



Get With The Guidelines®- North Dakota Updates

October 26, 2023



Agenda

- Welcome
- 2024 GWTG Recognition Opportunities
- 2023 ND GWTG Recognition Recipients
- Rural Health Care Outcomes Accelerator
- ND GWTG State of the State of Stroke Care
- Upcoming Events







Get With The Guidelines®

Get With The Guidelines is a healthcare-based quality improvement program designed to ensure patient care is aligned with the latest research-based guidelines to improve patient outcomes.

GWTG CAD, Stroke and HF programs available for newly enrolling Rural Health Care Outcomes Accelerator participants.







To date, more than 7.1 million patient records have been entered into the Get With The Guidelines® - Stroke database. Improved patient outcomes attest to a quality impact as impressive as the quantity of lives touched by the program.



This inpatient quality program strives to improve outcomes for heart failure patients. The program is aligned with the 2022 Guideline for the Management of heart failure including the latest evidence based guideline-directed medical therapies.



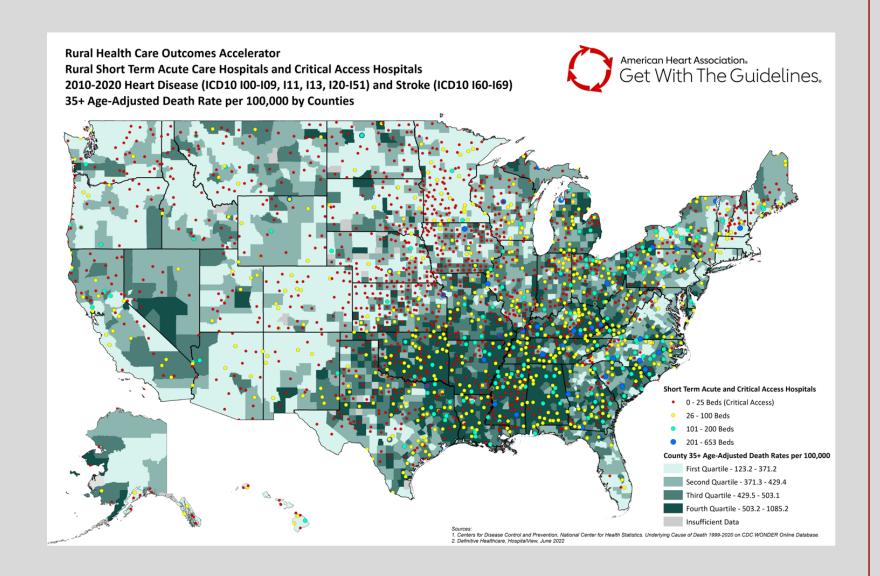
Get With The Guidelines® - CAD tracks AMI process data and supports both hospital quality improvement, as well as regional system of care work between EMS, Referring and Receving Hospitals.

heart.org/quality

ND GWTG® Participants

CURRENT GWTG® PARTICIPATION

- 42 ND HOSPITALS GWTG-STROKE
- 6 ND HOSPITALS GWTG-CAD
- 37 ARE RURAL HOSPITALS
- ND DHHS GWTG
 STROKE & CARDIAC
 SUPERUSER ALLOWS
 A GROUP OF
 HOSPITALS TO REPORT
 INTO AN AGGREGATE
 ACCOUNT.







GWTG-Stroke Recognition





QUALITY MEASURES + AWARD

≥75% on at least 4 measures *Must achieve Silver or Gold to be eligible

Dysphagia Screening (AHASTR8)

Stroke Education (AHASTR12)

NIHSS Reported (AHASTR10)

Door to Needle \$60 minutes (AHASTR13

TARGET: STROKE

(Minimum of 6 patients to be eligible)

Door-to-Needle ≤60 minutes

HONOR ROLL ELITE

Door-to-Needle ≤60 minutes HONOR ROLL ELITE PLUS

HONOR BOLL ADVANCED THERAPY

Door-to-Device \$90 minutes \$60 minutes for Transfer Patients for Direct Arriving Patients (Within 6 hours or 24 hours)

Door-to-Needle ≤30 minutes

(AHASTR48)

Door-to-Needle ≤45 minutes

(AHASTR49)

sessed for Rehabilitation (AHASTR11 LDL Documented (AHASTR9)

Target: Type 2 Diabetes







 Be the same calendar year as your eligible achievement award 2 Include the same patient population as is included in the eligible achievement

Get With The Guidelines.

