



Stroke Strategy  
Southwestern Ontario

a partner in the Ontario Stroke System

A NEWSLETTER FOR HEALTH CARE PROFESSIONALS ABOUT THE ACTIVITIES OF THE SWO STROKE STRATEGY



Edith Jarvis, a long-time resident of Listowel, celebrated her 90 birthday at an open house celebration on May 17.

## “That drug was a miraculous thing.”

As she had each morning for the eight years she lived at Caressant Care Retirement Home in Listowel, Edith Jarvis, 90, went to the dining room at 8am for her breakfast. That morning – it was August 15 – she added milk to her cereal and then realized that she couldn’t lift her spoon to sprinkle on some sugar. Bonnie, a member of the Caressant Care team, came by at that moment and asked Edith if she wanted more coffee. Edith couldn’t respond.

She recalls, “Bonnie took one look at me and said ‘Oh Edith, you’re having a stroke.’”

Edith was taken by ambulance to Stratford General Hospital. Conscious the

*continued on page 8*

## A fresh new look for the Southwestern Ontario Stroke Strategy

Just in time for the New Year, I am delighted to introduce the new look for the Southwestern Ontario Stroke Strategy!

Understanding the need to differentiate ourselves from our partners, and knowing it was important to create a recognizable identity for the Stroke Strategy among our internal and external stakeholders, the Southwest Region embarked upon a re-branding process earlier this fall.

The result of this process is a fresh new brand representing health and caring, collaboration and cooperation, and the commitment of Southwestern Ontario health care professionals to stroke patients and their families. The abstract representation of the brain reflects the Stroke Strategy’s connection to medicine and the supportive hands represent those of the formal and informal caregivers across the region. Our colour palette is adapted from the highly recognizable colours of our partner at the Heart and Stroke Foundation.

The Southwest region is a part of the Ontario Stroke System. We have selected the word “strategy” for our regional name, however, as it accurately reflects how we work. A **strategy** is a long-term plan of action designed to achieve specific goals or results. “Strategies” are active and purposeful and this word sends just the right message to our partners across the continuum of care.

We are confident that we have captured the spirit of the innovative team that is reorganizing stroke care delivery across the continuum of care. We thank the Heart and Stroke Foundation of Ontario for supporting our re-branding process. Watch for our new brand in action as we begin to circulate the new logo online, in presentations and throughout our communications materials.

Best Wishes of the Holiday Season!  
Chris O’Callaghan, Region Program Manager

### WHAT’S INSIDE

- Health Promotion and Prevention 2
- Rehabilitation and Education 3
- Stroke Centre Updates 4-5
- What is the FIM? 6
- Resources for HCP 7
- CSS Best Practices 8



Ontario  
**Stroke**  
System

## Health promotion and prevention with Sharon Mytka

The provincial task group on secondary prevention is developing a messaging strategy to prevent stroke by providing education and enhancing resource options to health professionals who have first contact with persons experiencing a TIA.

The Centre for Effective Practice at the University of Toronto is spearheading **A Patient Centered Circle of Stroke Support**, in collaboration with the Ontario College of Family Physicians. Through this project, neurologists and family physicians with a special interest in stroke will be paired as mentors with a number of family physicians ("mentees") within their catchment area. The family physicians will self-identify as interested in enhancing their care of stroke patients or those at risk of stroke. Interested in being a mentor or mentee? Contact Sharon Mytka (519) 685-8500 ext 32264. Additional updates:

- **Cardiac Rehabilitative Programming as Secondary Prevention for Survivors of Transient Ischemic Attacks and Mild Non-Disabling Strokes.** The Ministry-funded portion of this project is drawing to a close. Findings will be submitted to the Ministry of Health and Long Term Care in January 2007. The evaluator, Dr. Peter Prior, presented preliminary findings at the Joint World Congress on Stroke in October.
- **The Oxford Blood Pressure Education Program.** All patients will have completed the pilot program in December. The report of findings and recommendations will be submitted to the Ministry of Health and Long Term Care in January 2007. In the interim, the task team is seeking funding to continue the program.



