

A decorative gold swoosh starts from the bottom left, curves upwards and to the right, ending in a gold circle in the top right corner.

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A large, thick, gold-colored swoosh curves from the bottom left towards the top right, ending in a solid gold circle in the top right corner.

Welcome to Iredell Memorial

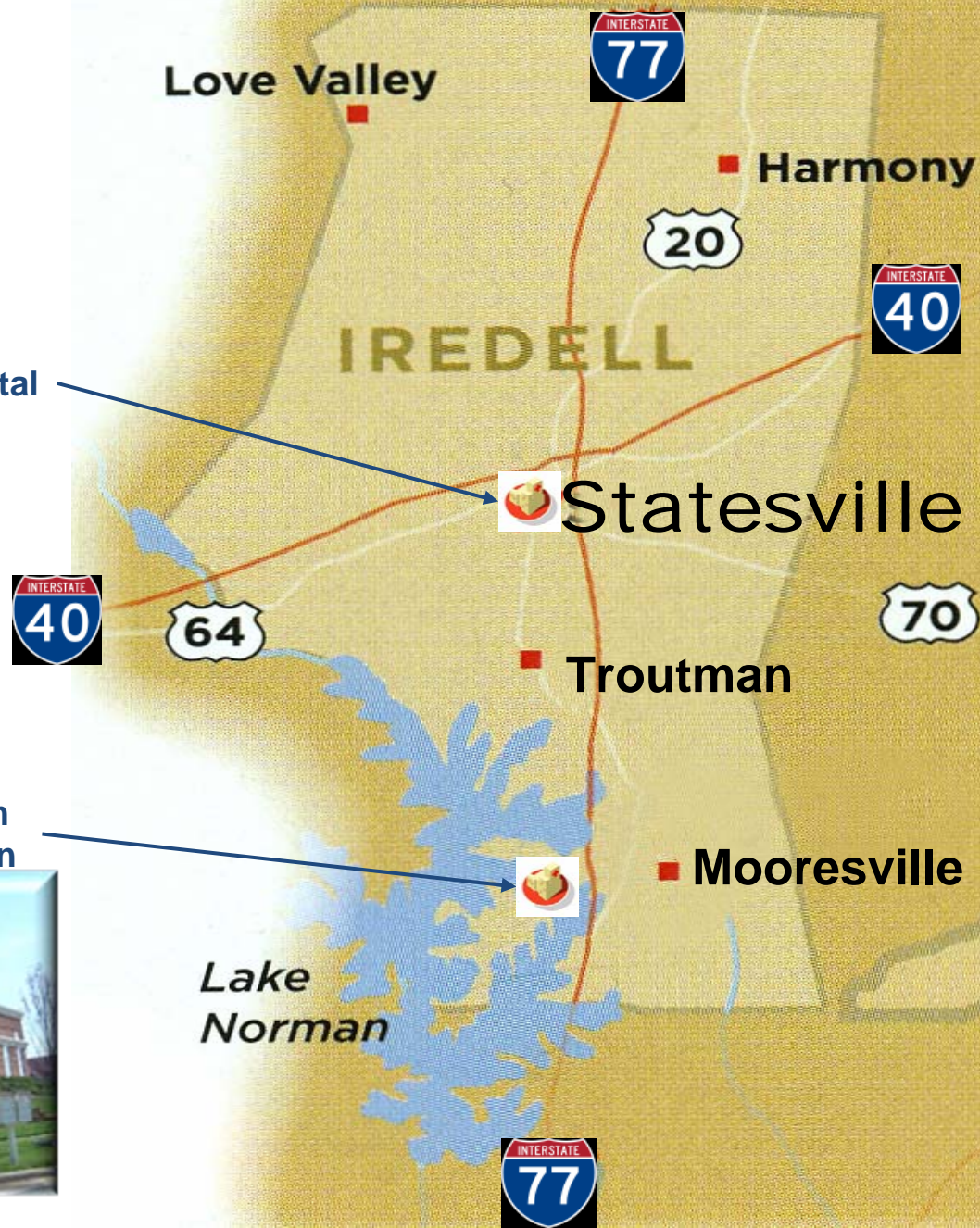
*Where you'll find a caring community...
and a community to care for!*

Our Location...



Iredell Memorial Hospital

Iredell Health System
at Morrison Plantation



Our Community...



- Immediate area population of approximately 40,000
- Population within 25 mile radius of near 300,000
- 40 minutes from Charlotte or Winston Salem, NC
- Morning's drive from popular North & South Carolina beaches
- An hour's drive from ski resorts
- Clean air environment
- Low crime area

Our Hospital Information and History...



