



PURPOSE: To provide standardized quantifiable indicators to assess and evaluate the performance, quality of care and program management of designated STEMI Receiving Centers (SRC).

DEFINITIONS:

Door to Balloon Time (D2B): A time measurement that starts with the patient's arrival in the emergency department and ends when the first device (excluding guidewire) intervened at the culprit lesion during the first percutaneous coronary intervention.

Electrocardiogram (ECG) Time: Time 12-Lead ECG was obtained.

Emergency Department (ED) Door Time: Time of patient arrival at the ED.

Percutaneous Coronary Intervention (PCI): A procedure used to open or widen a narrowed or blocked coronary artery to restore blood flow supplying the heart.

Return of Spontaneous Circulation (ROSC): Following cardiopulmonary arrest, ROSC is the restoration of a spontaneous perfusing rhythm. Signs of ROSC include: palpable pulse, breathing (more than an occasional gasp), a measurable blood pressure and/or a sudden rise in capnography to a normal/high reading.

STEMI Referral Facility (SRF) Time: Time of patient arrival at the ED of the STEMI Referral Facility

Targeted Temperature Management (TTM): Maintaining body temperature at a target between 32 and 37.5 degrees Celsius in a person for a specific duration of time for the purpose of preserving neurological function post cardiac arrest.

POLICY:

- I. The SRC shall meet compliance threshold on all performance measures to maintain SRC Designation.
- II. The EMS Agency may terminate SRC designation at any time if an SRC's non-compliance with the Performance Measures are deemed significant enough to result in poor patient outcomes.
- III. Performance Measures:
 - A. Receipt of notification of transmission of prehospital ECG to MD ECG review is within 5 minutes 90% of the time
 - B. ED Door Time to ED ECG obtained time, when a confirmation ECG is required, is within 10 minutes 90% of the time

- C. Prehospital ECG Time to PCI is within 120 minutes 90% of the time and 90 minutes 75% of the time
- D. D2B for EMS (9-1-1) Transports: within 90 minutes 90% of the time and 60 minutes 75% of the time
- E. SRF Door to PCI is within 150 minutes 90% of the time and 120 minutes 75% of the time
- F. Prehospital/ED cardiac arrest patients who achieve ROSC with STEMI to cath lab is within 6 hours 90% of the time
- G. TTM for patients who meet inclusion criteria is applied 90% of the time

IV. Procedure for Non-Compliance with Performance Measures

Month	Action 1	Compliance Result	Action 2
1 st	SRC provides care to STEMI and OHCA Patients		
2 nd	SRC starts data collection and electronic data collection for patients who meet inclusion criteria		
3 rd	EMS Agency reviews SRC's 1 st month compliance with all performance measures	SRC does not meet 90% compliance in any one of the performance measures Significant Improvement	EMS Agency notifies SRC's Medical Director and Program Manager via e-mail or telephone, of non-compliance and request corrective action plan and assist in determining solutions. Monitor
4 th	EMS Agency reviews SRC's 2 nd month compliance with all performance measures	No significant improvement Significant improvement	EMS Agency sends a written notice to SRC's Medical Director and Program Manager notifying of compliance results and continued non-compliance. Monitor
5 th	EMS Agency reviews SRC's 3 rd month compliance with all performance measures	No significant improvement Significant improvement	EMS Agency notifies SRC's Medical Director and Program Manager in writing of compliance results and request to submit within 15 calendar days a plan to correct deficiency. Monitor

Month	Action 1	Compliance Result	Action 2
6 th	EMS Agency reviews SRC's 4 th month compliance with all performance measures	No significant improvement Significant improvement	Within 15 days of EMS Agency's receipt of SRC's corrective action plan, the EMS Agency will provide SRC a written approval or request additional modification to SRC's corrective action plan. Monitor
7 th	EMS Agency reviews SRC's 5 th month compliance with all performance measures	No significant improvement Improvement based on approved corrective action plan	EMS Agency notifies SRC's Medical Director and Program Manager in writing of compliance results and request modification to SRC's corrective action plan. Monitor
8 th	EMS Agency reviews SRC's 6 th month compliance with all performance measures	No significant improvement Improvement based on approved corrective action plan	EMS Agency notifies SRC's Chief Executive Officer or President in writing of compliance results and continued failure to meet performance measures. SRC is placed on a 3-month provisional status. Monitor
9 th	EMS Agency reviews SRC's 7 th month compliance with all performance measures	No significant improvement Improvement based on approved corrective action plan	EMS Agency will notify SRC of continued non-compliance Monitor
10 th	EMS Agency reviews SRC's 8 th month compliance with all performance measures	No significant improvement Improvement based on approved corrective action plan	EMS Agency will notify SRC of continued non-compliance Monitor
11 th	EMS Agency reviews SRC's 9 th month compliance with all performance measures	No significant improvement Improvement based on approved corrective action plan	EMS Agency notifies SRC's Chief Executive Officer or President in writing that continued noncompliance may result in revocation of SRC designation. Monitor
12 th	EMS Agency reviews SRC's 10 th month compliance with all performance measures	No significant improvement	EMS Agency will notify SRC's Chief Executive Officer or President in writing of revocation of hospital's SRC designation.