

The CARES Report



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CARES Welcomes a New Team Member

CARES is excited to announce the addition of a new team member! In early October, Julie Mayo joined us as a Program Coordinator, and looks forward to working with CARES communities. Julie is from Central Florida and completed her Emergency Medical Technology - Basic (EMT-B) certification from Valencia Community College. She also received her Bachelor of Science in Psychology with a Health Sciences minor from the University of Central Florida. Julie then attended the Tulane University School of Public Health & Tropical Medicine in New Orleans, LA, and received a Master of Science in Public Health degree. Julie currently lives in Atlanta, GA with her husband. She has five years of outcomes research experience, from her previous work at the University of Florida, the Marcus Trauma Center at Grady Memorial Hospital, and the American Cancer Society. Julie is excited to intertwine her previous research experiences with her EMT-B knowledge as a new team member with the CARES Program.



Contact Us

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CARES Educational Webinar 2016 “Prehospital Cardiac Catheterization Lab Activation for Witnessed Ventricular Fibrillation Cardiac Arrest”

In early September, Dr. Jason Kruger and Dr. Steven Martin gave a webinar to the CARES community on "Prehospital Cardiac Catheterization Lab Activation for Witnessed Ventricular Fibrillation Cardiac Arrest." The webinar covered the success of a novel system implemented in Lincoln, NE, which has since drastically improved the OHCA survival rate in this community. At the end of the webinar, the audience asked great questions about the challenges as well as solutions for emulating similar systems in their own communities.

For those who could not join or are interested in distributing the webinar to their department, please see below for links to the recording and slide deck.

The full recording can be accessed at the link below:

<https://www.dropbox.com/s/zkr5a6fgpddwxy9/CARES%20educational%20webinar%202016.mp4?dl=0>

The slide deck can be accessed at the link below:

<https://www.dropbox.com/s/7tfl88vywgces1v/CARES%20educational%20webinar%20deck%202016.pdf?dl=0>

National Report Reminder

CARES staff will release the 2016 National Report in April of 2017. Participating EMS agencies should enter all 2016 records by January 31, 2017 and all hospitals must complete data entry by February 28, 2017. If there are any questions or concerns, please feel free to contact your CARES Program or State Coordinator. We appreciate everyone's time and effort in following these guidelines.

CARES Spotlight

Illinois Heart Rescue: “A Survivor’s Network”

The Illinois Heart Rescue project (ILHR) has always known that data is only significant if it precipitates positive change. With that in mind, earlier this year we started looking at our data for the city of Chicago, specifically our survivors. We know that attacking out-of-hospital cardiac arrest (OHCA) in our communities before someone drops is key to increasing survival. What we also discovered is that we have another population that needs just as much attention: the survivors and their families.

With the cooperation of the City of Chicago’s four medical directors, a “Survivor’s Network” was created.

This letter invites the survivors of OHCA and their families to join a network of other survivors throughout the city. ILHR organizes meetings with these survivors to provide resources and encourage networking. Our goal is to continue to support these survivors and their families on their road to recovery.

Our hope is to build this network and to continually give support in a variety of recovery areas. Quarterly, we will provide a meeting space and guest speaker for the network. These guest speakers will cover different areas of recovery and life adjustments post OHCA. The speakers will come from different disciplines ranging from nutrition, occupational health, physical therapy, and any other areas that are of interest to the network.

As we move forward, ILHR will expand our survivors network throughout the state of Illinois. Joining with other statewide medical directors and EMS agencies, our hope is to have a vibrant and healthy OHCA survivors network. None of this could have been possible without CARES data.

Claus Johnsen NR-P
CARES Coordinator for Illinois





Survival

SaveMiHeart is a new non-profit organization in Michigan uniting the community, first responders, EMS, and health systems to improve cardiac arrest survival. Our mission is to double survival by 2020 of patients treated for cardiac arrest.