The Elgin Stroke Working Group hosted "What's Happening in Stroke in Elgin County" on June 9. Walter Gretzky was our special guest. (Front, centre) Walter Gretzky, (clockwise, starting at the left of Walter) Shirley Biro, Lois Beamish-Taylor, Erica Arnett, Sharon Mytka, Alyssa Hollingsworth, Christine Sanderson, Sue Couillard, and Godlief Devaere.

## LTC and community update with Alison Greenhill

The SW Stroke Strategy has recently established links with the **Canadian Centre for Activity and Aging** and the stroke research program at **Parkwood Hospital** under Dr. Robert Teasell. Meetings have been held to discuss the development of a stroke exercise program at Mount St. Joseph's. A literature search looking at possible models that include caregiver and community re-engagement sections as well as exercise, is being completed.

The **Middlesex LTC Data Group** completed a survey of LTC homes in London and Middlesex regarding stroke survivors in their homes and the services provided for them. Survey results will serve as a benchmark prior to implementing enhancements to services for stroke survivors and their caregivers.

Hospital partners in London, Stratford, Sarnia, Windsor and Grey/Bruce and the SW Stroke Strategy are developing and evaluating the use of a post-discharge telephone questionnaire to identify and investigate issues for stroke survivors and their primary supports during the first year of community re-engagement. The next step is to develop a research proposal and submit it to the individual ethics committees.

The **Midwestern Adult Day Program** in Clinton has developed a program for stroke survivors. Two focus groups, open to the community were held in September to identify community needs. An evaluation process will be developed as part of the plan. The **VON Oxford** will soon start a day program for young stroke survivors in Tillsonburg.

The LTC and Community Coordinators working group has completed a document outlining the issues for stroke survivors in the community and LTC. This document is intended to generate discussion and increase awareness within the Erie St. Clair and Southwest LHINS.

Finally, a poster presentation was prepared by the provincial Community and Long Term Care Specialist group for the **Ontario Community Support Association** annual conference to inform them about our role and to invite collaborative initiatives.



On December 1, the Clinical Neurosciences Unit at London Health Sciences Centre-University Hospital formally launched the implementation of the best practice guidelines for the management of the hemiplegic arm known as the "Hemi Arm Protocol." The staff on the unit were educated on criteria for inclusion in the protocol as well as positioning and handling of the hemiplegic arm. Positioning and transfer cards, which will be posted at the bedside, were created to assist with the clinical application of the protocol. The "Hemi Arm" Committee members include: Dalia Abromaitis (OT); Jennifer Curry (PT), Mary Thomas (RN), Gina Tomaszewski (SWO Regional Stroke Educator), Deb Willems (SWO Regional Rehabilitation Coordinator) and Sharon Wyville (RN). The committee would also like to thank the following people for their support: Megan Cornwell, Delynn Felder, Kim Staikos and Kathy Stuart.

## Rehabilitation with Deb Willems

On **November 28, 2006** we convened a gathering of regional stroke rehabilitation stakeholders for an **Action Planning Day**. This day facilitated discussion by key decision makers as they identified opportunities for improvement, and developed action plans for initiatives to be undertaken within the realm of stroke rehabilitation. Dr. Robert Teasell presented **A Blueprint for Stroke Rehabilitation: Improving Outcomes and Maximizing Efficiencies**, an economic model for stroke rehabilitation.

A **Stroke Rehabilitation Advisory Group** now supports the Regional Rehabilitation Coordinator position. Eileen Britt, Coordinator, Stroke Rehabilitation Program at Parkwood Hospital, SJHC, London and Bernice Markham, Program Manager, Windsor Western Hospital co-chair this group.

As a member of the **Stroke Evaluation Advisory Committee (SEAC)** and Rehabilitation Subcommittee, I work with other committee members to identify performance indicators. These indicators serve to support evaluation of the current status of stroke rehabilitation, and will provide the opportunity to measure system changes as we move toward best practice.



