Disease Specific Care Certification Comprehensive Stroke Center Certification (CSC) Agenda Template

Please refer to the Disease Specific Care Review Process Guide for additional information.

All times are local.

DAY ONE	Activity	Organization Participants
8:00-9:30 am	 Opening Conference Reviewer will begin this session with a few remarks and introduction of themselves, followed by an introduction of the program staff Next, hospital and/or program leadership will present an orientation to Program. Topics to be covered include: Program leadership Program interdisciplinary team composition Program design and integration into hospital Program mission, vision, and goals of care Population characteristics and needs Diversity, equity, and inclusion efforts Program selection and implementation of Clinical Practice Guidelines (CPGs) Overall program improvements implemented and planned Presentation will be followed by a brief Q&A Reviewer will end session with: Overview of agenda and objectives Dialogue about what the reviewer can do to help make this a meaningful review for the program 	Program Clinical and Administrative Leadership Individuals responsible for performance improvement processes within the program and, as applicable, the organization Others at the discretion of the organization
9:30 am – 10:00 am	Reviewer Planning Session A list of comprehensive stroke patients for tracer selection separated by diagnosis, with date of admission - Current Inpatients - Discharged patients	Program representative(s) that can facilitate patient selection and tracer activity
10:00 am – 10:30 am	Emergency Department Review The organization is to provide a high level, brief overview of how care is provided to CSC patients in the emergency department. Note: This activity is designed to assist the reviewer's understanding of how CSC care is initiated in your organization. This departmental review does not require a formal slide presentation. Be prepared to: -Tell your story about providing care for acute complex stroke patients in the ED settingDescribe how your organization is able to care for more than one complex stroke patient simultaneouslyDiscuss your ED's infrastructure including staff,	Both reviewers Emergency Department Medical Director Emergency Department Nurse Director/Manager Emergency Department licensed independent practitioners and staff as determined by the organization

8:00-8:30 am	Activity Daily Briefing	Organization Participants As determined by the
3:30 - 4:30 pm	Team Meeting/Reviewer Planning Session – – Address any special issues for resolution – Communicate summary of the first day's observations – Select individual patient tracers for Day 2	As determined by the organization
1:00 – 3:30 pm	Individual Tracer Activity (cont.)	Program representative(s) that can facilitate tracer activity
12:30-1:00 pm	Reviewer Lunch	
10:30 am–12:30 pm	licensed independent practitioners, equipment and materials (including medications) that are required to care for acute complex stroke patients. -Discuss your process for obtaining EMS records documenting care provided during the transfer to the facility. -Discuss transfer protocols Individual Tracer Activity - Each reviewer will conduct tracers separately. Evaluation of patient care, treatment, and services, including: 1. Advanced Imaging 2. Acute Comprehensive Stroke Care -Emergency care -Informed consent -Evaluation of the patient before surgery - IR suite -CT/MRI suite -Procedures and interventions -ICU care -Nursing care -Medical care -Additional care 3. Post Acute Care Comprehensive CSC Care -Assessment -Goals -Patient/Family education -Referrals -Transfers -Medical care -Nursing care -Social work/Case management -Additional care (could include speech Therapy, physical therapy, occupational therapy, psychology, pharmacy) 4. Transfer/Discharge 5. Follow-up Call 6. Closed Record Review:	Program representative(s) that can facilitate tracer activity

	A brief summary of the first day's agenda will be provided	
8:30 am-10:30 am	Individual Tracer Activity (cont.)	Program representative(s) that can facilitate tracer activity
10:30 am – 12:30 p,	System Tracer: Data use, research, and performance improvement (PI): Conducted by both reviewers. - Use of a defined performance improvement methodology Volumes of procedures and interventions (including SAH, coilings for aneurysm, and clipping for aneurysm.) - Annual aneurysm clipping and coiling mortality rates - Complication rate data - Public reporting of outcomes - Current stroke performance measure data - Percentage of complex stroke patients that receive a follow-up phone call by a member of the organization's stroke team within seven days of discharge (Note: Applicable only to CSC patients who are discharged home) - Interdisciplinary program review and peer review process - Use of the stroke registry - Patient satisfaction data specific to complex stroke patient population - CSC research which must be patient-centered and approved by the Institutional Review Board (IRB). - Review of the program's stroke team log	
12:30-1:00 pm		
1:00 – 3:00 pm	 Competence Assessment/Credentialing Process Note: Conducted by both reviewers simultaneously Orientation and training process for program Methods for assessing competence of practitioners and team members Inservice and other education and training activities provided to program team members Reviewers will review personnel records and Credentialing files. Nursing Staff Medical Staff Other Staff Community Education The reviewers will also ask to view the personnel records of the: Medical Director of Stroke Program Stroke Coordinator 	 Individuals responsible for Program Education Medical Staff Office Personnel Human Resources

	 Director of Rehabilitation Services Advanced Practice Nurse Provider Files Licensure DEA Licensure Most recent reappointment letter Board certification Privileges and applicable supporting documents OPPE or FPPE (two most recent, as applicable) CME or attestation for CME Staff Files Licensure (if applicable) Certification (if applicable) 		
	 Job description Most recent performance evaluation Program Specific Orientation Education/Competencies Program Specific Ongoing Education/Competencies 		
3:00 – 3:30 pm	Summary Discussion This time will be utilized for a final discussion prior to the reviewer's report preparation and the exit conference. Topics that may be discussed include: • Any issues not yet resolved (IOUs) • The identified Requirements For Improvement (RFIs) • What made the review meaningful to the team • Sharing best practices to inspire quality improvement and/or outcomes • Educative activities of value to the program (i.e., knowledge sharing related to CPGs or the latest scientific breakthroughs) • Did I meet the goals of your team today?	•	Program Leadership Others at Program's discretion
3:30 - 4:00 pm	Reviewer Report Preparation		
4:00-4:30 pm	Program Exit Conference	•	Program Leadership Hospital Leadership Interdisciplinary Team Members

Note: This agenda is a guide and may be modified based on organizational need and reviewer

discretion