Learning collaborative for ischemic stroke: Correlation between protocols for stroke care and adherence in clinical practice to improve outcomes

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BACKGROUND

• Adequate treatment of stroke is key in the reduction of mortality and morbidity.

• To streamline the care process, a Breakthrough Improvement Collaborative was established between Flemish hospitals (BIC4Stroke).
  → Retrospective patient record analyses per hospital.
  → Variation in the clinical performance (within and between hospitals).

• Variation was observed for these FeSS+ indicators:
  o Measuring body temperature (Fever)
  o Measuring glycemia (Sugar)
  o Swallowing function screening (Swallowing)
  o Depression screening
  o Activities of Daily Living (ADL) screening

AIM

To analyze the protocols of 24 Flemish hospitals, all part of the BIC4Stroke, to gain insight into this established variation and the correlation between adherence and performance.

METHODS

• Deductive content analysis of the protocols of the FeSS+ indicators.

• Calculation of the correlations between protocol content and clinical performance via Pearson’s and Spearman’s correlation tests.

RESULTS

Figure 1: Overview of the content of the protocols regarding the FeSS+ indicators

Figure 2: Significant correlation between protocol content and adherence
Adherence score calculated based on 30 patients/hospital (n=24), pearson correlation coefficient r = 0.61, p = 0.01

Figure 3: Correlation between hospital specific protocol content and adherence
(A) Body temperature (rs = 0.1410, p = 0.5109), (B) glycemia (rs = 0.4168, p = 0.0427), (C) swallowing function screening (rs = 0.2671, p = 0.2070), (D) depression screening (rs = 0.4292, p = 0.0363) and (E) ADL screening (rs = 0.4393, p = 0.0317)
For all 24 hospitals, 30 patients were included in the adherence scores.

CONCLUSION

• Importance of having protocols that are both complete, in accordance with the latest guidelines, and well-implemented.
  → Closing the gap between guidelines and daily practice.

• Implementation of evidence-based treatment protocols results in better adherence to the guidelines and, in turn, may improve patient outcomes.

• Learning collaboratives as the BIC4Stroke can help with this by facilitating knowledge sharing between hospitals.

MORE INFORMATION?

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