

Stroke Telemedicine Newsletter - September 2011

Cambridge University
Hospitals NHS Foundation
Trust

190 stroke telemedicine cases!

Hello and welcome to the second **Stroke Telemedicine Newsletter**. The stroke telemedicine service has been busy, with 190 patients being reviewed by telemedicine to date, which is great news. The numbers of patients are increasing and we have been seeing up to 10 patients being reviewed over a weekend – so excellent news and many thanks to all the Superusers and their colleagues for their continued hard work and commitment.

New Faces

Ipswich Hospital

Welcome to Sharon Maynard, the new Stroke Specialist Nurse recently started in post at Ipswich Hospital and will be the designated Superuser – so welcome to Sharon!

Lister Hospital

We also welcome Gill Waldox - the new Stroke Nurse at Lister Hospital—hello to Gill!

Princess Alexandra Hospital

An update on PAH, Harlow, who will be joining the stroke telemedicine Level 2 telemedicine rota by the end of October. I shall keep you all posted as to when they are 'live'!

Stakeholder Partnership Meeting

A date for your diary! - the next Stakeholder Partnership Meeting is on **Wednesday 12th October 2011 14.30—16.30** in Riverside 1 building at Granta Park in Cambridge.

I have emailed you all the proposed Agenda. If you could let me have any apologies and any further Agenda items to add, please email me at the usual address.

Sept 2011

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- ☉ And again....a very well done and a BIG thank you to all of you for your commitment and hard work — keep it up!

Case of the month

One of the regular features that has been suggested for this Newsletter is a 'Case of the Month'.

It would be really interesting to have a case each month that has stood out for a particular reason – perhaps an unusual presentation or an unexpected outcome?

If you have a case that you think would be appropriate and of interest to all the team, then please email me with some information.

Lynda.sibson@addenbrookes.nhs.uk

Keeping up to date!

Don't forget to visit the Stroke Telemedicine website for news & updates.

I will add various meeting, information and updates for you all.

I will of course continue to email you all the relevant information but I thought this would be a quick way of keeping you updated when you are checking the rota!



Review & Audit

We are planning to undertake a retrospective review, as part of our governance, of the first year of the stroke telemedicine service. I have recently updated the Stroke Consultant Audit Forms to capture more data & information, such as time from presentation to call, time to thrombolysis, time to CT scan etc. In order to ensure that we have complete data, such as final diagnosis, repeat scans and clinical outcome, we will need to review the patient's notes — all undertaken anonymously. We are fortunate to have Dr Smriti Agarwal, Clinical Research Associate & Dr Caroline Lebus, Specialty Registrar both from Addenbrookes Hospital, who will be assisting Diana and myself in visiting the sites to collate this information. We are in our early stages of designing our database and will be in touch with all the Stroke Consultants and Superusers individually to arrange a convenient time to visit and review the patient data. We aim to publish our review in an appropriate academic peer-reviewed journal— it will be great to share all your great work.

There have been two recent publications relating to stroke telemedicine, which maybe of interest to you:

Johansson T, Mutzenbach SJ & Ladurner G (2011) Telemedicine in acute stroke care: the TESSA model. *Journal of Telemedicine & Telecare*. 17 (5): 268-272.

Zaidi SF, Jumma MA, Urra XN, Hammer M, Massaro L, Reddy V, Jovin T, Lin R & Wechsler LR (2011) Telestroke-guided Intravenous Tissue-Type Plasminogen Activator Treatment Achieves Similar Clinical Outcome as Thrombolysis at a Comprehensive Stroke Center. *Stroke*. (online journal).

(I have electronic copies of both articles, so if you would like a copy just drop me an email)



Calling all Stroke Consultants — Audit Forms!

As we are undertaking the audit and review, the **Audit Forms** from ALL the telemedicine consultations will obviously be very useful, even if the consultation is purely over the telephone. If you could complete the Audit Form—just tick the Yes or No in the 'Did the consultation include telephone advice?' section then leave the remainder of the form blank in relation to the System questions (such as whether the cart & your laptop were working etc.) We can then look at the number of calls that required telephone advice only.

If there are any **outstanding Audit Forms**, please **email them to me** — as I am still missing a few and we would like to have the Audit as complete as possible.

Remember that ALL the relevant Audit Forms are also available to download from the Stroke Telemedicine website!

Upside down images?

There have been a number of reports of the images from the telemedicine cart being transmitted upside down to the Stroke Consultants!



There is an 'Invert Image' switch on the back of the camera on top of the telemedicine cart, which if in the 'ON' position, will flip the image on the screen!

