



To protect the health and promote the well-being of all people in Virginia.

Virginia Stroke Care Quality Improvement Advisory Group Meeting

Meeting Location: Mary Washington Healthcare, Fick Conference Center, 1301 Sam Perry Blvd, Fredericksburg, VA

January 19, 2024 | 8:30am – 9:30am
Meeting Minutes

Attendance: 23 attendees in person

Attendees	<ol style="list-style-type: none"> 1. Patrick Wiggins, Chronic Disease Supervisor, VDH OFHS 2. Kathryn Funk, Stroke Registry Coordinator, VDH OFHS 3. Allie Lundberg, Stroke Epidemiologist, VDH OFHS 4. Bethany McCunn, Stroke Registry Epidemiologist, VDH OFHS 5. Kelsey Rideout, REMS 6. Michael Player, PEMS 7. Valerie Vagts, TEMS 8. Susan Halpin, Mary Washington Healthcare 9. Amanda Loreti, CJEMS 10. Daniel Linkins, CSEM 11. George Lindbeck, OEMS 12. Rhonda Ragan, Valley Health 13. Debbie Thomas, PEMS 14. Mary Jobson-Oliver, UVA 15. Wendy Bunting, Acute Rehab Director, Riverside Regional Healthcare, Newport News 16. Elizabeth Hart, LewisGale Medical Center, Salem 17. Stacie Stevens, VCU Health, Richmond 18. Mandi Zemaiduk, Centra Health 19. Donna Layne, Centra Health 20. Wayne Perry, REMS 21. Branden Robinson, Sevaro Health 22. Robin Scott, Bon Secours St Mary’s Hospital 23. Jessica Rosner, VDH OEMS
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Debbie from PEMS. A nice to have metric: Would be nice to see LVO metrics and outcomes when TNK was administered early. Do we always need to go to a comprehensive stroke center?

Response by Stacie: Explained process with imaging with CT and CTA.

Response 2: An EMS region wanted to know more information about following an LVO patient.

Stacie – Is the Stroke Registry’s plan to link the EMS to the hospital to the next hospital, which would take out the stroke coordinator from needing to make the data connection (i.e. follow-up)?

Response: That is the big goal. Stacie response: then it would allow EMS to know whether they are over triaging. (I.e. over/under triage metric).

Wendy – Do we know now if our stroke patients have been seen by more than one facility? Response VDH: Now no because it goes back to the patient ID. Nationwide there is no system in place, except Arkansas has a band system tracking from EMS to hospital. Response Stacie: we want to know which EMS. Response VDH OEMS: NEMESIS is working on unique patient identifier. There are products such as Pulsara has a scanning function bracelet, which can talk to EHR at hospital. We do not have that worked out in STEMI, Stroke or Trauma. Still working on it.

Response: Michael PEMS – EMS can have a patient care report, can turn it over to somewhere else, can then hand it over to air transport. Now it is 3 different patient care reports. Response VDH: The Stroke Registry is a patient-centric registry to breakdown silos and join multiple transports together.

Michael PEMS – A couple of EMS Regional Council members in attendance were concerned with the EMS survey report results given the number of responses and the impact it had on data reliability. In PEMS, we know that all transports go to a certified stroke center, as all hospitals in the region are stroke certified, how can there be a portion that does not? If the report goes out to the public, it would be a poor response and problematic responses. The regional councils would like to be more involved in improving response rate and have accurate data. Concerned it may be a similar issue with the first state Trauma Report. Suggest that this EMS report results could speak to the data inconsistencies.

Follow-up Daniel Linkins: EMS agencies that answered this survey may have changed leadership or staff who would not know the protocols or data. EMS Regional Councils can provide the consistency. We do this well with the children survey.

Amanda Loreti – It is a low response for the survey. VDH Response: we changed up the distribution list to be more targeted, which may have decreased the completion %.

Mandi – for future state, it is important to see out migration. Will the Stroke Registry and VDH be looking at. VDH Response: We are needing to develop data suppression and data sharing protocols, agreements. We are looking into it.

9:40 am Adjourn