THE AWARD REPORTING PERIOD MUST:

Hospital Must Qualify for Silver Level or Higher Achievement Award

≥10 Patients with a New Onset or Previous History of Diabetes

Overall Diabetes Cardiovascular Initiative Composite Score (AHASTR150) criteria: ≥ 80% Compliance for 12 Consecutive Months

Get With The Guidelines.

IV Thrombolytics Arrive by 3.5 hours / Treat by 4.5 hours (AHASTR149)

Early Antithrombotics for Patients With Diabetes (AHASTR148)

VTE Prophylaxis (AHASTR154)

Antithrombotic Prescribed at Discharge (AHASTR145)

Anticoagulation Prescribed for AFib/AFlutter at Discharge (AHASTR144)

Smoking Cessation (AHASTR151)

ntensive Statin Prescribed at Discharge (AHASTR298)

Diabetes Treatment (AHASTR130)

Therapeutic Lifestyle Changes (TLC) Recommendations at Discharge (AHASTR153)

Antihyperglycemic Medication With Proven CVD Benefit (AHASTR146)

May 2023 | www.Heart.org/quality

Overall Diabetes Cardiovascular Initiative Composite Score (AHACAD73) criteria:

≥ 75% Compliance for 12 Consecutive Months

ACE-I or ARB for LVSD at Discharge for Patients with Diabetes (AHACAD66)

Adult Smoking Cessation Advice for Patients with Diabetes (AHACAD67)

> Antihyperglycemic Medication with Proven CVD Benefit (AHACAD74)

Aspirin at Discharge for Patients with Diabetes

Beta-Blocker at Discharge for Patients with

Cardiac Rehabilitation Patient Referral from an Inpatient Setting (AHACAD70)

Dual Antiplatelet Therapy Prescribed at Discharge (AHACAD71)

High-Intensity Statin at Discharge (AHACAD72)

Overall Diabetes Cardiovascular Initiative Composite Score criteria: ≥ 75% Compliance for 12 Consecutive Months
(Calendar Year)

ACEI/ARBs or ARNI at Discharge (AHAHF77)

Evidence-Based Beta Blocker Prescribed at Discharge (AHAHF78)

Post-Discharge Appointment Scheduled

Smoking Cessation (AHAHF82)

Left Ventricular Function Assessed (AHAHF79)

Lipid-Lowering Medication Prescribed at Discharge (AHAHF81)

Diabetes Treatment (AHAHF26)

Antihyperglycemic Medication With Proven CVD Benefit (AHAHF84)







Four or more



One calendar quarte and ≥1 stroke or TIA

Rural Acute Stroke Composite Score Criteria: At least 75% Compliance

Time to Intravenous Thrombolytic Therapy ≤ 60 minutes (AHASTR13)

Door-In/Door-Out Time at First Hospital Prior to Transfer for Acute Therapy ≤ 90 Minutes (AHASTR27)

> National Institutes of Health Stroke Scale (NIHSS) Reported (AHASTR10)

> > Door to CT ≤ 25 min (AHASTR305)

Dysphagia Screen (AHASTR306)

Documentation of Last Known Well or Time of Discovery of Stroke Symptoms (AHASTR270)

IV Thrombolytic Therapy Arrive by 3.5 Hours Treat by 4.5 Hours (AHASTR5)

EMS Pre-notification (AHASTR39)

Non-Contrast Brain CT or MRI Interpreted Within 45 Minutes of Arrival (AHASTR272)







Federally Designated Critical Access Hospitals

Short Term Acute Care Facility and Rural Hospital located within Rural Urban Commuting Area Codes (RUCA) indicating large rural, small rural and







Rural Acute Non ST-Elevation Acute Coronary Syndrome (NSTE-ACS) Composite Score Criteria:

At least 75% Compliance (AHACADES

12 Lead ECG (Electrocardiogram)

Early Cardiac Troponin Results Within

Risk Stratification of NSTE-ACS Patients (AHACAD101)

Low-Risk NSTE-ACS Follow Up Appointment (AHACAD100

High-Risk NSTE-ACS Anticoagulant Administration Prior to Transfer (AHACAD97)