*More than 70 health care providers and administrators met on November 28 for the Southwest Stroke Strategy's Stroke Rehabilitation Action Planning Day. Pictured here: Deb Willems, Regional Rehabilitation Coordinator and Mr. Richard Bondy, a stroke survivor and member of the Rehabilitation Advisory Committee.*

## Education with Gina Tomaszewski

The region has been busy with **Chedoke McMaster Training**. Several districts hosted the 8-hour certification workshop for Occupational Therapists and Physiotherapists. Deb Willems, our Regional Rehab Coordinator, provides **"Introductory Sessions"** on the Chedoke. These sessions are for health care professionals requiring more information regarding the assessment before they consider the certification workshop.

The inaugural **Social Work Practice and Stroke Conference** for Social Workers was held at the Lamplighter on Sept. 28 and 29. Approximately 50 Social Workers attended. Kathy Stiell, Social Worker; and Gillian Gailey, Speech Language Pathologist, co-founders of the Aphasia Centre of Ottawa helped social workers expand their understanding of family resilience following stroke and provided a plan for addressing the emotional needs of families. Dr. Barbara Decker Pierce, Associate Professor at the School of Social Work, King's University College, provided the audience with a "Practical Primer on Evaluation" with the intention of imparting some practical tools and renewing confidence in evaluation of practice.

The two day **Best Practices Workshop for frontline staff** is still going strong! Owen Sound, Tillsonburg, Sarnia and Windsor-Essex have all held workshops.

On Sept. 21 the SWO Education Committee held an Education Planning Day. Goals included:

- reviewing the stroke education to date;
- identifying key programs for evaluation; and
- developing a three year education plan that would delineate the education and/or evaluation requirements for the key programs.

Chedoke McMaster Education; Tips and Tools (specifically the Feeding and Swallowing module), and Blood Pressure Education were selected for evaluation. These three programs were strategically aligned with the Knowledge Transfer Cycle resulting in three comprehensive evaluation plans to support of the integration of new knowledge into practice.



*On April 4, nearly 30 regional Recreation Therapists met in Stratford at the Arden Park to identify and discuss educational needs related to stroke care.*

## Chatham-Kent District Stroke Centre

It is an amazing journey to reflect on the activities and initiatives that have taken place since Chatham-Kent was designated one of the five District Stroke Centres within the Southwest Region in April 2003. All those supporting the Chatham-Kent District Stroke Centre should be very proud of the tremendous growth and change we have implemented in **partnership with our community** across the continuum of care, for patients and families affected by stroke. Coordinated efforts continue to provide **best practice stroke care** strategies and ensure that stroke survivors and their families experience continuity of care as they move through the stroke care system.

Chatham's participation in the telestroke project, "**BRAINSAVE**", which builds capacity for the assessment and treatment of acute stroke using video-conferencing and tele-radiology, the implementation of the **Integrated Stroke Unit** within Rehabilitation/CCC program, and the continued dedication to the provision of an integrated, interdisciplinary approach to **primary and secondary stroke prevention** have all been strongly embraced by our community. The Stroke Prevention Clinic-CK will continue to work collaboratively with other vascular health models to provide prevention leadership within our community, district and region.

**Editor's Note:** Laurie Zimmer, who has served as the District Stroke Coordinator for Chatham Kent with commitment, diligence, vision and enthusiasm since 2003, has accepted a new position with the hospital effective December 4, 2006. As a District Stroke Coordinator, Laurie delivered on many initiatives including processes for the administration

of tPa for acute stroke, bypass to the closest stroke centre, Tips and Tools for frontline workers, multiple DSC Strategic Plans, and BRAINSAVE. Please join us in wishing her well in her new position as a Project Manager with the IT Department (CHIS).

