Clinical staff was surveyed to determine a baseline understanding of the current stroke alert process and the perceived barriers in the activation of the Stroke Alert process.

Four questions were asked:
1. How do you call a Stroke Alert?
2. Are there any barriers to calling a Stroke Alert? If so, what are they?
3. Have you ever called a Stroke Alert?
4. Would you feel comfortable calling a Stroke Alert?

Results of the survey were analyzed by the Neuro Champion Group and an educational plan was developed and implemented.

Poster presentations were created to educate the hospital clinical staff by the neuro champions addressing key knowledge gaps highlighted by the survey.

In our mission to improve the identification and treatment of in-hospital strokes, the Neuro Champion Group has identified the following as immediate goals:
- Continue re-education of front-line staff on the Stroke Alert process with the goal of maintaining a high level of awareness and increasing the percentage of staff that would be comfortable calling a Stroke Alert (currently ~90%)
- Identify means to reach newly hired staff to ensure their awareness of the processes in place
- Duplicate the model to assist in elevating nursing practice in other patient-focused quality measures

Special thanks to the Neuroscience leadership for their guidance and encouragement and to the Nurse Managers of Washington Township for their support of the group's efforts.

Acknowledgement

In the initial survey, 68% of respondents felt there were barriers to calling a Stroke Alert. Following the education, only 25% reported barriers.

Six months prior to the educational campaign, 56 Stroke Alerts were called hospital-wide. Six months following the campaign, Stroke Alert calls increased to 92.

Education was provided to each unit in the hospital, including the Imaging Departments by the unit-specific Neuro Group Champion designee.

Background
- Stroke is the fourth leading cause of death and is the leading cause of long-term disability among adults.
- Of the 795,000 patients that suffer a stroke each year, approximately 35,000 to 75,000 (4%-17%) occur while the patient is hospitalized for non-neurologic diagnoses.
- Time to treatment for in-hospital strokes can be significantly longer in comparison to strokes presenting to the Emergency Departments.
- The Neuro Champions at Washington Township recognized a need to implement a plan to improve the staff's recognition and treatment of in-hospital stroke.

Objectives
- To highlight the performance improvement project developed and implemented by the Interdisciplinary Neuroscience Champion Group.
- To identify and remove the obstacles associated with the activation of the In-Patient Stroke Alert process through education of front-line staff.

Methods
- Clinical staff was surveyed to determine a baseline understanding of the current stroke alert process and the perceived barriers in the activation of the Stroke Alert process.
- Four questions were asked:
  1. How do you call a Stroke Alert?
  2. Are there any barriers to calling a Stroke Alert? If so, what are they?
  3. Have you ever called a Stroke Alert?
  4. Would you feel comfortable calling a Stroke Alert?
- Results of the survey were analyzed by the Neuro Champion Group and an educational plan was developed and implemented.
- Poster presentations were created to educate the hospital clinical staff by the neuro champions addressing key knowledge gaps highlighted by the survey.

Evaluation
- In the initial survey, 68% of respondents felt there were barriers to calling a Stroke Alert. Following the education, only 25% reported barriers.
- Six months prior to the educational campaign, 56 Stroke Alerts were called hospital-wide. Six months following the campaign, Stroke Alert calls increased to 92.
- Education was provided to each unit in the hospital, including the Imaging Departments by the unit-specific Neuro Group Champion designee.

Implications for Practice
- In our mission to improve the identification and treatment of in-hospital strokes, the Neuro Champion Group has identified the following as immediate goals:
  - Continue re-education of front-line staff on the Stroke Alert process with the goal of maintaining a high level of awareness and increasing the percentage of staff that would be comfortable calling a Stroke Alert (currently ~90%)
  - Identify means to reach newly hired staff to ensure their awareness of the processes in place
  - Duplicate the model to assist in elevating nursing practice in other patient-focused quality measures.

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