High-risk NSTE-ACS Transfer to utaneous Coronary Intervention (PCI)
Center Within 6 Hours (AHACAD98)







Rural Acute ST-Elevation Myocardial Infarction (STEMI) Composite Score Criteria: At least 75% Compliance (AHACADS

12 Lead ECG Within 10 Minutes of Arrival (AHACAD91)

STEMI-Positive 12 Lead ECG to Interfacility

Aspirin on Arrival or Prior to Transfer (AHACAD90) Arrival or Subsequent STEMI-Positive 12 Lead (Door-In/Door-Out) (AHACAD88)

IV Thrombolutic Therapu Within

P2Y12 Receptor Inhibitor Administered Prior to Transfer (AHACAD92)

MISSION: LIFELINE STEMI REFERRING HOSPITAL









· VOLUME CRITERIA







THE AWARD REPORTING PERIOD MUST:

GWTG-CAD

Recognition

- Be the same calendar year as your eligible achievement award
- Include the same patient population as is included in the eligible achievement award



Hospital Must Qualify for Silver Level or Higher Achievement Award

2024

CRITERIA

(based on 2023 data

HOSPITAL RECOGN

≥10 Patients with a New Onset or Previous History of Diabetes

Overall Diabetes Cardiovascular Initiative Composite Score (AHASTR150) criteria:

IV Thrombolytics rrive by 3.5 hours / Treat by 4.5 hours (AHASTR149)

Early Antithrombotics for Patients With Dighetes (AHASTR148)

VTE Prophylaxis (AHASTR154)

ntithrombotic Prescribed at Discharge (AHASTR145)

Anticoagulation Prescribed for AFib/AFlutter at Discharge (AHASTR144)

Overall Diabetes Cardiovascular Initiative Composite Score (AHACAD73) criteria: ≥ 75% Compliance for 12 Consecutive Months

ACE-I or ARB for LVSD at Discharge for Patients with Diabetes (AHACAD66)

Adult Smoking Cessation Advice for Patients with Dighetes (AHACAD67)

Antihuperalucemic Medication with Proven CVD Renefit (AHACAD74)

Aspirin at Discharge for Patients with Diabetes

Beta-Blocker at Discharge for Patients with Diabetes (AHACAD69)

ACEI/ARBs or ARNI at Discharge (AHAHF77)

Evidence-Based Beta Blocker Prescribed at Discharge (AHAHF78)

Post-Discharge Appointment Scheduled (AHAHF80)

Smoking Cessation (AHAHF82)

Left Ventricular Function Assessed (AHAHF79)

Lipid-Lowering Medication Prescribed at Discharge (AHAHF81)

AWARD LEVELS

(based on 2023 data)

120 minutes

MISSION: LIFELINE STEMI RECEIVING CENTER







most up-to-date evidence-based treatment guidelines to improve care and outcomes in the communities they serve.

Prehospital personnel are the first providers of care to patients suffering from cardiac emergencies. The role of EMS in the system-of-care for these patients is crucial and often sets the course for the patient's

2024 MS RECOGNITION CRITERIA (based on 2023 data)

Mission: Lifeline EMS Award

AHAEMS1	Pre-arrival notification for suspected stroke	
AHAEMS2	Documentation of last known well for patients with suspected stroke	GOLD
AHAEMS3	Evaluation of blood glucose for patients with suspected stroke	Aggregated annu
AHAEMS4	Stroke Screen Performed and Documented	compliance of >75% f required measures and or Gold award in 20
AHAEMS5	12-lead ECG performed within 10 minutes for suspected heart attack	_
AHAEMS6	Aspirin administration for STEMI-positive ECG	SILVER
AHAEMS7	Pre-arrival notification ≤ 10 minutes for STEMI positive ECG	
	eria: At least 4 patients for the calendar year tient and >1 Stroke Patient)	Aggregated annu compliance of \$75% for required measure

Mission: Lifeline System of Care Target Heart

AHAEMS8 EMS First Medical Contact (FMC) to PCI ≤ 90



Congratulations Get With The Guidelines® Gold & Silver Recipients!

