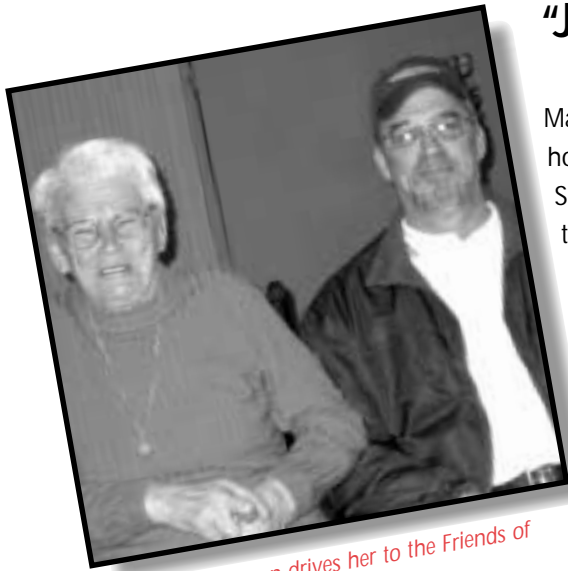


REGIONAL STROKE STRATEGY



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



Mrs. Dragstra's son drives her to the Friends of Stroke Meeting each month.

“Just be yourself” motto at *Friends of Stroke*

On March 13, 2003, twenty-five years to the day after her husband passed away, Mary Dragstra had a stroke. After three months in hospital, she returned home to the house she had lived in for forty-three years. Of course, not everything was the same. She needed a ramp installed, and a wheelchair to get around. She needed her son to drive her to appointments, socials and to church. Her son moved in with her, to ensure she had the day-to-day support that she needed.

Another change? Mary started attending the *Chatham-Kent Friends of Stroke Recovery* meetings, which allowed her to meet and socialize with new people. The support group, offered jointly by Chatham-Kent Health Alliance and the Heart and Stroke Foundation, meets monthly and provides an opportunity for stroke survivors and their families to discuss areas of common concern, make connections within their community and access educational speakers on a variety of topics.

The group has an almost tangible energy stemming from their shared experiences. And with the number of attendees increasing rapidly – some meetings have 35 participants – it is obvious that Friends of Stroke meets a real need.

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Our roots, our progress and the path ahead – Chris O’Callaghan, Region Program Manager

When I reflect on the contents of our spring newsletter, what really strikes me is the scope of activity and the tremendous growth in the number of programs taking place across the continuum. Seven years ago we were a “team of one” and the Stroke Strategy’s activities primarily supported hospital-based care for stroke patients. We have always had our sights set on activity beyond the hospital walls, however, and it is exciting to see so many new initiatives underway.

The expansion of BRAINSAVE, the opening of the clustered stroke unit in Chatham, and the launch of a Stroke Prevention Clinic in Sarnia and a satellite-site in Goderich are advancements worth celebrating.

Provincially, a newly established Stroke Rehabilitation Consensus Panel will: define components of a stroke rehabilitation system; identify and recommend a triage process; select common assessment tools; and develop stroke rehabilitation standards. This work, slated for completion at year’s end, will inform provincial policy development and regional planning.

Nationally, the Canadian Stroke Strategy is developing 23 best practices and standards for adoption by stroke programs across the country. Watch for these standards in the summer.

Further opportunities for growth and collaboration will unfold in 2006/07 as we learn how the Stroke Strategy will support the LHINs and evolve the disease management model.

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HEART & STROKE FOUNDATION OF ONTARIO

Finding answers. For life.

Education with Gina Tomaszewski

The **New Directions and Emerging Evidence** workshop was well attended by 69 OTs and PTs from the region. Sessions included: constraint therapy, functional electrical stimulation and motor therapy. Evaluations from this workshop were excellent. "It was a very stimulating and practical learning workshop," commented one participant.

On November 23, a workshop entitled, "**Stroke and TIA: What's New and What Hasn't Changed,**" was held for 68 family physicians. The workshop focused on topics relating to risk factor management, revascularization, antithrombotics, and investigations for stroke.

On April 4, a workshop for Recreation Therapists working with stroke patients in the Southwest region was held in Stratford at the Arden Park. This was the first time that recreation therapists came together as a network, allowing them to identify stroke educational needs and issues related to stroke care.

