

Stroke Task Force Meeting

December 2, 2021

Attending: Christine Greff, Mindy Cook, Nikki Mack, Jody Ward, Curt Halmrast, Brannigan Hamrick, Haily Gilstad, Lance Harris, Jamie Nienhuis, Jessi Nicola, Megan Carlblom, Christopher Price, Dr. Hensler, Alana McClellan and Linda Zahn.

I. Welcome: Change to task force Shelle Berg is no longer with us, and Stacey Moen will be serving as interim for Altru

II. Approval of Minutes: Motion made by Megan seconded by Holly. Minutes approved

III. Coordinator updates:

Changes – Brannigan is new stroke coordinator taking over for Julann. Shelle Berg is no longer with us, and Stacey Moen will be serving as interim coordinator for Grand Forks.

Lance - Essentia – They hired new stroke educator

Brannigan- CHI New Stroke Coordinator. Really busy with COVID cases. She Took CSL Course so will be able to teach those classes and coordinating them probably every couple of months. Working with Hailey at Sanford with support groups and alternate months between them.

Hailey - Stroke support group with okay attendance. New ASLS classes for 2022. Stroke volumes are dropping off but still busy. Working in the ER. Hired a new data abstractor. Hoping to get out and do outreach education.

Holly – Busy, doing ASLS classes through July. Will be available on success center website. May will be outreach. February they will be going to Mahanomen. Trying to reach people who can't travel to them.

Jamie- Had one hemorrhagic stroke and is getting data in to system. Doing well have few inpatients with COVID.

IV. Christine Update - Working on stroke education videos. Editing Fast ED. Great job to all who participated. Would like Coordinators to post their education dates to our website.

The videos will be on the website and then sent out in a file to everyone and sent to Critical Access and Tertiary hospitals.

Stroke and Cardiac conference will be held virtually next week.

Worked on mentoring education presentation. 11.5 Education credits for attending both days

SIM MD will have education credits also.

Acute stroke Ready Hospital site visits. The ones discussed at last meeting have been designated. Discussion with the site coordinators. The first blinded one was designated with a provisional one- year designation with action plan to be provided in one month and six month follow up. Site visit number two received the full 3- year designation. Last week they completed the first virtual site visit, and it went smoothly with some glitches with internet. Hopefully we can get caught up on the site visits.

Stroke system care plan. PHAC group has completed stroke coordinator orientation manual to help transition into their new roles. Christine will send it out again with the updates.

One of the goals is to distribute the NIHSS in plain English, the new IV thrombolytic inclusion/exclusion criteria and stroke triage and transfer guidelines for clinics and hospitals without CT Scanner.

Met with PHAC group. Feedback from group was that printed material wasn't necessary so will make sure the PDF files are distributed.

According to Century Code we must establish a data oversight process and implement a plan for achieving quality improvement in the quality of care provided under the state comprehensive stroke system for stroke response and treatment. Must analyze the data identify potential intervention and provide recommendations. Mindy helps us interpret our data.

Needing a representative for Cardiac Ready Advisory Committee. Christine went over it. If interested let Christine know.

VI. App Stroke Program Medical Director Qualifications - Christine reviewed it.

Definition remains the same. Jamie suggested that we go with as is. No quorum so will be sent to task force for vote.

V. Shila Blend - Evaluation of Implementation of ND stroke system of care.

Summary of work that has been done. And the timeline of Stroke System of Care

Stroke is one of the 5th leading causes of death

AHA published Stroke system of care in 2005. Focus is on prevention, recognition, treatment, and rehabilitation

2009 HB 1339 legislatively mandated SSoC - 2014 FTE to coordinate Stroke System of Care

Donabedian quality of care framework. – Structure, Process, and outcome

Had done a great job 2009 -2014. Outcomes didn't improve but the foundation for Stroke System of care was developed.

Shows that the work being done has been improving in our state.

VII. Blinded Site Visit Review - Christine went over this. Some questions came up regarding alteplase documentation and blood pressure checks and there should be a follow up to prove they made corrections. They did a good job.

Motion made by Megan to approve full designation with an exception for three - month revisit on the recommendations for dual sign off on alteplase documentation and vital signs pre and post. Action plan must be sent to Christine within three months with corrections. Seconded by Jamie Nienhuis.

Have more reviews to catch up on. Working with coordinators to set up schedules.

VIII. Update from Mindy -Get with the Guidelines

Hit just under 1800 stroke cases this year. Small case of TIA case data entry

COVID on Admission or during hospitalization

Performance metrics - Stroke screening performed. We are performing better than rest of the country.

Rural measures- hopefully people use these

Concentrate on measures- Dysphagia and Arrive in 3.5 hours and treat in 5.5 hours for CAH's. We are at 57.8% and national is 75%. Arrive in 3.5 hrs. and treat in 5.5 hrs. we are at 54% nationally is 75%.

Performance Improvement

Looking forward to the conference to review

With distribution of new Thrombolytic checklist there will be improvements.

Lots of discussion on suggestions on how to improve dysphagia screen and what hospitals are using. Should do a short survey of hospitals to see what is causing the compliance issue and what they can do better. Could have the PHAC group work on this. Could use the site visits as an education opportunity. Stroke coordinators review dysphagia screen and documented inclusion/exclusion criteria. Review transfers for 3 months then develop an outreach. Hope to improve our goals to increase our percent. Would take a year for the data to be up. Look back at it again in December 2022. **Jamie made motion to reach goal of these measures to 75%. Brannigan seconded. Would need to get a list of hospitals that would be reviewed.**

Next Stroke Task Force meeting will be March 3, 2022