

Stroke In -Situ Simulation & Diversity, Equity, and Inclusion in Stroke Care

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Stroke In -Situ Simulation

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Lessons



01

Simulation

*“...the imitation or
representation of one act or
system by another...”*

- Society for Simulation in Healthcare



Educational

- Learning Objectives
- +/- Interprofessional
- Pre-brief, Scenario, Debrief

What the heck is
In Situ
Simulation?



Educational

- LO Driven
- +/- Interprofessional

Diagnostic

- Stress Test
- Latent Safety Threats

Therapeutic

- Response of QI
- Interprofessional

ISSAC-Program

//saac/

In
Situ
Simulation
Acute
Care

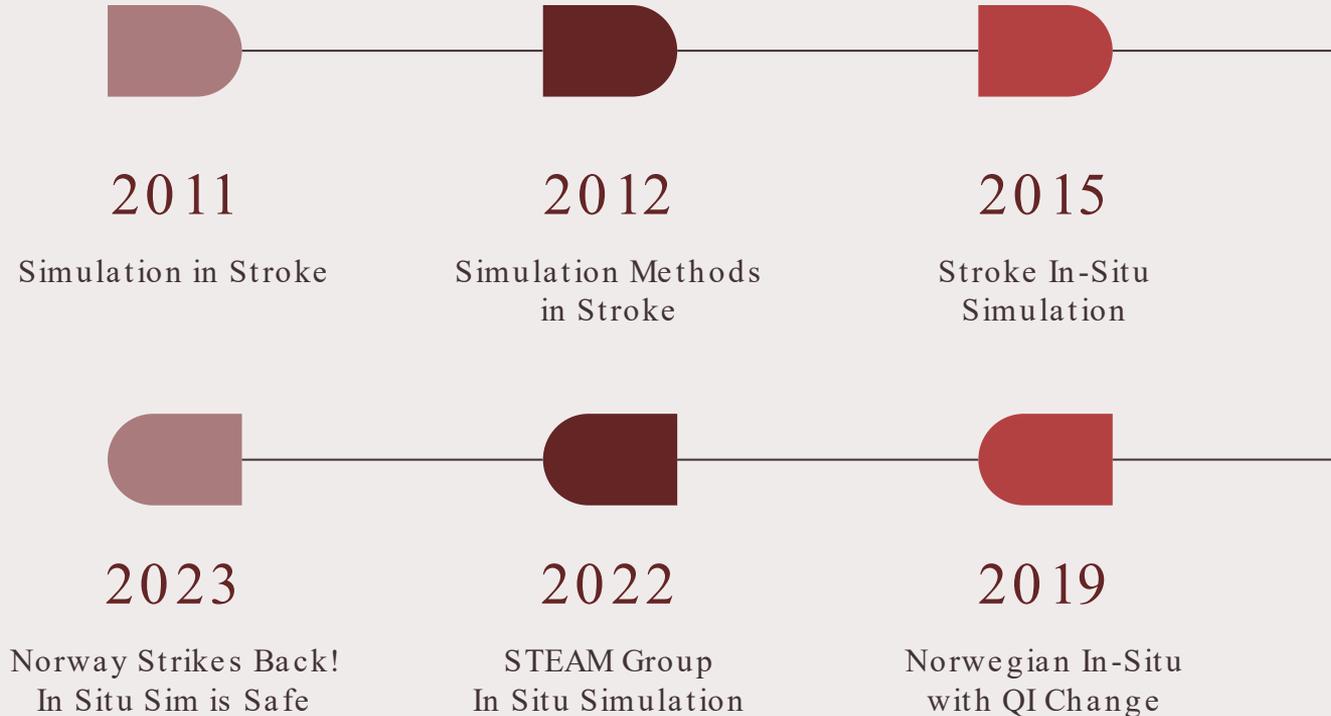
Program



02

Road to ISSAC

Abbreviated History of Stroke Simulation



Stroke Simulation Improves Acute Stroke Management: A Systems-Based Practice Experience

Tapan Mehta, MD, MPH

Sara Strauss, DO

Dawn Beland, RN, MSN, CCRN, CS, CNRN

Gilbert Fortunato, MBA

Ilene Staff, PhD

Nora Lee, MD

TECHNICAL REPORTS

Stroke and TIA Assessment Training

A New Simulation-Based Approach to Teaching Acute Stroke Assessment

Garside, Mark J.; Rudd, Matthew P.; Price, Christopher I.

