Hawaii Coverdell Program

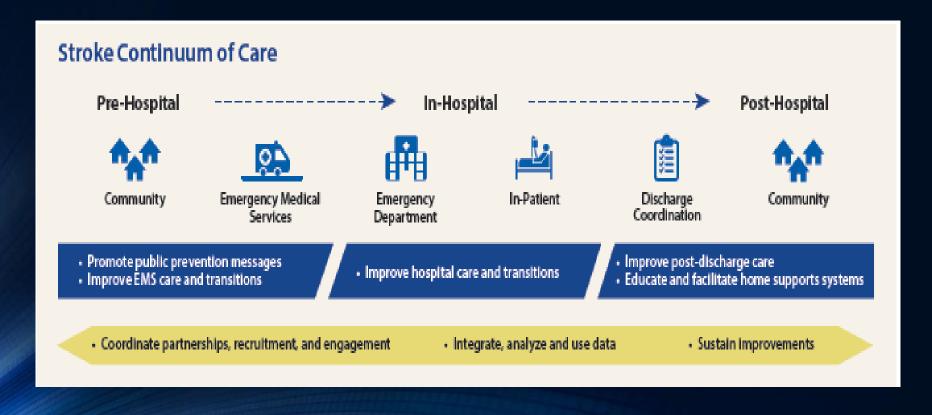
THURSDAY, AUGUST 22, 2024





Coverdell Background

- The Paul Coverdell National Acute Stroke Program (Coverdell Program) funds state health departments to collect, measure, and track data to improve the quality of care for stroke patients.
- The aim of the program is to improve the delivery and quality of stroke care to save lives, prevent disability, prevent recurring strokes, and reduce stroke deaths.



Period of Performance

June 30, 2021 – September 29, 2024



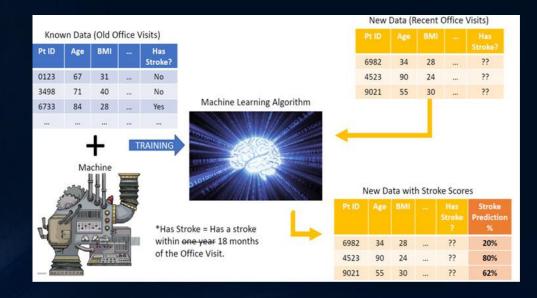


Program Strategies

- C1: Leverage electronic health records (EHR) and health information technology to identify
 patients with stroke risk factors (e.g., undiagnosed hypertension) and monitor health care
 disparities for those at highest risk for stroke events.
- C2: Establish and expand statewide data infrastructure through an integrated data management system that links pre-hospital, hospital, and post-hospital follow-up data for measurement, tracking, and assessment of quality stroke care data.
- C4: Analyze data and identify areas to improve the efficiency and quality of care within EMS and hospital settings and to improve transitions of care between settings through systematic Quality Improvement (QI) methods and interventions (e.g. PDSA, Lean, Six Sigma).
- C6: Develop and implement patient care practices/patient care protocols within EMS and hospital systems to coordinate patient hand-off and transitions in care throughout the stroke systems of care.
- C7: Establish and strengthen partnerships with relevant state or local stroke coalitions, initiatives, professional organizations, providers, and health systems that provide resource support for stroke patients, as well as those at highest risk for stroke events.
- C8: Facilitate engagement of patient navigators/community health workers in the management of those at highest risk for stroke events and post-event discharge support and follow-up of stroke patients across clinical and community settings.

Strategy C1 Achievements

- Collaborated with OCIPN to create / develop a stroke algorithm
 - The stroke algorithm uses data from old and recent office visits to train the machine learning algorithm to create new data set with stroke risk scores





Strategy C2 Achievements

Half of the stroke ready hospitals in the state activated the AHA EMS pre-hospital GWTG layer.













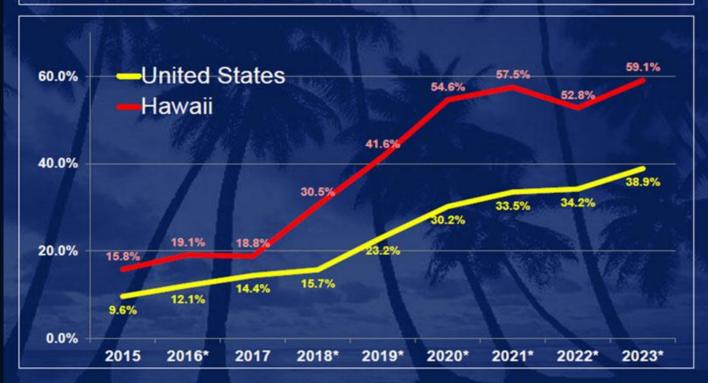




Strategy C2 Achievements



Annual proportion of ischemic stroke patients receiving intravenous thrombolytic therapy within 30 minutes of arrival, Hawaii vs. U.S., 2015-2023



