

## *STROKE ALERT TRANSPORT*

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<b>Desired Outcome</b>	All patients who need and accept medical care related to a Stroke Alert are transported to an appropriate stroke specialty care facility.
<b>Standard</b>	≥ 90% Patients with EMS identified Stroke Alert will be transported to appropriate specialty care facility or have documented reason for exception.
<b>Acceptable Quality Level</b>	Performance may not fall more than 3% for more than two consecutive months or any three months in a year.
<b>Monitoring Method</b>	Run Chart updated by 10th business day each month.

### *MEASURE DESCRIPTION*

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<b>Indicator Description</b>	This indicator measures the percentage of patients who are experiencing a stroke and accept care by EMS who are taken to an appropriate stroke specialty care facility.
<b>Question Indicator Answers</b>	What is the percentage of patients who are experiencing a stroke and accept care by EMS are taken to an appropriate stroke specialty care facility?
<b>Patient / Customer Need</b>	Patients who are experiencing a stroke need to be taken to a designated stroke specialty care facility that will be able to provide definitive care in the most appropriate method based on the patient's condition.
<b>Type of Measure</b>	Intermediate Outcome
<b>Objective</b>	All patients who need and accept medical care related to a Stroke Alert are transported to an appropriate stroke specialty care facility.
<b>Data Provided By</b>	Clinical Performance Management
<b>Reporting Values</b>	Percentage of patients documented as meeting stroke alert criteria who are transported to an appropriate receiving facility.
<b>Limitations</b>	This indicator is limited to those patients contacted by ATCEMS outside a clinical setting.
<b>Notes</b>	None

## Measure Calculation

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<b>Formula Description</b>	Count of patients meeting stroke alert criteria who are transported to an approved receiving facility or have a documented reason for exception, divided by the count of all patients meeting stroke alert criteria.  The resulting measure is expressed as a percentage.
<b>Indicator Formula</b>	$\text{Percentage} = \frac{\text{count}([\text{patients transported to stroke center}])}{\text{count}([\text{patients meeting Stroke Alert criteria}])}$
<b>Data Filters</b>	Include only patients identified in ePCR data as meeting stroke alert criteria  Exclude patients who are not transported to a receiving facility.
<b>Interval Calculation</b>	Not Applicable
<b>Numerator</b>	<p><i>Population</i> Count of patients who meet Stroke Alert criteria and meet one of the following:</p> <ul style="list-style-type: none"><li>• Transported to an approved receiving facility, OR</li><li>• Personnel have documented a reason for exception to transport to an approved receiving facility</li></ul> <p><i>Inclusion</i> See “Population”</p> <p><i>Exclusion</i> Patients meeting Stroke Alert criteria who are not transported by ATCEMS.  Patients with an incident problem type of “Emergency Transfer” or “Attended Patient.”  Patients transported to another facility per physician orders.</p> <p><i>Data Source</i> Clinical Performance Management performance report.</p>
<b>Denominator</b>	<p><i>Population</i> Count of patients meeting Stroke Alert criteria who are transported to a receiving facility.</p> <p><i>Inclusion</i> See above.</p> <p><i>Exclusion</i> Patients meeting Stroke Alert criteria who are not transported by ATCEMS.  Patients with an incident problem type of “Emergency Transfer” or “Attended Patient.”</p>

Patients transported to another facility per physician orders.

*Data Source* Clinical Performance Management performance report.

**Aggregation** Aggregate incidents by month based on date/time of phone pickup in Communications.

**Stratification** None

**Minimum Sample Size** None

**Data Lineage** Patients meeting Stroke Alert criteria are queried from ATCEMS ePCR data. Charts of patients who are not transported to an approved stroke receiving facility are retrieved and reviewed to identify those meeting exclusion criteria.

## *Reporting*

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**Travis County ILA Reporting** **Medium:** Web site chart  
**Orientation:** External  
**Format:** Run chart containing monthly data values for most recent 13 month period.  
**Update Frequency:** Monthly  
**Data Source:** Clinical Performance Management performance report.

## *Metadata*

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**Pillar / Strategic Objective Links** S2: To have a service delivery model that best serves the needs of our community.  
S3: To be an organization that puts service before self.  
F2: To be an organization that provides value to the community.  
F3: To provide quality cost efficient service to the community.

**Development Status** New indicator.

**References** *Interlocal Agreement Between the City of Austin and Travis County for Emergency Medical Services (Fiscal Year 2014)*

Adams HP, et al, "Guidelines for the Early Management of Adults With Ischemic Stroke." *Circulation*, 2007; 115: e478-e534. Available at <http://circ.ahajournals.org/content/115/20/e478>

## Best Practices

From Adams (2007):

“The benefits of EMS activation by patients with stroke symptoms appear to occur in both the prehospital and in-hospital settings. Hospital arrival is faster for patients who use EMS/9-1-1 as their initial medical contact than for those who contact their primary physician or hospital directly (p. 1657).”

## Definition Version Info

Version C; 2014-03-06