Stroke Care Across the Continuum

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Learning Objectives

* The learner will be able to identify successful initiatives this community hospital used to improve its stroke care.

* The learner will be able to discuss lessons learned from implementation of the initiatives by the community hospital.
About Blessing

367 Bed Community Health System

2,000 Employees

240+ Physicians

Affiliates include:
- Illini Community Hospital (critical access hospital)
- Community Outreach Clinic
- Denman Medical Equipment
- Denman Biomedical
- Blessing Physician Services

College of Nursing
Schools of Radiology and Laboratory
Key Target Areas:

- Interdisciplinary Stroke Team with two physician champions
- Neuro Assessment and Vital Sign Standardization post-tPA
- Standardization process for tPA mixing between ED and Pharmacy
- Stroke Alert Pager
- Link to Tertiary Center
- Standardized order sets
- Weekly QI Meetings for defects and have built access database that assists with defect follow-up
- Designated Stroke Unit when Critical Care not required.
- Community Education
Measure blood pressure every 15 minutes for the first 2 hours and subsequently every 30 minutes for the next 6 hours, then hourly until 24 hours after treatment.

Perform neurological assessments every 15 minutes during the infusion and every 30 minutes thereafter for the next 6 hours, then hourly until 24 hours after treatment.
Leveraging Electronic Medical Record

* Care Plan to flow to Educational Record with Hard Stop for all educational requirements
* Electronic Dysphagia Screening Tool
* Contraindication documentation added to order sets
* Work List Documentation for Alternating Leg Pressure Device to flow to documentation in Medical Record.
* Reminder for Antiplatelet restart to tPA orders
* Physician Discharge Checklist
* Medication Reconciliation Document to include VTE Prophylaxis
Educational Record

List Set Description

Stroke Education

- Literature Given
  - Stroke Packet given

- Identified/Educated Risk Factors
  - High Blood Pressure
  - Cigarette Smoking
  - Diabetes
  - Carotid or other artery disease
  - Atrial Fib
  - High Blood Cholesterol
  - Physical Inactivity
  - Obesity

- Education
  - Signs/Symptoms of Stroke
  - When to call 911
  - Follow-up appointment

[OK] [Cancel]
Dysphagia/Swallowing Screening Tool

RN will perform dysphagia screening on all Acute Stroke/TIA patients before intake/meds a
Dysphagia Screening (stop after 1st failure)

Saliva Swallow

5 ML Water using Teaspoon

Sip from cup (held by nurse)

Sip from cup (held by patient)

Drink like swallowing a pill

I have notified the physician of Screening Results
STK 1: Venous Thromboembolism Prophylaxis (VTE) given day of or day after arrival

STK 2: Discharged on Antithrombotic Therapy

STK 3: Anticoagulation Therapy for Atrial Fibrillation/Flutter (prescribed at hospital discharge)

STK 4: Thrombolytic Therapy (tPA initiated w/in 3 hours of time last known well)

STK 5: Antithrombotic Therapy by End of Hospital Day 2

STK 6: Discharge on Statin Medication

STK 8: Stroke Education

STK 10: Assessed for Rehabilitation
Stroke Core Measures

**STK 1: VTE Prophylaxis**

- **CY Q3 ’10:** 20%
- **CY Q4 ’10:** 60%
- **CY Q1 ’11:** 80%
- **CY Q2 ’11:** 100%

**STK 2: Discharged on Antithrombotic Therapy**

- **CY Q3 ’10:** 100%
- **CY Q4 ’10:** 100%
- **CY Q1 ’11:** 100%
- **CY Q2 ’11:** 100%
Stroke Core Measures

STK 5: Antithrombotic Therapy by end of Hospital Day 2

- CY Q3 '10: 100%
- CY Q4 '10: 100%
- CY Q1 '11: 100%
- CY Q2 '11: 100%

STK 6: Discharged on Statin Medication

- CY Q3 '10: 80%
- CY Q4 '10: 60%
- CY Q1 '11: 80%
- CY Q2 '11: 60%
Community Initiatives

- Strike Out Stroke Baseball Night
- Community Wide Wellness Event with a focus on Stroke (700 people)
- Carotid Screenings for Early Intervention
- Middle School Health Fair
- High School Health Class Presentations
- On Hold Telephone Message on Warning Signs for Stroke
- Warning Signs Posted on Hospital Vehicle and Parking Lot Banners
- Radio and TV Spots and Hospital Website Information
- Live Presentations
- Professional Education
Lessons Learned

* Educate, educate, educate!
* Maximize electronic medical record
* Performance Measures need to be shared at all levels
* Real time follow up on defects is helpful.
* Positive Reinforcement i.e. Pens “My Care is a Stroke of Genius”
* It takes a village.