## Grey-Bruce District Stroke Centre

The focus of this update is knowledge translation. In the past few months a number of activities have concentrated on awareness, education, skill building, environmental support and policy support for professionals. Here are some of the initiatives:

- **Fast FAQ for Stroke Nurses** and RNAO Stroke Guidelines were made accessible to all nurses in Grey Bruce.
- **CNS** training was held with individual nurses.
- **Chedoke-McMaster Stroke Assessment Workshop** was held for 21 therapists who have informally reported on their use of the assessment.
- **Dysphagia Training** – A Train the Trainer Session was held for South Bruce Grey Health Centre (SBGHC). The twenty nurses who attended have held training sessions for nurses and therapy staff at the 4 SBGHC sites.
- **Stroke Fairs** for health professionals, organized by the Rehab Readiness Champions, were held at the 4 South Bruce Grey Health Centre sites. Dysphagia training took place at the same time. More than 100 staff members participated.
- **South Bruce Grey Health Centre** physiotherapists set learning objectives with the DSC at a staff meeting in May. The physiotherapy specific objectives of Multi-Disciplinary Learning Objectives for Stroke were reviewed.

- **Evidence-Informed Practice for Stroke Rehabilitation Physiotherapy and Occupational Therapy Specific Guidelines Workbook** developed by the DSC has been distributed (50 copies).
- **Health, Humour and Happiness, A Stroke Survivor Symposium** was held on May 2.
- 60 participants, including hospital coders, took part in the **Best Practice Stroke Education Workshop for Frontline Staff** held in June.
- **Clinical Nutrition and Stroke reference binders** were distributed to the hospitals' clinical nutrition departments. We are investigating a similar resource for LTC and community.

Health professionals continue to benefit from regional education initiatives and funding and the DSC continues to support professionals to move their stroke knowledge into practice.

## Huron-Perth District Stroke Centre

The Huron Perth District Stroke Centre is progressing with work across the continuum. We are actively getting the word out about stroke recognition at various venues and have initiated activities such as a mailing to local churches in Stratford and area. The **TEIP (Toward Evidence Informed Practice)** project continues with the development of the logic model and evaluation plan for the "Perth Workplace Lifestyle Intervention Program". A presentation about the program was provided at the Provincial Secondary Prevention and Promotion Roundtable in Toronto on October 17. A Medical Office Workshop was held on November 22 to provide information on the revised stroke prevention clinic referral tool, guidelines for blood pressure, and community

resources for stroke survivors. Tips and Tools workshops were held in the Spring and Fall with good attendance and feedback. The **Huron-Perth Community Rehab Group** is collaborating with thehealthline.ca website to develop a stroke-related “mini site” that provides access to local information about stroke services for stroke survivors, families and caregivers. Tammy Antaya, social worker with the **Midwestern Adult Day Program** held the first stroke survivor/caregiver support group on Oct 12 at the Clinton Day Centre. The name for the new group is SAYS (Stroke And You Surviving). Its goal is to bring together stroke survivors, caregivers and friends in a social environment to discuss topics of interest.

### **Sarnia-Lambton District Stroke Centre**

The Sarnia-Lambton Secondary Stroke Prevention Clinic (SSPC) opened **July 11, 2006**. The clinic is located at Bluewater Health, Norman Site, on the 3rd floor. Four physicians work in the clinic with our Clinical Nurse Specialist. A community grand opening for the SSPC was held on September 13, and a Medical Office Staff Workshop on September 20, to promote the SSPC referral process and provided education on TIA and stroke.

The Sarnia-Lambton DSC set up a booth promoting stroke awareness at the Lambton Seniors’ Fair, May 2 & 3, 2006. The DSC and SSPC held an open house to promote Stroke Month on June 26, 2006.

