



**Rappahannock EMS Council
Quality Improvement Committee—Medical and System
August 19, 2014—1900
REMS Council Regional Training and Simulation Center – Classroom “A”**

Members Present

Mark Crnarich, Chair
Waverly Alley
Jake Marshall
Tina Skinner
Melissa Hall, via teleconference

Staff Support

Margot Moser, Office Manager
Wayne Perry, Executive Director

Excused

Guest

Call to Order

The meeting was called to order at 1915 by Mark Crnarich, committee chair.

Approval of Minutes

Minutes from the last QI meeting approved without revisions.

New Business

Margot is the new REMS staff support. Carolyn Marsh will be assisting with VPHIB report generation because Margot is not a provider and therefore cannot be given access to the database.

Reviewed prototype VPHIB report produced by OEMS representative. Report includes most of the standard QI quarterly indicators that are collected, however report did not include all REMS agencies. Report indicated that Caroline County did not submit any data to OEMS. Report also indicated that Colonial Beach was not part of REMS. Both issues need to be investigated. VPHIB does collect type of call (BLS/ALS/other), therefore that data may not be available.

Committee discussed changing methods of reporting, possibly focusing more on VPHIB data and supplying additional questions on indicator forms.

Reviewed 12-lead survey data. Some agencies indicated that they do not perform 12 leads because they were BLS only. Is this a lack of equipment issue, or a training issue? BLS providers are allowed to perform 12-lead assessments.

A predominant number of agencies that did not report any data were almost exclusively from Fauquier County. Is this typical? Follow-up needed.

Discussion/Review of upcoming indicators. Current quarter is late for distribution due to personnel turnover. Current (1Q) indicators will be Medical Indicator #3 (Overdose) and System Indicator #4 (agency financial survey). Next quarter (Q2) will be Medical Indicator #4 (Pain Management), and System Indicator #3 (Use of Mechanical Aids)

Old Business

Committee action to begin review of PIP in November for future updates. Current version of PIP to be forwarded to REMS BOD for re-affirmation with no changes.

Adjournment

Meeting adjourned at 1958.

Next Meeting

The next meeting will be held at the REMS Council offices on November 19 at 1900.



**Rappahannock EMS Council
Quality Improvement Committee—Medical and System
November 19, 2014—1900
REMS Council Regional Training and Simulation Center – Classroom “A”**

<u>Members Present</u>	<u>Staff Support</u>	<u>Excused</u>	<u>Guests</u>
Mark Crnarich, Chair Jake Marshall	Margot Moser, Office Manager Wayne Perry, Executive Director	Tina Skinner Melissa Hall	

Call to Order

The meeting was called to order at 1919 by Mark Crnarich, committee chair.

Approval of Minutes

Minutes from the last QI meeting approved without revisions.

New Business

Reviewed the results of Q1 medical (Overdose) and system indicators (agency financial survey). System indicators was not well received, and it was felt that better rational should have been provided for the requested data. Agencies will not be reported as non-compliant for failure to respond to the System Indicator. The committee is trying to determine the overall investment in pre-hospital patient care, which is a valid quality measure. Effort will be focused at a later time to better educate rational for this measure.

Q1 Medical Indicator (overdose) indicated about 48 cases reviewed (of the agencies that reported). The average age of overdose patient was 37. The committee still struggles with what to do next with data collected.

There was a larger number of non-compliant agencies this quarter, including those that regularly participate. Speculation included the possibility of indicators being published late.

One commendation received from King George – Don Perry, Cardiac Arrest Call. REMS to issue a letter and gift card acknowledging the provider.

PEMS requested QI data related to Cincinnati Stroke Scale (CSS) and staff attempted to comply. Initial query was on cardiac calls. Discussion occurred as to why cardiac and not altered mental status. The committee concluded that VPHIB does not make it easy to document the usage of CSS.

Discussion occurred as to whether topics have to be unique for each quarter. The committee determined that the current Q2 measures (Pain Management and Use of Mechanical Aids) should be extended into Q3 as well. Q2 will be reviewed as a “checkpoint” at the next regular meeting.

Q4 indicators topics were discussed. The committee decided to select response time for the System Indicator and Altered Mental Status / Stroke Assessment as the Medical Indicator (try to include Cincinnati Stroke Scale utilization). Specific criteria will be finalized at the next meeting.

Discussion on utilizing VPHIB data for the standard QI quarterly indicators. Carolyn Marsh has completed the state training. She has not been able to complete generation of regional level reports yet. We will revisit status at the next meeting.

