

GWTG – Stroke Registry Programs Patient Management Tool (PMT) Updates

Release Date:May 26, 2021Impacted Users:EMS Layer Users

Mission: Lifeline Stroke Regional Reports

Background

The concept of Mission: Lifeline was first implemented in STEMI care in 2007 with the first Mission: Lifeline STEMI Report debuting in 2010. Since inception, the reports have been the standard for administering System of Care Quality Improvement by providing a single view of multiple care settings for multiple system stakeholders.

By participating in a Mission: Lifeline Region, system of care stakeholders are able to see both a site level and an aggregated view of a region's stroke care performance. Enabling these reports allow for scalable quality improvement initiatives to be initiated at the state, local, regional, or site level.

Reports are generated in real time to ensure the most up to date data is available and facilitate rapid cycle quality improvement.

New Feature

- All hospitals with the EMS Layer active on May 26th will automatically have this new feature added to their tool with this release.
- Initially, these reports can be used to review how your hospital performs with these metrics against other existing benchmarks that your hospital already compares itself to.
- Once released, your system or region can elect to set up a Regional Benchmark to review these reports on a regional level, with each hospital in your region displaying blinded and separately.

How Can My Hospital Use These Reports?

- Any hospital that collects prehospital data can use these reports for the enhanced visualization and case lists.
- If your facility elects to join a "Region," this can be used to look at blinded data from other sites in your region to review and improve system performance.
- To Join a Region:
 - Connect with your local AHA QI Manager. If you are not sure who that is, email <u>GWTGSupport@heart.org</u>. They will assist in building a region.
 - Complete a permission form provided to you by your AHA QI Manager to have your hospital's blinded data shared within your region.
 - Once 3 or more hospitals have agreed to participate in a region by completing a permission form, a new option will be available for you to view system data across that region.



Report Configuration

- Following the update, a new link will display at the bottom of the Reports tab of the PMT called "Stroke Mission: Lifeline Reports."
- Reports can be configured by:
 - o Date Range
 - Measure
 - ML Region (Blinded Sites) These are not yet built and require permissions! See page 1 for instructions on how to get these regions set up.
 - o ML Region Aggregate
 - Other Benchmarks (All hospitals, State, Region, STK, TJC Certified, etc.)

	Stroke Mission: Lifeline® Report This report provides the ability to select your own parameters for the Mission:Lifeline® regional report.					
	TIME PERIOD					
	Interval:	Monthly V Aggregate				
	From:	2021 🗸 Jan 🖌				
Site-Level Reports	To:	2021 V Mar V				
Configurable Measure Reports Build your own Quality Measure Reports	MEASURES					
Pre-Defined Measure Reports Select from the Most Common Measure Reports or run your previously saved report types.		 My Facility M:L Report M:L Prehospital Rate-Based Measures IV Thrombolytic Arrive by 3.5 Hour, Treat by 4.5 Hour Means of Arrival Time to Interveneeur Thrombolytic Therapy. 60 min Means of Arrival 				
PMT Patient List Provides a list of patient records entered for this study.		Median Door to CT Time and Means of Arrival FMC to Thrombolytic (Stacked Median)				
Stroke (STK) Initial Patient Population Report STK Initial Patient Population and Sample Count Report	All Reports	Door to Device in <= 60 minutes for transfers, OR <= 90 minutes for direct presentation EMS FMC to Device Time (Stacked Median)				
Patient Time Tracker Report Provides time tracking for patient records entered for this study.		 Median Door-in-Door-Out Time and Means of Arrival Stroke Screen Performed and Reported Stroke Severity Screen Performed and Reported - Rate Based 				
Due to the size of this report, unfortunately, our Print to PDF feature is not well supported for this report at this time. In order to print this report more effectively, please use the "Export to Excel" feature in the top right hand corner of the report and print from Excel.		 On-Scene Times <=15 minutes for Suspected Stroke Median On-Scene Time for Suspected Stroke Documentation of Time LKW Identification of Suspected Strokes - Rate Based Evaluation of Blood Glucose 				
Stroke InSights Data Quality Report	MISSION: LIFELINE REGION(S)					
Stroke Mortality Report	Example ML Region	Regional Aggregate Blinded Facilities				
EMS Feedback Log	BENCHMARKS					
Provides the feedback details of the patients entered for the stu	My Hospital					
Data Quality Poview	0 - 100 Discharges Hospital					
Submission Errors identified by QualityNet and The Joint Commission.	0 - 99 Bed Hospital					
GWTG On Demand Trend Reports GWTG - Stroke On Demand Trend Reports and Slipp						
Mission: Lifeline® Reports						
Stroke Mission: Lifeline® Report This report provides the ability to select your own parameters for the Mission:Lifeline® regional report.						



Report Design

- Page 1 of the report presents the site with a tabular view of demographics, care, and outcomes.
- The data is presented alongside State, Regional, and National aggregate distributions.
- Page 2 displays a breakdown of performance by your facility, State, and National benchmarks on a group of specific System of Care metrics (Prehospital and Target: Stroke).

