

NSW Telestroke Service

The Reperfusion Times

An internal newsletter for staff at NSW Telestroke Service Referring Sites

December 2024

Medical Director's Foreword

In our 10th edition of this newsletter, we look at the important work being done by Stroke Care Coordinators (SCC) across the state. These roles are such an integral part of being able to deliver good stroke care which is a message that we seek to promote at every opportunity. We hope you enjoy reading about the great projects being undertaken by SCCs in NSW. We have recently developed our **Time is Brain Award**, inspired by one such SCC project running in Shoalhaven Hospital. The aim of the award is to recognise all team members involved in looking after a patient when fast treatment times have been achieved. Nationally, treatment targets have been established for the provision of time critical stroke care.

This certificate acknowledges team members when they are achieving exceptional treatment times and has been very well received.

Since March 2020 we have seen over 5500 patients and recommended reperfusion therapy for over 1000 of them. In 2025 we

will commence a project looking at providing stroke specialist support and advice beyond the hyperacute phase of the patient journey. I am looking forward to updating you about that project next year. Until then, I hope you are able to enjoy some time off over this holiday period and we look forward to working with you all in 2025. All the best, Ken



NSW TSS Recognition and Milestones

Double Trouble at Port Macquarie: National Stroke week was celebrated in August and Port Macquarie was featured in 3 local news publications; Camden Haven, Port Macquarie News and The Macleay Argus, celebrating their Angels Platinum Award and the wonderful outcomes of two patients who presented at the same time to Port Macquarie ED, suffering a stroke. Both patients required urgent transfer for ECR. A great team effort by the local staff resulted in treatment and

Stroke team's platinum advice



CHHC receiving their Platinum Award

transfers to John Hunter Hospital for clot retrieval, in record times and great outcomes were achieved for both patients. One of these patients returned to PMBH to talk to staff and the media about their experience.

Platinum at Coffs Harbour: Coffs Harbour received their first Platinum Award in Q3 2024. This is recognition of the brilliant work being done by the local team and everyone was on hand to celebrate this fantastic achievement.

WSO Angels Award Recipients for Q3: Congratulations to Gold Award recipients Orange, Port Macquarie, Shoalhaven and Wagga Wagga.

Aligning with National Safety and Quality Standards

<https://www.safetyandquality.gov.au/standards/nsqhs-standards>



Clinical Governance Standard

Partnering with Consumers Standard

Comprehensive Care Standard

Communicating for Safety Standard

Preventing and Controlling Infections Standard

Medication Safety Standard

Blood Management Standard

Recognising and Responding to Acute Deterioration Standard



Acute Stroke Clinical
Care Standard

ACI Stroke Network Update

In October 2024 we formed a **Hyperacute Stroke Transfers Working Group** to look at enhancing transfer and retrieval times for hyperacute stroke patients and explore barriers preventing timely transfers. This working group is chaired by Dr Michael Novy, Acting Director Aeromedical Operations, NSW Ambulance. The group is aiming to present an update on potential avenues to enhance transfers of patients to INR treatment facilities to be shared with the rest of the network by June 2025.

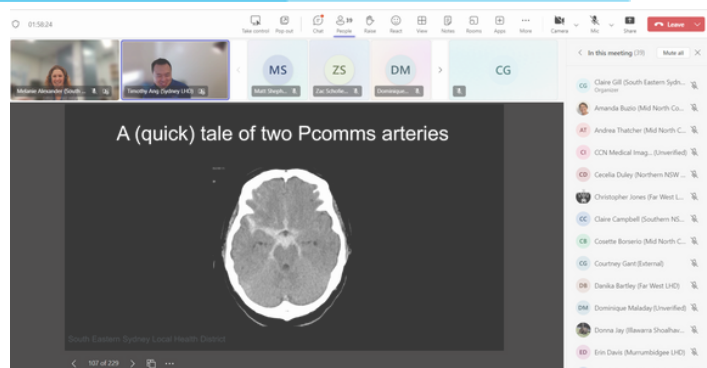
Stroke Incentive funding – was shared with Local Health District performance/finance teams this week. If you would like information on how your site has performed, please contact your local performance team and request they share this information with you.

Stroke Specialty Services Review will commence in the new year, local health districts have all been contacted to nominate representatives to contribute to this review. The review process is expected to take six months with a final report due in the middle of 2025.

NSW ACI 2025 Stroke Forum **change of date to Friday April 4th**

NSW TSS Engagement

NSW Telestroke Forum 2024: It was our pleasure to host this year's NSW Telestroke Forum online, providing an opportunity to hear from our colleagues across the full continuum of hyperacute stroke care. We had over 40 people attend the day with representation from all of our sites. A special shout out to all of the presenters who showcased the fabulous work that is being done across the state.



NSW Telestroke Forum 2024



TSS and Broken Hill Acute Care CNC

These educational initiatives not only aimed to enhance clinical skills but also sought to harness the existing culture of proactive patient care among healthcare professionals in Broken Hill.

Broken Hill Site visit: In October, our visit to Broken Hill involved a collaborative effort with the local education team to enhance stroke care knowledge among healthcare professionals. The focus was on education in the Emergency Department, and Melanie, our Imaging Coordinator was able

to spend the day with radiographer colleagues. Highlights of the educational sessions were model of care simulations, alteplase practice and a focus on stroke recognition and early

escalation in the inpatient wards. These



Imaging Dept Broken Hill

Opportunity for Reflective Clinical Supervision

Reflective Clinical Supervision provides opportunities for individuals or groups to be supported and enabled to review and reflect on their work/role and consider actions to develop their practice further.

Reflective strategies are used in clinical supervision sessions to help deal with day-to-day clinical workloads; challenging clinical encounters; or to mentally prepare for a potentially complex situation.

Why Clinical Supervision Matters? Supervision has been shown to positively impact the wellbeing of practitioners leading to lower rates of burnout and higher job satisfaction. All clinical supervision facilitation occurs in a supportive, safe, confidential and non-judgemental environment and is offered to Stroke Care Coordinators/Telestroke roles. If you would like to explore an opportunity for Reflective Clinical Supervision please reach out to our CNC Shona.Haigh@health.nsw.gov.au for further information.

Resilience Based Clinical Supervision



Clinical Supervision Framework

NSW Telestroke Service: Stroke Care Coordinator Spotlight

The Stroke Care Coordinator (SCC) role in Australia was established in the early 2000s to improve stroke patient outcomes by managing care across acute, rehabilitation, and community settings. Initially focused on acute care coordination within hospitals, the role expanded to support patient transitions, reduce readmissions, and provide follow-up in the community, emphasising secondary prevention and education. SCCs work closely with multidisciplinary teams, facilitating comprehensive care plans, advocating for patient needs, and contributing to policy and protocol development. Today, SCCs play a crucial role in providing coordinated, patient-centered care and enhancing recovery and prevention efforts in NSW. Growing research supports the positive impact of the role in improving compliance with evidence-based practice and reducing length of stay. This issue we spotlight our dedicated Stroke Care Coordinators, sharing and celebrating some of the work that is being done across NSW to achieve better outcomes for our regional patients and meeting the demands of this challenging role.

Connecting with Community

Shoalhaven



Engaging with Aboriginal communities is a nuanced process that requires cultural sensitivity, respect, and a commitment to building long-term relationships. **Taneen O'Connor**, the Telestroke CNS from Shoalhaven District Memorial Hospital, was invited to participate in Aunty Jean's Program. This program focuses on health promotion, education, and self-management for Aboriginal and Torres Strait Islander people with chronic and complex care needs. During a lunch and a yarn, Taneen talked about the signs and symptoms of stroke, the importance of seeking immediate medical attention, what to expect when visiting ED and having a consult with the Telestroke service. Participants shared their personal experiences with stroke, fostering a valuable dialogue and building trust within the community.

This engagement proved to be invaluable in raising awareness about stroke and encouraging timely hospital presentations. The positive response from the community has opened doors for future collaborations and outreach efforts to other local Aboriginal communities.

Meet at the Chopper

Port Macquarie



Port Macquarie's Stephanie Barber (Telestroke CNC) and **Jenni Steel** (Stroke Care Coordinator) have commenced a great initiative with the aim to reduce the time it takes to retrieve patients by air for ECR at their hospital. The team are hopeful that they are able to reduce retrieval times by 20 minutes by meeting the retrieval team on the helipad. The idea was first introduced by one of their FACEMs, who also works for the retrieval services, when the helipad moved to the top of the ED building. The new process of escorting the patient up to the helipad by a doctor and nurse will be embedded within existing transfer procedures. We are excited to see the impact this will have on their local Door In Door Out (DIDO) times.