The popular **Best Practices Workshop for Frontline Staff** was first held in April 2005 and has been offered four times since. This primer on stroke care is targeted at RNs and RPNs. The first day focuses on acute care of stroke with topics such as neuroanatomy, neuroassessment and nursing care of post stroke complications. The second day focuses on rehab, and features subjects such as rehab philosophy, management of right hemiplegic shoulder and post stroke depression.

The Best Practices Workshop will soon include a **mentoring** component. Health care professionals will outline their learning needs specific to stroke and will be partnered with expert health care professionals who will help them further exercise their neuroassessment skills.

Lyn Levandoski, a **Rehabilitation Coordinator at Country Terrace**, requested a mentoring experience with the PTs at Parkwood Hospital. "I want to thank everyone who had a hand in providing this experience, I was made to feel very welcome and a part of the "care team" as a representative of LTC in the continuity of care," commented Lyn about her experience.

BRAINSAVE

Bringing Regional Assessment in Stroke and Virtual Education™

The SWO telestroke project has been 'live' Monday to Friday, 9am to 5pm since August 24th, 2005. We have had 7 patients through the protocol. Two patients have avoided unnecessary transport to London and one patient was given tPA. Family members and patients have been involved in video discussion with London physicians and have provided positive feedback about the experience.

Chatham-Kent Health Alliance clinicians have started an online Acute Stroke teaching module. This is a pilot module that will be evaluated this summer.

A preliminary evaluation report of early lessons learned, and including focus group feedback, has been completed and distributed provincially.

BRAINSAVE initiated phase II, a 12 hour, 7am to 7pm launch on April 18. London physicians are supporting the CKHA physicians from their homes, adding an extra layer of technical complexity. Laptops with small cameras are being deployed for the out-of-hospital coverage of telestroke.

Our third phase, 24/7 will 'go live' later in 2006. We are currently planning telestroke at two new sites in SWO. Owen Sound and Stratford will be the next BRAINSAVE sites...stay tuned for more information on these developments!

Meet... Deb Willems



The SWO Stroke Strategy is very pleased to announce that Deb Willems joined the team as the Regional Rehabilitation Coordinator effective January 9, 2006.

Deb has conducted and coordinated research for the Canadian Stroke Network and Heart and Stroke Foundation of Ontario and has successfully obtained grant monies. She has 22 years of clinical experience as a physiotherapist working in rehabilitation at Parkwood Hospital and in Clinical Neurological Sciences at London Health Sciences Centre, most recently as a Clinical Specialist. As a clinical specialist Deb's responsibilities included quality and project management, staff coordination and education, team practice change and course coordination. In addition Deb has been an outreach assessor for the Regional Geriatric Program, and she worked with community hospitals and Long Term Care throughout Grey, Bruce, Huron, Perth and Middlesex counties.

FOCUS ON...

Community re-engagement with Alison Greenhill

Since November I have met with community and long term care stakeholders to introduce my role and to discuss possible collaborative partnerships around filling the gaps and overcoming the barriers to implementation of the stroke best practice guidelines. Some initiatives that are in the early stages of development include:

- A research project looking at a **telephone questionnaire follow – up** for stroke survivors moving into the community at 6 weeks, 3 months, 6 months and a year post-discharge. Multiple sites are involved around the region and we have involvement of a faculty member from King's college
- Enhancement of the stroke day program at the **Midwestern Adult Day Program** in Clinton with additional stroke education for staff, mentoring opportunities and the idea of a new program for young stroke survivors
- A new self-help support group for stroke survivors and their caregivers in Elgin, and a one-day stroke symposium for stroke survivors and their caregivers in Grey Bruce

Volunteers from across the region and from different sectors of the community and long term care have kindly agreed to sit on the newly formed **SWO LTC and Community Advisory Group**. The first teleconference was held in December and the Terms of Reference were discussed. The second face-to-face meeting was held in February. Unfortunately due to the bad weather, not everyone could attend but the group enthusiastically discussed the LTC and Community work plan.

Rehabilitation with Deb Willems

The number of adult Ontarians living with the effects of stroke is estimated to be about 115,000. Stroke is the leading cause of disability in Canada.

Recent compilations of the evidence indicate that post stroke rehabilitation makes a significant difference in reducing death, disability and institutionalization. In the Southwest, these results were confirmed through a 2004 Pilot Program that provided expert stroke rehabilitation outpatient and outreach services. Significant increases in function and reduced institutionalization with the most severely affected stroke survivors were achieved.