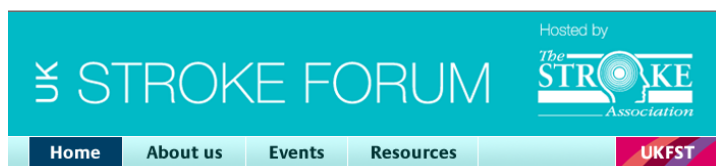
To rectify this, simply turn the '**Invert Image**' switch to the 'OFF' and restart the telemedicine cart (by turning it on and off) for the change to take effect.

.....STOP PRESS ** New Standby Room ** STOP PRESS.....

With increasing numbers of calls (see data graphs on pages 4 & 5), there have been an increasing number of occasions where the Stroke Consultants have had simultaneous calls. This can obviously cause some problems. So in order to manage this more effectively, we have developed a **Standby Room** on the Stroke website. The Standby Room can be easily accessed via the Stroke website - just above the on call rota.



To access this room, just click on the **Standby Room** link. This is essentially another virtual 'room' where Superusers can talk to the Stroke Consultants. Ideally if the Superusers and others can contact the Consultant **BEFORE** using this room, this will make it easier if the Consultants are currently managing a call. The Superusers can then arrange to 'meet' the Stroke Consultant as you would do for any other call. The Stroke Consultants can then simply toggle between these two rooms in order to speak to the various hospitals. This will hopefully avoid any confusion and aid patient confidentiality. We will also monitor this usage and see how it is working but please feedback to me if you have any issues. With the new software, you will be able to send the Consultant a message to say that you are online and ready to meet, which should make this easier and this will be covered in the training that we will provide you with when we update all your computers!



As I am sure most of you are aware, the **6th UK Stroke Forum Conference** takes place from Tuesday 29th Nov – Friday 1st December in Glasgow. IOCOM, who developed the telemedicine software, will be having a stand (no.73) at the Conference, and we will be demonstrating our award-winning Stroke Telemedicine service!

Gary Refka, VP of Operations for IOCOM has very kindly offered to pay for ONE ticket to the Conference and we would like to offer this to one of the Superusers as a way of saying thank you for all your hard work!

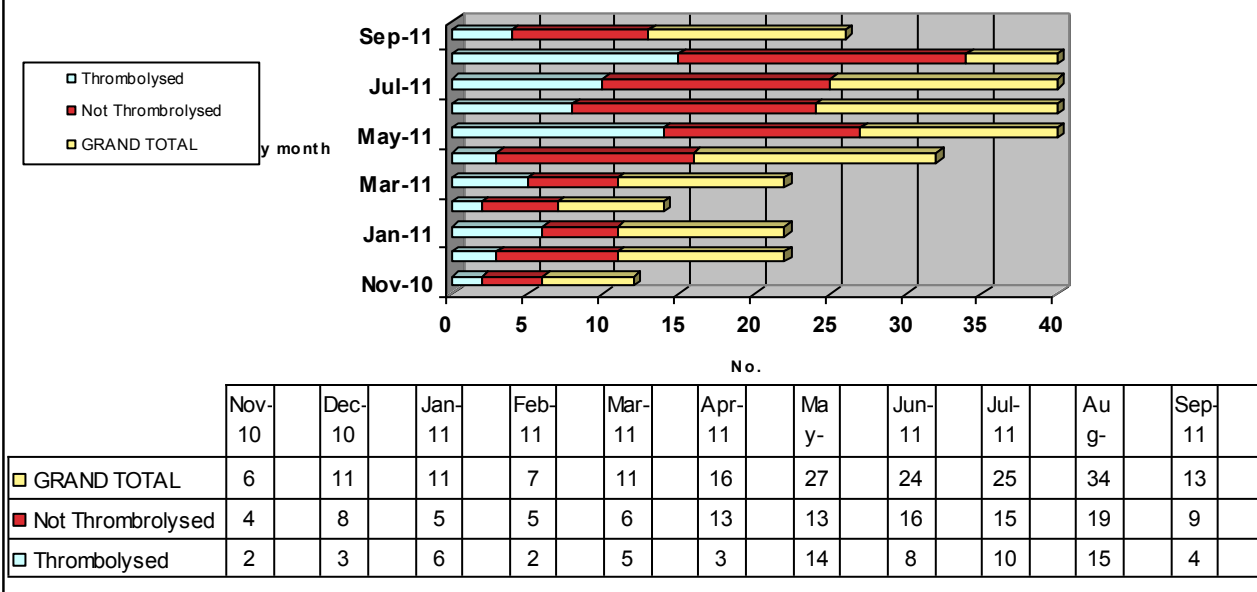
Either perhaps one of you can nominate yourself or a colleague or perhaps we will pull names from a hat - just let me know!

