

Improving Stroke Response Speed

Strengthening Stroke Response with a Collaborative TeleStroke Model

The Challenge

A 352-bed acute care hospital in California wanted to improve its Door-to-Needle (DTN) metrics for acute ischemic stroke patients.

Stroke response requires tight coordination across multiple teams, technologies, and time-sensitive decision points, where even small delays can significantly impact outcomes.

The focus was not on building a stroke program from scratch, but on refining an already established approach, reducing variability, improving reliability, and ensuring every stroke activation moved as efficiently as possible from arrival to treatment.

The Solution

The hospital partnered with Access TeleCare to strengthen its teleStroke program through close collaboration of on-site and virtual clinicians and deeper integration with hospital workflows.

Rather than functioning as a standalone service, Access TeleCare worked in lockstep with clinical, operational, and leadership teams to ensure the hospital was fully realizing the value of its teleStroke coverage. The partnership emphasized:

- ✓ Integrated coordination between Access TeleCare clinicians and on-site teams
- ✓ Alignment across stroke activation and treatment workflows
- ✓ Clear communication and shared accountability during stroke events
- ✓ Ongoing identification and resolution of operational barriers

This collaborative approach allowed both on-site and virtual teams to move quickly, adjust in real time, and stay focused on accelerating treatment without adding unnecessary burden to frontline staff.

The Result

Within just three months of the teleStroke model, the hospital achieved a 52.9-minute reduction in DTN time, cutting average DTN from 95.9 minutes to 43 minutes for thrombolytic stroke cases.

This improvement represented a fundamental shift in stroke care delivery. What had previously been a prolonged process became faster, more reliable, and aligned across teams, creating a foundation for sustained performance improvement. Comparing 2024 to 2025, the hospital was better equipped to treat stroke patients efficiently, leading to a 43 percent increase in the number of patients treated per month for acute ischemic stroke.

Key Outcomes



52.9 MINUTE REDUCTION
in Door-to-Needle Time



AVERAGE DTN IMPROVED
from **95.9 MIN** → **43 MIN**



43% INCREASE
in number of patients treated
for acute ischemic stroke

"This level of Door-to-Needle improvement doesn't happen without alignment. The collaboration between our teams and Access TeleCare fundamentally changed how we deliver stroke care. Access TeleCare came in quickly, reliably, with shared accountability, and right where our sticking point was."

**System Stroke
Program Supervisor**