Phase II of the **Towards Evidence-Informed Practice** (TEIP) project is well underway. The DSC and Healthy Living Lambton work with the Smoking Cessation Program to enhance the program based on recommendations from Phase I. Enhancements include the development of a program logic model and evaluation framework, revisions to the program evaluation forms, and development of a Lambton County Smoking Cessation Network. The TEIP project was presented

at the Northeastern Regional Stroke Strategy Conference on September 28. An abstract submitted to the **State-of-the-Art Nursing Symposium** at the International Stroke Conference 2007 in San Francisco has been accepted for oral presentation.

A Chedoke McMaster Stroke Assessment (CMSA) Workshop was held in Sarnia on June 10. Twenty-four hospital and community-based occupational and physical therapists participated in the workshop. The CMSA is being piloted across the continuum of stroke care at Bluewater Health. **Tips and Tools** education was provided to Sarnia-Lambton VON PSW’s in June. The Best Practice Stroke Education Workshop for Frontline Staff was held November 22 and 23, at the Village Inn in Sarnia, Ontario.

### **Thames Valley**

VON Oxford is establishing two stroke programs. The first, a support program targeting stroke survivors under 65 began on November 7<sup>th</sup>. The second is a support program for caregivers of persons living with stroke and will begin in January 2007. For more information, contact Melissa Connor, 519-539-1231.

Tillsonburg District Memorial Hospital recently hosted a two-day workshop for frontline nurses on best practices in stroke care. In Elgin County, work is underway to host a forum with stroke survivors to determine interest in establishing a self-help group. St. Thomas Elgin Hospital is undertaking a revision of its acute care protocols and care path.

Middlesex County long-term care facilities completed a survey to determine the number of resident stroke survivors in their facilities and the related issues. Middlesex Health Alliance has drafted revisions to the acute and rehabilitation care pathways. London-Middlesex CCAC has reviewed and revised its protocols for assessment and reassessment of stroke survivors in the community.

At LHSC neurological unit, the nursing staff received training on the CNS Stroke Scale during the month of June. They are using the tool and are presently engaged in an evaluation of it’s utility. An interprofessional work group is implementing Management of the Hemiplegic Shoulder.

A Stroke Update, lunch and learn session was presented to the ER Nurses at University Hospital on October 26. Brenda O’Farrell facilitated the session.

### **Windsor-Essex District Stroke Centre**

Registered Dietitian Lisa Whatley joined our stroke prevention team as a permanent member and will provide individual and class nutrition patient education. Jackie O’Rourke, RN, will soon join our team as the County Stroke Resource Nurse based at Leamington District Memorial Hospital. Jackie’s role is innovative, providing cross-continuum case management and best practice support to the non-urban areas of Windsor Essex.

In partnership with Chronic Disease Prevention we participated in the annual Southwestern Ontario Medical Education Day. Our display focused on an awareness campaign targeting local physicians and is part of a larger initiative designed to inform local policy makers, key policy stakeholders and the general population about alcohol as a risk factor for chronic disease.

During the week of September 17-22, Denise St. Louis participated in HDGH’s Employee Wellness Week. Denise gave daily motivational presentations and then led employee “Wellness Walks”.

The Young Stroke Survivors Support Group led by Lisa Halley RN and Bonnie Cronin SW has been very successful. The group first met in June, and meetings have been increased to two times a month. The group’s purpose is to provide support for stroke survivors 55 years and younger.

## It's our pleasure...

... to welcome **Wendy Laing** to the role of Administrative Assistant for the Sarnia-Lambton District Stroke Centre and Secondary Stroke Prevention Clinic. **Angela Small Sekeris** is also joining the Sarnia-Lambton DSC in the role of Clinical Nurse Specialist. Angela is working in the Secondary Stroke Prevention Clinic.

... to thank **Sandy Taylor** for her important contributions to best practice stroke care within an interdisciplinary model both within LHSC and in collaboration with our external partners in the southwest region. Sandy will retire from her position as SWO's NP/CNS Regional Stroke Program effective December 28th 2006. We wish Sandy success in her future endeavours.

