VDH VIRGINIA DEPARTMENT OF HEALTH

Virginia Stroke Care Quality Improvement Group

April 2024
Edward Via College of Osteopathic Medicine, Blacksburg, VA

Patrick Wiggins, Chronic Disease Supervisor, VDH
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Allie Lundberg, Stroke Epidemiologist, VDH
Bethany McCunn, Stroke Registry Epidemiologist, VDH

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Agenda

8:30-8:45am	**Welcome and Minutes Approval**
8:45-9:25am	**Overview of the 2023 Hospital Reabstraction Data**
	VDH Stroke Registry Updates
	Overview of the VSCQI Advisory Group Report 2024
9:25am	**Public Comment**
9:40am	**Adjourn**

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Minutes Approval

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Coverdell Re-Abstraction Process & Results

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Purpose

Re-abstraction of patient medical records or charts assists in the assessment of data coding quality and completeness.

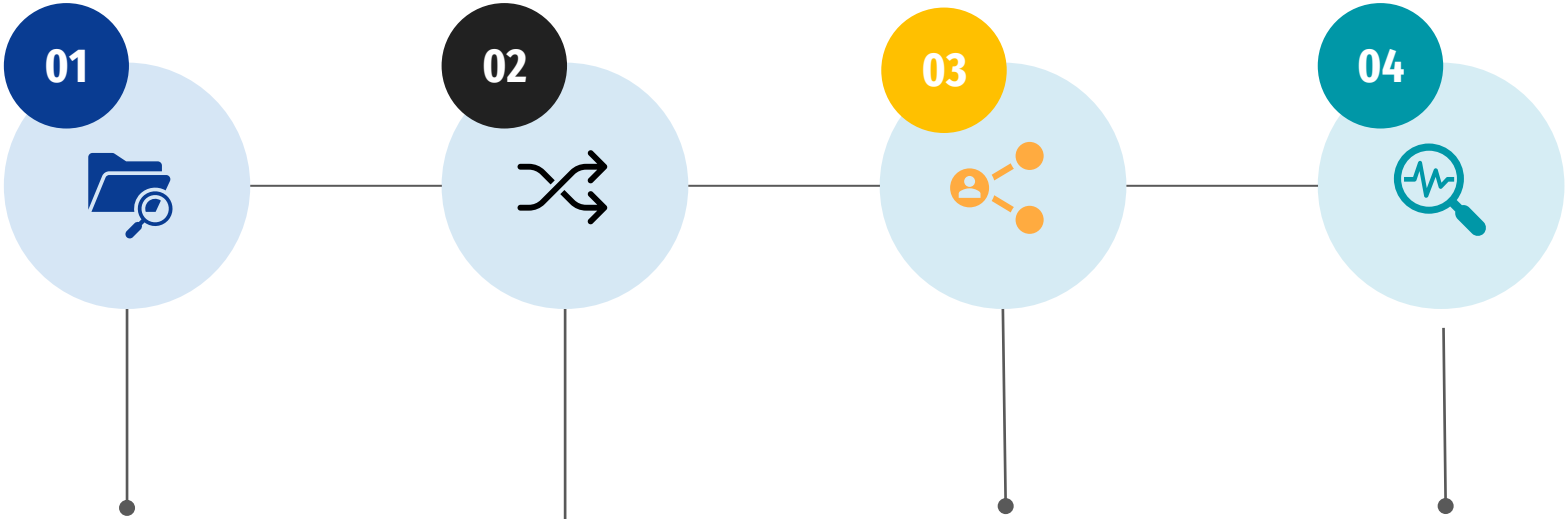
This project included hospitals who have submitted data through Virginia's current Coverdell Stroke project.

Why is re-abstraction important?

1. Ensure patient data is accurate and reliable
   - Reduce errors and adverse events affecting patient safety
   - Inaccurate data could restrict health data sharing
   - Inaccurate data could complicate clinical research
2. Stay compliant
   - Needed for certification, accreditation, etc.
3. Initiate quality improvement
   - Create improvement projects to monitor and improve performance metrics

Alzu'bi AA, Watzlaf VJM, Sheridan P. Electronic Health Record (EHR) Abstraction. Perspect Health Inf Manag. 2021 Mar 15;18(Spring):1g. PMID: 34035788; PMCID: PMC8120673.

