VDH VIRGINIA DEPARTMENT OF HEALTH

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

Virginia Stroke Care Quality Improvement Advisory Group Meeting

Meeting Location: Virginia Hospital and Healthcare Association,

4200 Innslake Dr, Glen Allen, VA 23060

October 20, 2023 | 8:30am – 9:30am

Agenda

8:30-8:45am **Welcome and Minutes Approval**

8:45-9:25am **Virginia Hospital and Healthcare Association Health Equity Collaborative - Going Upstream to Prevent Stroke Readmissions and Hospitalizations |** Mary Brandenburg, Director of Population Health, VHHA Foundation

Advisory Group Discussion

9:25am **Public Comment**

9:30am **Adjourn**

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Virginia Stroke Care Quality Improvement Advisory Group Meeting

Meeting Location: Tidewater Emergency Medical Services, 723 Woodlake Drive
Chesapeake, VA 23320

July 21, 2023 | 8:30am – 9:40am
Meeting Minutes

Attendance: 15 attendees in person

Attendees	
	1. Kathryn Funk, Stroke Registry Coordinator, VDH
	2. Nina Rodrigues, Diabetes Coordinator, VDH
	3. Kristie Burnette, Regulatory, VHHA
	4. Robert "Alek" Collins, Stroke Coordinator, Chesapeake Regional Medical Center
	5. Carla Gunter, Stroke Coordinator, Twin County Regional Medical Center
	6. Chad Aldridge, Physical Therapist, UVA
	7. David Long, TEMS Regional Council Lead and VSSTF co-chair
	8. Donna Layne, Data Analyst, Centra Health
	9. Karen Bonham, Community Health Worker, Twin County Regional Medical Center
	10. Mandi Zemaiduk, Stroke Administrator, Centra Health
	11. Melanie Winningham, Neurologist, Sentara Martha Jefferson and Sevarro Teleneurology
	12. Nicole Duck, Stroke Coordinator, Riverside Regional Healthcare
	13. Rebecca Smith, Stroke Coordinator, Ballad Health Johnston Memorial
	14. Sophea Booker, Stroke Coordinator, Bon Secours Maryview Medical Center
	15. Wendy Bunting, Acute Rehab Director, Riverside Regional Healthcare

Agenda	Notes
8:30-8:35 am Welcome and Minutes Approval	Kathryn Funk (VDH) opened the meeting at 8:30 am with introductions. Chad (UVA) motioned to approve the minutes, and Mandi (Centra) seconded. The minutes were approved as submitted.
8:35-9:00 am VHHA Stroke Collaborative update **9:00-9:20 am Twin County Regional CHW Update** **9:20-9:40 am Hospital Inventory Survey Overview** **Public comment** **9:40 am Adjourn**	* Kathryn shared that the meeting will cover updates by VHHA and HQI on Virginia projects and an overview of the Hospital Inventory survey. * Kristie Burnette (VHHA) gave an overview of Coverdell grant and Stroke Collaborative with ten members. Year 1 review, shared sample of VHHA Data Analytics reports. Year 2 review led to a discussion on elements of ASR certification and having standardized training for staff with more frequent, hands-on mock stroke codes. Current work in year 3 includes quarterly reports and the importance of feedback and accurate data submissions from hospitals, SDOH screenings with referrals, and continued, ongoing support for hospitals seeking ASR Certification. *Karen Bonham (HQI) gave an overview of the populations served in their region, including high number of Hispanic, seasonal residents. They have found creative ways to connect with this population through a local Hispanic coffee shop, churches, and a free clinic that offers Spanish-speaking care 2 evenings per week. A large number of patients in this region go to neighboring states for hospital care and hospital data is lost on these patients. Discussion regarding the challenges with post-stroke discharge planning amid the Spanish population. Many return to Mexico and are lost to follow-up. *Kathryn (VDH) gave an update on the stroke survey with 61 responses yielding a 57% response rate. Of those responses received, 75.4% of responding facilities are stroke certified. Barriers to certification include a lack of neurology services or having a nearby facility that is already certification. In reviewing avg door in-door out times, < 120 min was in target, >120 min and <180 min needs improvement. 53 facilities utilize telestroke services with 85% provider to camera in less than 15 min. Discussion followed on data reports and feedback to and from teleneurology vendors and facilities. Responding facilities making changes to improve gaps and performance times. EMS integration and hospital policy changes discussed to improve response times to CT, ensuring EMS run reports are scanned into EMRs. Discussion followed on transitions of care and use of referral tracking systems for follow up. The meeting was adjourned at 9:40 am