S TeleSpecialists Case Study



AdventHealth Gordon

About AdventHealth Gordon

AdventHealth Gordon in a 69 bed hospital located in Calhoun, Georgia. Calhoun is a rural city with an estimated population of 10,667. AdventHealth Gordon partnered with us, TeleSpecialists, for TeleStroke and TeleNeuroHospitalist services in March 2019.

The Problem

Concerns were voiced by our Quality Program Specialist, Haley Fogle, RN, that thrombolytic administration times were not consistent, often delayed beyond the 45-minute or less goal. Fogle worked collaboratively with Kevin Rodman, AdventHealth Gordon's Emergency Director, to identify areas of delay during the stroke alert process. Two major issues were found: pre-arrival notifications to our team were not being executed, and process delays were slowing down during stroke alerts.

The Result

In the initial review, it was identified that EMS pre-arrival notifications were not being called into our team. Immediately, education was provided on the benefits of calling a stroke alert after EMS incoming notifications. This allows the TeleNeurologist to be on camera, at bedside, when the patient arrives at the facility, and accessing them critical information from EMS to expedite patient care.

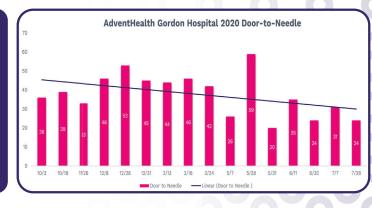
After a comprehensive review of the hospital's stroke alert process, the decision was made to overhaul the stroke alert process completely. We implemented best practices and the changes included:

- o Patients are triaged and assessed via our Pit Stop Program™ (TSPSP) when they arrive at the hospital
- Patients are taken straight to CT after the TSPSP, cutting back on rooming delays
- The creation of a Stroke Kit containing thrombolytic and blood pressure medications were implemented to ensure quick access and availability
- The telestroke cart is moved to CT to ensure that the neurologist can quickly assess and make decisions on treatment

Once best practice implementations were started, the average door-to-needle time (DTN) average dropped by 21.5%, down to 32 minutes (including outliers).

The Takeaways

- A rural hospital in Georgia was experiencing inconsistent DTN times
- After review, two major areas of improvement were identified
- After implementation of process improvements, average DTN dropped by 21.5%



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