Process



Extract records

Using the October 2023 Coverdell data submision

Randomize

Select 10 patient charts using Excel

Distribute Survey

Load required elements into a REDCap survey and distribute to participants

Collect & Analyze Results

1. State level report
2. Individual hospital reports

Data Elements Collected

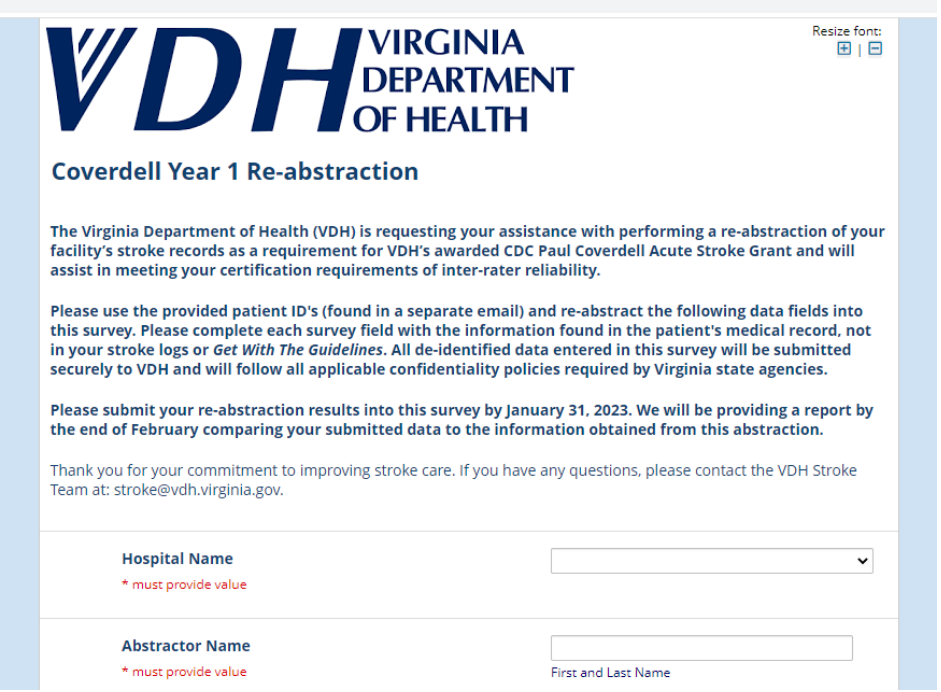
1. Age
2. Gender
3. Race and Ethnicity
4. Date of Arrival at Hospital
5. Time of Arrival at Hospital
6. Date of Hospital Admission
7. Telestroke consultation performance
8. Brain imaging performance
9. Date and Time brain imaging first initiated at your hospital
10. Last known well date and time
11. NIH Stroke Scale performance
12. If performed, first NIH Stroke Scale total score
13. Was IV thrombolytic initiation
14. Date and Time IV thrombolytic was initiated for this patient at this hospital
15. Dysphagia screening performance
16. Dysphagia screen results
17. Was a dysphagia screen performed before administration of any PO medication?
18. Patient discharge date
19. Principal discharge ICD-10-CM code
20. Clinical diagnosis related to stroke that was ultimately responsible for this admission
21. Discharge disposition

Re-Abstraction Survey

Distributed online survey on December 1, 2023 with a targeted completion date of January 31, 2024.

Requested: 44 hospitals

Received: 35 hospitals // 339 total records



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Resize font:

Coverdell Year 1 Re-abstraction

The Virginia Department of Health (VDH) is requesting your assistance with performing a re-abstraction of your facility's stroke records as a requirement for VDH's awarded CDC Paul Coverdell Acute Stroke Grant and will assist in meeting your certification requirements of inter-rater reliability.

Please use the provided patient ID's (found in a separate email) and re-abstract the following data fields into this survey. Please complete each survey field with the information found in the patient's medical record, not in your stroke logs or *Get With The Guidelines*. All de-identified data entered in this survey will be submitted securely to VDH and will follow all applicable confidentiality policies required by Virginia state agencies.

Please submit your re-abstraction results into this survey by January 31, 2023. We will be providing a report by the end of February comparing your submitted data to the information obtained from this abstraction.

Thank you for your commitment to improving stroke care. If you have any questions, please contact the VDH Stroke Team at: stroke@vdh.virginia.gov.

