



Improving Stroke Care in Illinois

Making it a Reality in Rural Areas

Contact:

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Stroke is a Thief

Stroke is a Thief – It robs people of

Identity **Home** Relationships

Speech **Joy** Dreams

Career Independence

Motherhood **Sight**

AND, **So many of life's pleasures**

#1 Cause of Long Term Disability



Today's Objectives

- Recognize the **vision** and the need for improving stroke care
- Identify the **six key elements** of the ICAHN plan for stroke
- Understand the **services and resources** that are available through the stroke plan
- Understand the **commitments** to join the ICAHN Stroke initiative



Stroke Legislation

A vision for Quality Stroke Care in IL

The vision for quality stroke care in IL was developed through a collaborative effort

Governor's Stroke Task Force

Chicago Area Stroke Task Force (CAST)

American Heart Association

Illinois Hospital Association

Illinois Critical Access Hospital Network

Illinois Emergency Medical Systems Advisory Council, Legislative Committee and Quarterly Open Forums



- Elevate the Quality of Stroke Treatment **regardless of where a stroke patient lives** by implementing a **two tiered** system of Emergent Stroke Ready Hospitals and Primary Stroke Centers.
- Through legislation, **allow but not mandate** for **ambulances to bypass** hospitals that are not designated as stroke ready.
- Create regional plans for an **organized system of emergency care and transfer**



Proven Need

While evidence-based guidelines for stroke and TIA care have been developed along with improved diagnostic and treatment modalities, there **are gaps, variations, and disparities** in how these are applied.

Furthermore some hospitals may not have the systems, organization, staff, and equipment to effectively diagnose and treat acute stroke patients.

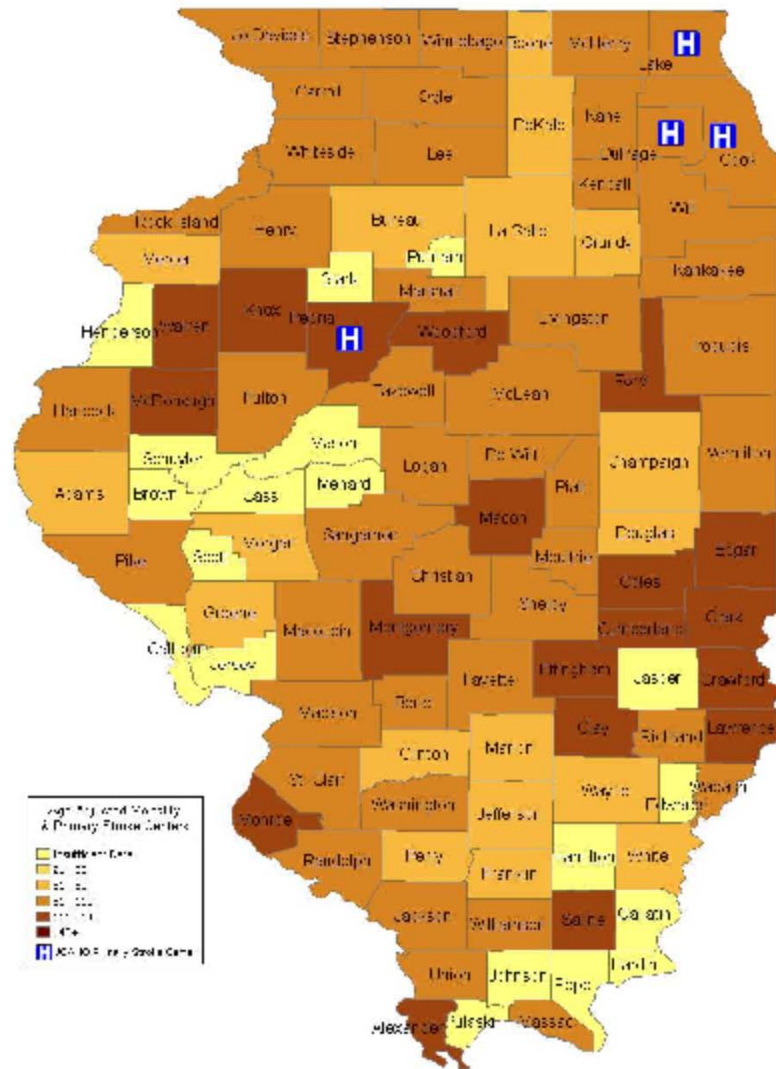
**The Wall Street Journal, November 9, 2003, Physicians' Weekly,
June 21, 2004, ADHERE Study*