... to announce that the new Chair for the Ontario Stroke Evaluation Advisory Committee (SEAC) is **Nizar Ladak**, who currently works at the Central East LHIN as Senior Director Performance, Contract & Allocation.

... to congratulate **Mary VandenNeucker**, BScN, RN (EC) on successfully completing her Extended Class Registration Examination!

... to announce that **Bev Powell-Vinden** has been confirmed in the position of Manager, Stroke Care Delivery with the Heart and Stroke Foundation of Ontario. Bev will provide leadership at the HSFO as they move forward with the implications of the Strategic Positioning Report.

... to congratulate **Maureen Leyser** on her receipt of the Graduate Nurses Student Union Fellowship from University of Toronto. The Fellowship is awarded to a student in a Masters Program who has a good academic standing and has demonstrated outstanding extra-curricular involvement or leadership abilities. Maureen is a Primary Healthcare Nurse Practitioner at the Huron Perth District Stroke Program.

## News from the Heart and Stroke Foundation!

*Living With Stroke*, a community based educational and support program for stroke survivors and their caregivers, has been completely revamped by the Heart and Stroke Foundation of Ontario in collaboration with a group of stroke experts. The newly revised program is eight weeks in length, has a greater community focus, and incorporates principles of self-management. *Living With Stroke* is facilitated by a health professional who will help participants link to the resources that are available in their local community.

The program will be piloted from January to April 2007. To date, eight sites in Alberta, Saskatchewan and Ontario have committed to piloting *Living With Stroke*. A two-day facilitator training session will be held in early January. The coordination of the pilot will be lead by Rika Vander Laan at [rvanderlaan@hsf.on.ca](mailto:rvanderlaan@hsf.on.ca)



Congratulations to the London "BRAIN TRAIN" team for raising more than \$3,882.00 in the London Big Bike Ride for Stroke Event! Proceeds support Heart and Stroke Foundation research programs.

## FAQ's

**Q:** What is the FIM?

**A:** The FIM (Functional Independence Measure) is a copyrighted scale used to assess the physical and cognitive disability in terms of burden of care. It is used to monitor the patient's progress and assess outcomes of rehabilitation. The FIM includes 18 items assessing independence in: self-care, sphincter control, mobility, locomotion, communication, and social cognition. For each of these items a score ranging from 1 to 7 is assigned. A FIM score of 7 indicates "complete independence," while a score of 1 is "total assistance". Scores falling below six require another person for supervision or assistance. Scores for each item are totaled. Total scores can range from 18 (lowest) to 126 (highest) level of independence.

A FIM scores are routinely collected within 72 hours after admission to the rehabilitation unit, within 72 hours before discharge, and in follow-up scores may also be collected between 80 to 180 days after discharge.

A wide variety of health care professionals (physical therapists, occupational therapists, nurses, psychologists, and social workers) can administer the FIM in practice, once they have received FIM certification training.

FIM is most widely used in medical rehabilitation units.

## Resources for Health Care Professionals

### Report from the Canadian Population Health Initiative

The Canadian Population Health Initiative (CPHI) has released a report entitled, *How Healthy Are Rural Canadians? An Assessment of Their Health Status and Health Determinants*. This pan-Canadian report compares rural and urban Canadians on a variety of health measures including rates of death, chronic diseases, and self-rated health. The report is available, free of charge, at [www.cihi.ca/cphi](http://www.cihi.ca/cphi).

### HEARTBEAT of the Anishnawbe Nation educational DVD

Learning about stroke and blood pressure management by means of both medical and Aboriginal traditions is the path of this DVD. Brenda's journey through the clinic allows us to understand how stroke and blood pressure is affected by smoking, diet, exercise, alcohol, and medication. The language of the DVD is Ojibwe and dubbed as English and Oji-Cree (19 minutes). For more information contact Gina Tomaszewski, Regional Stroke Education Coordinator or [csor@hsf.on.ca](mailto:csor@hsf.on.ca).

