

Certify your stroke care program.

Tell your community you're
ready when needed.



Stroke Certification Options



Stroke Ready Certification

Demonstrates to community emergency services and the public that the organization's stroke care program effectively meets the initial needs of stroke patients.



Primary Stroke Certification

Demonstrates that the hospital has the capacity to stabilize and treat acute stroke patients through safe and efficient administration of t-PA and other therapies.



Thrombectomy Certification

Demonstrates that the hospital has the capacity to perform this procedure for ischemic stroke patients.



Comprehensive Stroke Certification

Demonstrates that the hospital is equipped to meet the needs of complex stroke patients via advanced treatment in neurology, neurosurgery, and neuroradiology.

Each HFAP Stroke Certification option includes standards addressing governance, delivery of clinical services, and infrastructure support. Within this common framework, the requirements are tied to the specific level of program complexity.

Participating organizations submit a quarterly report on measures relevant to the level of care provided using the *HFAP Stroke Data Tool*. For hospitals that submit data to the Get With The Guidelines® database, the GWTG data may be substituted for HFAP quarterly reporting purposes, but HFAP measures not included in the GWTG report must be tracked and available at the time of onsite survey and mid-cycle review.

Every hospital—every healthcare setting—should be prepared to identify the signs and symptoms of stroke and to activate protocols for appropriate triage, treatment and (potential) transfer of stroke patients.

Whether your hospital is “stroke ready” or provides advanced neurological care, you should have a structure and set of protocols representing best practice for your level of treatment.

HFAP Stroke Care Certification is designed to recognize excellence across the continuum of care. Our certification programs recognize four levels of treatment and each program option welcomes you to on-going participation in a community of practice.

Why seek HFAP Stroke Certification?

Organizations have chosen HFAP Stroke Certification to:

- Organize service delivery structures toward advanced levels of care.
- Drive the adoption of practices that improve outcomes and reduce risk.
- Benchmark performance; you can't know what your data means without putting it in a meaningful context.
- Signal excellence to staff, patients, and payers.
- Articulate a commitment to continuous improvement.
- Provide staff with an opportunity to build skills and receive recognition for achievement.
- Participate in community of practice quarterly teleconferences.
- Access resources shared by clinical peers including evidence-based protocols, order sets, policies and procedures, educational plans, and data collection tools.
- Strengthen community partnerships and consumer confidence.

Why HFAP?

HFAP launched certification for hospital stroke programs in 2006 based on the guidelines of the Brain Attack Coalition and the American Heart Association/American Stroke Association. The program's expansion is the result of advancing science in stroke treatment options and contributions from clinical experts in the field of stroke care. HFAP's consultative, educational approach and commitment to the facility's success results in **a better survey experience**.

HFAP is the nation's original healthcare accrediting organization, founded in 1945 to validate quality in hospitals using a collegial, teaching-based survey process. Granted deeming authority by CMS when that agency was founded, our accreditation programs cover the range of healthcare settings from acute care and critical access hospitals to outpatient surgical and behavioral health organizations.

Effective stroke care begins well before a patient arrives.

Your stroke care program should address a continuous cycle of planning, service delivery, evaluation of processes and outcomes, and performance improvement activities.



PLANNING & ENGAGEMENT

- Who is your patient population?
- Do you see differences in stroke type, patient age, and risk factors within that population?
- Which hospital departments are put on “standby” when a stroke patient is arriving?
- How long do patients wait before coming to the emergency department with stroke symptoms?
- How do you partner with primary care or other providers in the community?

PROTOCOLS

- What types of assessment information is shared before the patient arrives?
- Who’s on the treatment team, and how are they alerted?
- What are the time goals for physician call-back, in-person team response, lab and radiology turnarounds, and medication delivery?
- How do you prepare patients for transition of care/ discharge?

EVALUATION

- What’s the quality improvement and reporting process?
- Are “door-to-needle” times consistent or are there particular shifts when the acute stroke protocol doesn’t meet time targets?

The HFAP standards outlined below align multidisciplinary integration of care with specific organizational roles to create a focused and effective stroke care program.

GOVERNANCE / ADMINISTRATION	CLINICAL	ORGANIZATIONAL INFRASTRUCTURE
01.00 Strategic Direction ■ 01.00.01 Governance Plan 01.00.02 Licensure 01.00.03 Grievance Process	02.00 Service Integration ■ 02.00.01 Emergency Department 02.00.02 Stroke Unit 02.00.03 Intensive Care Unit 02.00.04 Neuroimaging 02.00.05 Laboratory Services 02.00.06 Medication Management 02.00.07 Surgical Services 02.00.08 Telemedicine	03.00 Human Resources ■ ■ 03.00.01 Nursing Services 03.00.02 Non-Physician Professionals 03.00.03 Orientation and Education
01.01 Credentialing ■ 01.01.01 Medical Director 01.01.02 Medical Staffing	02.01 Standards of Care ■ ■ ■ 02.01.01 Target Population and Service Delivery 02.01.02 Access to Care 02.01.03 Patient Rights	03.01 Quality and Risk Management ■ 03.01.01 Quality and Performance & Risk Management 03.01.02 Data Collection 03.01.03 Clinical Measures
01.02 Physical Environment ■ 01.02.01 Safe Environment 01.02.02 Equipment 01.02.03 Infection Prevention & Control	02.02 Delivery of Care ■ ■ 02.02.01 Protocols and Guidelines 02.02.02 Assessments 02.02.03 Plan of Care 02.02.04 Rehabilitation 02.02.05 Discharge Coordination 02.02.06 Patient and Patient Representative Education	03.02 Information Management ■ ■ ■ 03.02.01 Patient Registry 03.02.02 Information Management System 03.02.03 Medical Records
01.03 Social Responsibility ■ 01.03.01 Health Promotion 01.03.02 Partnerships	02.03 Responsive Care ■ ■ 02.03.01 Emergency Medical Services 02.03.02 Clinical Deterioration 02.03.03 Rapid Response System	

The Journey to HFAP Stroke Certification

1

Call us at 312.202.8258 or email certification@hfap.org.

We'll discuss your stroke program to determine which HFAP Stroke Certification option is the best fit.

2

Review the relevant manual of standards.

On-going consultation is available by phone to help you understand the intent of each standard and what it means in the context of your organization's stroke program.

3

The on-site survey takes place.

The survey is scheduled in consultation with your organization and conducted by a clinician with experience in stroke care. The survey experience is positive and educational. Concerns or questions will be identified while the surveyor is on-site and a report of any deficiencies is provided within 10 days of completion of the survey.

4

Provide your plan of correction.

Tell us how you plan to address the deficiencies identified.

5

Certification decision is made.

Certified organizations are invited to participate in quarterly peer-led community of practice teleconferences.

6

Maintain compliance with the certification standards.

Certification lasts for three years and requires submission of quarterly data measures. For Primary Stroke and Thrombectomy, certification includes a mid-cycle desktop review. For Comprehensive Stroke, certification includes a mid-cycle on-site survey.



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