Old Business

Standing action to review Performance Improvement Plan (PIP) for suggested updates. No recommendations discussed..

Adjournment

Meeting adjourned at 1948.

Next Meeting

Due to conflict with the REMS BOD meeting, the next QI meeting will be had at the REMS Council offices on Tuesday, February 17 at 1900.



**Rappahannock EMS Council
Quality Improvement Committee—Medical and System
February 25, 2015—1900
REMS Council Regional Training and Simulation Center – Classroom “A”**

<u>Members Present</u>	<u>Staff Support</u>	<u>Excused</u>	<u>Guests</u>
Mark Crnarich, Chair Jake Marshall Waverly Alley	Margot Moser, Office Manager Wayne Perry, Executive Director		

Call to Order

Meeting was postponed from 17 February 2015 due to inclement weather. The meeting was called to order at 1913 Mark Crnarich, committee chair.

Approval of Minutes

Minutes from the last QI meeting approved without revisions.

New Business

Kudos to Margot for the presentation format of last quarter’s indicator data

Reviewed standard QI indicator reports. Participation from all agencies continues to be a problem. Discussion on format of the form, it is still based on the legacy PPCR forms, some of the data is not as easy to retrieve from VPHIB. Disposition has some additional options, such as Treated & Transferred to Law Enforcement.

Caroline March continues to work on VPHIB training to help support council wide data reports.

Reviewed the results of Q2 medical (Pain Management) and system indicators (Mechanical Aids).

Q2 Medical Indicator (Pain Management) had a pretty even distribution of pharmacological and non-pharmacological measures. It was noted that some agencies stopped filling out data because the page supplied was filled up. Instructions need to be modified to have the agency add additional pages if they run out of room. 86 out of 239 reports sampled indicated that there improvement in patient status.

Next survey for pain management should include assessment of patient improvement after intervention, instead of at the end of the transport.

System Indicator was free-form assessment of mechanical aids. Only 1 agency reported AED. Next survey should include a list of aids for agency to check off. There appeared to be some confusion about time to deploy vs. how long device was used. Some agencies appeared to indicate how long device was used.

Q4 indicators were selected:

Medical – AMS/Stroke Assessment and utilization of Cincinnati Stroke Scale.

System – Agency Response Time SOP and measurements against that SOP

Old Business

Standing action to review Performance Improvement Plan (PIP) for suggested updates. No recommendations discussed..

Adjournment

Meeting adjourned at 1944.

Next Meeting

The next QI meeting will be had at the REMS Council offices on Tuesday, May 20 at 1900.



**Rappahannock EMS Council
Quality Improvement Committee
May 26, 2015 – 7:00 PM
Regional Simulation and Training Center**

Members Present

Waverly Alley
Mark Crnarich, Chair
Jake Marshall

Staff Support

Margot Moser, Office Manager
Wayne Perry, Executive Director

Excused

Steve Mitchell

Guest

Call to Order

The meeting was called to order by the committee chair, Mark Crnarich, at 1910.

Approval of Minutes

Minutes for the February 25, 2015 minutes approved with no corrections.

New Business

1. Review of statistical data for general and medical indicators for the 2nd and 3rd quarter FY 2015: The Council staff is still having difficulty access data from VPHIB to augment that collected by the committee. Margot noted that responses were more thorough and exact now that agencies were provided with additional clarification regarding indicators, but that the level of agency participation was still low. The committee briefly discussed methods of improving participation. Mark requested that Margot generate an additional report focused on patient improvement (attempting to measure efficacy of Fentanyl v. Morphine according to agency reporting). The committee also discussed the need to alter pain scale questions in the future, specifying that agencies should include both the first pain scale response and patient response after treatment.
2. The committee agreed to extend the fourth quarter FY15 indicators into the first quarter of FY2016.
3. In future indicators, the committee agreed that "Type of Call" should be replaced by "Chief Complaint."

Old Business

1. Continuing discussion regarding lack of agency participation. The committee briefly discussed changing reporting requirements, i.e. increasing the 10% requirement to increase the amount of data the committee is able to pull from. The committee will revisit at a later date, after reviewing contract requirements and EMS rules and regulations.

Adjournment

Meeting adjourned at 8:08.

Next Meeting

The next QI meeting will be held on August 13, 2015, at 7 PM at the REMS Council. The FY 2016 schedule will be as follows:

1. August 13, 2015
2. November 19, 2015
3. February 11, 2016
4. May 12, 2016