Implementation of stroke teams and simulation training shortened process times in a regional stroke network—A network-wide prospective trial

Damla Tahtali, Ferdinand Bohmann, Natalia Kurka, Peter Rostek, Anelia Todorova-Rudolph, Martin Buchkremer, Mario Abruscato, Ann-Kathrin Hartmetz, Andrea Kuhlmann, Christian Henke, André Stegemann, Sanjay Menon, Björn Misselwitz, [...], Waltraud Pfeilschifter  [view all]

Simulation-Based Training of the Rapid Evaluation and Management of Acute Stroke (STREAM)—A Prospective Single-Arm Multicenter Trial

Simulation-based training improves patient safety climate in acute stroke care (STREAM)



Ferdinand O. Bohmann^{1*} , Joachim Guenther¹, Katharina Gruber¹, Tanja Manser², Helmuth Steinmetz¹, Waltraud Pfeilschifter^{1,3}, for the STREAM Trial investigators

european journal of neurology
the official journal of the european academy of neurology



ORIGINAL ARTICLE |  Open Access |   

Simulation-based training improves process times in acute stroke care (STREAM)

Ferdinand O. Bohmann , Katharina Gruber, Natalia Kurka, Laurent M. Willems, Eva Herrmann, Richard du Mesnil de Rochemont, Peter Scholz, Heike Rai, Philipp Zickler, Michael Ertl ... [See all authors](#) 

Reducing door-to-needle times in stroke thrombolysis to 13 min through protocol revision and simulation training: a quality improvement project in a Norwegian stroke centre FREE

 Soffien Chadli Ajmi^{1, 2}, Rajiv Advani³, Lars Fjetland⁴, Kathinka Dehli Kurz^{4, 5}, Thomas Lindner^{6, 7}, Sigrunn Anna Qvindesland⁸, Hege Ersdal^{2, 6}, Mayank Goyal⁹, Jan Terje Kvaløy^{5, 10}, Martin Kurz^{1, 11}

Correspondence to Dr Soffien Chadli Ajmi, Neurology, Stavanger University Hospital, Stavanger 4010, Norway; soffiena@yahoo.com

Cost-effectiveness of a quality improvement project, including simulation-based training, on reducing door-to-needle times in stroke thrombolysis

Soffien Chadli Ajmi ,^{1,2} Martin W Kurz,^{1,3} Hege Ersdal,^{2,4}
Thomas Lindner,^{4,5} Mayank Goyal,⁶ S Barry Issenberg,⁷ Corinna Vossius⁸

ORIGINAL ARTICLE

 Open Access



Simulation-based team-training in acute stroke: Is it safe to speed up?

Liv Jorunn Høllesli , Soffien Chadli Ajmi, Martin W. Kurz, Thomas Bailey Tysland, Morten Hagir, Ingvild Dalen, Sigrun Anna Qvindesland, Hege Ersdal, Kathinka D. Kurz



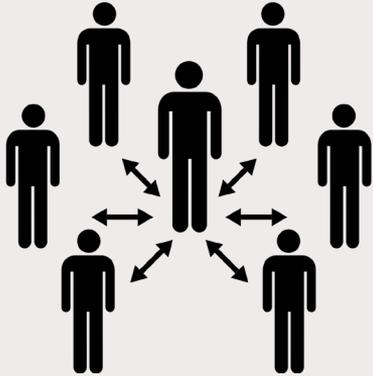
03

ISSAC Program



WHO WE ARE

Intradisciplinary



Collaborative



Innovative



Educational

- LO Driven
- +/- Interprofessional

Diagnostic

- Stress Test
- Latent Safety Threats

Therapeutic

- Response of QI
- Interprofessional

Educational

- Interprofessional & Intradisciplinary

Diagnostic

- Evaluating for improvements and threats

Therapeutic

- Targeting high-yield topics thru QI



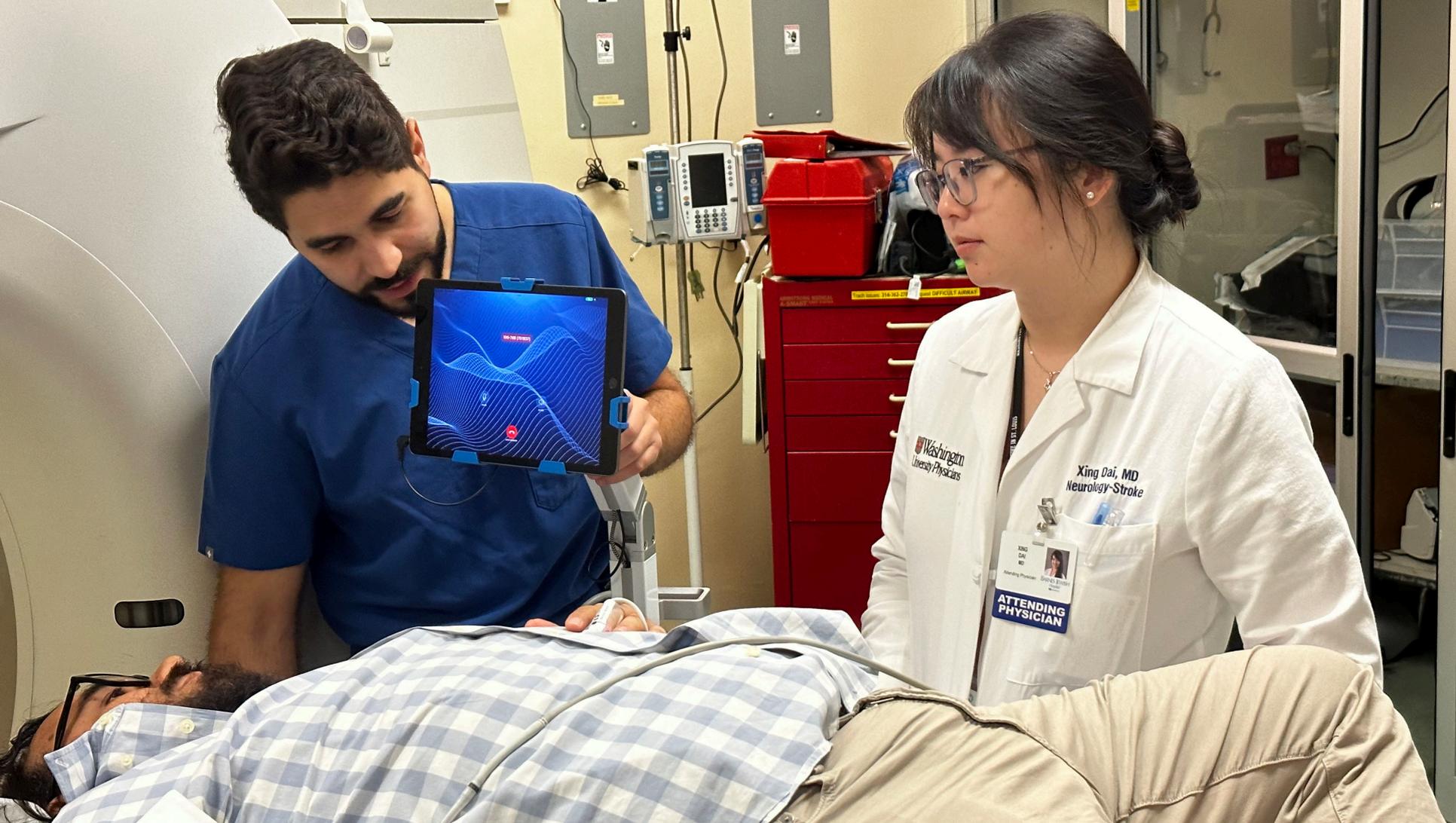
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SIEMENS

SOMATOM
Definition Flash

DRESSINGS
&
OSTOMY SUPPLIES





Washington
University Physicians

Xing Dai, MD
Neurology-Stroke

XING
DAI
MD
Attending Physician: Stroke/Stroke

ATTENDING
PHYSICIAN



04

Lessons Learned



Be Patient



Be Persistent



Be Flexible

Patients come first.

THANK YOU!

DO YOU HAVE ANY QUESTIONS?

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