Unfortunately this does not include travel or accommodation—sorry! But hopefully one of you will be able to come along. So many thanks to Gary for his kind support and we will look forward to seeing one or perhaps more of you (Trust or personal finances allowing) at the Conference. For further information visit www.ukstrokeforum.org



Data & stats

Chart 1: Stroke Telemedicine Consultations - by month



Continuing our monthly review of the data, Chart 1 (above) looks at the number of telemedicine consultations by month. As you can see the number of consults via telemedicine are rising rapidly every month – with 34 patients assessed in August. The rate of thrombolysis is 38% of ALL patients seen via telemedicine.

Chart 2: Appropriateness of telemedicine calls

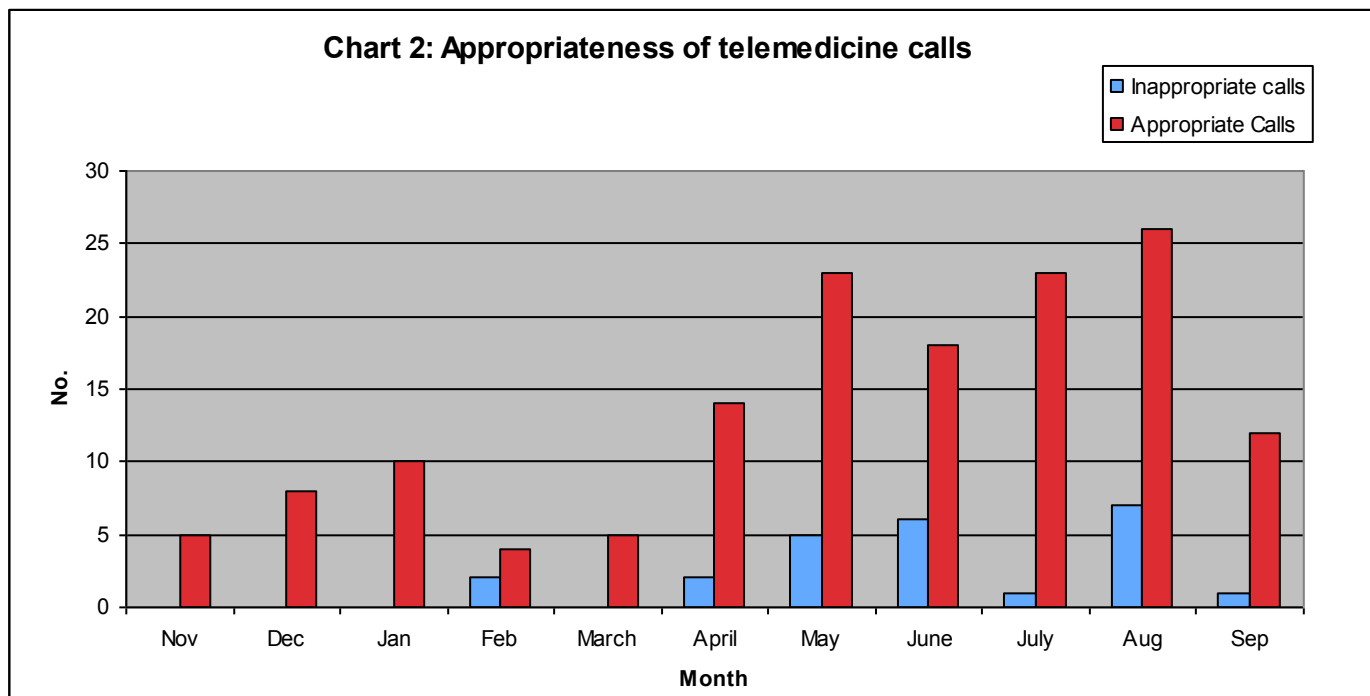


Chart 2 above relates to the appropriateness of the telemedicine call— anecdotally it appeared to be rising—and there was a spike in August, this appeared to relate to new staff starting in post. The rate of inappropriate calls appears to have decreased so far in September and this probably relates to staff being updated and more familiar with the system but we will keep an eye on this trend.

