

# Stroke Rehabilitation Bulletin

## Outcome Measures

April 2009

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In 2006, the Canadian Stroke Strategy convened a panel of experts in stroke rehabilitation from across Canada to review the tools we use to measure outcomes in stroke rehabilitation with the goal of establishing a core set of rehabilitation outcome measures to be used across the continuum.

This panel reviewed tools using the following criteria for selection:

- Published use in stroke trials (as identified by the Evidence-Based Review of Stroke Rehabilitation)
- Strong psychometric properties (tools were proven to be reliable and valid)
- Ease and feasibility of administration
- Potential for multidisciplinary administration (felt to be important for smaller centres that may not have access to all rehabilitation professionals)

The Panel recommended tools to evaluate the outcomes of stroke rehabilitation in Canada for relevant domains according to the International Classification of Functioning (body structure and function, activity and participation). See [www.swostroke.ca](http://www.swostroke.ca) under Rehabilitation Resources

### **Benefits to using a Core Set of standardized assessment and outcome measures:**

- Improve data collection regarding stroke rehabilitation outcomes across regions
- Ensure clinicians know which tools are valid, reliable measures that support best practices
- Promote use of a common language within teams and across transitions
- Select screening tools that identify when more in depth assessment/treatment is needed
- Provide stroke survivors with consistency, enabling them to potentially track their own progress throughout the recovery period

### **A Best Practice for Stroke Care**

Canadian Best Practice Recommendations for Stroke Care 2008:

*4iv & 5viii.* Clinicians should use **standardized, valid assessment tools** to evaluate the patient's stroke-related impairments and functional status (Evidence Level B; ASA, RCP).

Ontario Consensus Panel on the Stroke Rehabilitation System "Time is Function" 2007

*Standard 5:* Stroke related impairments and functional status will be evaluated by rehabilitation professionals trained in stroke rehabilitation using **standardized, valid assessments** (Evidence Level 2).

*The Southwestern Ontario Stroke Strategy will be hosting a Regional Forum in June for Occupational and Physical Therapists to begin work to implement the National Panel's recommendations. This work has been endorsed by the Regional Stroke Rehabilitation Advisory Group.*

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