How to find heart and stroke care near you, measured by the American Heart Association

> Every patient deserves access to high-quality heart and stroke care, regardless of where they live. Each year, the American Heart Association recognizes hospitals across the country - from rural areas to the most populated cities - for consistently following up-to-date, research-based treatment guidelines for cardiovascular disease. These hospitals maintain unrelenting standards to help patients live longer, healthle lives and have the opportunity for a higher quality of life. Read more about this recognition from the American Heart Association and find an award-winning hospital near you.



any year since 2003, with

In 2020, more people died from

Guidelines, a 20-plus vea effort to bring research-bas stroke patients.



ardiovascular health for all, including identifying and care access and quality.

Bismarck CHI St. Alexius Health Bismarck







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These hospitals are recognized for achieving 65% adherence to Dual Antiplatelet prescription at discharge and 85% or higher compliance on each of the four performance measures for two or more consecutive calendar vears.



Get With The Guidelines: Gold Plus Achievement

These hospitals are recognized for two or more consecutive calendar years of 85% or higher adherence on all achievement measures applicable and 75% or higher adherence with additional select quality measures in stroke.



A national honor roll program for hospitals participating in Get With The Guidelines® (HF, Stroke) to reinforce evidence-based guidelines with hospitals that qualify for a Silver level or higher achievement award in the related Get With The Guidelines module. These hospitals must be able to demonstrate adherence for 12 consecutive months (calendar year) for the "Overall Diabetes Cardiovascular Initiative Composite Score" measure in the selected module.



Target: Stroke™ Honor Roll Elite

These hospitals are recognized for treating 85% or more of their eligible stroke patients in 60 minutes or less* in addition to their current Gold or Silver Get With The Guidelines®-Stroke status. *Door to Treatment Time Essentia Health







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D E G+



Target: Type 2 Diabetes™ Honor Roll



A national honor roll program for hospitals participating in Get With The Guidelines® (HF, Stroke) to reinforce evidence-based guidelines with hospitals that qualify for a Silver level or higher achievement award in the related Get With The Guidelines module. These hospitals must be able to demonstrate adherence for 12 consecutive months (calendar year) for the "Overall Diabetes Cardiovascular Initiative Composite Score" measure in the selected module.



Target: Stroke™ Honor Roll Elite

These hospitals are recognized for treating 85% or more of their eligible stroke patients in 60 minutes or less* in addition to their current Gold or Silver Get With The Guidelines®-Stroke status. *Door to Treatment Time



Get With The Guidelines: Gold Plus Achievement

These hospitals are recognized for two or more consecutive calendar years of 85% or higher adherence on all achievement measures applicable and 75% or higher adherence with additional select quality measures in stroke.



Get With The Guidelines: Gold Plus Achievement

These hospitals are recognized for two or more consecutive calendar years of 85% or higher adherence on all achievement measures applicable and 75% or higher adherence with additional select quality measures in heart failure.



Target: Heart Failure™ Honor Roll

These hospitals are recognized for 50% or higher adherence to all relevant Target measures in addition to their current Gold or Silver Get With The Guidelines®-Heart Failure status.

Grand Forks

Fargo

Altru Health System



Target: Type 2 Diabetes™ Honor Roll

A national honor roll program for hospitals participating in Get With The Guidelines® (HF, Stroke) to reinforce evidence-based guidelines with hospitals that qualify for a Silver level or higher achievement award in the related Get With The Guidelines module. These hospitals must be able to demonstrate adherence for 12 consecutive months (calendar year) for the "Overall Diabetes Cardiovascular Initiative Composite Score" measure in the selected module.



Target: Stroke™ Honor Roll Elite

These hospitals are recognized for treating 85% or more of their eligible stroke patients in 60 minutes or less* in addition to their current Gold or Silver Get With The Guidelines®-Stroke status. *Door to Treatment Time



Get With The Guidelines: Gold Plus Achievement

These hospitals are recognized for two or more consecutive calendar years of 85% or higher adherence on all achievement measures applicable and 75% or higher adherence with additional select quality measures in stroke.



Sanford Medical Center Fargo









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Target: Stroke™ Honor Roll Elite Plus

These hospitals are recognized for treating 75% or more of their eligible stroke patients in 45 minutes or less* AND 50% of their eligible stroke patients in 30 minutes or less,* in addition to their current Gold or Silver Get With The Guidelines®-Stroke status. *Door to Treatment Time

These hospitals are recognized for two or more consecutive calendar years of 85% or higher adherence on all achievement measures applicable and

75% or higher adherence with additional select quality measures in stroke.

