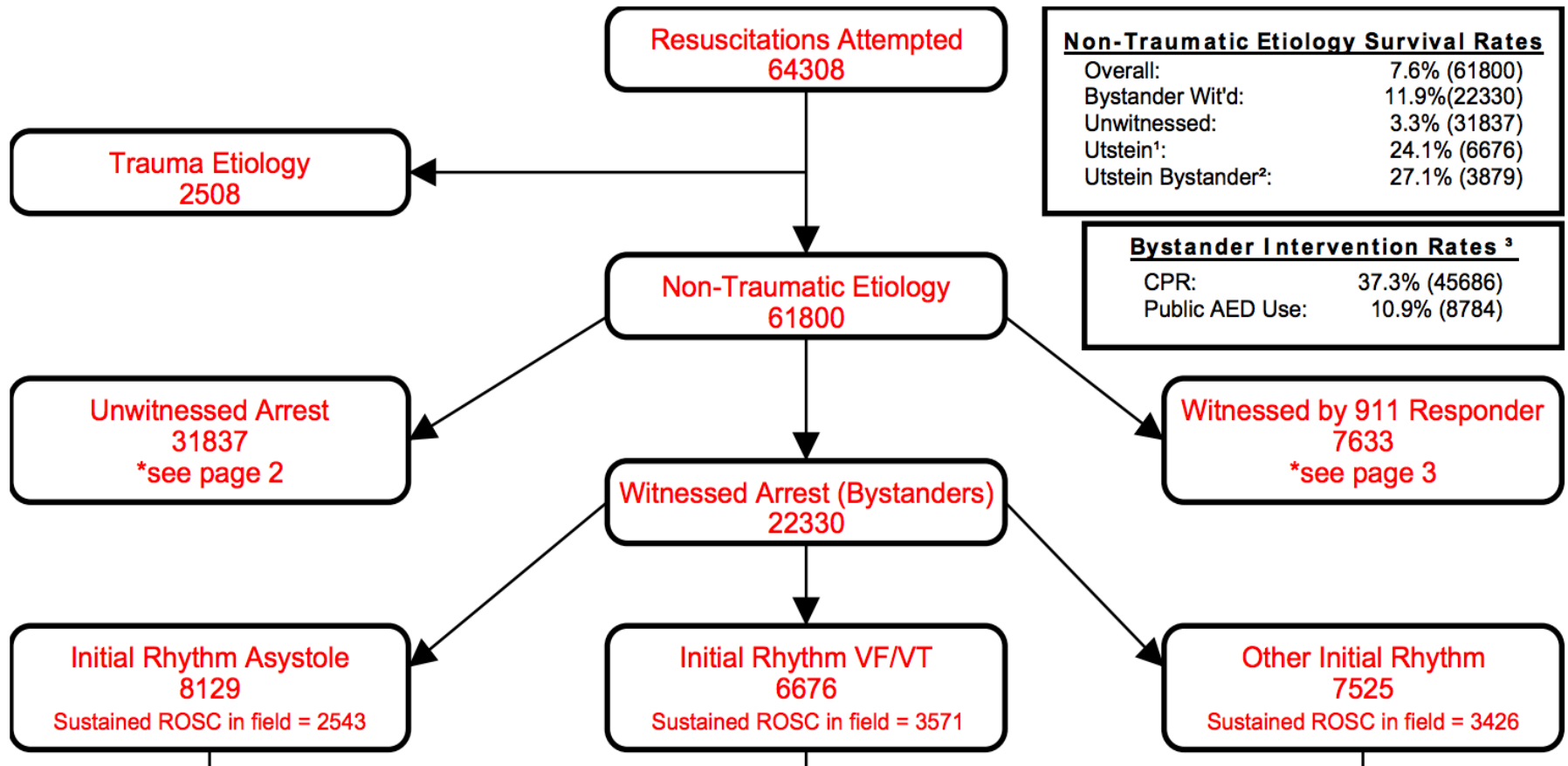
## Applying the Mission: Lifeline Model to Other Cardiovascular and Cerebrovascular Emergencies

- Mission: Lifeline Resuscitation & RQI
  - Cardiac Arrest – In-Hospital and OOHCA
- Mission: Lifeline Stroke
  - Overlap with Interfacility Transfers & Pre-Hospital EMS Coordination
- Other Emergencies