Certified Primary Stroke Centers

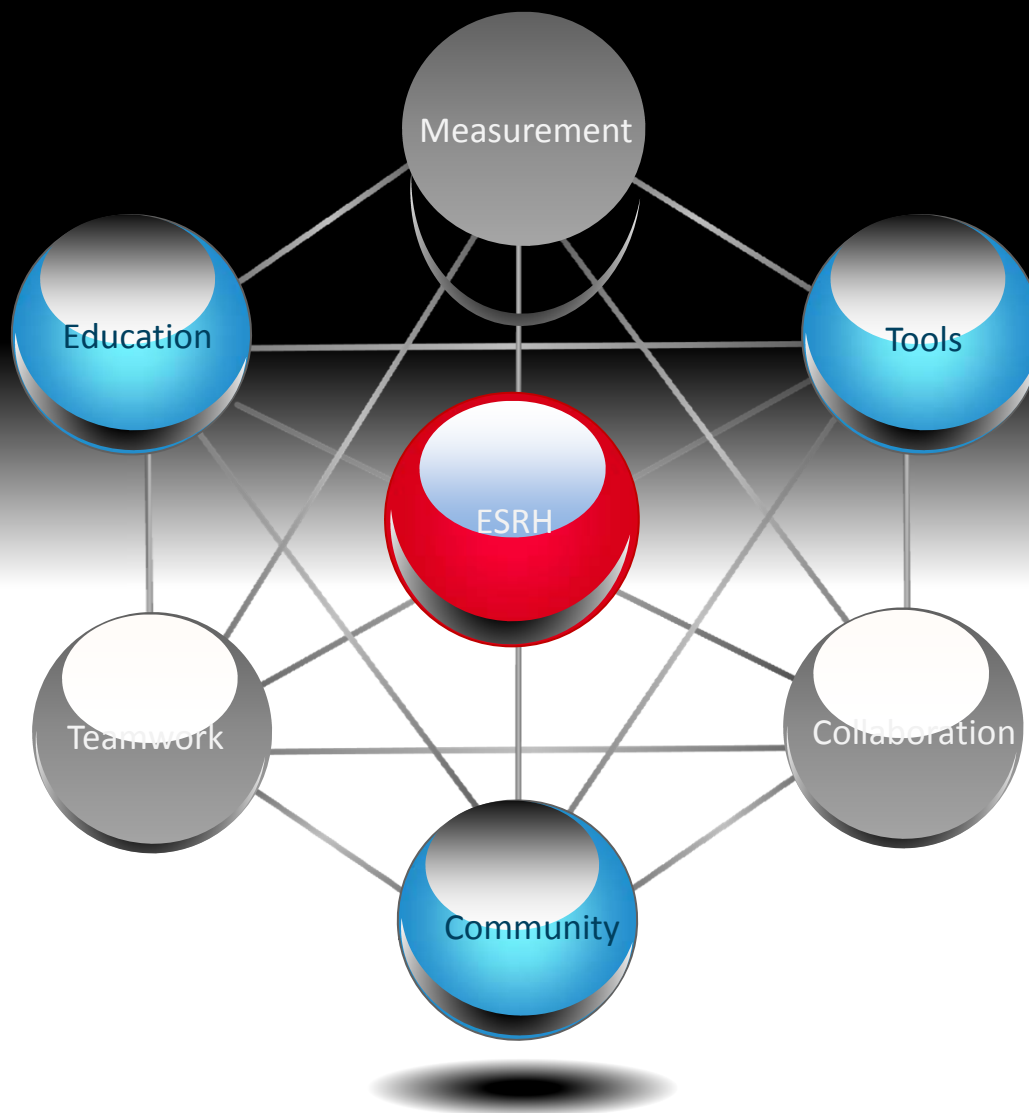
- **Now 42 Joint Commission Certified and 1 HFAP certified**
- Most are in Chicago area and **3 in Rockford Metro Area**
Factors include cost, volume and lack of specialists
- **Mid Central Illinois has 10**
 - 2 Peoria
 - 2 Bloomington Normal
 - 2 Decatur
 - 2 Springfield
 - 2 Kankakee
- **Quincy is the only PSC south of central IL**





ICAHN'S ESRH PLAN

Each circle represents a key element in preparing our Critical Access Hospitals to meet and exceed yet to be determined criteria for ESRH designation.