Southern NSW LHD was one of the last local health districts to implement the NSW TSS and has an SCC and Stroke Nurse who cover multiple sites. **Claire**

Campbell (Southern NSW LHD Stroke Nurse) hopes to overcome the challenges of covering multiple sites by developing a Stroke Champion Program that aims to have a stroke champion for each acute ward at each of the telestroke sites. The stroke champion role would include orientating new doctors to the telestroke model of care and use of the ASAP tool, promoting the correct use of the stroke pathway/care plan and championing the use of the ASSIST swallow screening tool. Through networking and running local education, Claire has been able to recruit 6 champions so far with incentives to develop skills, provide education and support champions to work towards the Clinical Nurse Specialist role. Battling the barriers to getting nurses off the floor, plans are underway for their first champion training day and monthly catch-ups to support the role.

Gathering of the Stroke Champions



Southern NSW LHD



Lismore Hospital has launched a weekly Stroke & TIA clinic, designed to provide swift, comprehensive care for low and high risk patients. Driven by physicians to minimise hospital admissions, the clinic primarily serves TIA patients presenting to ED, with a small capacity to support complex stroke cases.

Key Features of the Clinic:

- Coordinated by the Stroke Care Coordination (SCC) team
- TIA patients seen at the clinic within two weeks
- Patients receive a letter invitation and information about TIA and cardiovascular risk factors
- Outpatient MRI scans scheduled efficiently

Since its inception at the end of August, the clinic has already demonstrated significant benefits:

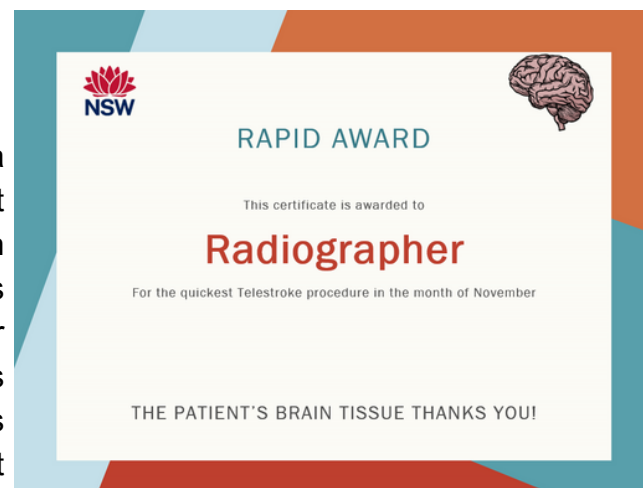
- Prevented 20 hospital admissions
- Identified 3 patients requiring further stroke review/admission and investigation

The clinic's success stems from the dedicated work by the SCC team of **Kim Hoffman** and **Cecelia Duley** and good collaboration with the MRI department, ensuring patients receive timely scans and clear care pathways. Current focus areas include ensuring patient referrals are completed in the ED to optimise this pathway.

Imaging Update: Quality Improvement



Rapid Awards QI: This edition we meet **Zac Schofield**, a radiographer from Coffs Harbour Health Campus, to hear about his QI project which aims to improve patient positioning and scan efficiency during Telestroke procedures. The reward tracks positioning metrics to ensure that patient positioning allows for maximum coverage of brain parenchyma. RIS and PACS data is used to monitor the efficiency with which telestroke procedures are performed - particularly the time from exam commencement to the commencement of the perfusion scan.



Rapid Award

Each month, the radiographer(s) with the fastest perfectly positioned telestroke procedure are presented with the "RAPID Award" - a pun on the name of the software that creates our perfusion maps.

What was the reason you started the project? I started this project because I noticed a lack of detail about the time patients spent in CT in the monthly Telestroke data reports. While door to CT times and DTN times were being monitored, there was no data to say whether the CT procedure was performed efficiently. I wanted to reflect the hard work of radiographers in ensuring that patients were efficiently imaged to reduce delays to treatment. I also identified a need for further education on patient positioning due to some misconceptions held by the radiographers. **Were there any challenges?** Ensuring that the times being recorded truly reflected the time patients were spending in CT. This required education with radiographers to ensure that scans were being commenced only when the patient arrived, and calling apps specialists to adjust the time on the CT machine to match that on the RIS computer. It was also a challenge ensuring that information was spread to all the radiographers, as there are many people missing during our infrequent departmental meetings. However, since everyone is now very aware of the project, the word seems to spread much faster!

What are your wins? Seeing the friendly competition between radiographers emerge. Everybody is attempting to perform the most well positioned, efficient scan to get one up on their colleagues. Another win is of course the increase in scan efficiency. During the first few months we were consistently above 10 minutes between scan commencement and perfusion, but as of the end of August we have 5 months straight of under 8 minutes, with a personal best month of 5 and a half minutes! **A hearty congratulations to Zac and his team for their work on improving processes in CT and to all the recipients of Rapid Awards.**