## Utstein Survival Report

All Agencies/National Data

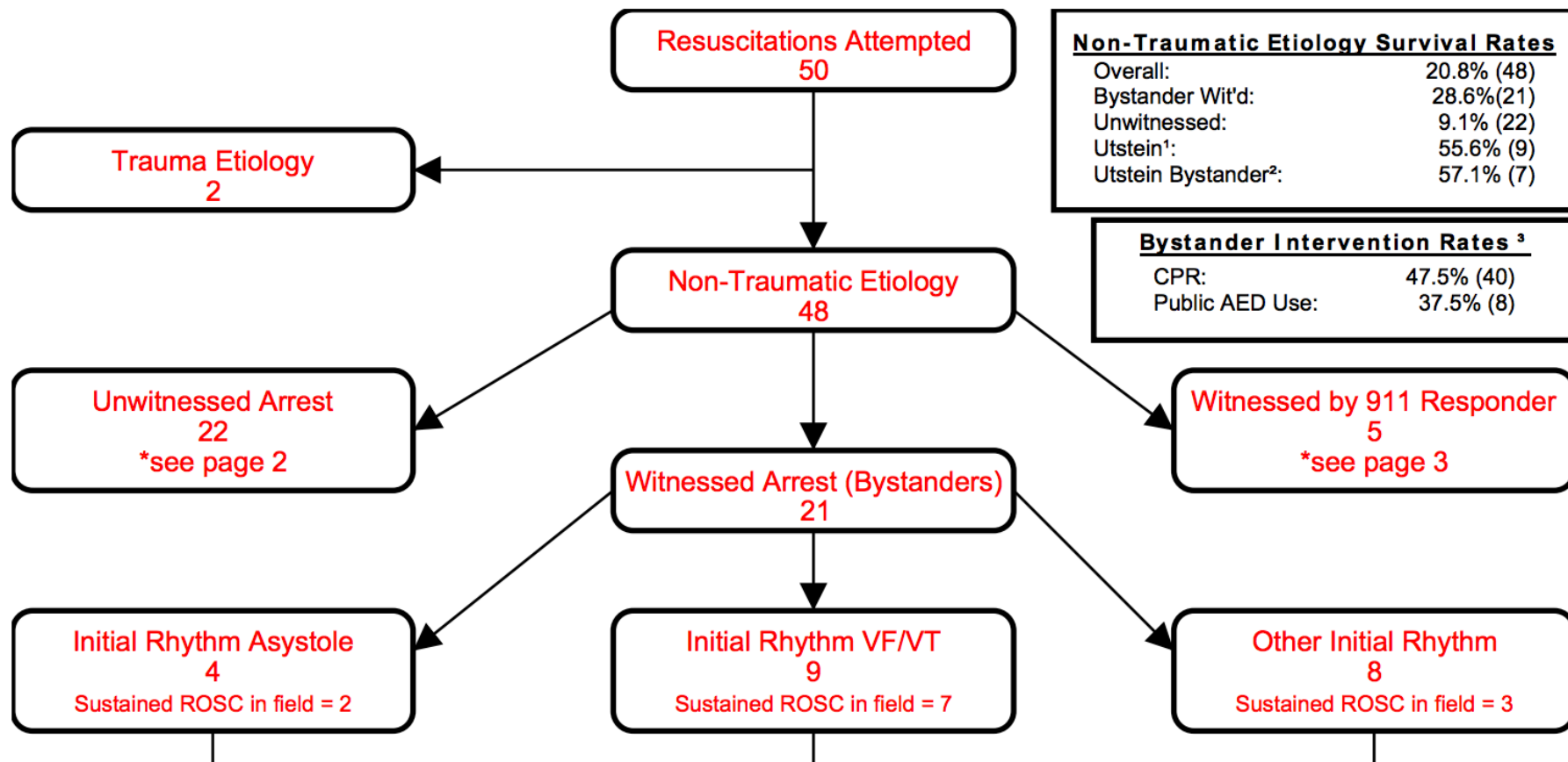
Service Date: From 01/01/2017 Through 12/06/2017



### Utstein Survival Report

Town of Colonie EMS

Service Date: From 01/01/2017 Through 12/06/2017



<b>Non-Traumatic Etiology Survival Rates</b>	
Overall:	20.8% (48)
Bystander Wit'd:	28.6%(21)
Unwitnessed:	9.1% (22)
Utstein <sup>1</sup> :	55.6% (9)
Utstein Bystander <sup>2</sup> :	57.1% (7)

<b>Bystander Intervention Rates <sup>3</sup></b>	
CPR:	47.5% (40)
Public AED Use:	37.5% (8)