- Objectives
- Workshops
- Action step checklists
- On-line resources
- FAQ



Professional Education for All

- Clinical Workshops on evidence based medicine and best practices
- Workshops for targeted audiences and providers at every level
- On line professional education with stipends for fees
- Conference educational opportunities with stipends for registration
- Off line participation in accredited workshops with follow up test for credit
- Special attention given to opportunities for EMS training
- Outreach to local physicians for risk factor management



Outcomes Measurement – Get With the Guidelines

AHA Get with the Guidelines is a web-based Patient Management Tool

Used for point of care data collection

Decision support

On-demand reporting

Transmits data to CMS, local primary care physician and others

Patient education

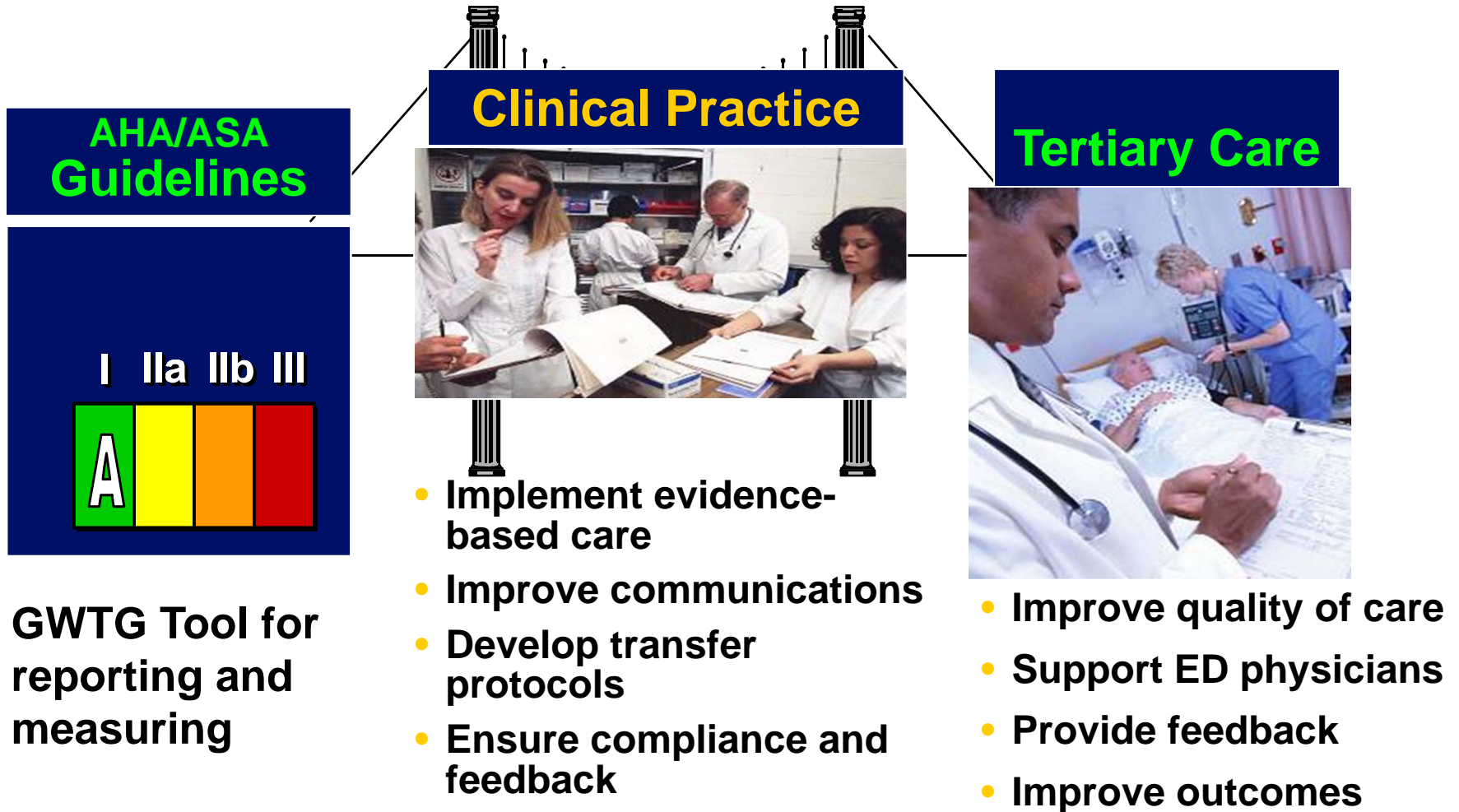
TRAINING

AHA will provide the training for implementation including

Learning sessions, conference calls, email and staff support

**Nationally, data for over one million patients has been entered into
GWTG**

Bridging the Gap Between Knowledge and Routine Clinical Practice





Proposed Role for Hub/Receiving Hospital

- Consult with rural hospital ED on treatment
- Allow Rapid Transfer based on pre-approved transfer agreements
- Receive transferred patients
- Commit to collaboration and communication
- Participate in family orientation at transfer time
- Become a Supporting Partner in the ICAHN-ESRH initiative



