



Georgia Coverdell Acute Stroke Registry Quarterly Newsletter

Georgia Coverdell Acute Stroke Registry
Participating Hospitals, November 2015



SUMMER 2016

Coverdell Partners:

Georgia Department of Public Health (DPH)

Emory University School of Medicine

Alliant Health Solutions-Georgia Medical Care Foundation (GMCF)

American Stroke Association (ASA)

Georgia Hospital Association (GHA)

Stroke Month Highlights

Southern Regional Medical Center



If you have anything you would like included in an upcoming newsletter or have achieved recent recognition in the area of stroke, contact:

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or

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You can be a Stroke Hero; Act FAST to help someone having a stroke.
Created by Allie Garrett, Stroke Program Medical Director, Southern Regional Medical Center

Southern Regional's stroke program has partnered with the Riverdale public library in Clayton County, Georgia, for the national stroke awareness month to promote a community-wide Stroke Awareness Coloring Contest. The coloring sheets display male or female characters experiencing stroke symptoms with the F.A.S.T acronym included to educate their community's children on the signs or symptoms of stroke (see some of the submissions on previous page). Winners were selected by Southern Regional's Stroke Advisory Team on Thursday May 26th. The winners were invited to their hospital and recognized as "Honorary Stroke Team Members" for the day; they met with Emergency Room Doctors and Nurses who have helped care for over 3,000 stroke patients since 2010, and they also had the opportunity to meet with Clayton County Fire and Emergency Services at Clayton County's Station 1 and learned how EMS takes care of all patients who call 911 for help!

Crisp Regional Hospital

Crisp Regional is one of Coverdell's newest hospitals. During Stroke month Crisp Regional conducted hospital wide mandatory competencies for all nursing staff as well as all of their ED and ICU staff to become NIHSS certified. They taught the hospital ancillary staff to recognize early warning signs of stroke by promoting the F.A.S.T. acronym as well as having educational opportunities they participated in through their online learning programs.

They partnered with others throughout the region for the first ever Tyson Health Fair in Vienna, GA. Their working population consists of almost 90% women between the ages of 25 and 45. Most of these employees have no primary health care physician and do not maintain regular health checkups. This was a great opportunity for them; allowing them to reach over 500 people in a single day, and educate them on co-morbidity factors as well as the importance of establishing a "get well" routine early on in life. Kim Anda, with Genentech, was very kind to provide Crisp with flyers, magnets, pamphlets, and stickers with the F.A.S.T. Logo.

They were so very blessed to have a quick mention of their Tele-health program and how it will benefit the community as it relates to stroke. Fortunately, 800,000 strokes ***do not*** occur in GA each year, but with that number being in the 20,000 range they still have a lot to do to battle this debilitating, yet preventable disease.

Grady Memorial Hospital

For this year's National Stroke Awareness month, the American Heart and American Stroke Association chose the theme "Stroke Superheroes." During this time Grady's Marcus Stroke & Neuroscience Center worked as stroke heroes in spreading stroke awareness and education. In the past Grady has focused on educating the external patient community, but this year they focused on reaching Grady's own employees. Stroke coordinator Shelley Nichols and her team had the opportunity to educate and advocate stroke awareness by handing out F.A.S.T. pamphlets, pens, magnets, and brain ice-packs in the hospital lobbies, and at numerous in-services. Stroke education and awareness presentations were given, and the F.A.S.T. assessment was taught at various departments/staff huddles, as well as off campus at Georgia Power and Regions Bank meetings. Overall, over 1,000 handouts, 500 brains, and 1,000 F.A.S.T pens were distributed, and **over 1,000 of** Grady's own employees were reached! Now we are all stroke heroes, and together we can make a difference!



The Marcus Stroke & Neuroscience Center team kicks off the week as "Stroke Superheroes." From left to right are Clinical Data Abstractors Maryam Amuda, Dewanda Smith, Mercer MPH Intern Valerie Levy, Stroke Coordinator Shelley Nichols, and Outreach Coordinator Carol Fleming.

