Strategies for Successful Stroke Survey.

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INTRODUCTION: Stroke Centers operate in a dynamic healthcare environment, continuously undergoing series of changes that impact care delivery across the continuum. In theory survey preparation is an ongoing process. In reality people get comfortable once certified and return to previous workflows with less attention to detail. Current literature focuses on improved quality and outcomes that result from disease specific certification. There is a limited amount of published literature regarding stroke survey preparation activities, and available publications are over ten years old.

THE WORK IS NEVER DONE

Stroke certification occurs every two years and can be resource intensive for hospitals. No matter how experienced a center is, preparation requirements remain the same. Comprehensive Stroke Centers (CSC) have been challenged with adopting additional metrics and are expected to have analyzed data trends. Internal organizational data transparency requires ongoing planning and resources. As CSC experience continues to grow benchmarking performance is a necessity.

ORGANIZING & COMMUNICATING WITH TEAMS

The stroke program oversees the communication with other members of the team and facilitates preparation for on-site visit. Clarification of assignments and expectations helps keep things running smoothly. Effective teams continue to refine their approach to sustain and maintain in between survey visits. Focused efforts at everyone reviewing opening, data tracer and any internal vulnerable areas ensures smoother survey visit.

Data Drives Practice:
A consistent theme throughout this survey is the utilization and sharing of internal data to continually improve patient care and stroke outcomes. Comprehensive Stroke Centers (CSC) have been challenged with adopting additional metrics and are expected to have analyzed data trends. Internal organizational data transparency requires ongoing planning and resources. As CSC experience continues to grow benchmarking performance is a necessity.

Checklist for Data Presentation:
- Performance Improvement (PI) methodology
- Volumes of procedure/interventions
- Annual aneurysm clipping/ceiling mortality
- Complication rate data
- Public reporting outcomes
- Stroke performance measurement data
- Percentage discharge follow-up phone call
- Multidisciplinary Review & Peer Review
- Use of Stroke Registry & Stroke Log
- Patient satisfaction data specific to stroke population
- IIB approved clinical research

Day of Survey Essentials:
- Logistics to host 2 reviewers
- Centralized support for phone calls
- Ancillary support for phones, document prep and centralized communication
- Internal communication system - rapid ability to share information
- Contact lists for key personnel, departments and staffing
- Organized IT/IS resources to support electronic medical record review

Key Sources for Team:
- Certification standards
- Clinical Practice Guidelines
- Certification Review Process Guide
- Certification newsletters
- Previous survey communication

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KEY LEARNINGS FROM 3 CSC SURVEYS

- Mock Surveys help to understand process gaps
- Tip Sheets with Common FAQ’s assist with staff readiness
- Navigating EMR remains dynamic and should be reassessed each time reviewers are expected.
- Telling the patient story may not be as easy and requires practice with bedside staff.
- Staffing up to allow for optimal interaction with visiting experts.
- Provider updates require 4x’s the times you think!

CONCLUSION

More research and publication is needed to assist stroke centers to prepare for a successful certification review. As CSC’s mature, expectations are raised to grow advanced programs meeting the needs of complex stroke patients and continuously develop the professional team. By comparing and sharing strategies, comprehensive stroke programs can foster experiences that lead to decreased stress and improved confidence at the time of on-site certification visit.

References: