

Mission: Lifeline Stroke Montana - Post-Acute Care Initiative

Why are the American Heart Association and The Helmsley Charitable Trust focusing on quality care standards for stroke patients in post-acute settings?

Together the American Heart Association (AHA) and The Helmsley Charitable Trust seek to standardize and increase the quality of care delivered to stroke survivors in Montana's post-acute care settings. The post-acute phase of stroke care is a promising domain for reducing disability, prolonging, and saving lives. Over 90% of stroke patients experience some form of disability, and more than 11% suffer a second stroke within a year. Targeted, high-quality post-stroke recovery, rehabilitation and secondary prevention (hereafter abbreviated to post-acute care) interventions, customized to patient needs, have shown to dramatically improve recovery of function lost during the stroke and reduce the risk of secondary effects.

Despite the high impact opportunity it presents for patients, post-acute care is frequently siloed from the rest of the health care system and inconsistent across care delivery settings. The disjointed landscape can lead to high rates of hospital readmissions, variability and gaps in care coordination, and suboptimal outcomes for patients.

What is the goal of this initiative?

The aim of the Mission: Lifeline Stroke Montana - Post-Acute Care Initiative is to equitably increase stroke patients' access to high-quality post-acute care that can improve and prolong their lives. As a foundational step towards this goal, the AHA developed quality standards for post-acute care and now seek to validate those standards among facilities in Montana. The overall Mission: Lifeline Stroke initiative aims to create a sustainable and comprehensive system of stroke care from pre-hospital to hospital, to post-acute facility settings, extending high-quality guideline-directed care for all patients across their full stroke journey.

What is the post-acute care facility's role and time commitment?

Twenty post-acute care facilities in Montana will be invited to join this initiative, which will run through June 2022. During this time, participating facilities will be provided with informational resources and tools for success and partner with the AHA to implement and evaluate post-acute care quality standards.

This initiative is supported by an AHA program manager with assistance from other AHA Quality, Outcomes, Research & Analytics team members.

1-2 representatives from your facility will participate in learning collaborative conference calls to inform process improvement around the post-acute care quality standards. These meetings will vary in their frequency throughout the initiative but will most commonly be monthly.

What are the criteria to participate?

While many factors will determine the final makeup of the initiative, we are especially interested in the following facility characteristics:

- Provide inpatient stroke rehabilitation services at your facility.
- Agree to share information and data as part of this initiative.
- Have a desire to share best practices, solutions to workflow gaps, and participate in the initiative learning collaborative.

What is the benefit to the post-acute care facility for participating?

Facilities will receive a \$1,000 participation stipend. Other benefits include but are not limited to the following:

- Site-specific intensive quality improvement support throughout the entirety of this initiative.
- Working with leading national experts in neurology and stroke rehabilitation to build tools and share/create best practices to be disseminated coast-to-coast.
- Opportunities for statewide and national recognition as a leader in the field of post-acute care.
- Increased collaboration between your facility and local and state system of care organizations and facilities, e.g., Montana Stroke Initiative, referring hospitals, local outpatient providers, etc.

Who should we contact to be considered for this initiative?

If your post-acute care facility is interested in being considered for this initiative, contact the following AHA representative:

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