The HSFO released a Stroke Rehabilitation Consensus Panel Report that articulated the following vision for stroke rehab:

Individuals who experience a stroke will have timely access to the appropriate intensity and duration of rehabilitation services. These services will be provided in a comprehensive and coordinated way to patients and their families, by agencies and health care providers who are expert in stroke and practice rehabilitation principles.

The Rehabilitation Coordinator will work toward a system of services for stroke rehabilitation resulting in:

- Strong regional systems of stroke rehabilitation
- Enhanced understanding of the issues, which will lead to identification of needed improvements in the current system
- An evaluation mechanism to identify and quantify the missing elements of the current system that will enable and support long term planning



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

The Ontario Stroke Strategy is a blueprint for change for the way stroke care is delivered at CKHA. To date we have achieved significant success with providing comprehensive, integrated, evidence-based, accessible stroke care through many avenues. Our commitment to the principles of organized stroke care combined with the **enthusiasm** of the medical professional staff and community agencies have set the stage for expanding our state of the art service delivery model. This commitment creates an opportunity to further optimize stroke management in the Acute and Rehabilitation phases.

In April 2006 we will launch a **5-bed acute stroke unit** in conjunction with 18 general Rehabilitation beds. Interdisciplinary care on a stroke unit should reduce mortality, shorten hospital stays, improve the functional ability of stroke patients and result in the long-term reduction of death, dependency and institutionalization.

Our goal is to provide an optimal environment and service delivery model, which ensures the “right care in the right place at the right time.” A treatment team trained specifically in acute stroke care and general rehabilitation concepts will provide a 24/7 interdisciplinary treatment approach. The team consists of patients, families, physicians, nursing and non-nursing staff members including support staff and volunteers.

Grey-Bruce District Stroke Centre

Belonging, support and stewardship are the common themes throughout our latest activities. The Community Wellness Strategy, Health Library Prescription Project, and Spirituality and Stroke integrate the three themes and are highlighted in this update.

The **Community Wellness Strategy** is a partnership with the Public District Health Unit that encourages communities to become the stewards of their own health. The initiative’s goal is to develop an intersectorial community-based system to support a healthy living strategy. This goal supports the Integrated Pan-Canadian Healthy Living Strategy goals.

The **Health Information Prescription Project** will allow individuals to access health information at their local library. A prescription is made out by health professionals and recommends credible information, including online resources, to the individual. The resources can all be found at local libraries. Planning is proceeding well and the project should be instituted in the next few months.

The **Spirituality and Stroke Project** is a partnership of the DSC and the Grey Bruce Chaplaincy. Sessions about stroke and the role of spirituality and community are planned in March with the clergy and pastoral teams. The project is evidence-based thanks to some guidance from Duke University’s Department of Spirituality and Health.

Huron-Perth District Stroke Centre

A Huron Perth community **rehab working group**, has developed and prioritized goals and explored the resources in the community for rehab as well as gaps in service.

A successful Best Practice workshop for front-line staff was held on November 9 and 16. HSFO-RNAO Best Practice Guidelines for the Nursing Management of Hypertension was reviewed at the February Nursing Matters Forum.

A referral form was developed for community hospitals in Huron and Perth to help identify patients that may benefit from the rehab unit at Stratford General. The **Transition Information Plan tool** was endorsed by the Rehab and Continuing Care team and will be implemented after approval at MAC.

A BRAINSAVE information session was held on January 11. **Dr. S. Narayan** agreed to be the internal medicine representative for the Planning and Implementation Committee.

Phase II of the Toward Evidence Informed Practice project with the Heart Health Resource Centre saw the **Life-Style Intervention Program** from the Best and Promising Practices Compendium chosen for program and logic model development. The Perth District Public Health Unit and Healthy Living Perth will assist and guide its development.

March 7 was the first year anniversary of Stratford’s Stroke Prevention Clinic. 78 patients have been seen in the clinic. 17 were referred to UH; 6 were surgical candidates; 10 were non-surgical candidates and

1 is awaiting consult. The **Goderich** satellite site of the Stroke Prevention Clinic, which opened January 30 and operates every second week, has seen 10 new referrals to date.

The Huron Perth Hospital Association will go **smoke-free** on June 2/06. Maureen Leyser worked closely with administration, nursing practice council and the Perth District Health Unit's smoking cessation program in the development of policies and clinical pathways.

Sarnia-Lambton District Stroke Centre

Plans are underway to get the Sarnia-Lambton **Stroke Prevention Clinic** up and running. The clinic will be located at Bluewater Health, Norman Site, on the 3rd floor. Renovations of the space are presently taking place to accommodate the clinic.

