



Meeting Title	STEMI & Stroke Advisory Comm	nittee Meeting	
Meeting Location	Zoom		
Meeting Date	06.06.2024		
Called to Order @	6:00 p.m.		
In Attendance "⊠" STEMI Members "**" Stroke Members "**"	 ☑ Dr. Harper Stone (Chair)* ☑ Dr. Jason Waller** ☐ Dr. Barry Bertolet** ☑ Dr. Paul Levy** ☒ Ms. Jada Coker, NRP** ☒ Ms. Bridget Watkins, RN** ☒ Dr. Chris Waterer** ☒ Mr. Chuck Carter, RN, NRP** ☐ Ms. Debra Cox, RN** ☒ Ms. Laura Watrous, RN** ☐ Dr. Harvey Mason** ☐ Ms. Heather Sistrunk** ☐ Mr. Kevin Smith, NRP** ☐ Ms. Melissa Stampley, RN** ☒ Ms. Ginny Hudson, RN** ☐ Ms. Kim Cleland, RN** ☐ Ms. Kim Cleland, RN** ☐ Dr. Thad Waites** ☐ Dr. Brett Kathmann** ☐ Ms. Stephen Houck, NRP** ☐ Ms. Stephen Houck, NRP** ☐ Ms. Finley Boyed** ☐ Ms. Karyn Dean* ☒ Ms. Allison Sandlin ☒ Ms. Christina Batton ☒ Ms. Amber Herron 	 ☑ Dr. Ruth Fredericks (Chair)* ☐ Ms. Teresa Ellerbusch, RN* ☐ Ms. Ashley Joyner, RN* ☐ Mr. Mickee Ramey* ☒ Mr. Scott Stinson* ☐ Ms. Heather Sudduth* ☐ Ms. Kristen Isom* ☐ Ms. Lee Waldrop, RN* ☒ Mr. Neal Kiihnl, RN* ☐ Dr. William Evans* ☐ Mr. Sam Marshall* ☐ Mr. David Grayson* ☐ Ms. Kolandra Rucker* ☐ Ms. Wendy Barrilleaux* ☐ Dr. James Kolb* ☐ Ms. Laura Nikki Kelleway* ☐ Ms. Heather Sistrunk* ☐ Ms. Paula Metzger* ☐ Dr. Paul Bradley* ☐ Ms. Alicia Grant* ☐ Dr. Shreyas Gangadhara, ☒ Ms. Belinda Sanderson, RN* ☐ Mr. Evan McGlothin* ☒ Ms. Keisha Teasley ☒ Ms. Jennifer Coleman 	





ACCREDIT		
Ex Officio Members Present	☑ Ms. Elizabeth Day, RN	☑ Ms. Christy Berry, RN
	☑ Ms. Angie Carter	⊠ Ms. Christy McGregor, RN
Others present	⊠ Ms. Erin Tedder	☑ Mr. Dennis McDill
	☑ Mr. Jeffrey Whitfield	☑ Mr. Jim Craig
	⊠ Mr. Jon Wright	
	☐ Ms. MaCalla Matthews	⊠ Ms. Laura Hammonds
	⊠ Mr. Ryan Wilson	
		⊠ Dr. Bob Galli
		☑ Mr. Corey Vollenweider





	AGENDA TOPIC	NOTES		
I	Call to Order	Dr. Stone called the meeting to order.		
II	Roll Call	Ms. Day roll call with quorum present		
III	Review of Minutes a. MHCA Quarterly Mee	M – Dr. Waterer 2 nd – Mr. Stinson Approved – none opposed.		
IV	Reports a. Office of EMS & ACS b. Mississippi Healthcare Alliance i. CARES Update ii. Financial Update	M – Dr. Waterer		
V	STEMI Performance Improvement Committee Report a. Aggregate Data	 Ms. Carter gave a brief update on each account. Aggregate Data: Dr. Stone provided updates: Symptom Onset to Arrival: Median Minutes: Rolling 4Q (2022Q4-2023Q3). POV Arrival STEMI Patients Metric 11020: MS 120 minutes the nation 120 minutes. MS is doing better. This is the Dial Don't Drive campaign. EMS Arrival STEMI Patients: MS is at 48 minutes. The nation is at 54 minutes. 		