Get With The Guidelines: Gold Plus Achievement







Trinity Health

These hospitals are recognized for one calendar year of 85% or higher adherence on all achievement measures applicable and 75% or higher adherence with additional select quality measures in stroke.

Valley City

Minot

CHI Mercy Health - Valley City





STEMI: Silver Plus Referring

These hospitals are recognized for compliance to Door In / Door Out in 30 minutes or less for transferred STEMI patients for one calendar year, in addition to current Silver Mission: Lifeline status.

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selected module.

In addition to participating in Get With The Guidelines®-Stroke measuring these hospitals are recognized for Door To Device (DTD) times in at least 50% of applicable patients within 90 minutes for direct arriving and within 60 minutes for transfers.



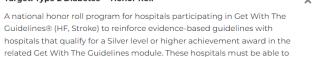






A national honor roll program for hospitals participating in Get With The Guidelines® (HF, Stroke) to reinforce evidence-based guidelines with hospitals that qualify for a Silver level or higher achievement award in the related Get With The Guidelines module. These hospitals must be able to demonstrate adherence for 12 consecutive months (calendar year) for the "Overall Diabetes Cardiovascular Initiative Composite Score" measure in the

Target: Type 2 Diabetes™ Honor Roll



related Get With The Guidelines module. These hospitals must be able to demonstrate adherence for 12 consecutive months (calendar year) for the "Overall Diabetes Cardiovascular Initiative Composite Score" measure in the selected module

Target: Stroke™ Honor Roll Elite

These hospitals are recognized for treating 85% or more of their eligible stroke patients in 60 minutes or less* in addition to their current Gold or Silver Get With The Guidelines®-Stroke status, *Door to Treatment Time



Get With The Guidelines.

Get With The Guidelines: Gold Plus Achievement

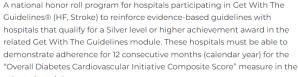
These hospitals are recognized for two or more consecutive calendar years of 85% or higher adherence on all achievement measures applicable and 75% or higher adherence with additional select quality measures in stroke.

Jamestown Regional Medical Center Jamestown



Target: Type 2 Diabetes™ Honor Roll

Guidelines® (HF, Stroke) to reinforce evidence-based guidelines with hospitals that qualify for a Silver level or higher achievement award in the related Get With The Guidelines module. These hospitals must be able to demonstrate adherence for 12 consecutive months (calendar year) for the "Overall Diabetes Cardiovascular Initiative Composite Score" measure in the selected module.



Get With The Guidelines: Gold Plus Achievement

These hospitals are recognized for two or more consecutive calendar years of 85% or higher adherence on all achievement measures applicable and 75% or higher adherence with additional select quality measures in stroke.





advertisement is now available here: The Road to a Healthy Heart Starts Here (usnewsbrandfuse.com)

The digital edition of the US News and World Report















CALL TO ACTION: RURAL HEALTH

Call to Action: Rural Health: A Presidential Advisory From the American Heart Association and American Stroke Association Originally published 10 Feb 2020 https://doi.org/10.1161/CIR.000000000000753Circulation. 2020;141:e615-e644

According to the Call to Action: Rural Health: A Presidential Advisory from the American Heart Association and American Stroke Association published in February 2020

- In 2016 the American Public Health Association all cause mortality data shows a 20% rural disparity (847.7 versus 713.0 per 100,000)
- Rural residents in the U.S. have a 30% increased risk for stroke mortality compared with urban residents

American Heart Association.

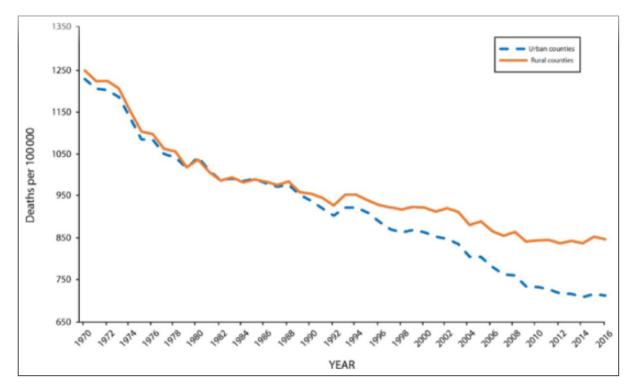


Figure 1. Trends in rural and urban age-adjusted (all-cause) mortality for the United States (1970–2016). Reproduced from Cosby et al⁷ with permission. Copyright © 2019, American Public Health Association.