Hospital Name

* must provide value

Abstractor Name

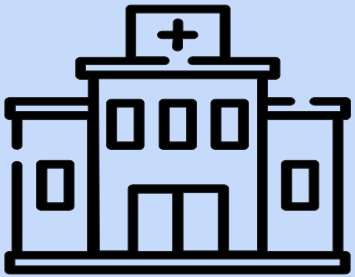
* must provide value

First and Last Name

Participants

(new participants are in **bold**)

Augusta Health
Bon Secours Mary Immaculate
Bon Secours Maryview
Bon Secours Memorial Regional
Bon Secours Rappahannock
Bon Secours Richmond
Bon Secours St. Francis
Bon Secours St. Mary's
Bon Secours Southside
Carillion Roanoke Memorial
Centra Lynchburg
Chesapeake Regional
Fauquier Hospital
HCA Chippenham Johnston Willis
Inova Alexandria
Inova Fair Oaks
Inova Fairfax
Inova Loudoun
Inova Mount Vernon
Mary Washington
Riverside Doctors'
Riverside Regional
Riverside Shore
Riverside Walter Reed
Sentara Care Plex
Sentara Halifax
Sentara Leigh
Sentara Martha Jefferson
Sentara Norfolk
Sentara Virginia Beach
UVA Hospital
VCU Community Memorial
VCU Health
Virginia Hospital Center



Comparison from 2023 Re-Abstraction Project

- Number of participating hospitals:
  27 -> **35**
- Number of records re-abstracted:
  240 -> **339**
- Number of discrepancies:
  1094 (14.7%) -> **559 (7.5%)**

Summary Results

Demographics

Total number of records = 339

Age
Number matched: 332
Percent matched: 97.9%

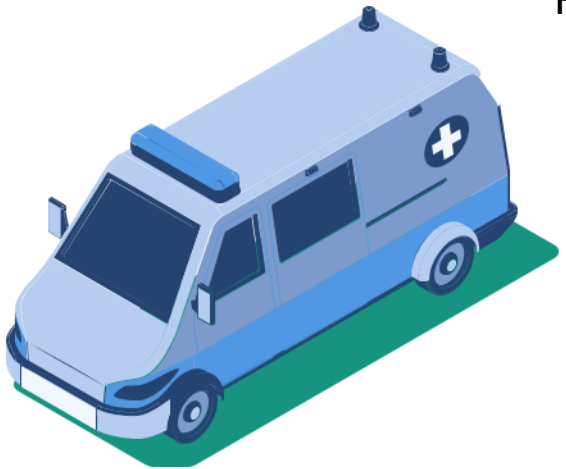
Gender
Number matched: 331
Percent matched: 97.6%

Race and Ethnicity
Number matched: 2,355
Percent matched: 99.2% (**+1.1%**)

Summary Results

Hospital Arrival & Admission

Total number of records = 339



Date of Arrival at Hospital
Number matched: 339
Percent matched: 100% (**+2.9%**)

Time of Arrival at Hospital
Number matched: 284
Percent matched: **83.8%** (**-5.4%**)

Date of Hospital Admission
Number matched: 309
Percent matched: 91.2% (**+21.3%**)

Summary Results

Stroke Elements

Total number of records = 339

Date Last Known Well
Number matched: 316
Percent matched: 93.2%
(**+19%**)

NIH Stroke Scale Performance
Number matched: 319
Percent matched: 94.1%
(**+0.3%**)

Time Last Known Well
Number matched: 269
Percent matched: **79.4%**
(**+1.5%**)

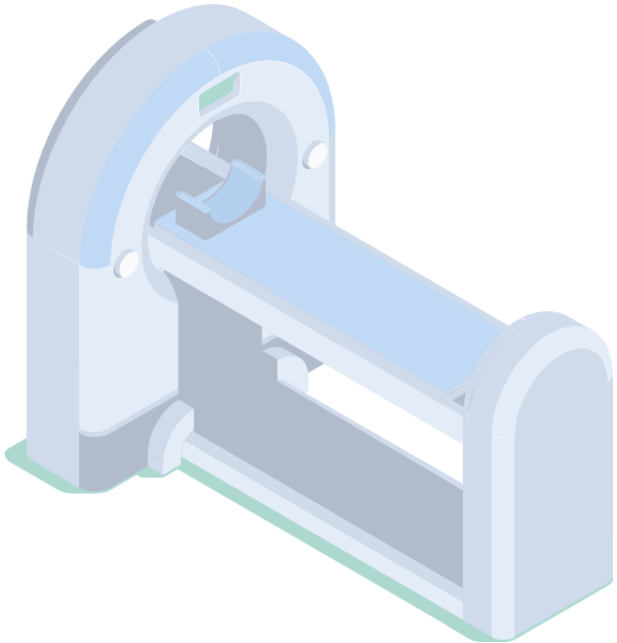
NIH Stroke Scale Score
Number matched: 289
Percent matched: **85.3%**
(**+2.4%**)

Telestroke Consultation
Number matched: 255
Percent matched: **75.2%**
(**-2.7%**)

