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Region South EMCC AMK-VC



Region Syddanmark





29/10-2018

Resuscitation Academy III

Local RA Implementation Program



1. Commitment to T-CPR

2. Train and Provide Continuing Education in T-CPR for all Telecommunicators

3. Conduct Ongoing Quality Improvement (QI) for all Calls in which a Cardiac Arrest is Confirmed by EMS Personnel and in which Resuscitation is Attempted

4. Connection to EMS Agency

5. Designated Medical Director

6. Recognition for Outstanding Performance

Commitment for T-CPR

- Focus area at the EMCC
- All members of the EMCC participates in T-CPR discussion
- An continuous proces
- Implementation with Danmark saves lives initiate "§"



Education in T-CPR

- OUH Hospital Level - Hands on CPR for all Dispatchers
 - EMD 3 hours of training
 - TECHINAL DISPACTHER 2 hours of training
- EMD Group session with voicelog
 - Small groups with 4-6 members
 - 2 hours
- EMD Educational training
 - 2 hours

Quality Improvement

- Post T-CPR Quality Improvement (April 2018)
 - Time to identify OHCA for the EMD
 - Time to initiate on scene bystander CPR
 - Quality for T-CPR assistance delivered by EMD to bystander
- Peri T-CPR Supervision (September 2018)
 - EMD gets real time supervision
 - Every 2. Week Mon-Fri
 - If not possible:
 - EMD gets an e-mail with comments from doctor
 - EMD can comment back

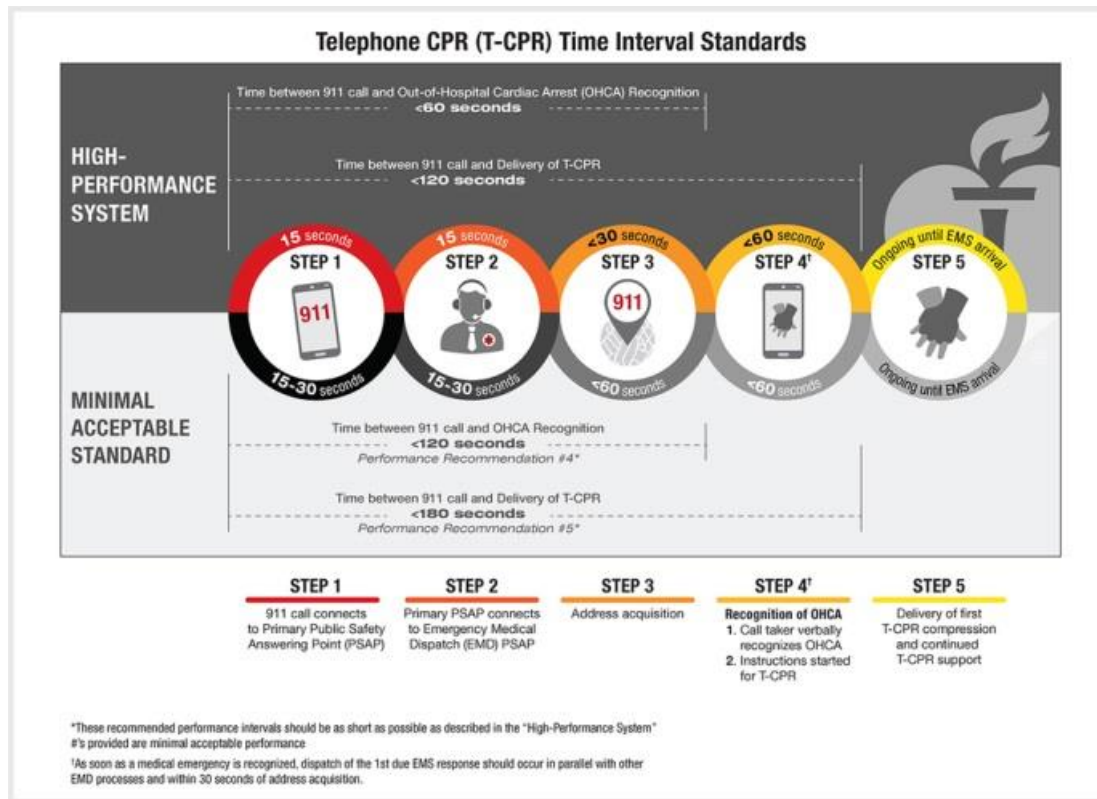
Quality Improvement

- Data collected april to august 2018
 - PPJ coding system for Cardiac Arrest (medic PPJ)
 - Cases identified on the voicelogging system
 - Doctor listen and measure time intervals
 - No. 261 counts

Quality improvement

- Data:
 - Did caller identify OHCA prior to calling?
 - Y124/N135/?2
 - A lot of old people with landline telephone N61
 - A lot of healthcare workers Y89
 - If **Yes** Y124
 - Did caller start CPR prior to calling?
 - Y85/N39
 - Maybe single bystander N20
 - Healthcare workers in groups Y63

Quality Improvement



Quality improvement

If **NO** N39

- Time for EMD to recognize OHCA on scene
 - 122 sec
 - 21 sec to 331 sec
 - Not prior identified OHCA
 - Mobile versus landline
 - Caller not at scene or nearby.

- Time to start guidance T-CPR
 - 131 sec
 - 26 sec to never
 - Can not by somatic reason
 - Do not want to perform CPR.

Quality improvement

- Quality for T-CPR assistance by EMD to caller
- Few data
- T-CPR quality Measurement
 - Which Parameters?

T-Supervision

- Ongoing from 1.sept 2018
 - EMD gets real time supervision Y31
 - Positive feedback
 - » Learning environment
 - » Relevant clinical conditions discussed
 - EMD gets an e-mail Y22
 - Relative positive feedback
 - EMD prefers realtime supervision
 - » Feedback from too few EMD

Thank You for listening

Contact info:

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