FACT SHEET

MARCH 2011



OVERVIEW

Target: Stroke is a national quality improvement campaign of the American Heart Association/American Stroke Association designed to improve outcomes for ischemic stroke patients by helping hospitals achieve door-to-needle (DTN) times of 60 minutes or less. By participating in Target: Stroke, hospital teams can work towards eliminating delays in treating stroke patients, with the ultimate goal of saving lives and reducing long-term disability. To date, more than 800 hospitals have enrolled in Target: Stroke, with new hospitals joining all the time. If your hospital hasn't already signed on, please consider becoming part of this important lifesaving effort.

KEY TIME INTERVALS

To help hospitals achieve times of 60 minutes or less from ischemic stroke patient arrival to the start of IV treatment, Target: Stroke has identified key time targets for steps in the process:

- Perform the initial patient evaluation within 10 minutes of arrival in the emergency department.
- Notify the stroke team within 15 minutes of arrival.
- Initiate a CT or MR scan within 25 minutes of arrival.
- Interpret the CT or MR scan within 45 minutes of arrival.
- Start IV rt-PA immediately after scan interpretation.

EXPECTATIONS FOR TARGET: STROKE HOSPITALS

The more effort a participating hospital team puts into achieving Target: Stroke goals, the more progress they can expect in improving DTN times and patient outcomes.

 Complete the baseline survey.
 The baseline survey is available at www.ahasurveys.com/se.ashx?s=0B87B7ED20BB1365

- Assemble a Target: Stroke improvement team.
 A multidisciplinary hospital-based team should meet
 to review the hospital's processes, stroke care quality,
 patient safety goals and clinical outcomes. The team should
 reconvene on a regular basis to review progress and make
 recommendations for improvement based on the evidence.
- Implement Target: Stroke best practices. The Target: Stroke campaign recommends that participating hospitals adopt the 10 best practice strategies referenced in the Target: Stroke Resource Manual to improve door-to-needle times.
- Put the Target: Stroke toolkit to work. Participating
 hospitals receive a stroke toolkit containing clinical decision
 support, stroke-specific order sets, guidelines, hospitalspecific algorithms, critical pathways, the NIH Stroke Scale
 and other stroke tools. Implementation of the tools
 appropriate to your hospital is one of the keys to getting
 maximum benefit from Target: Stroke.
- Track progress toward your goal using PMT reporting functions. The Get With The Guidelines®-Stroke Patient Management Tool™* (PMT) can be used to collect data on DTN times. Hospitals participating in Target: Strokeare encouraged to use the PMT reporting functionto monitor the percentage of patients with DTN within 60 minutes and provide to hospital team members feedback/progress reports.
- Network to share insights and experiences. Sharing
 successes and challenges is one of the best ways to improve
 quality of care. Target: Stroke provides participating hospitals
 with a unique opportunity to network and share best practices
 with other Target: Stroke hospitals.



^{*} The Patient Management Tool™ system provided by Outcome, Cambridge, Mass.

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BENEFITS TO PARTICIPANTS

Participating hospitals have access to:

- Knowledge-sharing with world-class stroke experts
- Best practice strategies for improving acute stroke care and meeting DTN goals
- Online forums to exchange knowledge and improve performance
- Customizable strategies and tools
- Recognition opportunities for your hospital's stroke care team

RECOGNITION PROGRAM

Your hospital team deserves to be recognized for their efforts to improve stroke care. That's the idea behind the Target: Stroke Honor Roll. Current Get With The Guidelines®-Stroke Achievement Award-winning hospitals can earn public recognition on the Target: Stroke Honor Roll by achieving 50% or greater for at least one calendar quarter on the following Get With The Guidelines-Stroke PMT measure: percent of acute ischemic stroke patients treated with IV rt-PA with door-to-needle times ≤ 60 minutes. To qualify, complete the Target: Stroke Honor Roll application and submit the paperwork to your American Heart Association/ American Stroke Association QI representative.

Please note that Target: Stroke Honor Roll renewal requirements have changed for 2011-2012, please refer to the FAQ document for specifics, located at http://www.strokeassociation.org/idc/groups/stroke-public/@wcm/@private/@hcm/documents/downloadable/ucm_318752.pdf

TOOLS AND RESOURCES

Target: Stroke provides participating hospitals with a variety of tools and resources, including:

- Best practice strategies that have helped others reduce DTN times
- Customizable implementation tools
- Suggested time intervals for treatment steps and patient time-trackers
- Educational webinars
- Guidelines-based algorithms, order sets and dosing charts
- Target: Stroke Resource Manual
- Patient education materials, such as a Patient Education Flyer
- Target: Stroke Honor Roll Award Application
- Videos from experts and real-time users on the Target: Stroke YouTube channel http://www.youtube.com/user/AHAASATargetStroke

Check the Target: Stroke website regularly for additional materials. New tools to look for:

- New videos posted to the Target: Stroke YouTube channel located at http://www.youtube.com/user/AHAASATargetStroke
- New practical webinars to help you overcome key roadblocks
- · Additional best practices tools and resources

ENROLLING IN TARGET: STROKE

Enrolling in Target: Stroke is easy. Complete the baseline survey and enrollment form, available at www.ahasurveys.com/se.ashx?s=0B87B7ED20BB1365

Learn more about Target: Stroke at strokeassociation.org/targetstroke.

