



QuICR in Camrose!



Faculty/Presenter Disclosure

Faculty:

Dana Norton – Mgr of Rehab and Heart & Stroke Clinic Kim Roberts – Patient Care Manager Janice Throndson – Clinical Lead, Heart & Stroke Michelle Bowman – ER/ACC/ Floats Unit Manager Marcy Humphrey – DI Manager Dr. Chris Nichol - Physician

Relationships with commercial interests:

- Grants/Research Support: none
- Speakers Bureau/Honoraria: none
- Consulting Fees: none
- Other: none



Camrose

Population:

• City: 18 000

• County: 8000

economic catchment of 140 000

University of Alberta – Augustana

campus (1000 students)

7th largest centre in Alberta

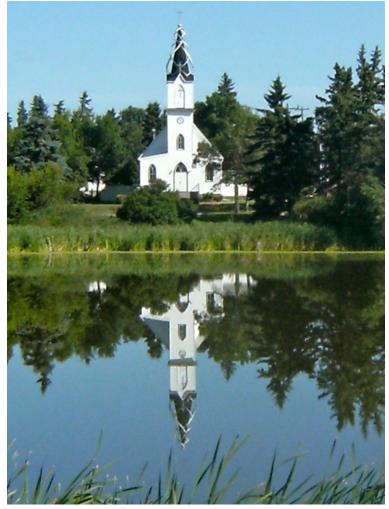
Located about:

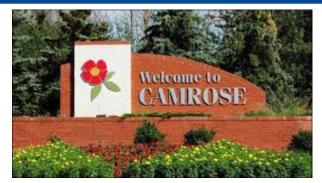
- 1 hour south east of Edmonton
- 1 1/4 hr north east of Red Deer





Camrose













St Mary's Hospital - Camrose

•Hospital:

- 76 inpatient beds
- 400 staff
- 24 hour Emergency Care
- DI Dept: 24 hr coverage with on-call services
- on-site Heart and Stroke team





SMH – DTN Data – 2014-15

ER Visits 17,931 Stroke (incl TIA): 61 tPA: 12



SMH – DTN Data

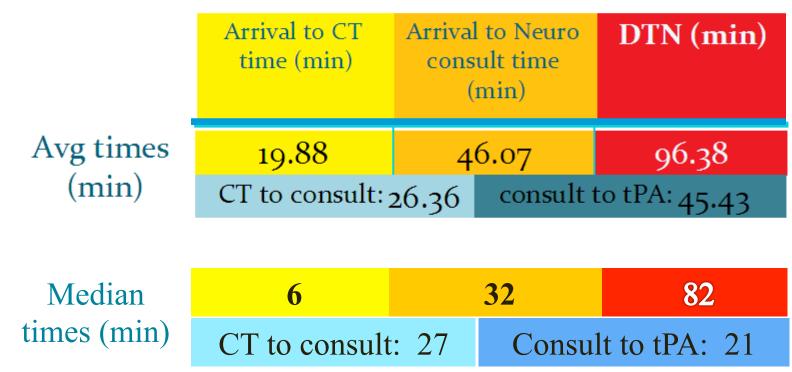
16 tPA clients – April 2014-Aug 2015 (16 mo)

| | Arrival to CT time (min) | Arrival to Neuro consult time (min) | DTN (min) |
|--------|-------------------------------|---|---------------------|
| BEST! | О | 6 | 28 |
| | CT to consult: 6 consult to t | | PA: 22 |
| WORST! | 1 | 36 | 224 |
| | CT to consult: | consult to t | consult to tPA: 188 |



SMH – DTN Data

16 tPA clients – April 2014-Aug 2015



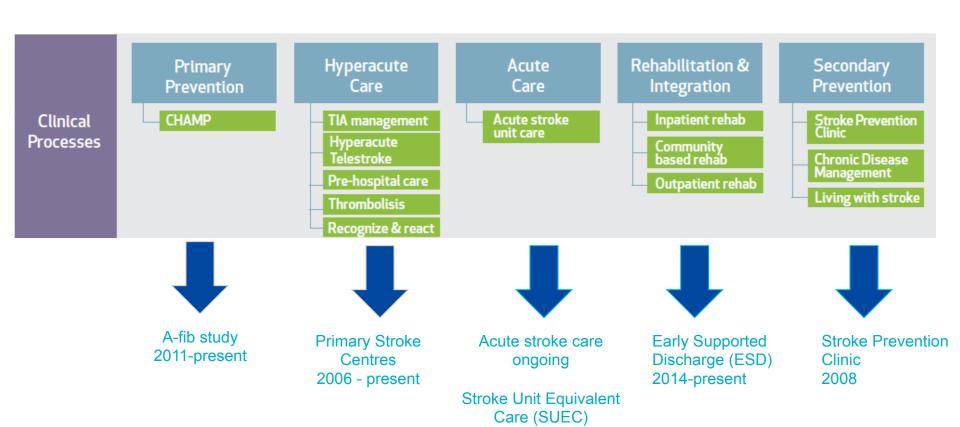


SMH – What makes us UNIQUE

- No on-site neurologist
- Heart and Stroke team
 - stroke navigation,
 - Assists in ER, best practice data tracking
 - stroke prevention clinic
 - Primary prevention initiative (a-fib)
 - Visiting neurologists
- ER staff training
 - E.g. all ER nurses trained for NIHSS



SMH – What makes us UNIQUE



enhancement 2014 - present



SMH – What makes us GREAT!

- Committed and engaged staff
 - EMS, ER staff, physicians, DI staff, Navigators
 - Supportive and trusting relationship with neurology staff in Edmonton
 - All Emergency nursing staff trained for NIHSS (improved knowledge for consulting neurologist)



SMH – What makes us GREAT!

- Small centre & Community Minded
 - Small team = great communication
 - Small site = short distances
 - 70 steps from Trauma room to CT scanner



SMH – What makes us GREAT!

- Willing to self-reflect and look critically at service delivery
 - Lean initiative in 2012
 - Chart audits and reviews
 - Ongoing review and dissemination of Canadian Best Practice guidelines
 - Ongoing education



SMH – What is holding us back

- Staff levels
 - ER current levels: 1 DR, 2 RN's
 - DI on-call over night

- Physician factors
 - Personal preferences
 - Reaching neurology via tele-stroke



SMH – What is holding us back

- EMS to hospital
 - Pre-registration to reduce revisions to pt file later
 - Geography
 - Bypass protocols
- ER factors
 - other ER events eg trauma, CVA
 - if ambulatory entry eg time to wait for triage (not factor for our site)



SMH – in a Perfect World....

- On site neurology (!!)
- •EMS pre-admissions (we can do this now and have done some)
- Increased staffing
 - ER: 3 RN's 24/shift
 - DI: 24hr on-site staffing
- Physician Engagement
- Updated DI technology



REAL

SMH – in a Perfect World....

- •On site neurology (!!)
- EMS pre-admissions
- Increased staffing
 - ER: 3 RN's 24hr/shift
 - DI: 24hr on-site staffing
- Physician Engagement
- Updated DI technology

- Faster access to neurologist
- Increased staffing
 - ER: 3 RN's 24hr/shift
 - DI: 24hr on-site staffing
- Physician Engagement
- DI update AHS capital equipment plan





Thank you from Camrose!