Rural Health Care Outcomes Accelerator

Our Community, Our Priority.



Eligibility:

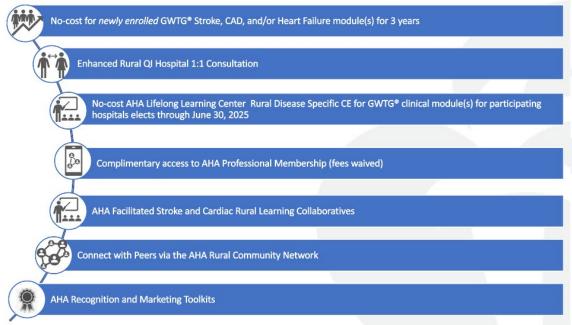
- Critical Access and/or Short-Term Acute Care Hospitals located within Rural Urban Commuting Area (RUCA) Classifications: Large Rural, Small Rural, or Isolated.
- New enrollment in Get with the Guidelines® - Stroke, Coronary Artery Disease (CAD) and/or Heart Failure

Rural Health Care Outcomes Accelerator

Working to ensure Americans living in rural areas have the best possible chance of survival and the highest quality of life attainable by promoting consistent, timely and appropriate evidence-based care.

Contact for More Information

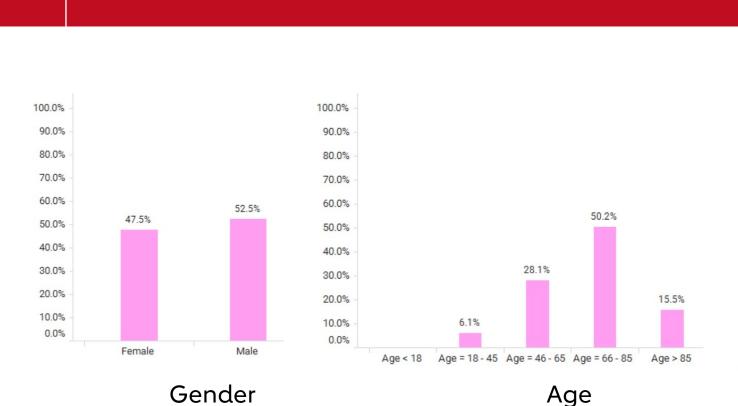


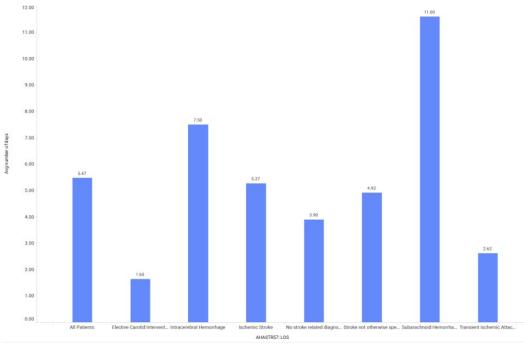


For more information on how to enroll in the Rural Health Care Outcomes Accelerator, please visit: heart.org/ruralaccelerator



ND Stroke Patient Demographics





Length of stay

Get With The Guidelines®-Stroke This work represents the authors' independent analysis of multicenter data gathered using the AHA Get With The Guidelines® (GWTG) IQVIA Registry Platform but is not an analysis of the national GWTG dataset and does not represent findings from the AHA GWTG National Program."





World Stroke Day









en el brazo o

una pierna.









Obten ayuda.

October 29, 2023

World Stroke Day | American Stroke Association







F.A.S.T. Infografía



5 Key Facts **About Stroke**



5 Hechos Clave Sobre el Ataque Cerebral



What to Do Instead of Having Another Stroke (PDF)

IAM Determined to Prevent **Another Stroke** Infographic

HEART OF STROKE

F.A.S.T. Quiz

How well can you detect the early warning signs of a stroke? Take our stroke guiz to find out! Your knowledge may save your life or the life of a loved one.

Begin Quiz





Thank you!

Mindy.Cook@heart.org