[Wellstar Cobb Hospital](#)

Sending Stroke information to Haiti!

When thinking about stroke month we each try to impact our communities as much as possible in order to give patients a better outcome after stroke. As high school kids were preparing for a mission trip to Haiti as part of their curriculum it became possible for Wellstar Cobb to assist in outreach across our borders. Bayer Aspirin had delivered boxes of Aspirin to our Hospitalist office. The Secretary in the office came to me to seek out the best option for the Aspirin. I thought she had just a couple of bottles and was very surprised to see we had over a year



supply available to us. It was then that we started to think how could this best be used? Having educated these High school students on stroke earlier this year made me think maybe they could take the Aspirin with them to Haiti. What we did was have a nurse from Haiti at Wellstar Cobb Write up stroke information and the Aspirin information in Creole and placed on a label that we placed on each bottle of Aspirin. When the students installed water filters for the small community in Haiti, they were also able to deliver these Aspirin bottles. We also supplied Red FAST Stroke bags full of kid's crafts and toys for the kids in Haiti. This outreach will not increase our census or improve our door to needle times here at Wellstar Cobb but maybe it will help other less fortunate stroke victims.

WellStar North Fulton Hospital's Stroke Support Group's Golf Outing

The WellStar North Fulton Hospital stroke support group is facilitated by Edna Kennedy, Stroke program coordinator and Keisha Brown, licensed clinical social worker. The group meets on the last Wednesday of each month in the ACE day room of WellStar North Fulton Hospital from 6:30pm to 7:30pm. The purpose of the group is to offer a way to bring together stroke survivors, their caregivers/families to meet and talk about their experiences and provide mutual positive support. The group provides information and education that promotes a better understanding of stroke recovery, rehabilitation and prevention of recurrent stroke.

In an effort to promote community involvement, Keisha Brown invited David Windsor, Director/Facilitator for the Adaptive Golf Program to speak at the support group in April. He shared that the goal of the program is to reach out to stroke and brain injured survivors and teach them how to play golf using special adaptive equipment. After David's exciting presentation, the stroke support group was invited to participate in a session. May was Stroke Awareness Month, and the group celebrated by participating in a two hour adaptive golf session with David Windsor. The stroke survivors, family members and group facilitators had a great time swinging and putting on the green. The group continues to explore innovative ways to enjoy life, grow and support each other.



Medical Center Navicent Health

Stroke Awareness month started off with a bang including a 2-Day Health Fair at GEICO where we reached 100's of employees. During our time there we discovered two employees with hypertension both requiring immediate follow-up. The month was filled with health fairs, speaking engagements, and television interviews to spread the word on stroke. Below are the links for the television interviews including one at our Rehabilitation Hospital on "Stroke in the Young Adult". We were able to include a recent 36-year old stroke survivor. On Friday, May 13th, the Mayor of Macon signed and presented his Proclamation deeming May as Stroke Awareness Month for Macon, Ga. The Proclamation meeting included Denise Goings, Theresa Ledrick, Stroke Unit Director and Kristen Ankrom, Stroke Coordinator with Coliseum Medical Centers; Dr. John Wood, EC Medical Director and Johnny Williams, EC Nursing Director; Dr. King-Whitby, Rehabilitation Hospital Medical Director and JT Barker and Gina Tipton with the Rehabilitation Hospital. During the Proclamation, Mayor Reichert invited us back to our City Council meeting where we were given the opportunity to speak on stroke awareness to council members and city residents in attendance. Medical Center Navicent Health did their part in promoting stroke awareness during the month.

<http://www.41nbc.com/2016/05/13/medical-monday-stroke-awareness/>

<http://wqxa.tv/news/local/american-heart-association-a-stroke-is-the-5th-leading-cause-of-death-in-the-us>



Kudos to Clayton County Fire and Emergency Services for their Community Treatment Program (CTP)

The Community Treatment Program (CTP) is a mobile integrated health care initiative designed to fill the gaps in primary care within our community. The CTP will play a pivotal role in decreasing disparities by integrating a multi-tiered health care model achieved through physician directed, data driven, and patient-centered medical care.

