



# **STROKE COORDINATOR: WHO, WHAT, WHEN, WHERE, HOW?**

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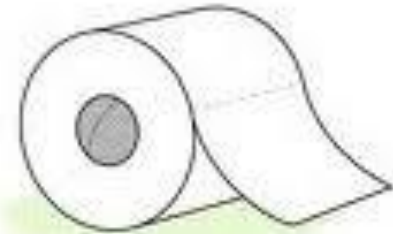
Stroke Program Coordinator



# DISCLOSURES

Financial: Joint Commission DSC Reviewer – Stroke and Sepsis

# IS THERE A RIGHT OR WRONG ANSWER?



This is right.  
(good)



This is wrong.  
(bad)



# STROKE COORDINATOR: WHO?

## Who is the stroke coordinator?

- Typically a nurse
- Subject matter expert
- “Rule keeper” – knowledgeable on stroke program standards and guidelines
- “Glue that holds the program together” – keeps everything...coordinated
- “Face of the program” – when people see you they think about the stroke program
- “Wearer of many hats” – may be working on multiple programs, quality initiatives or have unit responsibilities
- “Gatekeeper”

# STROKE COORDINATOR: WHAT?

What is it that the stroke coordinator does??? Just to name a few...

- Reviews current program standards related to certification body that does site certifications
- Update on changes that affect stroke program guidelines, stroke care evidence, order sets, processes
  - Example: 2018 AHA ischemic stroke guidelines
  - Example: DAWN and DEFUSE results
- Concurrent chart review
- Attend stroke codes ED/Inpatient
- Point of contact in healthcare system for stroke program
- Community education
- EMS and hospital feedback
- Data entry/IRR
- Regional meeting attendance
- Research

Does your job description accurately define your role and responsibilities?

Do you have a stroke coordinator competency?

# STROKE COORDINATOR: WHEN?

## When do you get it all done??

- Plan out the day...if you can
- Schedule, schedule, schedule
- Block calendar for items
- Don't carry the load alone – delegate if possible
  - Stroke champions
  - Unit leaders/representatives
  - Define roles and responsibilities
- Ask for help
- Are you trying to run a program on your own
  - Who is managing all the action plans??
- Promote unit leadership of stroke processes...does not happen overnight



# STROKE COORDINATOR: WHERE?

## Where are all the places to be?

- Stroke program meetings – Performance improvement meetings, stroke steering committee
  - Stroke work group meetings
- Quality meetings
  - Ensure how you say the stroke data is reported is what you are doing
- Unit meetings
- Regional meetings
  - Example: RAC meetings
  - Example: GETAC meetings
- Provider meetings
- New process implementation
- Education for staff
- Core team meetings/Stroke faculty
- Stroke activations

# STROKE COORDINATOR: HOW?

How do we get it all done??

## 1. Define the expectations at your organization

- Stroke medical director job description
- Stroke coordinator job description/competency
- Stroke program guidelines –annual review
  - **KEY: STAKEHOLDERS need to review and AGREE to expectations!!!**

## 2. Who are the people that can help facilitate the program?

- Stroke medical director
- Stroke champions – define roles and expectations
- Unit leadership
- Unit representative





# STROKE COORDINATOR: HOW?

How do we get it all done??

## 3. Hospital leadership

- CMO, CNO, COO
- Reporting out of data is your friend – how do you tie into overall hospital reporting structure
- Be ready to answer the question – “how can we help?”

## 4. Stroke program data

- How often do you need to have your stroke PI meeting
- Do you have unit boards to post stroke data on
- Unit huddles – can you provide data for them to review
- Who does your data fall out validation
- What are the opportunities – patience is key to improvements

# STROKE COORDINATOR: HOW?

How do we get it all done??

## 4. Stroke program data cont'd

- Are you monitoring data elements relevant to the program— may be outside the standard measures
- Can units aggregate data to report out at stroke meetings

## 5. Staff education

- Define education plan – share with leaders the expectations – no surprises
- Huddles
- Staff meetings
- Stroke care classes
- Email – read receipts
- 1:1

# STROKE COORDINATOR: HOW?

How do we get it all done??

## 6. Tools and resources

- Can you have assistance to help with data entry –especially if you are coordinating multiple programs
- Checklists for items to complete – Post IV Alteplase monitoring, post procedure groin assessments, dysphagia screening, stroke education
- Resource binders – but beware
- Hospital intranet sites
- Embedded items in EMR/EHR
- Local coordinators group – systems or non-system
- Texas Stroke Coordinator Forum
- AHA representative

# QUESTIONS?