Welcome To ICAHN

Available Now- Check it out

Stroke Resource Library

**Forms, Sample protocols,
Research papers, guidelines
FAQ, checklists, stroke month kit
Community resource order form
Teamwork tips**





Community Outreach

Let the library be your best resource
for community action ideas and tools

- Involve Primary Care Physicians
- Provide Stroke Education in the community
- Provide programs for risk factor management
- Solicit Community Organizations for Support
- Enlist stroke survivors in support groups
- Involve local media
- Implement social marketing techniques
- **Encourage stroke month activities in May and beyond**

Collaboration

Coordination



Multiple Partners

- EMS – State, Regional ,
Local agencies
- American Heart
Association
- Illinois College of
Emergency Physicians
- IDPH Heart & Stroke
Program
- Primary Care Physicians
- Illinois Hospital Assoc
- Rehabilitation Partners
- Community
Organizations
- Other health
organizations



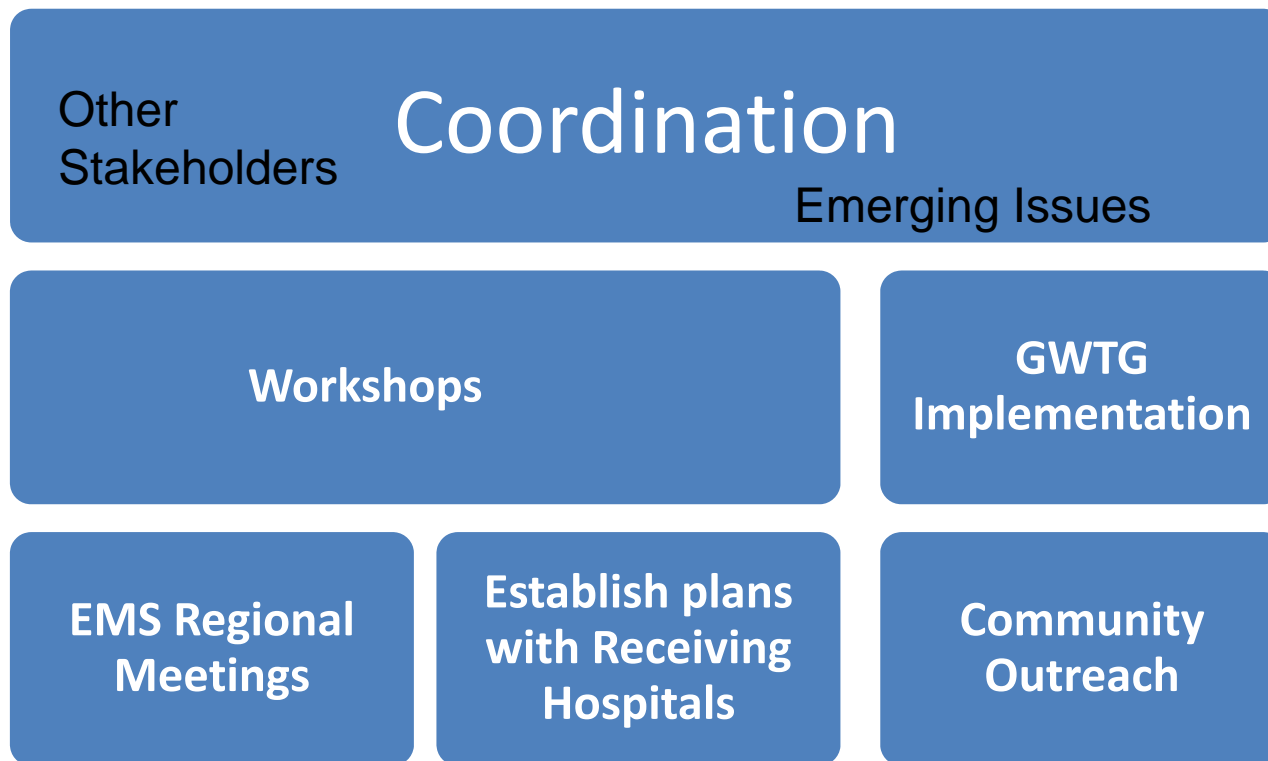
Building a Stroke Team for your Unique Setting

- Hospital Champion(s)
 - ED
 - Nurses
 - Radiology and Lab
 - Data Manager
- EMS Providers
- Receiving Hospital
- Pharmacists
- Hospital Administrators
- Stroke Rehab Team
- Community Leaders





