

## STROKE ADVISORY COUNCIL MEETING MINUTES

September 25, 2024

12:30 - 2:30 pm

Atrium Health Sanger Heart & Vascular Institute

### **Members/Partners**

**Present:** Michael Aquino, Rapid AI; Sue Ashcraft, Novant Health (NH); Andrew Asimos, SAC member, Atrium Health (AH); Pat Aysse, AHA; Barbara Beatty, JWTF member, Catawba County Commissioner; Debbie Beecham, UNC Health Nash; Sharon Biby, SAC member, Cone Health; Annabelle Black, Novant Health (NH) Greater Charlotte; Kelly Boland, Cone Health; Olivia Broomer, Cone Quality; Anna Bess Brown, Executive Director, Justus-Warren Heart Disease and Stroke Prevention Task Force (JWTF); Adrienne Calhoun, JWTF member, NC Association of Area Agencies on Aging; Jennifer Carmichael, Cone; Representative Becky Carney; JWTF Co-Chair; Amber Carter, Cone; Heather Carter, Dementia Services, NC Division of Aging; Ally Castelloe, ECU Health Roanoke-Chowan Hospital; Judy Clark, NH Greater Winston-Salem; Arnett Coleman, SAC member, Old North State Medical Society; Sylvia Coleman, nurse consultant; Michelle Comp, NH Thomasville; Lauren Davis, AH Union and Waxhaw; Carissa Dehlin, NH Matthews and Ballantyne; Karissa Del Hoyo, NH Kernersville MC; Tina Dotson, NH Rowan; Dan Fesperman, AH Community Health; Rebecca Gainey, NH New Hanover Regional Medical Center (NHRMC); Michelle Geroleman, WakeMed; Melanie Greenway, NH Presbyterian; Bobbie Handy, AH Wake Forest Baptist (WFB) Wilkes Medical Center; Scott Herrick, AHA; James Ho, UNC; Gina Howell, Appalachian Regional Health/Watauga Medical Center; Adam Jacks, UNC Speech & Hearing; Melisa Johnson, CaroMont Health Gastonia; Robin Jones, SAC member; Brandon Kinder, CaroMont Health Gastonia; Hervey Kornegay, SAC member; Di Laues, Fayetteville VA Medical Center; Erin Lewis, UNC Rex; Sarah Lycan, AH WFB; Lauren Macko, AH; Abigail Matusik, AH Performance Improvement; Jenny McConnell, AH; Kim McDonald, Chronic Disease and Injury Prevention Section, DPH; Crystal McHone, NH Forsyth Medical Center; Lucinda McLean, Columbus Regional Healthcare System; Charlotte McPhail, Duke Raleigh; Katie Michael, AH Lexington; Grayson Moore, ECU Health; Terri Moore, Coverdell Stroke Program, DPH; Elizabeth Murray, NC CARE 360; Kathy Nadareski, WakeMed; Becky Noe, AH; Peg O'Connell, Chair, Stroke Advisory Council; Gaurang Palikh, SAC member, Neurologist, Shelby; Diane Perkins, AH; Christen Phillip, CaroMont Health; Renee Potter, UNC; Brooke Prevattte AHWFB High Point; Liz Reeck, Carolinas Healthcare Concord; Julia Retelski, AH; Anthony Ribeiro, Rapid AI; Tammy Richardson, AH Quality Outcomes; Beatrice Siaw, UNC; Ashlee Simmons, AH; Marlene Sosa, AH Pineville; Denise Spaug, community educator; Ashley Spenard, AH Stanley; Mitzi Stanish, Northern Regional Hospital (NRH); Lauren Stevenson, NH NHRMC; Ceira Sullivan, UNC Rex; Julie Sundermann, JWTF member, DHHS Division of Aging and Adult Services; Chuck Tegeler, vice chair, Stroke Advisory Council; AH WFBMC; Leilani Tolentino, AH Cabarrus; Kate Turner, Sentara Albemarle; Ronda Vani, AH University City; Emily Volk, NRH; Caitlin Webb, Wilson Medical; Julie Webb, Duke Regional; Laura Williams, AH; Gwen Wise-Blackman, Minority Women Health Alliance; Sheila Wright, AH Community Health; Camron Young, RN; Erika Yourkiewicz, NHRMC.

### **Welcome and Introductions**

#### **Peg O'Connell, SAC Chair**

Stroke Advisory Council chair Peg O'Connell welcomed everyone gathering in person at Atrium Health and thanked them for coming to Charlotte, and she welcomed those joining virtually. Peg welcomed and recognized Vice-Chair Chuck Tegeler. She thanked Atrium Health for hosting the meetings and for providing continuing education credits. She acknowledged and remembered Libby Puckett, the first Executive Director of the Task Force, "on whose shoulders we stand today and every day."

## **Welcome by Representative Becky Carney**

Peg stated that we are excited to be in Representative Becky Carney's hometown and honored to have her here to speak to us. Representative Carney has been a devoted chair of the Justus-Warren Heart Disease and Stroke Prevention Task Force as she has represented District 102 by serving in the North Carolina General Assembly for 21 years. She is a champion for health and in particular for heart disease and stroke prevention and care.

Representative Carney brought greetings from the NC General Assembly and explained her involvement from the beginning when the Justus-Warren Heart Disease and Stroke Prevention Task Force was established in statute in 1995. She shared her experiences being diagnosed with congestive heart failure, having sudden cardiac death twice, using an LVAD, subsequently getting treatment for cancer, and dealing with the unexpected and death of her husband in March. She closed by thanking everyone for participating in the Stroke Advisory Council and for their work in stroke prevention and care.

