

TO: Arkansas Stroke Registry (ASR) Participating Hospitals
SUBJECT: ASR Program Summary: July 2019 – June 2020 Program Year
DATE: July 2019

Thank you for participation in the Arkansas Stroke Registry (ASR) and being part of our team to reduce the impact of stroke across the state! With your help, we will continue optimizing Arkansas' stroke system of care and patient outcomes.

Contacts

There are three organizations working together to support the ASR: Arkansas Department of Health (ADH), American Heart Association (AHA), and the stroke database, Quintiles/IQVIA.

- **ADH** provides quality improvement (QI) support to maximize adherence to the performance measures captured in the registry. The primary ADH contact is Dr. Tammie Marshall, DNP, MSN, MHA, RN, CNE, ASLS. Tammie is the Arkansas Stroke Nurse Coordinator and her contact information is as follows: Tammie.Marshall@arkansas.gov and phone number (501) 671-1448. David Vrudny, CPHQ, MPH, MPH(c), Section Chief Stroke/STEMI is a secondary contact and may be reached at David.Vrudny@arkansas.gov and phone number (501) 661-2096. Joanne LaBelle, RN, MS, CPHQ, HRM is a contractor for ADH to provide quality improvement support for participating ASR hospitals. Her email address is Joanne.LaBelle@arkansas.gov.
- **AHA** provides assistance on using the *Get With The Guidelines*®-Stroke Patient Management Tool (GWTG-SPMT) for chart abstraction, and data entry, reporting, and analysis and QI. Kristen Waller is the AHA Quality Systems Improvement Director for Arkansas and Kristen's phone number (870) 310-0119 and email address is Kristen.Waller@heart.org.
- **Quintiles/IQVIA** is the software company which developed the GWTG-SPMT and provides technical support for the software, including assigning user IDs and resetting passwords. Quintiles/IQVIA customer support may be reached by calling 888-526-6700 and the email address is InfosarioOutcomeSupport@quintiles.com.

Getting Started

- Complete program participation survey for the new program year found at this [web page](#).
- For a walk-through of entering cases and running reports, a GWTG-SPMT training video is located on this [web page](#).

Program Guidelines

- Abstract, enter and save 100% of patient records as complete within 90 days of patient discharge. Included in the database are patients with a final discharge diagnosis of TIA, ischemic stroke, hemorrhagic stroke, and stroke not otherwise specified. This includes patients transferred to another acute care facility; case inclusion criteria are listed in the GWTG-SPMT Coding Instructions found on this [web page](#).
- Ensure the additional 5 data fields will be input to GWTG-SPMT as applicable:
 - Stroke Band ID
 - EMS Agency Name Transporting Patient from Referring Hospital
 - EMS Agency Name Transporting Patient to Receiving Hospital
 - Hospital name if patient transferred from your ED to another hospital
 - Hospital name if patient transferred from another hospital
- Ensure that five (5) stroke cases are re-abstracted for patients discharges between July 2019 - June 2020 which may be completed either by the ADH's contractor or by your hospital. Hospitals that administer tissue plasminogen activator (tPA) should include at least one tPA patient record in the re-abstraction sample. If your hospital has requested assistance with re-abstractions from the ADH's contractor, your hospital will be contacted to arrange a time to complete this project. If you prefer to complete re-abstractions internally, a secondary abstractor needs to complete the re-abstractions. The secondary abstractor must be identified and contact information uploaded into the template. NOTE: The updated re-abstraction templates, and other stroke care resources, are posted to this [web page](#).

Key Upcoming Dates

- **July 17, 2019** – Due date to complete program participation survey to enable ADH to continue to pay the GWTG-SPMT fee.
- **September 30, 2019** – Final date to input cases for program year ending June 2019 before defect-free care awards are announced.
- **July 31, 2020** – Due date for the 5 chart re-abstractions (completed by ADH contractor or internally).

ADH Stroke Performance Awards

ADH will provide an award for the July 2019 – June 2020 program year based on achieving a minimum of 85%, 90%, and 95% adherence to the "CDC/COV Defect-Free" measure in GWTG-SPMT. This measure gauges the proportion of patients that received all the appropriate interventions were provided. It is recommended your hospital team continuously measure adherence to this measure by reviewing CDC/COV Defect-Free reports in GWTG-SPMT. These measures include (1) IV Alteplase Arrive by 2 Hour, Treat by 3 Hour; (2) Early Antithrombotics; (3) VTE Prophylaxis; (4) Antithrombotics; (5) Anticoagulation Therapy for Atrial Fibrillation/Flutter; (6) Smoking Cessation Counseling; (7) dysphagia screening; (8) stroke education; (9) rehabilitation considered and (10) LDL 100 or ND – Statin.