DSC staff, in partnership with Healthy Living Lambton, completed Phase I of the Heart Health Resource Centre Project, *Towards Evidence-Informed Practice (TEIP)*. Phase I of the TEIP project reviewed four local chronic disease prevention programs and evaluated them against criteria for best practices. The Phase II proposal, submitted in January, was accepted. Further funds will enhance our smoking cessation program.

Canadian Neurological Scale (CNS) training was completed with all RN's and RPN's working in emergency, cardiac care and medicine at Bluewater Health ensuring continuity of care and close monitoring of neurological status in the early stages following stroke.

Carol Mason (Clinical Resource Nurse for stroke) completes follow-up phone calls with all stroke patients discharged from hospital. This initiative was started to fill a gap identified at

the **Rehabilitation Management Best Practice Guideline Workshop** held in September 2004 at Bluewater Health. The SWO region is undertaking a research project to standardize the interview tool and gather information to identify gaps in patients' transitions from hospital into the community following stroke.

The **New Directions and Emerging Evidence in Rehabilitation Management Post Stroke Conference** was held in London in November. 10 OTs and PTs from Sarnia-Lambton attended this 2-day conference.

Thames Valley

The **Oxford Blood Pressure Education Pilot Project** is steaming ahead. The first patients started the program in January. To date 71 individuals have completed the classes. Of these 36 are recently diagnosed and meet the project requirements for 5 months of follow-up, monitoring and support. Intake will end in June and the project is scheduled to end in December.

Two speech-language pathologists in Oxford have recently completed training in **Supported Conversations for Adults with Aphasia**, a workshop designed to facilitate communication with aphasic persons, and are preparing to offer these workshops within the County. In Elgin County, both **Bobier Villa** and **Terrace Lodge** have both hosted Supported Conversations so far in 2006.

In London, the **TIA cardiac rehabilitation** project enters its final phases. The coordinating committee will introduce the randomized control component during the final few months. All TIA patients will complete their rehabilitation program by early winter. The final report will be submitted to the Ministry of Health in January 2007.

Middlesex County held a **Stroke**

Best Practices day on April 27 with service providers from across the county. By the end of the day, participants had begun to establish a stroke best practice action plan for the county.

Windsor-Essex District Stroke Centre

In keeping with our multi-disciplinary approach to stroke prevention patient education, we are very pleased to welcome two new staff members to our program. **Registered Pharmacist Dorothy Pardalis** joined our stroke prevention team and will provide group and individual pharmaceutical education. Registered Dietitian Joanne Giovanatti has also joined our stroke prevention team to provide individual and group nutrition education for patients.

We continue to explore partnership opportunities in the district. As a result of our Stroke Rehabilitation Nurse Lisa Halley's efforts, inpatient stroke rehabilitation patients at Windsor Regional Hospital can now attend vascular health classes provided by the **Windsor Essex Cardiac Wellness Centre**. Further, in partnership with the Windsor Essex Cardiac Wellness Centre, a physician education event was held informing local physicians about both programs and laying the foundation for future partnering initiatives related to vascular health.

We are also pleased to be participating in a district wide health promotion/chronic disease prevention initiative spearheaded by the local **Health Action** program, a public awareness event about obesity with the Heart and Stroke Foundation, an "alcohol as a risk factor for stroke" initiative with FOCUS and the Public Health Unit, and a County Stroke Resource Nurse position with **Leamington District Memorial Hospital**.

It's our pleasure...

... to announce that **Saralyn Lichty** BScN has joined the Huron Perth District Stroke Centre to work on a variety of community projects on a part-time basis.

... to welcome **Paula Gilmore**, Sarnia-Lambton District Stroke Centre Coordinator, back from maternity leave following the birth of her son. Thank you to **Doug Tomback** who was the acting District Stroke Centre Coordinator in 2005 while Paula was on maternity leave.

... to congratulate **Dr. Robert Teasell** on his re-appointed as Chair/Chief of the Department of Physical Medicine and Rehabilitation effective July 1, 2006 to June 30, 2011.

Dr. Teasell has been city-wide Chief since 2000 and Chair since 2001. He is a clinical researcher with the Lawson Health Research Institute and is also Medical Director of the 30-bed Stroke/Rehabilitation unit at Parkwood Hospital, St. Joseph's Health Care London.

