



Acute Stroke Ready Hospital (ASRH) Action Plan

Examination of Acute Stroke Ready Hospital (ASRH) data has revealed persistent problems with meeting one or more of the required elements of an Acute Stroke Ready Hospital (ASRH). Due to continued deficiencies in one or more metrics, LERN is requiring hospitals to critically examine how they can improve.

<p>A. Goal Your hospital deficiency requiring an action plan:</p> <ol style="list-style-type: none"> 1. Door-to-needle 2. Door-to-Emergency Department physician 3. Door-to-neurological expertise 4. Door-to-CT performed 5. Door-to-CT interpreted 6. Door-to-labs results 7. Door to transfer request 8. DIDO <p>**Submit separate action</p>	<p>The goal of your Performance Improvement project should be specific, measurable, attainable, reasonable, and include a time frame.</p> <p>Example: Reduce median door-to-needle time by at least 10 minutes as evidence by data submitted for 4th Qtr 2022.</p> <hr/> <p>Insert Goal Here:</p>
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plans for each deficiency.

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B. Background:	<p>This section should include why you think you have struggled to meet your efficiency goals.</p> <p>Ex: Lab samples not labeled as STAT.</p>
	<p>Insert Background Information Here:</p>

C. Action Plan

a. What do you plan to change about your process?

- Who is involved and why? Identify individuals in your department or other departments you will need to work with.
- What equipment you will need?
- What processes you will change?
- What education or training will be required?

b) Describe how the plan will be implemented. This must include the frequency of your monitoring: weekly or monthly? Who will be responsible for monitoring?

Print Name of Stroke Champion

Date

Signature: Stroke Champion