### Virginia CDC Paul Coverdell National Acute Stroke Program (CDC PCNASP)

### **Updates**

Patrick Wiggins, MPH Disease Prevention Strategist Virginia Dept. of Health Kathryn Funk, AGACNP-BC Stroke Registry Coordinator Virginia Dept. of Health

January 14, 2022



### Stroke Legislation Mandate

**Approved March 9, 2018**: Be it enacted by the General Assembly of Virginia: 1. That the Code of Virginia is amended by adding in Article 2.1 of Chapter 4 of Title 32.1 a section numbered 32.1-111.15:1 as follows: § 32.1-111.15:1. Department responsible for stroke care quality improvement; sharing of data and information.

- A. The Department shall be responsible for stroke care quality improvement initiatives in the Commonwealth. Such initiatives shall include:
- 1. Implementing systems to collect data and information about stroke care in the Commonwealth in accordance with subsection B;
- B. The Department shall implement systems to collect data and information related to stroke care (i) that are nationally recognized data set platforms with confidentiality standards approved by the Centers for Medicare and Medicaid Services or consistent with the Get With The Guidelines-Stroke registry platform from hospitals designated as comprehensive stroke centers, primary stroke centers, or acute stroke-ready hospitals and emergency medical services agencies in the Commonwealth and (ii) from every primary stroke center with supplementary levels of stroke care distinction in the Commonwealth. Every hospital designated as a comprehensive stroke center, or primary stroke center with supplementary levels of stroke care distinction described in clauses (i) and (ii) to the Department. The Department shall take steps to encourage hospitals designated as acute stroke-ready hospitals and emergency medical services agencies to report data and information described in clause (i) to the Department.

https://lis.virginia.gov/cgi-bin/legp604.exe?181+ful+CHAP0276



### **Coverdell Goals and Logic Model**

#### DP21-2102 Coverdell Program Logic Model (NOFO, page 5) Short Term Outcomes Intermediate Outcomes Long Term Outcomes Strategy Increased measurement. Track and Monitor Clinical Increased linkage and usage of tracking, and assessment of data Measures to Improve Data data across stroke systems of across stroke systems of care for Infrastructure Across Stroke care for those at highest risk for those at highest risk for stroke Systems of Care stroke events and stroke patients events and stroke patients Increased access to care and improved quality of care for Implement a Team-Based Increased implementation of stroke patients Approach to Enhance Quality of data-driven Quality Improvement Increased coordination of activities across stroke systems Care for Those at Highest Risk care across stroke systems of Decreased disparities for Stroke Events and Stroke of care for those at highest risk care for those at highest risk for in access to and stroke events and stroke patients Patients Across Systems of for stroke events and stroke quality of care for patients Care populations at highest risk for stroke Increased establishment of events Link Community Resources and Increased provision of community community resources and clinical **Clinical Services That Support** resources and clinical services to services for those at highest risk Those at Highest Risk for Stroke those at highest risk for stroke for stroke events and stroke **Events and Stroke Patients** events and stroke patients across patients across stroke systems of Across Systems of Care stroke systems of care care



### Stroke Registry Year 1 Participating Hospitals

Bon Secours St. Mary's Hospital Centra Health-Lynchburg Chesapeake Regional Medical Center HCA Chippenam/Johnston-Willis HCA Henrico Doctors Hospital HCA Reston Hospital Inova Alexandria Hospital Inova Fairfax Hospital

Riverside Regional Medical Center Sentara Norfolk General Hospital Sentara Martha Jefferson Hospital UVA Medical Center VCU Health

Additional Voluntary Hospitals Invited Sentara Halifax Sovah Health Martinsville Bon Secours Southern Virginia



### Virginia Stroke Registry-on EMS ESO Platform

### • ESO at State Level:

- EMS State Repository to aggregate and collect data from all EMS agencies across Virginia.
- State Trauma Registry to aggregate and collect data from hospital trauma registries across Virginia.
- AND....STATE STROKE REGISTRY

### Agency/Department/Hospital Level:

- Access to software, services and training to fit the specific needs of EMS agencies, fire departments, and hospitals
- Hospital: Trauma Registry and ESO Alerting
- EMS: ESO EHR with mobile and Cardiac Monitor Interface



### Why was ESO chosen for the Stroke Registry?

- Virginia has a vision to be the healthiest state in the nation. Partnering with ESO is a step in that direction by having access to a broad, modern ecosystem of software and services to support the commonwealth's EMS agencies, fire departments, and hospitals. By aggregating and collecting data from multiple touchpoints across the health and public safety continuum, Virginia will have access to insights and trends that will drive quality and performance improvement on a grand scale.
- <u>https://www.eso.com/virginia/?\_ga=2.19844986.312404743.1636991299-1564113538.1636991299#faq</u>
- ESO will allow reporting of data for <u>ALL</u> hospitals in Virginia



### Action Items for Year 1 Participating Hospitals

- Designate Point Person(s) to serve on Stroke Registry Stakeholder Group
- Review the Coverdell Data Dictionary and Data Manual that was sent to the hospital stakeholders in November and December
- Activate the Coverdell layer <u>AND</u> the EMS layer for GWTG
  - Free because Virginia is a Coverdell Grant Recipient
  - Need to request your rep to add the EMS layer if you don't already have
  - Coverdell has been added in GWTG to those hospitals that requested it
  - Allows tracking of data for Coverdell Element Requirements
  - Goal will be to facilitate Inter-rater Reliability for certification



### Coverdell Stroke Registry Build and Data Submission

- First Submission of Data due on February 15, 2022
- Delays Experienced
  - Virginia does not yet have access to the CDC uploading site
  - ESO cannot build the Stroke Registry without access to the submission portal
  - New Data Agreements will need to be signed between ESO and participating hospitals/hospital systems
- Data Submission Extension Letter sent to the CDC on 1/12
  - Requesting extension until April 15, 2022 to submit data



### Goals/Plans for Spring 2022

- Stroke Registry Staff Positions to be Posted Soon
  - Already funded by CDC Coverdell Grant
  - Need Stroke Registry Administrator, Stroke Registry Data Analyst and Stroke Registry Quality Assurance
- Continue working with ESO to create the VA Stroke Data Registry and get the agreements signed
- Follow Up Meetings with Stakeholders—Jan, Feb and March
  - Invites to be sent for Jan 28<sup>th</sup> at 10 am
  - Meetings TBD for February and March



### **Contact Information:**

## Patrick.Wiggins@vdh.Virginia.gov and Kathryn.Funk@vdh.Virginia.gov



# **Questions and Answers**