... to welcome **Joanne Giovanatti**, dietician with the Windsor Essex District Stroke Centre where she is providing classes/consultation about diet and stroke prevention. Over the past 16 years, Joanne has worked primarily in the areas of nephrology and diabetes, but also in general medicine, ICU and paediatrics.

... to welcome pharmacist **Dorothy Pardalis PSc.Phm. C.A.E.**, to the Windsor Essex District Stroke Centre where her primary role is to provide patient education specific to medications and natural/herbal remedies for TIA Clinic patients.

... to announce that leading Canadian stroke expert, **Dr. Vladimir Hachinski**, was elected Vice- President of the World Federation of Neurology (WFN). Dr. Hachinski, professor of neurology at The University of Western Ontario's Schulich School of Medicine & Dentistry and neurologist at London Health Sciences Centre. Hachinski will serve a four- year term as Vice-President.

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"In this group, the informal interaction is just as important as the planned portion of the program. It allows people to just be themselves – to talk and to share experiences," explains Floyd Fenema, a Therapeutic Recreation Specialist from CHKA, facilitator of the group for the last four years.

Wendy Zoldy, a forty-year-old stroke survivor who has attended Friends of Stroke meetings for the past year, says it is a relief to spend time with people who have experienced similar challenges. "The people here don't compare the 'new' me to the 'old' me," she explains, "I don't have to try and be someone I'm not."

Meetings last for approximately 90 minutes. Following an icebreaker that gets the entire group relaxed and laughing, an invited guest presents a topic of interest – ranging from nutrition to finances. The group then enjoys a refreshment and unstructured social time.



Interdisciplinary staff at CKHA met eight times between January and March for Integrated Stroke Unit Education Days.

? ? ? ? ? ? ? ? ? ?

FAQ's

? **Q:** Should anticoagulation be stopped in patients requiring surgical interventions? If yes, when? ?

? **A:** We do not have good data regarding peri-procedural anticoagulation. Most patients can undergo dental procedures, joint and soft tissue injections and arthrocentesis, cataract surgery and upper endoscopy or colonoscopy (with or without biopsy) without changing their anticoagulation regimen. However the risk of thromboembolic event and postoperative bleeding needs to be considered on an individual basis. For example, it would be reasonable to continue anticoagulation regimen in a patient with a mechanical mitral valve who will be having a minor surgical procedure since the risk of thromboembolic stroke overshadows the risk of major hemorrhage. For other invasive procedures carrying high risk of postoperative bleeding oral anticoagulation needs to be withheld and the decision of whether aggressive treatment of perioperative bridging with intravenous heparin or subcutaneous LMWH should be individualized. ?

? **Dr. Ozchan Ozdemir** ?
Stroke Fellow, University Hospital, LHSC ?

? ? ? ? ? ? ? ? ? ?

FOCUS ON...

Health promotion and prevention with Sharon Mytka

The Provincial Health Promotion Subcommittee of the Ontario Stroke Strategy works with the **Ministry of Health Promotion** to enhance communication about the Ministry funding process and the initiatives funded by stroke dollars. Maureen Murdock, Regional Stroke Manager in Champlain District, and Sharon Mytka will participate on the Ministry committee that reviews letters of intent for funding in the 2006-7 fiscal year. In addition, a provincial workshop will bring together the projects funded of 2005-6 to share and discuss lessons learned, successes and challenges.

The Heart Health Resource Centre is implementing phase 2 of *Towards Evidence-Informed Practice in Stroke Prevention* (TEIP). Healthy Living and the Stroke Strategy in each of the 5 communities are implementing recommended program enhancements for a selected program from Phase 1 and developing an evaluation framework to measure outcomes. TEIP is also developing an evidence-informed stroke prevention practices manual for stroke and heart health coordinators.

Cardiovascular Hypertension Awareness Program (CHAP) is an innovative, community-based program that enables service providers and volunteers to work together to improve high blood pressure detection, monitoring and risk factor modification to reduce risk of vascular disease. Led by McMaster and Ottawa Universities, implementation is targeted to begin in smaller communities throughout the province in the fall.

The Ontario College of Family Physicians recently held a consultation to determine priorities for bringing education to family physicians on primary and secondary prevention of stroke. Representatives from stroke medicine, managers, coordinators, educators and the Heart and Stroke Foundation participated along with family physicians and physician education specialists.