	MACCREDITATION		
	AGENDA TOPIC	NOTES	
		 STEMI Mode of Arrival in Percentage: Rolling 4Q (2022Q4-2023Q3) Metric 8898. 3Q EMS 54.8% POV 45.2%. MS 54.8% the nation 61.7%. Symptom Onset to Arrival: Median Minutes: Rolling 4Q (2022 Q4-2023Q3) Metric 11022 MS is at 49; nation 53 STEMI Mode of Arrival in Percentage: Metric 8898: MS 45%POV 55% EMS. STEMI Patients with Pre-Hospital ECG: In Percentage: Rolling 4Q (2022Q8-2023Q3). Metric 11012: 2023Q3 MS 88%. Nation 90.3%. This metric will be corrected by the next meeting and that will bring us back in line with the north and central region. FMC to Device Time ≤ 90 Min in Percentage: EMS and Hospital Arrival: Rolling 4Q (2022Q4-2023Q3) Metric 37: 2023Q3 MS 82.2%. Nation 85.7%. MS is slightly down from the previous rolling 4Q. FMC to Device Time in Median Minutes: EMS and Hospital Arrival. Rolling 4Q (2022Q4-2023Q3). Metric 11013. MS 92 minutes. The nation 83.5 minutes. Time to Primary PCI Among Transferred Patients in Percentage: Rolling 4Q (2022Q4-2023Q3) Metric 56: MS 67.5% and the nation is 76.4%. Median Time (Min) From First Facility ED Arrival to Primary PCI (Transferred Acute STEMI) Goal: ≤ 120 min. Rolling 4Q (2022Q4-2023Q3). Metric 11006: This is the first time RQ that MS has had ≤ 120 in three years. Hospital Arrival to ECG ≤ 10 Min Percentage: Rolling 4Q (2022Q4-2023Q3). Metric 1009: MS 71% the nation is at 66% Hospital Arrival to PCI (D2B) in Median Min: Rolling 4Q (2022Q4-2023Q3). Metric 11019: MS 60 minutes the nation is at 59 minutes. In-Hospital Risk Standardization Mortality: All AMI Patients Measured in Percentage 2023Q4 MS 5.31 nation 4.91. Performance Improvement Committee Report: Dr. Waites provided updates: The committee identified that FMC to the device time is directly correlated with the risk stratified mortality. 	
VI	STEMI New Business	None	
VII	Stroke Performance Improvement Committee Report a. Aggregate Data	Dr. Fredericks displayed a list of the current designated facilities. Dr. Fredericks provided updates:	





	A CENTA TODIC	NOTES	
	AGENDA TOPIC		
	AGENDA TOTTC	 NOTES AHASTER19: Arrival Mode By Percentage: Quarterly Data (2022Q4-2023Q3). MS 42.2% national 46.7%. AHASTR 39: Pre-Notification By EMS: Quarterly Data (2023Q1-2023Q4). MS 59.1% Nation 59.0% central 46.0% north 73.3% south 61.4%. Door To CT ≤ 20 Minutes By Percentage: Quarterly Data (2023Q1-2023Q4). The goal is ≥ 50%. MS 44.9% national 44.8% north 49.1% central 45.8% south 42.2%. Door to IV LYTIC ≤ 60 min By Percentage: Quarterly Data (2023Q1-2023Q4). MS 72.8% national 88.1% north 75.5% central 82.4% south 65.0%. AHASTR50 Time to IV Thrombolytic Therapy Times By Percentage: 2023Q4: MS 59.9 minutes the nation is 43.5 minutes. AHASTR40 Reasons for Daley IV Thrombolytic Initiation Beyond 60 Min: 2023Q4. Hypertension is still an issue. Number of Interventions State Aggregate: Quarterly Data (2023Q1-2023Q4) 2022Q1 69, 2023Q2 69, 2023Q3 72, 2023Q4 60 with a total number of cases 270. Door To Device Within 60 min for Transferred PTS or 90 mins for PTS Percentage: Quarterly Data (2023Q1-2023Q4). MS 13.3% the national is 46.9%. We do not do will as a state here. AHASTR60 Risk-Adjusted Mortality Ischemic Stroke and Hemorrhagic Stroke: 3Q2023 vs 4Q2023. MS 1.78% national 1.51%. AHASTR23 Most Common Discharge Destinations In MS: This has improved over the last 15 years. 	
VIII	Stroke New Business/Open Discussion	None	
IX	Announcements/Discussion	 The stroke abstraction workshop June 27th at Baptist Memorial – Oxford and July 12th at Gulfport Memorial. This workshop will be hosted by Ms. Isom. Lunch will be provided, and both are from 9am to 3pm. The 2024 awards will be released mid to last July. Hospitals have received your get with the guideline's invoices for June 2024. If you have not paid, please do and get with Ms. Isom. Coordinator meeting is August 8th and November 7th. 	





	AGENDA TOPIC	NOTES
Upo	coming PIC meetings	 September 5, 2024 December 5, 2024

ACTION ITEMS			
#			Due Date
1.	Follow up Stroke Centers regarding designations	OEMSACS	Next meeting
2.	Send draft of STEMI / Stroke System of Care plan to advisory committee member for review / approval to go to Board of Health in July	OEMSACS	2 weeks