### Tips and Tools for Everyday Living: A Guide for Stroke Caregivers

*"Putting it into Practice" Video Series also available in VHS, and on the Web-visit [www.strokestrategyseo.ca](http://www.strokestrategyseo.ca) then go to Professional Education.*

The series includes: Recognize & React to the Signs & Symptoms of Stroke for Health care providers; Communication; Meal Assistance & Hydration; Cognition, Perception & Behaviour; Mobility; Family & Communication Education. The series is intended to complement the traditional Tips and Tools Workshops. For more information go to link ([www.strokestrategyseo.ca/pdf\\_docs/strokevideoposter2006.pdf](http://www.strokestrategyseo.ca/pdf_docs/strokevideoposter2006.pdf)) or contact Gina Tomaszewski, Regional Stroke Education Coordinator.

### Canadian Best Practices Portal for Health Promotion

The Public Health Agency of Canada recently launched the Canadian Best Practices Portal for Health Promotion

and Chronic Disease Prevention – an online resource for decision makers in practice, policy and research. It is a virtual front door leading to an array of evidence-based best practices interventions, systematic reviews, and resources for health promotion and chronic disease prevention. The Population Health Approach is used as the organizing framework, providing you with a systematic approach to planning. Visit the Canadian Best Practices Portal today at <http://www.phac.gc.ca/cbpp>.

### Towards Evidence Informed Practice Project Online

The learning module is a step-by-step audio and slide description of all the Program Assessment tools developed by TEIP, complete with a case study showing their practical application. After viewing the entire learning module you should be able to apply the tools in your practice. The entire module is over 3 hours long but it conveniently divided into a number of sections lasting between 15 minutes to 40 minutes. Find it at: <http://teip.hhrc.net/tools/learning/index.html>

### Self-Help Resource Centre Information Tools

The Self-Help Resource Centre invites you to check out some free information tools now available on our web site. Go to [www.selfhelp.on.ca/stroke/index.htm](http://www.selfhelp.on.ca/stroke/index.htm) to see and download practical, user-friendly documents and tools that focus on using self-help approaches to lower the risk of stroke and related disease in marginalized populations. They include:

- A plain-language guide explaining stroke risk factors and simple, practical approaches for reducing them
- Guides for setting up community partnerships to combine resources and access marginalized populations
- Samples of practical self-help stroke prevention activities implemented in a variety of communities
- A list of links to free, fully-developed programs and resources available on the web to promote healthy lifestyles

### 6 Things You Need to Do About...

- S** Support the Stroke Survivor & Family
- T** Take Preventative Measures
- R** Reassess Regularly
- O** Observe for Depression
- K** Know the Signs & Symptoms of Stroke  
- Call 911
- E** Encourage Independence

Distributed by the  
Southwestern Ontario Stroke Strategy  
[www.lhsc.on.ca/rss](http://www.lhsc.on.ca/rss)  
[swstrokestrategy@lhsc.on.ca](mailto:swstrokestrategy@lhsc.on.ca)

## Prompting action for stroke

The "6 Things You Need to Do About Stroke" prompt cards, pictured here, were distributed in 2006 to health care workers in Long Term Care. The six actions, presented within the stroke acronym, are derived from stroke best practices and intended to serve as a quick reference pertinent to health care providers in this environment. An accompanying PowerPoint presentation was also developed. The "6 Things" cards have been disseminated across the region and are now in widespread use across the province. We were pleased to see that the cards are a useful tool for a variety of community groups – CCAC case managers, nurses, office staff in family physicians' offices and individuals working in community day programs – in addition to the original intended audience.

# Expert recommendations will improve stroke care and prevent deaths

New expert recommendations for improving stroke care in Canada – the *Canadian Best Practice Recommendations for Stroke Care: 2006* – were released on December 7 by the Canadian Stroke Network and the Heart and Stroke Foundation of Canada.

