

New Hampshire's Progress to reaching the NECC Recommendations

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Primordial and Primary Prevention

Public Policies

- NH Indoor Smoking Act
- HEAL Initiative
- Cigarette Excise Tax

- In the works: Tobacco Cessation Benefits for Medicaid patients

Community Education

AHA Public Policy Agenda 2011

- Obesity and Child Health; Nutrition and Physical Activity
- Tobacco Control Funding
- Increase healthcare access to preventive services

Emergency Medical Response

- 100% coverage for landline and wireless (if cell service available)
- Rapid caller number and location identification for wireless, depending upon manufacturer
- Stroke warning sign and symptoms recognition training programs for EMS communicators
- EMSS stroke specific dispatch guide cards and educational resources – Pro Q A, ongoing training

Emergency Medical Response

- AT&T Language Line provides Linguistic Services
- Statewide EMS Protocols for Dispatch, Treatment and Transport in place, but no diversion to designated centers
- Cincinnati Stroke Scale used for stroke screening and reported to hospitals through TEMSIS

Emergency Medical Response

- EMS is relicensed bi-annually, however receive 48 hours of continuing education w/in 2 years
- EMS Response Time monitored through TEMSIS but no statewide goals established due to broad response range between regions
- Relevant data elements for scene calls captured through TEMSIS

Acute Stroke Treatment

- Primary Stroke Center designation criteria not established for NH
- Telemedicine agreements between some NH hospitals and PSC
- Unknown as to which hospitals may have pre-specified inter-hospital transfer protocols

Acute Stroke Treatment

- Some data being collected, but no statewide Data Registry to capture Quality Improvement data
- GWTG stroke being used voluntarily by a few hospitals
- Some unofficial agreements between hospitals to coordinate stroke care

Subacute Stroke Treatment and Secondary Prevention

- The status of subacute stroke treatment and secondary prevention within NH hospitals is unknown
- - discharge education and information provided to patients and families?
- - discharge information shared with PCP?

Rehabilitation

- Assessment of stroke patients for referral to rehabilitation process unknown
- Assessment needed of Skilled Nursing Facilities, Inpatient Rehab Hospitals and Long Term Acute Care Facilities
- Assessment for adequacy of resources for rehabilitation needed

Overarching Recommendations

- State Stroke Stakeholders group for NH to facilitate assessment and determine a plan for stroke system improvement

Group Discussion

- **Identify gaps**
- **Discuss strategies to reach gaps**
- **Identify additional partners needed**