



## RACE CARS WINTER NEWSLETTER

### RACE Coordinator Meeting 12/3/13

What a great meeting attended by 33 participants representing 20 organizations. We covered the corners of the state: Wilmington to Greenville, Pinehurst to Charlotte, and Asheville to Raleigh.

MARK YOU CALENDERS, the next Coordinator Meeting will be on September 17 in Wilmington, prior to the New Hanover cardiac symposium. More details to come.

We will work on some resources for the newer coordinators. I would like to establish a mentorship program to assist the newer coordinators in becoming successful in their roles. I will be emailing some of you to act as mentors or if you have an interest and would like to be one, let me know. More details to come soon. Completion estimated at 2/1/14.

#### Follow up List:

Can you ask CARES to add a special hospital process to allow them to enter the Pre-hospital Fields? [Clark is checking with CARES now.](#)

Consider developing additional, meaningful data fields for Cardiac Arrest Centers to collect and report. [Lisa is going to query hospitals as to current data being collected. We will summarize and discuss additional data elements to track as a state. The process for collecting, reporting, and meaning of data will also be determined. Completion estimated by 2/1/14.](#)

In-hospital CPR/Team Resuscitation Training. [This was a hot topic at our state meeting. RACE staff will discuss a plan for hospital materials and roll out of this concept. Anyone interested in helping with this, contact Lisa. Completion estimated by 3/1/14](#)

Develop a resource letter to provide to American Heart Association Training Centers

explaining our project and the importance of compression only CPR training, including the goal to train non-clinical staff and high risk patients and families compression only CPR. [Kathy will develop the letter. We will ask for some physician signatures from across the state for support. We will investigate distribution to the training centers in NC. Completion estimated by 2/15/14.](#)

Post Arrest support: counseling, disease specific, signs and symptoms, CPR, support group creation. [Lisa will serve on the committee formed at Vidant Health with the intention of modeling something after they implement and evaluate their efforts. Completion estimated at 6/1/2014](#)

Identification of Cardiac Patients for EMS, are we capturing all cases? [Clark will investigate best practice around case identification with CARES EMS agencies. Completion estimated at 2/15/14.](#)

#### Needed Resources Links:

RACE CARS: <https://racecars.dcri.duke.edu/>

AHA Accelerator: <https://www.dcri.org/cee>

Heart Rescue – be sure to visit our partner sites for resources  
<http://www.heartrescueproject.com/>

Dispatch Training Video  
<http://azdhs.gov/azshare/911/academy.htm>

EMS/First Responder Team Training Video  
[http://azdhs.gov/azshare/ccr\\_share.htm](http://azdhs.gov/azshare/ccr_share.htm)

The Arizona website has a ton of resources. It is not easy to navigate but worth the time to look around. The main page is listed below:

<http://azdhs.gov/azshare/>



## STATE MEETINGS Dec 6 and 13, 2013:

150 participants representing 60 organizations from across the state including NCOEMS, The American Heart Association, Air Care, Hospitals, EMS Agencies, Fire Departments, Telecommunications Centers, and industry reps.

The meeting opened with a story of a recent cardiac arrest survivor. Mr Oakley, 75 years old, suffered a cardiac arrest at home after a day of playing golf. His wife recognized that his breathing was abnormal and called 9-11. She performed CPR until First Responders arrived. Mr Oakley was defibrillated several times before ROSC. He was transported to the local hospital where he received TH and awoke a few days later with no neurological deficits. Simple interventions in the Chain of Survival will make survivor stories like Mr. Oakley's the norm.

Agenda items addressed both STEMI and Cardiac Arrest and included:

NC data, the latest AHA guidelines, review of recent publications, hot topics, and best practices. Drs. Jamie Jollis, Chris Granger, Brent Myers, Meena Rao, and Matt DuPre lead discussions on care of these patients.

### Cardiac Arrest

Recent publications:

1. Nielsen N et al. N Engl J Med 2013;369:2197-206
2. Kim F et. al. JAMA 2013 doi:10.1001/jama.2013.282173.
3. Granger CB and Becker L. JAMA 2013 doi:10.1001/jama.2013.282174

RACE CARS recommendations from these publications will be sent out by January 1, 2014.