Clayton County Fire & Emergency Services (CCFES) is charged with providing healthcare on an emergency basis to more than 267,542 citizens through twelve ALS Transport Units, one Community Paramedicine Unit, and three new Community Treatment Units. Designated by the Department of Health and Human Services as a Medically Underserved Area in 2013, as well as, a Healthcare Professional Shortage Area in 2012, Clayton County is experiencing higher than average gaps in the continuity and availability of medical care for its citizens. The Clayton County Board of Commissioners, through its Fire & Emergency Services Department, seeks to remedy a part of the access issues by providing, non-acute medical care to its citizens through the use of nine (9) Nurse Practitioners functioning as an integral part of its Mobile Integrated Healthcare Program.

In January of 2013, a presentation was given to the Commissioners outlining the state of EMS in Clayton County and more specifically, the state of healthcare and the challenges that lay

ahead. During this retreat, several options to address gaps within the local healthcare model were presented to the Commissioners based on an analysis funded by the HHS Office of the

Assistant Secretary for Preparedness and Response (ASPR). The study indicates that approximately 15 percent of Medicare patients transported to the ED by ambulance can be safely cared for in other settings if available in a community. National models suggest that if these patients were transported to a physician's office, Medicare could save \$559.871 million per year and if they were treated at **home** it is expected the savings would be significantly higher. Given the low-acuity nature of many patients being transported, one may anticipate a better patient care experience when patients are either treated at the seen by EMS or taken to a clinic based provider with shorter wait times than in the ED.

After just over two years of data gathering, the Board of Commissioners unanimously approved the \$1.9 million dollar budget and the hiring of the Nurse Practitioners commenced immediately. To date, all nine have been hired and paired with their Paramedic partners functioning under the direction of CCFES Medical Director, Dr. Sudha Reddy. Though still early in the proof of concept phase, the program has gained national recognition for its innovation, as we are the FIRST fire-based EMS service to employ Nurse Practitioners. This innovation also led to the program receiving the 2015-2016 Georgia County of Excellence award from the Association of County Commissioners of Georgia.

The Community Treatment Program installed by Clayton County Fire & Emergency Services (CCFES) is a first of its kind program aimed solely at increasing the quality and availability of healthcare to the citizens of Clayton County. CCFES became the first fire-based EMS service in the country to employ Nurse Practitioners and assimilate them into the daily operations of the department. Secondly, CCFES became the first fire-based EMS to establish a fully funded, Mobile Integrated Healthcare model capable of closing the increasing gaps within the community's access to healthcare.

The program, though still in its infancy, is showing better than anticipated results as it specifically relates to the number of patients who were able to avoid transport and receive treatment in the home. The pre-hospital EMS system is uniquely positioned to care for 911 patients and assist less emergent patients with transport to the most appropriate care setting based on medical and social needs. According to the data collected thus far, approximately 55% percent of those patients that called 911 were successfully treated and released in the field, reducing the influx of non-emergent patients into the emergency room.

The Community Treatment Unit Program is one that can easily be replicated throughout the country. The issues facing the local population of Clayton County are no different than those in every town across America. The CTU program has been built on nationally recognized standards of patient care and scope of practice. Several of the barriers encountered in the establishment of this program are not unique to Clayton County, and through our due diligence and research, other communities can, and will, benefit. As local governments begin to assess how to fill the gaps in healthcare within their communities, programs such as the Clayton County Community Treatment Units, or a variant thereof, will be there for them to model. The Clayton County Community Treatment Unit Program stands ready to be a national model in the effort to change the healthcare system. This is accomplished through a physician directed, data driven, and patient centered model of care that any community can emulate.