Concurrent Events and Coordination





Let the Guidelines Be the Lifeline in Your Community

1. Education
2. Tools and Resources
3. Measured Outcomes
4. Collaboration
5. Teamwork
6. Community Outreach



Next

Steps

What's in it for your hospital

- Free videoconferences and webinars and stipends for additional education
- Opportunity for some to receive the GWTG Tool
- Tools- Visit the Resource Library for tools to help you in each of the key elements
- Collaboration and Consultation: Coordinated collaboration with EMS, Receiving Hospitals and others
- Team Building and Leadership Support
- Community Education Programs, Ideas, support, materials

Expectations

- CEO buy-in through participation and support
- Identify a stroke champion
- Develop a stroke team
- Attend or complete Core Educational Classes
- Develop an in-house stroke alert
- Develop a pre-arranged plan for consultation and rapid transfer and transport to a receiving hospital of your choice
- Create a community stroke education plan

Timeline

- By April 15: Gain CEO approval, name stroke champion, respond to participation request form from Peggy
- By May 15: Sign MOU and identify stroke team
- By May 31: Identify stroke committee, community champion and share initiative with all staff
- By August 31: Enter data for 1 year, review current protocols, order sets etc
- By Sept 30: Analyze data, identify strengths and weaknesses and needs
- By Nov 30: Facilitate process changes, amend order sets, etc

On-going Across Timeline

- Communicate with Peggy on concurrent planning with EMS, Hubs, and others
- Continue to measure and evaluate
- Continue to attend workshops, teleconferences and access tools in library
- Meet with your team and committee on a regular basis
- Proposed date for ESRH Designation to begin is July 2011

How to Become Involved

- Sign up to become part of the initial ESRH Team
 - Enlist your team
 - Qualify to Receive GWTG- Stroke Tool free
 - Commit to attending core classes and following team timeline
 - Incorporate the 6 key elements in your hospital and community
 - Apply for ESRH Designation by July 2011

How Do I Qualify for GWTG

- Verify your hospital currently treats 40 or more acute stroke patients per year
- Commit to consistently use the tool
- Have approval for the on-going annual fee
- Sign the GWTG MOU
- Enter data from 30 stroke charts or one year's volume of stroke patient data.
- Agree to participate in OUTCOME Science and AHA training

Can I participate without GWTG?

Yes, Please Join Us

- We have a limited grant funds for the GWTG tool, so not everyone will start out with the tool. (to purchase the tool cost is \$577)
- You can still participate by meeting the other 5 of the 6 key elements. As more money comes in, we will add new GWTG recipients from participating team hospitals.
- You can still apply for ESRH Designation if you meet the criteria

Select the Best Plan for your Hospital

- A. Implement the ICAHN Stroke Initiative with GWTG as your patient management tool
- B. Register your hospital with Target Stroke utilize the Target Stroke feedback log to track your stroke patients or use your current tool
- C. Elect to have EMS bypass your hospital with acute stroke patients but work to create an in-house stroke alert and walk-in stroke alert

NOW LET'S HEAR FROM YOU

- Questions?
- Concerns?
- Suggestions?
- Needs?
- Other Partners to include?
- Gaps you see?
- Next Step: Reply to Peggy's Email for sign up or contact Peggy with your questions

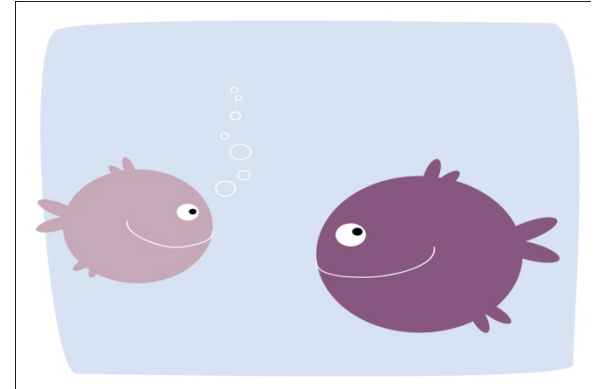


THANK YOU

- And , Remember
- May is Stroke Month
 - Educate your community
 - Create Awareness within your hospital
 - Check out the Stroke Month Kit in the ICAHN Resource Library
 - Contact Peggy Jones as you evaluate your place in this initiative or with any questions on this program or help with stroke month ideas

Let's Communicate

- **Peggy Jones**
- **Consultant Representing ICAHN**
- **Organizing Stroke Systems of Care**
- **pjones@icahn.org**
- **309-663-0092 or cell: 309-830-0100**



More to come as we announce programs and opportunities