When fully adopted by health-care providers across the country, the document's 24 'best practices' will save lives and prevent disability from stroke. An economic analysis released in June by CSN and HSFC shows that organized stroke care would prevent 160,000 strokes, 60,000 cases of disability and save \$8 billion net in health-care costs over 20 years.

The *Canadian Best Practice Recommendations for Stroke Care: 2006* provide a core set of evidence-based best practices for stroke prevention, care, rehabilitation and reintegration.

"The best practices are based on the strongest research evidence about what makes the most difference to stroke outcomes. We believe that these recommendations will help Canadian health-care providers deliver the best possible patient care," says Ken Fyke, Chair of the Canadian Stroke Strategy, a partnership between the Heart and Stroke Foundation of Canada and the Canadian Stroke Network.

The *Canadian Best Practice Recommendations for Stroke Care: 2006* is now posted at [www.canadianstrokestrategy.ca](http://www.canadianstrokestrategy.ca).

*continued from page 1*

whole time, she remembers the CAT scan and the explanation Dr. VanWalraven gave her about a drug that could break apart the clot in her brain that was causing the stroke. With paralysis on her right side and a complete inability to speak, Edith made the decision to be treated with tPA. "I only had about 15 minutes to make up my mind," says Edith.

By noon, Edith could again say a few words. By the end of the day, she was speaking in full sentences.

Edith had been healthy her whole life. Her goal following the stroke was to regain as much of her strength as possible. During a six-week stay at Stratford General, Edith received occupational, physical and speech therapy.

Today, her speech is strong and clear. She continues to do exercises to regain strength and function in her arm. Her leg, already compromised by a 1957 car accident, remains weak and she will use a wheelchair upon her move to the Caressant Care Nursing Home. Her "ocean of friends" visit regularly, bringing flowers and gifts and news of the community where Edith once worked as a ticket seller at the Capitol Theatre where her husband George was a projectionist.

"That drug was a miraculous thing."

*"Age is only one of the factors one needs to weigh carefully before giving t-PA. Often it is a situation of higher risk, higher gain. The oldest patient whom we have treated was 105 years old," comments Dr. Vladimir Hachinski, Distinguished University Professor with the University of Western Ontario.*



Ontario  
**Stroke**  
System

*London Health Sciences Centre does not accept any liability arising from an error or omission or use of the information contained in this publication. The information provided is not a substitute for consultation with a health care professional. If you have any questions or concerns please consult with your health care professional.*

## Contact Us

Region Program Manager  
Chris O'Callaghan  
(519) 685-8500 x32214

Stroke Education Coordinator  
Gina Tomaszewski  
(519) 685-8500 x35268

Stroke Prevention and Thames  
Valley Coordinator  
Sharon Mytka  
(519) 685-8500 x32264

Administrative Assistant  
Delynn Felder  
(519) 685-8500 x32462

Long-Term Care & Community  
Coordinator  
Alison Greenhill  
(519) 641-5547

Telestroke Project Lead  
Jennifer Mills-Beaton  
(519) 685-8500 x32050

Regional Rehabilitation Coordinator  
Deb Willems  
(519) 685-4000 x42681

Marketing and Communications  
Consultant  
Megan Cornwell  
(519) 685-8500 x20032

## Heart and Stroke Foundation Contact

Manager Stroke Care Delivery  
Bev Powell-Vinden  
(416) 486-7111 x412

## District Stroke Coordinators:

Chatham-Kent  
Laurie Zimmer  
(519) 352-6401 x6900

Grey-Bruce  
Mary Solomon  
(519) 376-2121 x2920

Huron-Perth  
Doris Noble  
(519) 272-8210 x2298

Windsor-Essex  
Andrea Drummond  
(519) 973-4411 x3082

Samia-Lambton  
Paula Gilmore  
(519) 464-4400 x4465

## [www.lhsc.on.ca/rss](http://www.lhsc.on.ca/rss)

SWO Stroke Strategy  
London Health Sciences Centre  
University Hospital – Room B10-104  
339 Windermere Road  
London, ON N6A 5A5