Chart 3: Stroke Telemedicine Consultations - calls by hospital (since Nov 2010)

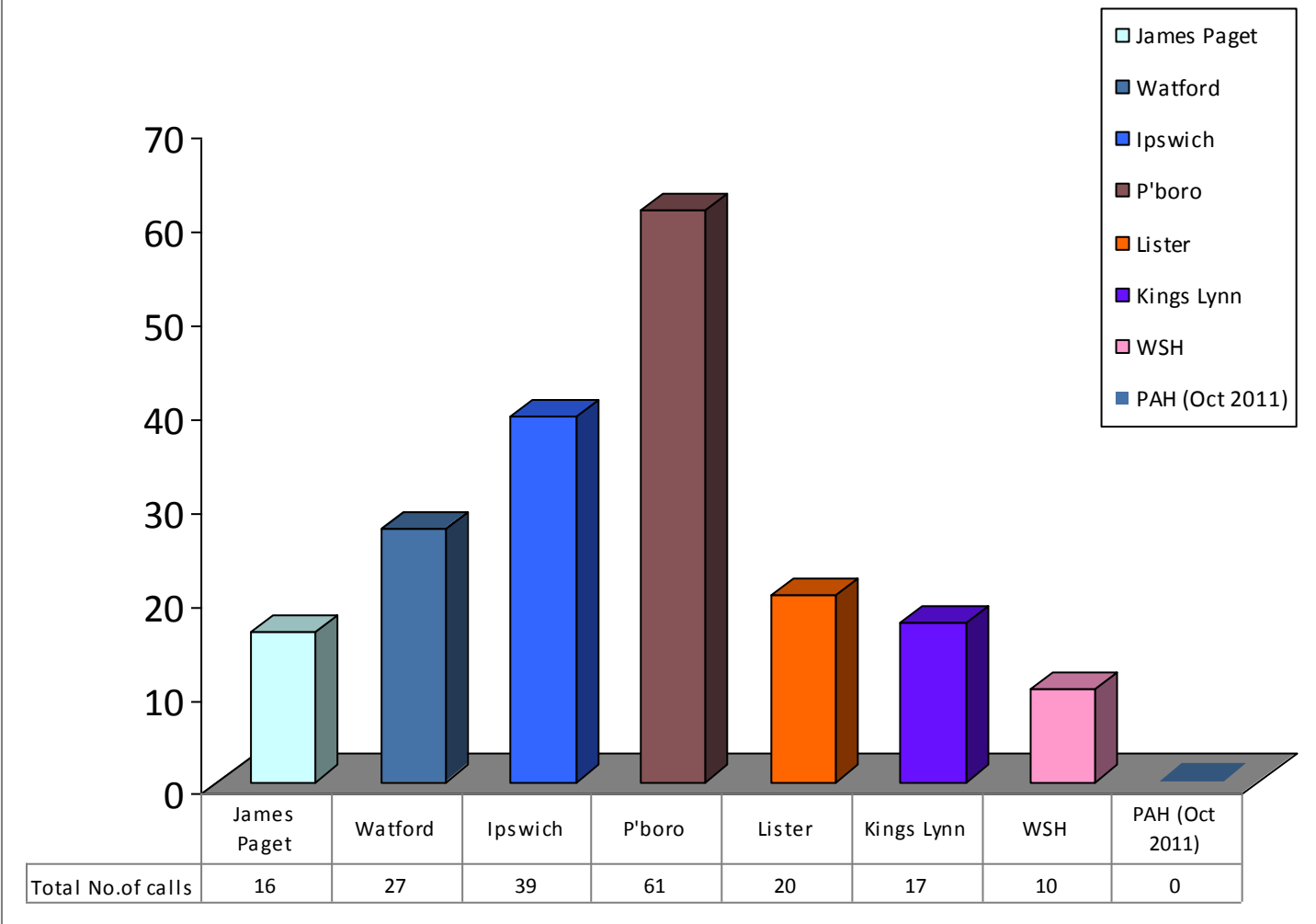


Chart 3 reviews the telemedicine consultations by hospital. Peterborough are in the lead, accounting for 32% of all calls, although of course Peterborough were one of the first hospitals to go online.

I am also asking the Stroke Consultants to document on the Audit Forms if the calls are 'telephone only' as there appears to be an increase in the number of cases that are managed by telephone alone. So far, where documented, 16 cases have been managed solely by telephone and again I think this is a feature that we will need to review.

Updated Software

Jim & I are putting together a timetable to update all the software on the carts and the Stroke Consultants laptops. We hope to have this completed before the end of the year. The new software, called Visimeet, is easy to use, very intuitive and user-friendly. Visimeet will provide you with the option to see who is online and if their sound/video is turned on or not—so hopefully it will resolve some of the sound issues!

I will be contacting you all individually with for some convenient dates in order to do this. The update only takes a few minutes and we will need the Superuser, cart, Consultant's laptop and the Trust tel-
medicine IT lead available while we do this. We will obviously be providing training and all the relevant documentation while we are there.

