



## LEARNING SESSION

MAY 21, 2019

### PRESENTERS:

Kate Remick, MD  
Krystle Bartley, MA  
Diana Fendya, MSN (R), RN  
Michael Ely, MHRM

### LINKS:

[Link to Recording](#)  
[PowerPoint Slides](#)  
[RedCap CNE Survey](#)

RedCap CNE Survey QR Code



\*Survey expires June 4, 2019

### Next Learning Session:

July 16, 2019  
11:00 – 12:30 CST  
[Meeting Link](#)

## SUMMARY

During this Learning Session, the current DUA and data entry status, including the new PRQC [Leaderboard](#) were shared. The Leaderboard illustrates states with greatest forward movement in bundles each month. Dr. Remick also reviewed the [results of the Environmental Scan](#) and Krystle Bartley shared the location of important and helpful bundle resources on the new EIC website. Additionally, a new member of the PRQC administrative team, Meredith Rodriguez, was introduced. Meredith will be assisting in coordinating/disseminating PRQC communications as well as other tasks of the collaborative.

## KEY TAKEAWAYS:

### State of the Collaborative

- The collaborative has been extended to April 2020. Aim statements have been updated to reflect the new ending date.
- A letter, addressing the extension may also be downloaded from the website, and is available for champions to share with hospital leadership. The letter provides a brief summary of progress to date and specifics related to the need for the extension.
- 98 sites (“Mighty 98”) have fully-executed DUAs. Others are either in the signature phase or still in negotiation. (M. not sure the rest is accurate, some may not be moving onward with DUAs due to site constraints.)

### Data Entry System/Dashboards

- Leaderboard: 13 sites have started entering their data. Ten have completed entry of the required 30 charts for baseline data in at least one bundle.
- Baseline data should be entered by all states by the end of June.  
\*Remember baseline data provides a snapshot of where your facility is at this time and future data will allow you to gauge progress and need for pulling in additional change strategies to achieve your aim.



### Environmental Scan Results and Important Tips

- 81 sites have completed scans at this time. Environmental scans can still be done even if your site does not yet have a fully-executed DUA. (This tool does not ask for Personal Health Information (PHI). Environmental Scans serve as a mechanism) to look at processes in place in your institution while identifying gaps specific to each of the Intervention Bundles. The link to the Environmental Scan is:
- Majority of sites are using ESI for triage.
- Standards for abnormal vital signs: if you're in the unknown, take a look at some of the most popular ones and talk to your leadership about implementing one.
- Physician Notification of abnormal vital sign: It may be a good idea to implement a closed loop process to assure that message(s) regarding abnormal VS were received (eg. confirmation in the EHR).

---

## ANNOUNCEMENTS:

- [CNE credit \(1.5 contact hours\)](#) is now available for learning sessions through the Emergency Nurse Association an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation . To obtain a CE certificate: **You must attend, sign-in to the live session as well as complete a short evaluation post-event to obtain CNE credit.** A link to evaluation y will be provided on the slides and in the chatbox during the webinar. All evaluations must be completed within 2 weeks of the session.
- The [new EIC website](#) is live.
  - The link to the PRQC webpage is: <https://emscimprovement.center/collaboratives/prqc/>.
  - The PRQC member-only content page is <https://emscimprovement.center/collaboratives/prqc/members/> Password: **EMSCPQRQ**
- **Format for the next Learning Sessions:**
  - July/August: The focus will be on bundles 1&2. Trainers will provide a 5-10 minute overview of their team's performance. Eight teams will present on each call.
  - Fall Learning Sessions will feature pediatric champions from affiliate sites presenting best practices from their work.
- [IHI QI Training Modules](#) are still open to PRQC participants! The EIC will pay for your seat. Earn a certificate in quality improvement. Contact us for the training code. (you may want to insert the information for them so they do not need to hunt for it) Hurry! Training expires June 30, 2019.
- **Additional Incentives:**



- Sites identified in the Leaderboard will receive information regarding Maintenance of Certification opportunities for participating physicians in the collaborative.
- Earn 25-points toward Part IV (ABMS and ABP)

■ Upcoming Fireside Chats:

Weight in Kilograms: June 4, 2019, 1:00-2:00 CST  
Abnormal Vital Signs: June 4, 2019, 3:30-4:30 CST  
Interfacility Transfer: June 4, 2019, 11:00-12:00 CST  
Disaster Planning: June 11, 12:00-1:00 CST

---

## Q&A

- 1. Q:** A question under the vitals entry section of the DES asks if a mental health assessment was conducted during the triage process. When the assessment is completed but not until the nursing assessment, should we answer yes or no?

**A:** Please answer “yes”. We want to get a sense for how often this is being done in an effort to determine if mental health would be a good focus for the next PRQC bundle.
- 2. Q:** In regard to the abnormal vitals bundle, what are other hospitals using to assess if/when home safety becomes N/A (e.g. age etc.). Our triage uses “do you feel safe at home? Is that what others are doing?”

**A:** (Responses from others) We use “do you feel safe at home?” and “is anyone forcing you to do anything you don’t want to do?”
- 3. Q:** When it comes to the question, if the patient is under age of asking/answering questions - should I answer "yes" or "no" when asked if it is assessed?

**A:** We would like to incorporate an "N/A" option in our pediatric portion of the triage for those who cannot answer.