

Minutes

Stroke Task Force Meeting

Thursday, December 7, 2023

10:00 am-2:00 pm

- I. **Welcome/Introductions:** Christine, Lindsey Narloch, Haley Gilstad, Desi Harstad, PJ Ringdahl, Nicole Threadgold, Mindy Cook, Nicole Mack, Sandy Kovar, Jerilyn Alexander, Chelsey Kuznia, Ken Rensch, Marcy Dawson, Kathy Lonski, Holly Nissen, Tony Burke, Megan Carblom, Tawny Harvala
- II. **Approval of Minutes:** Motion to approve made by Haley Gilstad, Seconded by: Chelsey.
- III. **Brief Update Stroke Coordinators:**
 - a. **Haley-** Dr. Kim is new doctor we call long term locum. In the process of onboarding Dr. Natalie Crawford as an interventional radiologist. Working on refining some of their pediatric stroke protocols. Reaching end of year and prepping for annual survey.
 - b. **Sandy-** Prepping for survey.
 - c. **Desi-**Sanford Mayville-Had an increase of Locums in ER. Partnered with EMS on FAST-ED.
 - d. **Chelsey-**added a new member and she is going through training on data, Passed advanced stroke coordinator course. Had Telestroke article that was being published in the Critical Care Nurse journal.
 - e. **Jerilyn-**had joint commission survey in November so working on action plans for process improvement.
- IV. **Christine-EMS Unit Update**
 - a. **EMS Study-**legislative study, and the committee is reviewing the sustainability of the rural EMS System. The study period is from June 2023 to June 2024.
 - b. **EMS Rules-**goes before legislative Rules Committee next Monday.
 - c. **EMSC Program-**gearing up to roll out an initiative to address the preparedness of emergency departments to care for pediatric patients. Chettie Greer is our EMSC coordinator if you would like more information on this.

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- d. **Cardiac Ready Community Program**-the ND Capitol campus was designated. They have 50 AEDs distributed throughout the campus. They also did Narcan training and put Narcan kits in AED Cabinets and set up blood pressure screening station in each building on the capitol campus.
 - e. **ESO Webinar**-held national webinar to all ESO customers. ESO is our prehospital data repository. Discussed prehospital stroke quality metric, rural vs. urban, and stroke system performance improvement program. ND leads in quality metric analysis.
- V. **Stroke Task Force Business-**
- a. **Site Visit Reimbursement**-Acute Stroke Ready Hospital site visit reimbursement has increased. So, a little bit more compensation for the hard work you do in helping with site visits.
 - b. **2023 Accomplishments-**
 - i. Distributed revised treatment guidelines, had posters made.
 - ii. Revised and approved 2024 Acute Stroke Ready designation criteria.
 - iii. Adopted BEFAST algorithm. Got posters printed and laminated.
 - iv. Adopted Yale Swallow Screen as our evidence-based dysphagia screen.
 - v. Held a dysphagia screen webinar.
 - vi. Developed dysphagia screen infographic and distributed them.
 - vii. AHA Sustainability grant provided funds to print educational materials.
 - viii. Stroke conference with CE credits, over 300 people attend.
 - ix. Completed 8 full site visits and 2 follow up visits.
 - x. 2023 performance projects: IV Thrombolytic within 60 minutes of arrival, door in door out time, and Telestroke consultation.
 - 1. Dr. Mutgi's presentation at the conference addressed door in and door out times and IV thrombolytic hesitancy.
 - 2. Ongoing education provided at site visits.
 - c. **Ongoing Projects-**
 - i. Acute Stroke Ready Hospital reference guide with appendices. This will help sites prepare for site visits.
 - ii. BEFAST/FAST-ED algorithm posters were mailed out to all hospitals, EMS Agencies, QRU and we are working on air medical. We have about 100 more to mail out.
 - iii. BEFAST public-facing standing poster with DHHS Communications design team and working on a smaller version of it in the form of a flyer.
- VI. **Election of Officers:** Christine went over the duties of each officer.
- a. **Chair Position-Megan Nominated**-Dr. Duchscherer, for position of chair. Pending acceptance of the position, **Dr. Duchsherer approved by committee as**

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Chair. If Dr. Duchscherer says no, **Chelsey nominated** Megan to take it again if she is willing. Megan is willing if Dr. Duchsherer unable.

- b. **Vice Chair position – Holly nominated Chelsey Kuznia** and she accepted.
Approved by committee.

VII. **Site Visit Review:**

- a. **Site One**-discussed strengths and recommendations for improvement.
 - i. Haley made motion for one-year provisional with an action plan and provider interaction to address IV thrombolytic hesitancy. Motion passed.
- b. **Site Two**- discussed strengths and recommendations for improvement.
 - i. Holly made motion for one-year provisional designation. Motion passed.

VIII. **Stroke Data Review with Mindy**-reviewed 2023 GWTG stroke quality metrics.

- a. **Strengths**-documentation of last known well, initial NIHSS, dysphagia screen improved, prenotification by EMS, door to CT, and door in, door out improved.
- b. **Room for improvement**-door-to-CT interpretation, door-to-IV thrombolytic less than 60 minutes, and stroke consultation.

IX. **2024 Stroke Performance Improvement-**

- a. Door-to-CT interpretation, door-to-IV thrombolytic in less than 60 minutes, and stroke consultation.
- b. Develop a plan to improve metrics and work on them in 2024.

Next meeting: Thursday, March 7, 2024, from 10: 00 am-2:00 pm.