



# Cardiac & Stroke Care Subcommittee 2019-2020 Work Plan

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## Committee Information

### Leadership:

*Chair:* Justin Fraser, MD (UK Healthcare)

*Vice-Chair:* Lacy Shumway (Norton Healthcare)

### Meetings:

*Committee:*

Type: Physical Meeting

Meeting Schedule: (See Attached\*) \*Always see [KBEMS Website](#) for updates/changes.

Time/Length: 1:30 a.m. eastern / 2 Hours (maximum)p

### Membership

Brian Baker (Kentucky One Health)

Debbie Berry (Madison County EMS)

Tracey Crawford (Kings Daughters Medical Center)

Phil Dietz (Independence Fire District)

William Dillon, MD (Baptist Health)

Curtis Given, MD (Baptist Health)

Amy Graham (AHA)

Jeremy Jeffrey (Mercy Regional EMS)

D.P Suresh, MD (St. Elizabeth Healthcare)

Chris Wilhite (Jessamine Co. EMS)

### KBEMS Ex-Officio/Staff Liaison:

Chuck O'Neal, Deputy Director (KBEMS)

Calynn Fields, Resource Specialist (KBEMS)

Julia Martin, MD (KBEMS)

## Purpose & Charge

### Purpose

The 2006 Institute of Medicine (IOM) Report “Emergency Medical Services at the Crossroads,” reported significant challenges facing the EMS system nationally, and Kentucky faces similar issues. Kentucky is large and diverse with contrasting regional needs. It has large rural areas with EMS systems sometimes staffed by volunteers and without easy access to PCI and Stroke care centers.



EMS providers operate on multiple sets of clinical protocols making it difficult to assure that all Cardiac and Stroke patients receive the same standard of care across the Commonwealth.

There is limited regional access to PCI and Stroke care centers due to census, finance, and issues of specialist recruitment. The purpose of the CSC is to assemble a panel of experts from rural and urban areas of Kentucky to evaluate systems of care both in and out of the hospital setting, to identify opportunities for improvement, implement interventions targeting improvement, and to evaluate successes and challenges incorporating sustainability. This collaborative effort among disciplines shall allow individuals from rural and urban areas to discuss the needs of their specific communities, and break down barriers to advanced care in all areas of our state.

### Charge

- Identify and convene experts and partners to guide the statewide approach to definitive treatment of Cardiac and Stroke cases and recommend project interventions.
- Implement and evaluate a comprehensive AMI and Stroke access assessment targeting 120 counties in the Commonwealth of Kentucky.
- Collaborate with system engineers to analyze EMS system capabilities and the capabilities of regional healthcare facilities and specialty care centers.
- Begin implementation of quality improvement initiatives prioritized by expert groups.
- Identify policy initiatives based on the findings of the assessment and the expert group recommendations.
- Promote and advocate for educational programs, protocol updates and a regionalized EMS system of care.
- Establish a minimum data set for Cardiac and Stroke care that can be reported by EMS Systems & Healthcare facilities for ongoing research.
- Implement a reassessment to evaluate progress, remaining challenges, and clarify questions on the initial assessment.
- Develop a gap analysis for ongoing evaluation of progress and strategy success with identification of future steps.

## Task List

TASKS	RESPONSIBLE PARTY(YES)	TARGET COMPLETION DATE

## Benchmark Activities

### Task {Identified from list above}

date	who	activity

### Task {Identified from list above}

date	who	activity