

## TCD Meeting Region A MARCER Sept 28, 2018

**In person attendance:** Debbie Stark, Stoke SLH; Matt Lammers Stoke SLH; Pam Jackson, Trauma SLH; Patty Richey Stroke, STEMI; Trauma, Western Mo Med Center; Brian Dixon, Trauma CMH; Amy Schumaker STEMI RMC; Stephanie Reich Trauma, Belton RMC; **By Phone:** Dr. David Gustafson, Med Director, Multiple EMS agencies; Angie Giegerich Trauma, Centerpoint.

Mike Wallace, MARCER; Jason White, MARCER; Ruby Mehrer, MEMSA and Air Amb. (Mike and Ruby are members of the state appointed TCD committee members meeting every two weeks in Jeff City)

Mike discussed the state TCD committee appointed by Dr. Williams, Director of DHSS. The committee is meeting every two weeks. Looking for data, funding, infrastructure etc. to support the TCD system. This meeting today is to share information from the state meetings and to gather information to take back to the state TCD meetings.

Dr. Williams has identified Governance, Funding and Data as the focus of the state TCD committee.

Today's group provided information on current meetings taking place that discuss TCD issues.

Stroke and STEMI have group meetings in MARCER region on 2<sup>nd</sup> Tuesday of each month; Stoke at 8 am and STEMI at 2pm at AHA building in Overland Park.

Mike Wallace would like people from this meeting to take information to their groups. Matt Lammers said the groups are bistate so may have to develop a way to focus on Missouri TCD for deeper discussion.

Mike reported Dr. Williams interested in getting medical treatments out of regulations so medical science can adjust treatment without being bound by regulations.

Kansas does ACOS Level I and 2 for designations and the state has own system for 3's and 4's. The 3's and 4's standards mirror ACOS requirements but not part of ACOS reviews.

This group would like to establish standing meetings before MARCER meetings on the third Fridays, Mission Life Line quarterly meeting is scheduled at 0730 Oct. 19<sup>th</sup> preceding the next MARCER meeting so the next meeting for this group will be Nov 16<sup>th</sup> – At either 7:30 or 8:00am. Mike Wallace will send out meeting time and an agenda. MARC will provide a conf call-in line if possible.

Should the designation process include all hospitals? How to have them participate and provide data and not be complicated and expensive. Opportunities need to be explored.

Pam Jackson: Says she can't capture the EMS record when a patient arrives from a different hospital—the EMS record is not available. That is problematic when collecting data.

Possibilities of linking prehospital and hospital data discussed.

Funding –this group in favor of going 'big'. Look at all sources to fund a meaningful TCD system.

Who controls the bucket of money? Needs must be identified and money should be available for those needs.

Pam Jackson said MHA sent out a survey to STEMI Stroke Trauma about a week ago. The survey asked about data points being gathered. Pam said the survey reflected what is already required to collect. Those collecting data would like to avoid dual entry and extra work as a state system is established.

Jason White said EMS wants to do a survey also. Having a copy of the hospital survey to review could be helpful in developing a survey for prehospital. He will explore options.

Brain Dixon suggested we look at what states are using data to prove improvements in TCD –how they are measuring and what data is gathered. Best practices can be looked at and copied.

Mike Wallace: Arizona Arkansas etc. have some of that data. Need to continue to look at other state systems.

Amy Schumaker: Iowa Neb N Dakota S Dakota –AHA highly involved and have similar one pagers of protocols. She will explore what they can share.

There was a question about ACOS designation—how would that impact smaller hospitals. Smaller hospitals are concerned if state will still have a TCD system still in place in 5 years.

Angie Giegerich: trauma ACOS is very costly and takes at least two years to have a site visit scheduled. Brain Dixon says that will compound as more trauma centers want to switch to ACOS certification.

Patty Richey says Warrensburg will not be pursuing ACOS. May look at STEMI / Stroke national certification.

Jason White said a multiple approach for different hospitals will be necessary. Pam Jackson says you can look at ACOS costs on website but that does not include personnel and other costs that are involved in the preparation. State still needs a system because not all can participate in ACOS. Should have state oversight of regulations/standards etc. Need to have a window of time to transition if that is the decision.

Most Stroke and STEMI have dual state and national designation. Joint Commission comes every two years—state rubber stamps that. In general, hospitals would rather have JC review every two years than have state review 4-5 years.

Mike reminded the group that Dr. Williams wants to be finished by July 2019

Dr. Gustafson says rural hospital using tele-neurology to help with Stroke patient plan of care by getting expertise from Level I center. Shows the process is changing and opportunities are different than they were a few years ago. Landscape is changing. How do we adjust our standards and treatments to stay current.

Adjourned approx. 10:23am. Next meeting November 16<sup>th</sup> preceding MARCER. Mike Wallace will send notice with details of time and agenda items.

***Summary prepared by Ruby Mehrer***