Resources Resources Resources

- **Faaast FAQs:** This 58 page resource for stroke nurses contains frequently asked questions and their answers in the areas of nursing assessment of stroke patients; common complications post stroke; medications for stroke prevention; and secondary prevention for stroke. The resource is available in PDF from the following link: [http://209.5.25.171/click on CSS/Professional Resources/Getting Started](http://209.5.25.171/click%20on%20CSS/ProfessionalResources/Getting%20Started).
- **RNAO Stroke Assessment Guidelines Across the Continuum of Care**
The goal of this best practice guideline is to provide nurses, with evidence-based recommendations regarding the assessment and/or screening of stroke survivors across the continuum of care. This resource at: www.rnao.org, then go to Best Practice Guidelines.
- **RNAO Nursing Management of Hypertension Guidelines**
This guideline contains recommendations for RNs and RPNs on nursing best practices in the care of adults with hypertension. It is intended for nurses working in a variety of practice settings. This resource is available in PDF at: www.rnao.org, then go to Best Practice Guidelines.
- **American Stroke Association Conference Materials**
A number of the sessions from the American Stroke Association conference held in February in Florida are available free of charge at the site. <http://www.stroke-scienceondemand.org/2005/>
- **SWTCAN Newsletter**
The southwest Tobacco Control Area Networks (SWTCAN) is comprised of community partners with a vested interest in tobacco control. They are producing a newsletter called the Southwest Tobacco Snapshot. If you would like to receive a copy and be placed on the mailing list, contact MaryLou Albanese, the SWTCAN Manager, at marylou.albanese@mlhu.on.ca
- **Chronic Disease Surveillance Information**
Check out the Public Health Agency of Canada's Non-Communicable Diseases (NCD) Surveillance Infobase. It is one of a number of Web-based tools used to disseminate health surveillance information. The NCD Infobase evolved from the Global Cardiovascular Disease (CVD) Infobase, which was developed seven years ago for the World Health Organization (WHO) by the Ottawa Hospital, in its role as a WHO Collaborating Centre for Cardiovascular Disease.
Bookmark both Web sites using the URLs below:
http://www.cvdinfobase.ca/surveillance/Mapdb/Infobase_e.htm
<http://www.cvdinfobase.ca/>

Community/Regional/Provincial events

Date	Event	Details
Windsor: Tuesday May 23, 6:00 – 8:30 pm, Cleary International Centre	Traveling the Cardiac Road 2006: An Evening with Experts in Cardiac Care	For those who would benefit from up-to-date information about cardiac care. Everyone welcome. For more information contact Continuing Medical Education (519) 661-2111 ext. 81370
Sarnia: Wednesday June 7. 6:00 – 8:30 pm, Hiawatha Horse Park and Entertainment Centre		
May 25, 2006: 11:30 – 12:30 (videoconference)	CART Series SESSION 6: Using Clinical Practice Guide	This monthly lunch and learn sessions addresses evidence-based practice for busy clinicians. Contact your District Stroke Coordinator for more information.
June 2, 2006 9am – 4:30 pm Toronto Rehab Rumsey Centre	Fitness in Neurological Populations: Application to Stroke	For more information: www.torontorehab.com/education/fitness
June 6, 2006 London Convention Centre 4 – 6 p.m.	Lawson Health Research Foundation Community Meeting “Stroke: Perception Meets Reality” with speakers Andre Picard from the Toronto Globe and Mail and Walter Gretzky.	Free admission. Pre-register by phoning 519-646-6100 ext. 61094
June 6 – 9 Sheraton Centre Toronto Hotel Toronto, ON	5th IASP Research Symposium: Central Neuropathic Pain On the Centenary of Central Post- Stroke Pain: Retrospective and Prospective	A new institute, the Michael G. DeGroot Institute for Pain Research and Care, is hosting this symposium. Visit www.fhs.mcmaster.ca/paininstitute or www.fhs.mcmaster.ca/conted for more information.

New from the Heart and Stroke Foundation!

Management of Dysphagia in Acute Stroke: An Educational Manual for the Dysphagia Screening Professional

- A manual that builds on the nine dysphagia management guidelines and highlights key practice issues involved in managing dysphagia in acute stroke survivors.

Nutrition Screening for Stroke Survivors: An Educational Manual for the Dysphagia Screening Professional

- A manual that builds on the nine dysphagia management guidelines and highlights key practice issues involved in nutrition screening for acute stroke survivors.

Order through Heart and Stroke at (416) 489-7111 x389 or csor@hsf.on.ca



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