SaveMiHeart utilizes the Cardiac Arrest Registry to Enhance Survival (CARES) to measure and report important cardiac arrest epidemiology, treatment parameters and outcomes that are essential to support implementation of evidence-based strategies to improve survival in the state of Michigan.

SaveMiHeart is working with EMS agencies, hospitals, dispatch and community groups to improve ROSC and survival to hospital discharge.

The main focus of our program:

- Bystander Response- Hands Only CPR Awareness and Training. Community Outreach.
- CPR in Schools Legislation
- Dispatch Assisted CPR
- Increase post-cardiac arrest hypothermia TTM
- Increased post-cardiac arrest coronary angiography
- Reliable post-cardiac arrest neuroprognostication



University of Michigan Club Sports Hands Only CPR training event Sept. 19 & 20, 2016. SaveMiHeart partnered with American Red Cross, American Heart Association, University Police and Huron Valley Ambulance to teach over 300 hundred students on HO-CPR and AED use.



University of Michigan Department of Emergency Medicine tailgate HO-CPR event Sept. 24, 2016.

CARES Attends the NASEMSO Conference

CARES presented a registry update to state medical directors, data managers, and electronic Patient Care Record (ePCR) vendor contacts at the National Association of State EMS Officials Conference in Albuquerque, New Mexico on September 19th. An update was provided on current state and site participation, 2016-2017 focus states, ePCR extraction processes, and program collaboration with HeartRescue. As a result of the discussion, NASEMSO membership approved an official resolution supporting and encouraging participation in CARES, which will be very valuable to program recruitment and ePCR vendor engagement. CARES continues to strive towards establishing relationships with stakeholders for expanded state and site participation in the registry. If you are interested in joining the CARES State network or HeartRescue US Consortium, please contact Monica Rajdev (mmehta5@emory.edu) or Dr. Thomas Rea (rea123@uw.edu), respectively.



Software Updates

In 2015, CARES began meeting quarterly with the ePCR Vendor User Group to discuss data definitions and processes, NEMSIS compliance, and challenges with data transfer from an EMS agency's ePCR platform to the CARES registry. The ePCR Vendor User Group made several process improvement suggestions to CARES surrounding NEMSIS dataset alignment, upload services, and documentation updates.

After reviewing the NEMSIS 3.4.0 data dictionary, CARES found 9 data elements that could be transitioned away from the NEMSIS-Custom section of the XML file and mapped directly from the core NEMSIS dataset. Vendors asked for uploaded files to go through a mandatory logic and validation process based on the NEMSIS dataset, as well as a CARES-specific validation process. In response to this feedback, Physio-Control, the CARES software developer, built a CARES schematron file and File Upload Validation Report to generate file upload results in real-time for vendor and agency contacts that identifies successful or failed transfer of data. Physio-Control also developed a second web service (SOAP messaging protocol) for CARES that allows vendors to upload agency data, as they do for NEMSIS. To clearly reflect all of the above changes that were made to XML programming, CARES and Physio-Control updated the CARES XML data dictionary.

The full list of build updates released on September 14th can be found below:

- Transition 9 Current Fields from Custom to NEMSIS in the CARES XML file
 - Incident Number (expand to allow 32 digits)
 - First Arrest Rhythm
 - Field Hypothermia
 - Mechanical CPR Device Used
 - 12 Lead

- ITD Used
- Time of 1st CPR
- Ambulance Times
- Incident City (use GNIS code) & Incident State (use ANSI state code)
- Update mycares.net Webpages and XML Upload Process Documentation
- Update Upload Utility to SOAP
- Build CARES Logic Schematron
- Update XML Data Dictionary

The underlying goal of this build was to increase NEMSIS-compliance within CARES and align as many data elements and processes as possible between the two systems. This remains aligned with the program's overall goal to move towards standardization in order to efficiently and effectively collect out-of-hospital cardiac arrest data and outcomes.

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