



South West Stroke Project

Project Overview

Subtitle

Name of Presenter

Date

October 2016

This project is
funded by:



Ontario
South West Local Health
Integration Network



Why this project?

- Improve outcomes for people in the South West LHIN who have a stroke or TIA (transient ischemic attack).
- Phase I focus on concentrating stroke expertise by realigning inpatient acute and rehabilitative stroke care from 28 hospital sites to 7 Designated Stroke Centres.
- Phase II focus on creating recommendations to enhance care for TIA and stroke survivors after they leave the hospital.

Phase I – Improving inpatient stroke care

Implementing and evaluating recommendations for the future of in-hospital stroke care

People with stroke or TIA achieve the best outcomes when treated:

- in a system with coordinated care
- by practitioners with recognized stroke expertise
- in a facility with a stroke unit where a critical mass of patients are cared for each year.

Realigning from 28 hospitals to 7 Designated Stroke Centres to achieve optimum stroke care by 2018.

Once realignment complete, those who have a TIA or stroke will go to a Designated Stroke Centre.

Phase I

Realigning inpatient acute and rehabilitative stroke to 7 Designated Stroke Centres:

- London Health Sciences Centre's University Hospital – hyper-acute and acute
- Huron Perth Healthcare Alliance's Stratford General Hospital – hyper-acute, acute and inpatient rehabilitation
- Grey Bruce Health Services' Owen Sound Hospital – hyper-acute, acute and inpatient rehabilitation
- St. Thomas Elgin General Hospital - acute and inpatient rehabilitation
- St. Joseph's Health Care London's Parkwood Institute – inpatient rehabilitation
- Woodstock Hospital – inpatient rehabilitation
- Alexandra Marine and General Hospital – telestroke (provides tPA, the clot-busting drug) assessment and treatment via the Ontario Telestroke Program, then patients transferred to Huron Perth Healthcare Alliance – Stratford General Hospital for the remainder of their acute care and, if required, rehabilitation on an integrated stroke unit.

Phase II

Creating recommendations to improve stroke care after discharge.

These recommendations will enhance secondary stroke prevention and community rehabilitation and recovery for TIA and stroke survivors after they leave the hospital.

TIA and stroke survivors, families and many other stakeholders engaged in process to create recommendations.

Phase II

Current post-hospital stroke clinics and services:

- Four **Urgent TIA/Secondary Stroke Prevention Clinics**
 - Grey Bruce Health Services
 - Huron Perth Healthcare Alliance
 - London Health Sciences Centre
 - St. Thomas Elgin General Hospital in the process of implementing a clinic

- Three **Community Stroke Rehabilitation Teams:**
 - Grey Bruce
 - Huron Perth
 - Thames Valley

Phase II

Current post-hospital stroke clinics and services (cont'd):

- **Specialized outpatient stroke rehabilitation** at:
 - Comprehensive Outpatient Rehabilitation Program (CORP) at St. Joseph's Health Care London's Parkwood Institute
 - Intensive Rehabilitation Outpatient Program (IROP) at Woodstock Hospital.
- Community support services such as adult day programs and exercise groups.

Phase II recommendations were submitted to the South West LHIN in March 2017.

Questions and Answers:

What organizations are involved in the South West Stroke Project?

Other stakeholders in addition to the South West LHIN and the [Southwestern Ontario Stroke Network](#):

■ Phase I

- 28 hospitals sites in the South West LHIN, together with Emergency Medical Services and the Community Care Access Centre

Questions & Answers (cont'd)

Phase II – other stakeholders

- **Phase II Community Rehabilitation for Stroke Survivors (CRSS):**
28 stakeholder groups consulted to create recommendations, including:
 - outpatient and in-home community stroke rehabilitation services
 - hospital teams and physicians
 - community support service agencies such as VON and ONECARE
 - transportation services
 - Community Care Access Centre provider agencies.

- **Phase II Secondary Stroke Prevention**
24 stakeholder groups consulted, including:
 - hospital sites with secondary stroke prevention clinics
 - family health teams
 - physicians
 - cardiac rehab groups
 - community services such as Dale Brain Injury Services, Cheshire Homes, and VON.

Questions & Answers (cont'd)

What difference will the realignment make to patients?

Patients who receive care in an integrated system have better outcomes; an integrated system of stroke care associated with reductions in mortality after stroke.

How will the patient's voice be heard?

Extensive interviews and focus groups in Phases I and II with patients and families to ensure their feedback incorporated into recommendations.

How will patients know which hospitals are Designated Stroke Centres?

All patients have to know is to call 911 immediately, because EMS will ensure they get to the right hospital to receive the best possible care. **Embed FAST video link: <http://swostroke.ca/fast-videos/>**

When will Phases I and II be complete?

Phases I will be complete by 2018. For Phase II, the recommendations were completed in the spring of 2017.

Questions & Answers (cont'd)

What changes will this bring to hospitals that are not Designated Stroke Centres?

Before

Patients who arrived at hospital with symptoms of stroke or TIA (transient ischemic attack) within a 3.5 hour window after their symptoms began, were always transferred to a Designated Stroke Centre that provides acute stroke care to determine whether they were eligible to receive tissue plasminogen activator (tPA) - a protein that helps to break down blood clots.

However, in the past those who could **not** receive tPA because their symptoms started **more** than 3.5 hours before they arrived at the hospital, remained at their local hospital for treatment.

When realignment complete

Even if it's more than 3.5 hours since symptoms started, stroke and TIA patients will be taken to a Designated Stroke Centre that provides acute stroke care. This ensures they can be cared for on a stroke unit to achieve the best possible outcomes. (timing for this message different for each hospital depending on timing for realignment).

Remember

Call 911 when you or someone with you is experiencing the signs of stroke.

Can link to respective FAST – call 911 videos: <http://swostroke.ca/fast-videos/>

Questions & Answers (cont'd)

If PowerPoint is for public include the following as appropriate:

- Creating Designated Stroke Centres is part of the South West Stroke Project which is ensuring all people in the South West LHIN with stroke and TIA (transient ischemic attack) receive the best possible stroke care.

Messages for people with stroke and TIA who must travel some distance from home

- At a Designated Stroke Centre you will receive excellent stroke care which will greatly improve your opportunities for recovery.
- Depending on where you live, your local hospital may not be equipped to serve people with stroke or TIA. The expertise for this is concentrated at Designated Stroke Centres.
- Once your acute care and inpatient rehabilitation is complete, you will return to your community for secondary stroke prevention services and further rehabilitation as needed.

Our partners

The South West Stroke Project partners include:

- South West LHIN hospitals
- Southwestern Ontario Stroke Network
- EMS
- South West Community Care Access Centre
- A host of community stroke clinics and services working together to create a system of stroke care that will improve outcomes.

Our Partners

