TCD Professional Education – STEMI Subgroup December 15, 2010 1:00 p.m. – 2:00 p.m.

Those participating: Lisa Hutchison, Kaisey Martin, Cindy Gillam, Dr. George Kichura, Rebecca Baker, Rita Stiles, Lindy Huff, Lisa Donnelly, Angela Hind, Kristen Seymour, Jessica Thomas, Peggy Crutchfield, Dwight Jones.

General information for workgroup participants:

The workgroup identified that conference calls would be held monthly, on third Wednesday of the month, from 1:00-2:00 pm. By Monday before each meeting, an email appointment will be sent to the listserv, and any handouts will be attached.

TCD STEMI Center Professional Education

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TCD STEMI Center Professional Education

DHSS Internal Leads: Cindy Gillam <u>Cindy.Gillam@dhss.mo.gov</u>

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It was stated that the reality of training more than 4,000 people per year in STEMI would be impossible for large health care systems. Must narrow focus on who needs to be trained in order to fulfill the requirements.

As a group, focus on creating what core competencies and objectives will be necessary to insure that STEMI training is complete and provided to the appropriate group on health care professionals. Decide how many hours will be required and specifically what will be taught during that training period.

Educational requirements will be weighted and have different levels of competency for different center levels. For example, a Level I center will have different requirements than a Level IV center. Determine the stratification difference for each level.

Effort needs to be a resource and guide for professionals and facilities and in no way be punitive. Eventually create a venue to share the information and make it available to all regions in the state. Level 1 and Level 2 centers will be responsible for reaching out to other levels for support.

Also list national benchmarks for core competencies and reach out to smaller hospitals so they understand the system.

If the group tries to package this as one size fits all, it will fail. Must be flexible and broad in order to develop the framework of the system. How to do this? Using the example of the 12 lead, need to educate in the basic recognition for STEMI.

Group wants to pull together what is currently available for education. Can list this information by topic and then create list of where information can be found.

Cindy Gillam at DHSS has offered to compile the information that is collected.

Potential Objectives: What are the topics under each of the six categories?

- 12 lead EKG competency
- ACS STEMI and NonSTEMI diagnosis, treatments/therapies

- Pathophysiology of Myocardial Necrosis
- Fibronolytic therapy
- Primary PCI
- Current anticoagulant therapies in ACS

The workgroup suggests the following Qualified Medical Professionals (QMP) should receive STEMI professional education:

STEMI Medical Director:

STEMI Program Manager/Coordinator:

Emergency Department:

Emergency Physicians

Hospitalists

Residents

Nurses

Physician Assistant (PA)

Advanced Practice Nurses

Physician:

Radiologist

Cardiologist

Interventional Cardiologist

Intensivist

Core STEMI Team Call Roster

PCP Primary Care Physicians

Hospitalists

Cardiovascular Surgeons

STEMI Team:

All members of the STEMI Team

Rapid Response Teams

Cardiac Catheterization Lab:

Cardiac Care Unit:

Cardiac Rehab:

Action Items for upcoming conference calls are as follows:

- 1. Objective to identify opportunities for CME/CEUs already available to place in compendium—lists of courses that will help
- 2. Compendium will have:
 - a. Resources to support educational guidelines
 - b. Sample Curriculum—if developing own program
 - c. Training Resources or Courses
 - d. Cost-effective approaches i.e. resources on TCD website for use

Participants were asked to submit information to organize and present at next conference call.