### Focus Areas for Cardiac Arrest

1. Establish champions in hospitals/and pre-hospital arenas
2. Coordinator Role development - mentors

3. Dispatch engagement
4. CPR/Pit Crew training for EMS and hospitals (continued education)
5. Data – feedback – engagement first responders and dispatch
6. State data reports
7. Hospital education
8. Hospital reports and additional data elements
9. Development of community groups
10. Update ops manual with latest RACE recommendations especially around 2 studies
11. Resource list
12. Updated to current RACE CARS website

## STEMI

### Focus Areas for STEMI

1. First Medical Contact to Device

*Review your data for each agency that is bypassing outlying facilities. They should be meeting the goal of <90 minutes 75% of the time. If they are not meeting this goal, review their plan for improvement opportunities or a change in strategy to stop at their local hospital.*

2. Transfer: First Door to Device

*Review the plan to see if there are opportunities for improvement, compliant to the plan. Are you arranging for transport early? For Transfer for PCI, Are you meeting the goal <120 minutes 75% of the time? If not, should you change to a lytic strategy? For Lytic, are you meeting the goal of <30 minutes?*

3. Lytic Therapy Administration

*Are you meeting the goal of door to drug < 30 minutes? Review your plan and how compliant staff is to that plan. Do you have new staff that needs education on lytic therapy administration?*

*Continue to review your protocols and order sets to assure that staff is compliant. Your STEMI plan should be incorporated into your*

orientation plans for staff including MD's, RN's, ED greeters, and secretaries.

**Calls:**

- RACE CARS: 2<sup>nd</sup> Monday of every month
- Mission Lifeline: 4<sup>th</sup> Monday of every month

**Resuscitation Academies:**

- February 19 in Pinehurst 0800-1630
- March 12 in Chapel Hill 0800-1630

Future offerings: Pitt Co, Lumberton, and Asheville

**2013 CARES DATA**

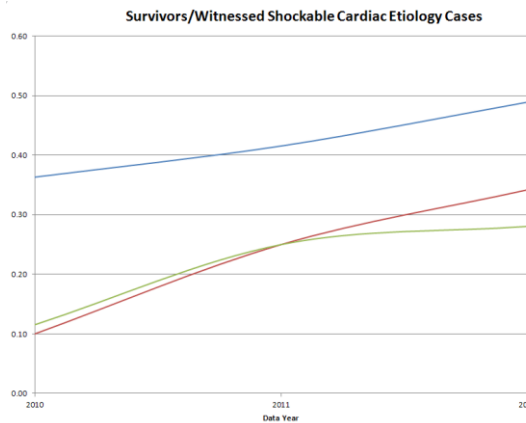
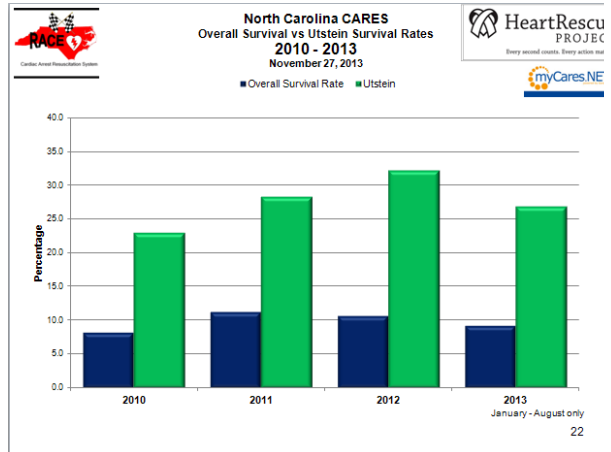
*This is a reminder that EMS agencies need to have their 2013 CARES data entered no later than Jan 31, 2014 and hospitals by 3/1/14*

Currently:

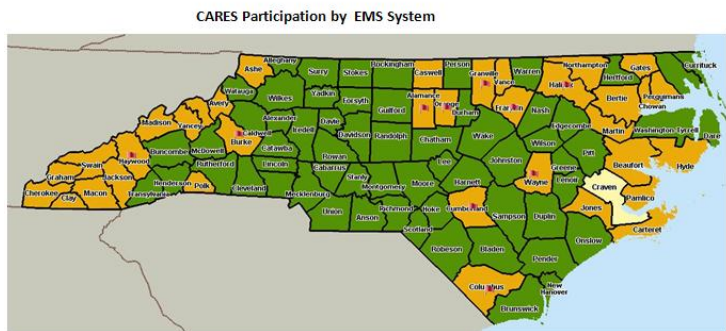
63 EMS agencies

Covers 82% of NC's Population

80 Hospitals entering data



Survival over time: By time frame that EMS joined:  
Joined first, second, and third



- Reporting Counties
- Limited Reporting – only select agencies
- Site set up in progress
- Future Sites
- Priority for Recruitment (Population)