Submitted by: Fire Chief Landry Merkison, Clayton County Fire and Emergency Services

Coverdell and Community Paramedics – Supplement to Preceding Article

Since 2012, the Georgia Coverdell Acute Stroke Registry (GCASR) has worked closely with emergency medical services (EMS) agencies to improve EMS care for suspected cases of stroke and the transition from EMS to hospital care. In order to improve the quality of care for stroke patients *after* they are discharged from the hospital, the GCASR is now exploring the possibility of the state's mobile integrated healthcare (MIH) services such as Clayton County's Community Treatment Unit Program to provide follow-up visits to stroke patients who have returned home. Currently in Georgia, there are eight MIH programs (including CCFES's Community Treatment Unit Program) tasked to reduce inappropriate use of local emergency care resources and increase patients' capacity of self-care. The GCASR has helped solidify the role of EMS in stroke care and hopes to learn from CCFES and others to maximize the recovery from stroke and prevent secondary stroke and stroke complications.

Submitted by: Patricia Hashima, Quality Improvement, Georgia Coverdell Acute Stroke Registry

One of Our Own

Irene Brown PCT III has worked in the ER at South Georgia Medical Center for several years and is very respected by all her co-workers. She has received her associate's degree and is about to graduate with her bachelor's degree in sociology and anthropology. She is a parent of 2 and she is also a foster parent. She has adopted 4 children from foster care. She is now the mother of 6 wonderful children that love to call her mom.

On the morning of June 7th of this year it was the end of a very long 12 hour shift in the ER for Irene. She was planning on leaving work a little early that morning. Before leaving she decided to tell one of the ER nurses, Gina Reid, that she just didn't feel right and that she had some left sided weakness and tingling. At first she thought she could go home and sleep it off. Irene thought it was related to stress and the long hours. After speaking with Gina and taking her advice Irene decided to check herself into the ER.

Dr. Dawson came to the ER to assess her stroke symptoms. Her NIH = 12. Irene received Activase within 16 minutes of checking herself into the ER. Upon discharge on June 9th her NIH = 4. On July 3rd Ms. Irene Brown was back at work in the ER at South Georgia Medical Center.

As a dear friend and co-worker I want to wish Irene many blessings. She deserves them. I also want to thank her for allowing me to share her story.

Submitted by: Jay Kelly, RN - Stroke Coordinator – South Georgia Medical Center

Coverdell Highlights

June Conference Call

Thank you to Image Trend, who presented on the Hospital Hub which is available to all Georgia Coverdell Hospitals. In addition, a big thank you to Catherine Whitworth from Spalding Regional Hospital, (who filled in at the last minute for Jay Kelly who was ill) and presented on her experiences using the Hospital Hub and the many benefits Both Spalding Regional and South Georgia Medical Center have been piloting the use of the hospital hub.

August Conference Call

Once again, we'd like to thank Dr. Michael Frankel, the lead Neurologist for the GA Coverdell Acute Stroke Registry, for presenting on the "Importance of Ischemic Stroke Sub Types". Dr. Frankel gave a broad overview of the many sub types. We are fortunate to have Dr. Frankel on the Coverdell team and thank him for the endless hours of expertise he offers to all the Coverdell Hospitals.

Upcoming Coverdell Workshops

Advanced Stroke Life Support (ASLS) Instructor Course

On Tuesday, October 25th, the Georgia Coverdell Acute Stroke Registry will be sponsoring an ASLS Instructor Class. The prerequisites for attending the class are: you must have completed a provider course within the last year and scored an 84% or higher on the posttest. Space is limited. For more information, contact Kerrie Krompf at: kkrompf@emory.edu or 770-380-8998.

Abstraction Training and Advanced Reporting Workshop

Our next Abstraction Training and Advanced Reporting Workshop will be held on Wednesday, October 26th. We will review charts and go over the data elements that present the most confusion. Invitations will be sent out later this month. In addition, time will be allotted to show you how to use the data to its full potential. For more information, contact Kerrie Krompf at: kkrompf@emory.edu or 770-380-8998.