Strategy C₄ Achievements

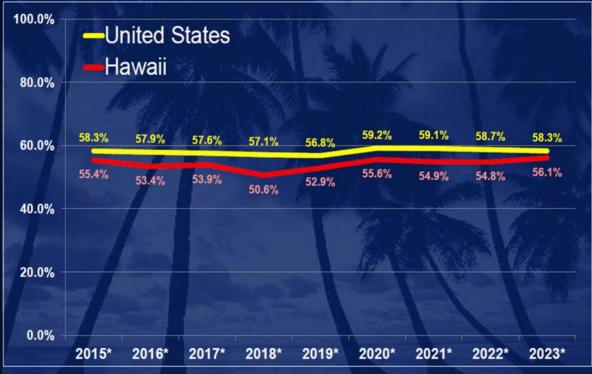
Hawaii EMS pre-hospital recognition of stroke among GWTG patients, 2022 - 8/2023 (n=2,622) Stroke recognition (74% overall): How stroke recognized - Did not significantly vary by patient sex or age, and no trend over time none ■3.narrative search ■2.Provider Impressions Most likely in Honolulu and Big Island patients (75%), lower for Maui ■1.positive screeners (70%) and Kauai (65%) More likely for Dispatch Complaint of "Stroke/CVA" (93% vs. 61% for other Complaints) 41% More likely for ischemic (75%) or tia events (82%) than hemorrhagic (70%) - Lower for low severity strokes (69% for patients with NIHSS score 0-7), compared to other strokes (87%)



Strategy C₄



Annual proportion of stroke patients arriving by EMS, Hawaii vs. U.S., 2015-2023

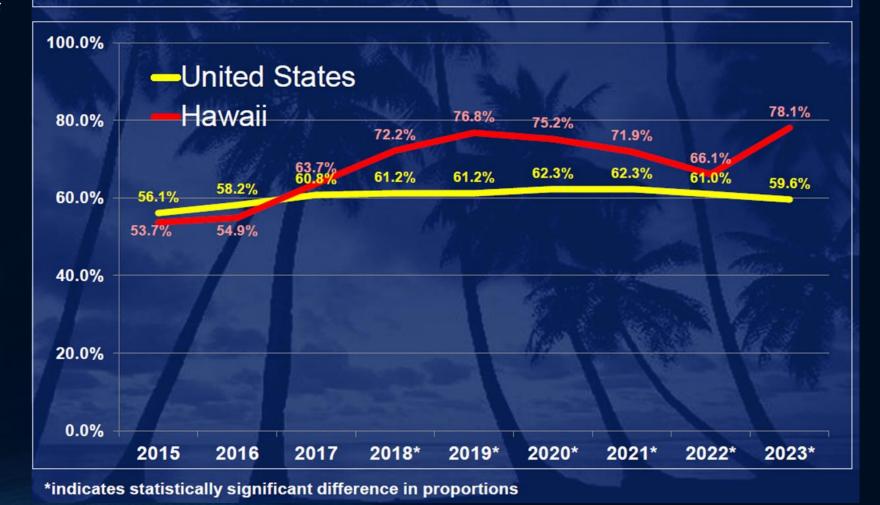


*indicates statistically significant difference in proportions

Strategy C6 Achievements

- Standing orders require a LAPSS done on all suspected stroke patients. If positive, CSTAT criteria are required in the patient chart (EHR). Results are stored in pre-hospital EHR.
- Hospital communication is required on all suspected stroke patients with reports of LAPSS and CSTAT status and last known well time.

Annual proportion advanced notification for stroke patients transported by EMS, Hawaii vs. U.S., 2015-2023



Strategy C7 Achievements





- In December 2022, the Hawai'i Stroke Coalition (HSC) in collaboration with the DOH held a Stroke Symposium for:
 - Healthcare providers to learn about recent advances in stroke care and treatment.
 - Community members to learn about stroke prevention, importance of calling 9-1-1, and hear from a stroke survivor.
 - Promote efforts of the Hawai'i Coverdell Program.

Strategy C7 Achievements, cont...

- BE FAST for Stroke Campaign
 - DOH and HSC partnered on a statewide stroke awareness campaign to develop consistent statewide messaging.
 - Information is being shared via print, digital, social media, mall ads, and on public buses.
 - DOH & HSC promote stroke prevention at various community events, by providing educational materials.







