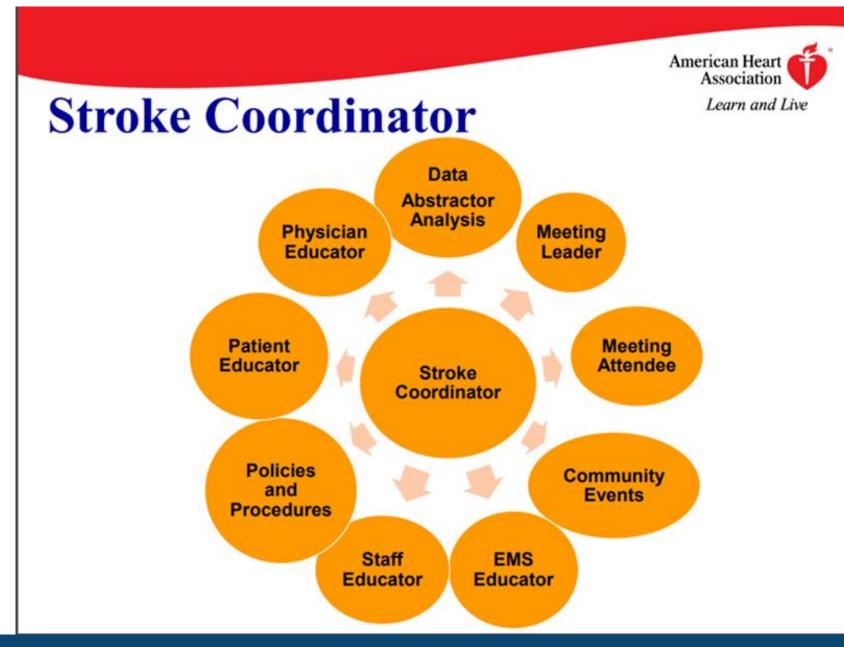
The Role of the Stroke Coordinator

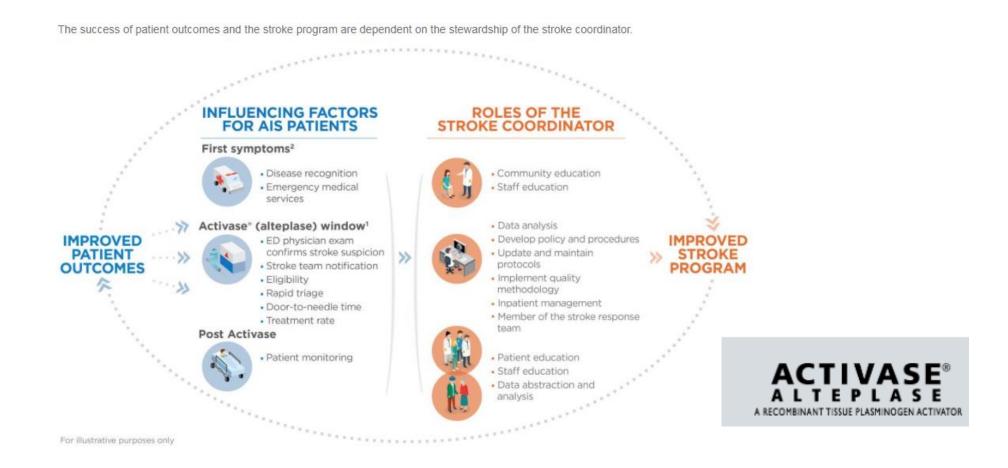
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The stroke coordinator is integral to patient outcomes and an institution's stroke program





Abstract P170: Stroke Coordinator Roles and Developmental Needs Around the Globe: An MT2020 International Survey Anne W Alexandrov, Sushanth Aroor, Sharon Biby, Jennifer Potter-Vig, Swatantra Kumar Soni, Manav Fakey, Violiza Inoa, Dileep R Yavagal, MT2020 Global Executive Committee Originally published11 Mar

2021https://doi.org/10.1161/str.52.suppl_1.P170Stroke. 2021;52:AP170

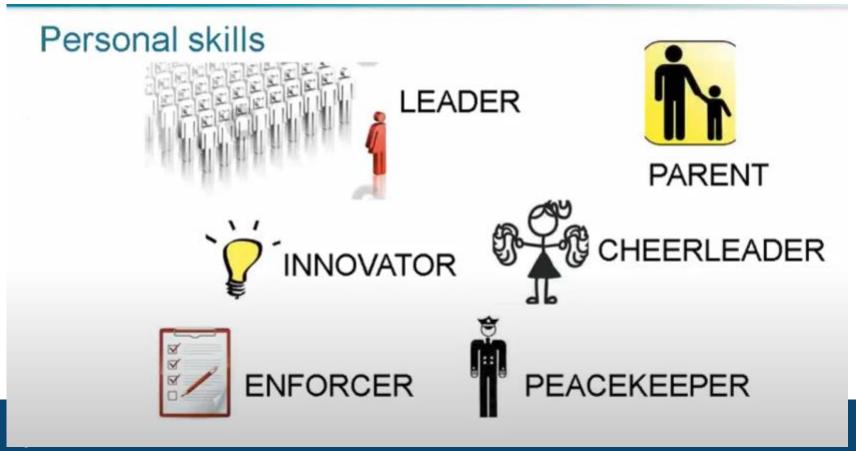
Of the 70% of respondents interested in receiving SC development resources, the aspect deemed most important was "Improvement of Stroke Nursing Knowledge/Care" (71% non-USA/81% USA). "Development of Stroke Systems of Care" was deemed second most important by non-USA hospitals (53%), followed by "Development of Government Policy" (35%).

Variable Non-USA USA Difference (Role performed by (Role performed by MD = 63%) RN = 95%) 73% X2=8; p=0.005 Data Abstraction 38.5% X2=7.9; p=0.005 50% 82% Lead Meetings Enter Quality Data 31% 55% X2=3.7; p=0.054 X2=5.7; p=0.017 61.5% 87% Staff Educator **Develop Policies & Procedures** X²=10.9; p=0.001 50% 87% Conduct Research 35% 41% p=NS X2=16.2; p<0.001 Patient Educator 23% 73% Educate MDs 38.5% 73% X2=8; p=0.005 Review Stroke Center 38.5% 82% X2=13.6; p<0.001 Certification Standards 31% X²=20.2; p<0.001 Update Evidence-Based Practices 84% X2=25.2; p<0.001 Concurrent Chart Review 27% 86% X2=5.9; p=0.015 Attend Code Strokes 46% 75% Point of Contact for the Stroke 35% X2=15.9; p<0.001 82% Program X²=18.9; p<0.001 Community Educator 27% 80% Quality Improvement X²=12.9; p<0.001 46% 87% X2=16.7; p<0.001 EMS Education 15% 66% Monitor EMS DX Accuracy 11.5% X2=12.8; p<0.001 54.5%

Table 1: Differences in Stroke Coordinator Roles



Team Leader/Team Player







Lynchpin (noun) one that serves to hold together parts or elements that exist or function as a unit

Stroke Coordinator: Lynchpin of the stroke team

"Many hospital stroke programs fail, and the primary reason is they lack a strong stroke coordinator. Almost universally, programs that fail or backslide in performance are those [that] lost a stroke coordinator or did not have one and tried to tack it on to someone else's job. Having seen a few hundred stroke programs, I can unequivocally make this statement."

-- Timothy Shepherd, PhD

Rodak 2013: Becker Hospital Review