- Opened in 1954 to serve residents of Iredell and surrounding counties
- Iredell Memorial is the county's largest hospital
- Iredell County's ONLY not-for-profit hospital
- JCAHO Accredited
- AHA designated *"Fit Friendly Place of Work"*

Our Hospital Information and History...



- First radiation therapy center in county
- Exclusive provider of Lifeline®
(24-hour emergency response service)
- Maintains health clinic for Statesville Housing Authority
- Owns Iredell Home Health

Our beds...



Iredell Memorial is licensed for 247 including:

•CCU/ICU	16 beds
•Med/Surg	129 beds
•Pediatrics	10 beds
•SNF	48 beds
•Telemetry	31 beds
•Birth Place	9 beds
•Level III Nursery	4 beds

Our numbers...

(FY2008)



- Approximately 1,200 full time staff members
- Total of 1,650 full/part/prn staff members
- 181 physicians
- 35 medical specialties

Our numbers...

(FY2008)



- Delivered 960 babies
- Handled 49,085 emergency/convenience care visits
- Registered 8,969 admissions
- Performed 6,496 surgical cases
- Made 31,739 home health care visits



Our Strengths...

- Location
- Medical Staff
- Board of Directors
- Independent/Free Standing
- Quality of Care/Staffing Levels
- Preferred Hospital
- Administration/Medical Staff Relationships

Our Strengths...



- County's first and only Primary Stroke Center Certification
- Three Year Approval with Commendation to Cancer Program
- 4 and 5 Star patient-rated Emergency, 2 North and Birthplace Departments.

Growth...



- **Interventional Cardiology Services**
 - New Services provided locally for our community
 - Barry Kramer, MD-Interventional Cardiologist
- **Medical Office Building**
 - Cardiology
 - Disease Management & Preventative Health
 - Ortho/Spine
 - Iredell Rehab/Sports Medicine

Growth...



■ Morrison Plantation- Mooresville

- Dr. Judy Bremnor, family care
- Dr. Jason Batley, orthopedic
- Dr. Augustine Obi, endocrinology
- Cardiac Rehab
- Diabetes Education
- Future addition of OB/GYN



Best Place to Work



Iredell Memorial Hospital
One of the Best Places to Work

CHARLOTTE
BUSINESS JOURNAL





Joint Commission Certification as a Primary Stroke Center August 22, 2008

The Beginning – Dysphagia Screen

Development of a dysphagia screen

Staff education in dysphagia screen

Implementation

Easy, just develop an action plan. Right???

Began Summer 2005; Successful June 2008

Development of a dysphagia screen

The Joint Commission:

Any swallow assessment/screening that is prior to oral intake; within 4 hours of admission

Most stroke teams stall here searching for the perfect dysphagia screen.

Pick one, any one, and move on!

Barriers

- Swallowing is not vital to patient outcomes
- Swallowing is not an emergency
- No choking = good swallow
- That's nice, but we just don't have the time
- What's the point anyway, I'm a nurse
- No way my staff will do that
- But they **HAVE** to have that aspirin ASAP

Education – WHY???

- Stroke, dysphagia and aspiration pneumonia
- Swallow anatomy and physiology
- Why me and why now? Impacting patient outcomes.
- Dysphagia screening protocol and form

Aspiration Pneumonia

- Of the more than 700,000 Americans who have a stroke each year, 13% will develop post-stroke pneumonia during their hospitalization.
- Post-stroke pneumonia is believed to be attributable to the aspiration of oral secretions and/or oral intake in the presence of varying degrees of dysphagia.



Aspiration often goes undetected.

Studies have shown the 30 – 50% of all patients who aspirate do so without bedside signs and symptoms such as coughing or choking.

Dysphagia education:

- Swallowing is a pressure system.
- Swallowing is a sensory-motor system.

GOOD NURSES observe swallowing anatomy and physiology with EVERY swallow!!!

- Facial symmetry
- Lip closure
- Tongue strength/control
- Speed/timing of swallow
- Open airway/closed esophagus
- Laryngeal elevation during swallow
- Voice quality before and after swallow
- Wet, gurgly sounds after swallow

MBS video

Patient with inefficient swallow; severe pharyngeal residue; silent aspiration of thin liquids in an alert patient with no bedside signs and symptoms.

2 minute dysphagia screen

- Improves patient safety immediately and after patient leaves your unit.
- Can be repeated as needed to upgrade or downgrade diet.
- Speech pathologist will follow up as needed.



Outcomes:

Originally taught 36 classes to ED, CC, and Stroke unit nurses. August – October 2007

Other nursing staff began showing up in the classes.

February 2007: Taught 18 classes hospital wide.

Now teach 1 hour class monthly during orientation.

IMH StrokeProgram Dysphagia Screening

