Due to the holidays, this month’s Wave is abbreviated.

The Great Lakes Regional Stroke Network wishes you and your family a very happy and healthy holiday season and continued success in 2010.

Thank you for all you do to improve the quality of stroke care in the Great Lakes Region!
Quality of Care Workgroup

Stroke Care on the Neurosurgery Side was held on December 10, 2009. Evaluations were very positive, 100% of the evaluations reported that Dr. Zubkov and Kari Olsen’s presentations met the anticipated objectives and were free from commercial bias. While the majority of participants were from The Joint Commission Primary Stroke Centers (59%), 17% were from Critical Access/Rural hospitals. 41% of participants plan to implement changes as a result of lessons learned on this call and 41% of the participants had never listened to a GLRSN quality of care teleconference. We thank you for your continued interest and involvement in these quality of care teleconferences. Please feel free to share the announcements with your partners and others that may be interested. Our next quality of care teleconference will be on April 8, 2010 at Noon Central/1PM Eastern. We anticipate having registration open soon.

The quality of care work group will be meeting again on February 25, 2010 at 1:30 Central/2:30 Eastern.

The Stroke Patient Education toolkit is still in process. We anticipate releasing this project during the April 8 call about “Fresh Approaches to Patient Education.”

Dysphagia Workgroup

This group met in December to review a revised draft. A checklist for hospitals to use on their dysphagia process is in early stages of creation.

An evaluation of the process is currently in process. We are asking all hospitals that participated in the GLRSN dysphagia project to complete this online evaluation in order to gauge how successful this project was. We appreciate your feedback and timeliness in completing this online evaluation.

Another fact sheet on “Findings” is in process and should be available in 2010.

Evaluation/Surveillance Workgroup

This workgroup continues to review drafts of GIS drive time maps to primary stroke centers for the region via email. Most recently a map was created which included the HFAP Primary Stroke Centers. Maps were also created for each individual state for their internal planning purposes. The Primary Stroke Center map on the GLRSN website under the Primary Stroke Center tab continues to be updated monthly based on the TJC and HFAP websites of Primary Stroke Centers that are certified. We anticipate being able to share these new maps in early 2010.

They are also discussing critical access hospital data and the telemedicine inventory project. Preliminary REGARDS data has been received and discussed. An abstract is being submitted to the Council for State and Territorial Epidemiologists on the REGARDS data and risk factors for the Great Lakes Region. A fact sheet discussing these findings is in process. An analysis using RUCA codes is also in process. We anticipate having these information in the Winter of 2010.

State Advisory Board

The State Advisory Board will meet for their annual in person meeting January 20—22 in Chicago. The discussion will focus on the future of the GLRSN.
Telesstroke Projects in the Great Lakes Region

This month’s telesstroke update is an overview of various telesstroke projects in the US developed by Angela Hedworth, Program Manager of the Great Lakes Regional Stroke Network, in response to a request from the new Telemedicine Committee of the Illinois Stroke Task Force.

Arkansas State model, called, “Stroke Assistance through Virtual Emergency Support (SAVES)” is a partnership between Arkansas Dept of Human Services—Medicaid, Arkansas Dept. of Health Video Network, and UAMS Center for Distance Health. The program is funded through Medicaid at $6,000,000 a year and is a hub and spoke model.

An NIH funded program is conducted in California using the Stroke DOC technology. Also a hub and spoke model, it is led by UCSD. Arizona also has a hub and spoke model using the Stroke DOC technology. Mayo clinic has 4 additional sites currently participating in a study. Montana also uses the Stroke DOC technology and tobacco master settlement funds for their telesstroke initiative which is coordinated by their State Heart Disease and Stroke Prevention program.

Massachusetts General Hospital has 26 members in their telesstroke initiative which uses a technology they developed also in a hub and spoke model.

Several programs in several states use the REACH technology including New York State, the Eastern Georgia initiative, and a pilot project in the works in Ohio.

InTouch, is another commonly used telesstroke initiative. The Michigan Stroke Network, which was featured last month, uses InTouch, as does a new project in the works in Minnesota. The University of Kentucky also uses this technology and reports they will begin treating in Southern Indiana as well. Currently, the Kentucky initiative has 13 sites with 6 more in process. A hospital in New Orleans is also using InTouch for their telesstroke initiative.

Various other states have other models. Utah has a hub and spoke model using their own technology. Hospitals pay a monthly fee to be a part of that initiative for telesstroke. Tennessee received a $60,000 grant for Vanderbilt to start a telesstroke initiative with hub and spoke, and Mississippi has also received a grant with Gulfport Memorial hospital to serve as the hub for that telesstroke initiative. The NorthWest Regional Stroke Network’s telesstroke initiative is focused on telephone consultation at this time with the hopes of adding a video component at a later date. Logistics are still being finalized for that initiative as well.

Stroke Highlighted on Minnesota Public Radio

Minnesota Public Radio dedicated a show (Midmorning) to stroke also. It is available for listening here:

GLRSN WEBSITE UPDATE

People can now join the GLRSN listserv directly from the GLRSN home page. Click on this icon to join.

The Neurosurgery presentation is now available to listen to online. Please go to: http://www.uic.edu/depts/glstrknet/events.html and click on “clip” to listen to this presentation. Unfortunately, people listening to the recording are unable to earn CEUs.

The website continues to be updated. Notice that the listserv questions are now on their own page, alphabetically. A submenu is now visible when hovering over the Quality of Care tab on the home page. The dysphagia and telemedicine pages are currently under construction.

GLRSN ORIENTATION

12 people participated in the GLRSN orientation conference call on December 17, 2009. This is the last orientation currently scheduled for the GLRSN.

NEW ONLINE EMS TRAINING

The Minnesota Stroke Partnership’s EMS Stroke Task Force has developed a unique training course focused on the role of EMTs and paramedics in stroke diagnosis and treatment. The EMS Response to Stroke continuing education course will improve EMS providers’ knowledge of current practices for recognition and treatment of stroke signs and symptoms in patients.

EMS Response to Stroke is a FREE one-hour course worth 1.0 Continuing Education Units (CEU) for EMTs and Paramedics in Minnesota. After completing the course online you will receive a Certificate of Completion.

The course is presented by Craig Rees, MS, NREMT-P, and Kari Olson, RN, CNRN.

Please visit the resources page at www.mnstrokepartnership.org to access the continuing education course.

The 1 hour presentation video must be viewed on a high-speed internet connection using Internet Explorer.

Craig has been working in EMS for over 20 years. His experience ranges from rural communities to high volume urban communities. He also spent time working as a flight medic. He has been providing education to EMS provider throughout his entire career in EMS. In an effort to improve the quality of education he was providing, he completed a Masters program in Experiential Education. Kari is a certified Neuroscience Nurse with the Stroke & Neurosciences Program at Fairview Southdale Hospital in Edina, Minnesota. She has 20 years of experience working with stroke patients from bedside nursing to various administrative and clinical roles. Kari provides education & support for hospital staff, patients, families and community partners. Kari obtained her Bachelor’s Degree in Nursing from Minnesota State University- Mankato and is currently pursuing her Master’s Degree in Nursing from the University of Minnesota.