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Bode		% Within 60 minutes	97%	86%	100%		
Doc		% Within 60 minutes (EMS Arrival)	100%	89%	100%		
Image: Product Arring of MS ON	Door-in-door out within 90 minutes	For MSU	0%	0%	0%		
Best MC to EVT Mode 0%		For Patients Arriving by EMS	0%	10%	0%		
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		Time to Intravenous Thrombolytic Therapy - 60 min	19		100%	0	0%



Measures Included

Each tab of the Mission: Lifeline Stroke Regional Report includes a visualization, measure details, and case list for the following metrics:

- 1. IV Thrombolytic Arrive by 3.5 Hour, Treat by 4.5 Hour Means of Arrival
- 2. Time to Intravenous Thrombolytic Therapy 60 min Means of Arrival
- 3. Median Door to CT Time and Means of Arrival
- 4. FMC to Thrombolytic (Stacked Median)
- 5. Door to Device Time
- 6. EMS FMC to Device Time (Stacked Median)
- 7. Median Door-in-Door-Out Time and Means of Arrival
- 8. Stroke Screen Performed and Documented
- 9. On Scene time ≤15 minutes for Suspected Stroke
- 10. Median On-Scene Time for Suspected Stroke
- 11. Documentation of LKW
- 12. Identification of Suspected Stroke
- 13. Evaluation of Blood Glucose

Visualizations

- Visualizations include blinded site performance and aggregate for the "Region" as well as National, State, or other benchmarks as applied during configuration.
- Participating sites are blinded a number that is only known by the site (circled below).
- Some Standard rate-based measures (ex: DTN <60) are presented with distributions of performance by arrival method (EMS/Private transport/Transfer) for enhanced QI review and system improvement.



Measure Results

- Measure details include the total number of patients, the numerator, denominator, and rate of performance for each facility and/or Benchmark selected.
- Table is easily exported to .csv/.xls for external analysis or review.
- Use of the measure results provides for easy performance break down of the measure and benchmark in a tabular format
- Measure details are designed to supplement the graphs and visualizations.

Details						
BENCHMARK	Time Period	Arrival Mode	Total Patients	Numerator	Denominator	% of Patients
2323	2020.00	EMS or MSU	28	14	18	77.8%
		Private transport / Walk	28	2	2	100.0%
		Transfer	28	1	1	100.0%
6193	2020.00	EMS or MSU	35	15	19	78.9%
		Private transport / Walk	35	2	2	100.0%
		Transfer	35	2	2	100.0%
6195	2020.00	EMS or MSU	4	1	1	100.0%
		Private transport / Walk	4	2	2	100.0%
		Transfer	4	1	1	100.0%
6743	2020.00	EMS or MSU	33	19	23	82.6%
		Private transport / Walk	33	2	2	100.0%
		Transfer	33	1	1	100.0%
AHA ML Stroke Demo Region	2020.00	EMS or MSU	134	66	81	81.5%
		Private transport / Walk	134	10	10	100.0%

Integrated Case List

- For individual site data, each Measure also comes with a Case List.
- The Case Lists make it easy to identify performance outliers. This allows the system to zero in on cases where performance is below standard.
- Every element used for the calculation of a specific measure are included in the corresponding measures case list, including time calculations.
- The Case List is easily exported to .csv/.xls for external filtering, analysis, or combination with other data sets.

Case List															
Patient ID	Denominator	Exclusion	Numerator	Age:	Patient locati	Hospital Arriv	IV Thromboly	Clinical Trial	Cause for IV t	Cause for IV	Cause for IV	Final clinical	IV thrombolyt	When was th	A
210	х		х	61.00	Not in a health	01/01/2020 10	01/01/2020 10	No				Ischemic Stroke	Yes	01/01/2020 08	
EMS782		х		50.00	Not in a health	02/02/2020 14		No				Ischemic Stroke	No	02/02/2020 13	1
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EMS780		х		35.00	Not in a health	02/01/2020 14		No				Ischemic Stroke	No	02/01/2020 13	1
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EMS786	х		х	69.00	Not in a health	02/02/2020 14	02/02/2020 14	No		Initial refusal		Ischemic Stroke	Yes	02/02/2020 13	1
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EMS784		х		51.00	Not in a health	02/02/2020 14		No				Ischemic Stroke	No	02/02/2020 13	1
EMS785		х		84.00	Not in a health	02/02/2020 14		No				Ischemic Stroke	No	02/02/2020 13	•
EMS801	х		х	57.00	Not in a health	02/04/2020 14	02/04/2020 14	No		Initial refusal		Ischemic Stroke	Yes	02/04/2020 13	
EMS802	х		х	59.00	Not in a health	02/04/2020 14	02/04/2020 14	No		Initial refusal		Ischemic Stroke	Yes	02/04/2020 13	1
EMS788	х		х	73.00	Not in a health	02/03/2020 14	02/03/2020 14	No		Initial refusal		Ischemic Stroke	Yes	02/03/2020 13	1
EMS789	Х		х	59.00	Not in a health	02/03/2020 14	02/03/2020 14	No		Initial refusal		Ischemic Stroke	Yes	02/03/2020 13	N
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IV Thrombolytic	Arrive by 3.5 Hour,	Treat by 4.5 Hour	Means of Arrival	Time to Intraveno	ous Thrombolytic TI	herapy - 60 min Me	ans of Arrival	FMC to Thrombo	lytic (Stacked Media	in)					

Stacked Medians

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- To better understand the treatment times, Stacked Median graphs and Measure Details are used for specific FMC to Treatment goals.
 - Each segment of the graph displays a section of the Stroke Systems of Care:
 - FMC to Hospital Arrival
 - o Arrival to Brain Imaging
 - Brain Imaging to Treatment