Bus Ads

face Drooping





Stroke care starts in the ambulance.

If someone suddenly has one or more of these stroke signs

CALL 9-1-1





For more information, visit BeFast.hawaii.gov



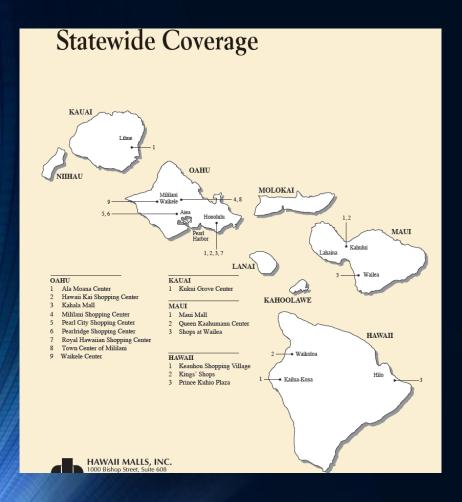








Mall Ads







Strategy C7 Achievements, cont...

- Stroke Media Project
 - DOH partnered with the HSC to film, develop, and disseminate various stroke educational video segments for a statewide stroke education media project.
 - One 30-minute educational video (informercial)
 - Two 30 second educational commercials (PSA commercials)
 - Living 8o8 lifestyle show
 - HI NOW Daily show

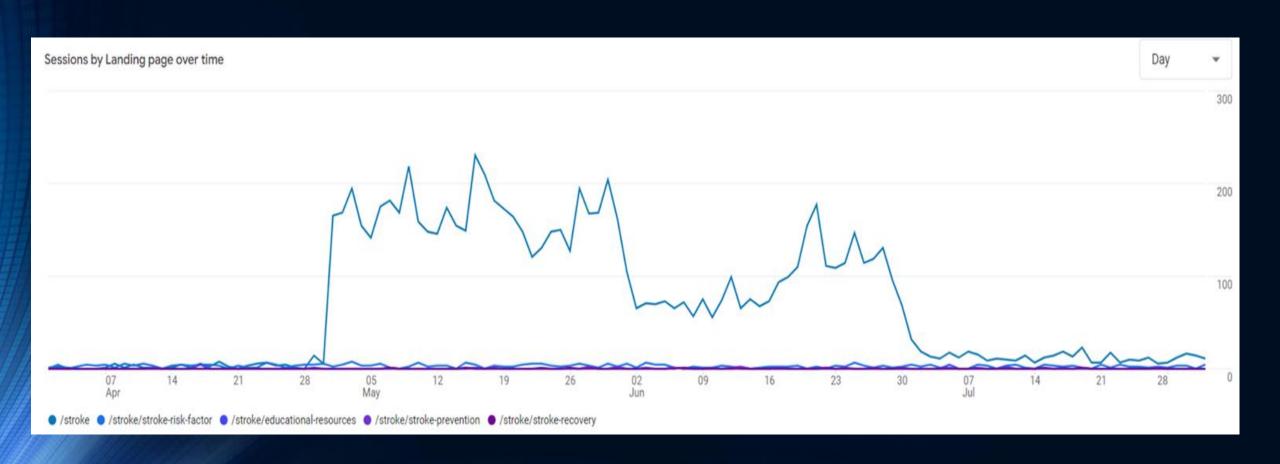








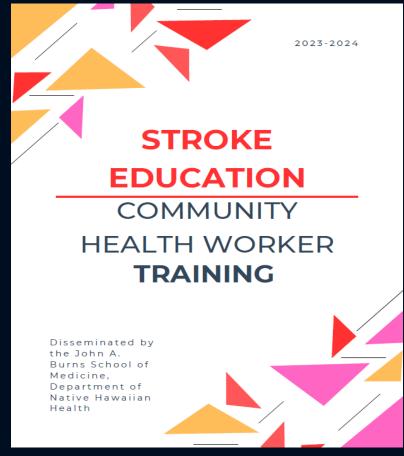
BeFast.hawaii.gov Webpage Visits (May-July 2024)



195 CHWs trained

Strategy C8 Achievements

- UH-DNHH Stroke 101 Training Project
 - Training CHWs to provide education on stroke and increase the number of CHWs trained to deliver stroke prevention education messages to NHOPIMF.
 - Culturally relevant curriculum solely for stroke.
- Project Outcomes
 - Deliver Stroke Prevention Education Training project across ten (10) partnered CBOs that serve NHOPIMF communities.
 - Increase community resources and coordination of care for those at highest risk for stroke.
 - Decrease disparities in quality and access to care/preventative health care services and programs among NHOPIMF populations through linkage of community resources and clinical services.





Thank you!

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