Summary Results

Brain Imaging

Total number of records = 339



Was brain imaging done?
Number matched: 304
Percent matched: **89.7%** (**-5.3%**)

Date of Brain Imaging at Hospital
Number matched: 331
Percent matched: 97.6% (**+5.5%**)

Time of Brain Imaging at Hospital
Number matched: 233
Percent matched: **68.7%** (**-16.3%**)

Summary Results

IV Thrombolytic Initiation

Total number of records = 339

IV Thrombolytic Initiation at Hospital

Number matched: 338
Percent matched: 99.7% (**+4.7%**)

Date of IV Thrombolytic Initiaion

Number matched: 338
Percent matched: 99.7% (**+14.7%**)

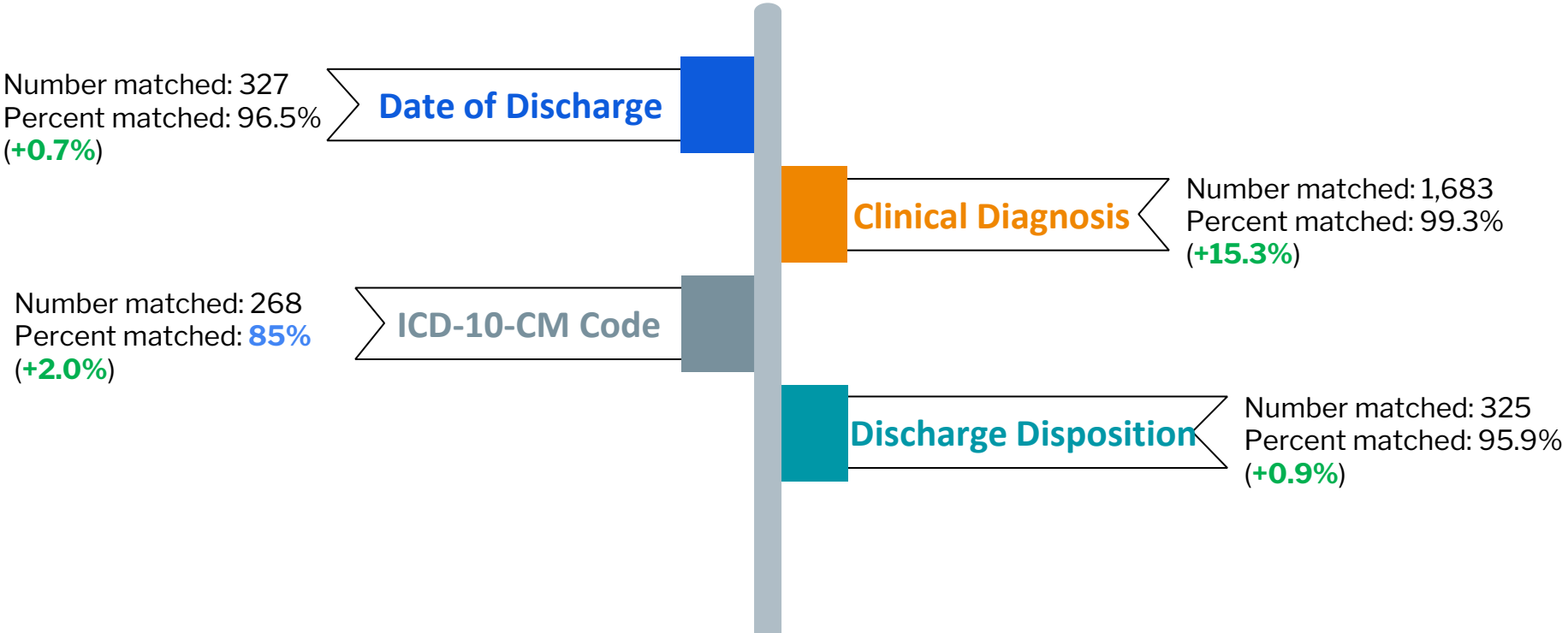
Time of IV Thrombolytic Initiation

Number matched: 338
Percent matched: 99.7% (**+22.6%**)

Summary Results

Discharge

Total number of records = 339



VDH Stroke Registry Update

Virginia Stroke Registry Update

- Stroke Registry continues to be built and tested through vendor.
- VDH will not have open calls for beta testers. If beta testers are needed, VDH will reach out to select hospitals directly.
- VDH Stroke Team is obtaining GWTG SuperUser access (TBD) – please be on the lookout for data sharing contracts.

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Questions?

For further questions, please contact:
Stroke@vdh.virginia.gov