Peg noted that the Stroke Coordinators gathered in the morning and were delighted to meet in person after holding monthly meetings virtually for the past year. This group meets to share best practices and discuss emerging issues. They have formed a statewide network of stroke nurse coordinators that is strengthening the stroke system of care. Peg thanked them for the work they do each day and for collaborating to raise the bar across the state.

## **Approval of Minutes**

Peg reminded members that minutes from the June meeting were posted on the website [start with your heart.com](http://startwithyourheart.com) and sent via email. She asked for corrections and additions. Seeing none, members approved the minutes by acclamation.

## **Legislative Update on Items on the Task Force Action Agenda**

The legislature adjourned in June; and they continue to convene periodically, most recently earlier in September. They're scheduled to meet again Oct. 9th.

We will send our Request for Applications for items to be considered for the Action Agenda on October 15<sup>th</sup>. Agencies-not individuals- may submit applications. Proposals must be evidence based. Applications will be due Nov. 8<sup>th</sup>. The Justus-Warren Heart Disease and Stroke Prevention Task Force will meet in December. At that meeting we'll have an update on the burden of heart disease and stroke, and we'll hear presentations from organizations on their advocacy priorities.

## **Coverdell Stroke Program Update**

Peg shared very good news: North Carolina has received notice from the CDC that we will be awarded Coverdell Stroke Program funding. The first year is set to begin September 30, 2024 and run through June 30, 2025. The grant period for this round of Coverdell Stroke Program funding is 5 years. Peg thanked those who provided letters of support and to all of you who form this amazing network of stroke care providers and advocates.

## **Get with the Guidelines®-Stroke Awards**

Pat Aysse, Health Care Quality, American Heart Association

Peg recognized Pat Aysse with American Heart Association to present the 2024 Get with the Guidelines® -Stroke awards. See Pat's slides.

Peg congratulated all the winners for their excellent work in stroke care and thanked Pat.

Peg thanked Atrium for hosting us and extended very special thanks to Julia Retelski, Director of Clinical Program Development for the Neurosciences Institute, for coordinating the logistics and presentations for this meeting. Julia welcomed everyone to Atrium and introduced long-time SAC member and Medical Director of the Atrium Health Stroke Network, Dr. Andrew Asimos, who offered his welcome to everyone and introduced Laura Williams, Manager of the Telestroke Program.

### **Atrium Health's Telestroke Program and the Role of the Telestroke Nurse**

Laura Williams, Manager, Telestroke Program

See slides for Laura's full presentation.

### **Questions and Answers**

Q: How many telestroke nurses do you have?

A: We stay on the cart with that patient. We have multiple nurses on at the same time. It depends on the site. Some EDs have 2; bigger sites have 5. We triage appropriately using the 80/20 rule: 80% business as usual monitoring the patient; 20% triage out. All nurses are remote. On-demand service. 12-hour shift. Not sure exactly how many FTEs but at least 9.

Q: Do we repeat imaging if patients over 90 minutes transfer?

A: Depends on how far out they are. Highly likely if patient is coming from a long distance, we'll re-image-especially if they got TNK.

Q: How do we measure reduction and readmission rates?

A: We have an abundance of data. We work with Quality colleagues to analyze data; we look at decision making- whether in-patient or virtual.

Q: Where are carts for inpatient code stroke kept?

A: Depends on location and who's responding. Some sites keep close to CT, some close to IR suite.

Q: Does the telestroke nursing team do a follow-up visit with patients next day for those who stay locally?

A: Not by my acute stroke team. Patients are typically in the ICU. We monitor their chart but don't do follow up evaluation. We have a virtual neurologist who rounds the next day. We communicate with tele-neurology team on a triage board.

Q: Is this program something that is used for patients when they are in ER only?

A: No. It can be used in emergency or inpatient.

Q: Is Laura's team part of the Neurosciences Institute or a Virtual Care team?

A: The Neurosciences Institute. We participate in virtual health meetings too.

Q: How do you justify FTEs?

A: Virtual Critical Care took this on with us in the beginning. As it grew, VCC got new leadership and gave us the nurses. The program grew; we made it stand out. We looked at how many patients we serve and at how long a visit takes. Stroke is important to Atrium. Program has evolved and grown over past two years. It's seen as a value add.

Q: Is utilizing different technologies difficult?

A: Yes; it leads to challenges. We're exploring transitioning carts we use to be sure new hospitals are hard wired. We created an app to provide direction and resources for specific sites.

Q: Do you work with the Cardiology Department as well?

A: That's a great question. Currently we do not have a strategic partnership, and we're working on the collaboration.

Q: Are there charges for nursing as there are for neurologists?

A: There are different models depending on facility. For example, it depends on whether the site is using nurses and 3<sup>rd</sup> party, etc.

Peg thanked Laura for sharing Atrium's innovative telestroke work. Peg also thanked all the presenters and Atrium for hosting. Atrium is providing continuing education credits for those who attended both the stroke coordinators' meeting and the SAC meeting and completed the evaluation.

Peg recognized Sheila Wright and Dan Fesperman with [Atrium Community Health](#) who shared their services. Click on their website for details on faith community nursing, community outreach and health education, resource hub, and more.

Julia invited everyone to tour Atrium's new Rehab Hospital. See the video on the web page for a virtual tour: [Carolinas Rehabilitation](#).

### **Final Stroke Advisory Council Meeting of 2024**

November 12 from 1-2:30 PM – virtual