



## ACUTE STROKE UNIT ORIENTATION RESOURCE: EVALUATION

Thank you for taking the time to complete this survey! Your responses will assist us in making changes and improvements to the Acute Stroke Unit Orientation Resource. There are 14 questions, the majority of which are multiple choice, and some short answer.

Please return this completed evaluation form to the person that provided you with a copy of the SWO Acute Stroke Unit Orientation Binder. This person should email the completed evaluation tool to [jennifer.beal@lhsc.on.ca](mailto:jennifer.beal@lhsc.on.ca) or [elissa.najm@lhsc.on.ca](mailto:elissa.najm@lhsc.on.ca), or fax a copy to Jennifer Beal/Elissa Najm at 519-663-3753.

1. Please specify your discipline:

RN

RPN

Other (please specify): \_\_\_\_\_

2. Please specify the Continuum of Care in which you work:

ED

Acute Care

Rehab

Other (please specify): \_\_\_\_\_

3. What is the name of the organization where you work?

\_\_\_\_\_

4. Years of experience in healthcare:

0 - 3 years

4 - 8 years

8 - 12 years

12+ years

5. Years of experience in stroke care:

- 0 - 3 years
- 4 - 8 years
- 8 - 12 years
- 12+ years

6. Are you currently working in a Stroke Unit?

- Yes
- No

Comments: \_\_\_\_\_

7. If you answered YES to question 6, please specify below the type of Stroke Unit you are working in:

- Hyperacute/Acute
- Integrated Stroke Unit (Acute/Rehab)

8. Please indicate below the modules of the Acute Stroke Unit Orientation Resource that you completed (check all that apply):

- Module 1: Pathophysiology of a Stroke, Neuroanatomy, and Stroke Syndromes
- Module 2: Acute Stroke Management
- Module 3: Pre-hospital and Emergency Management
- Module 4: Diagnostics and Assessments
- Module 5: NIHSS or CNS Training
- Module 6: Swallowing, Feeding and Oral Care
- Module 7: Mobility, Positioning and Transfers
- Module 8: Secondary Stroke Prevention
- Module 9: Cognition, Perception, and Behaviour
- Module 10: Stroke and Depression
- Module 11: Intimacy Post-Stroke
- Supplemental Modules (Dysphagia Screening; Monitoring/Telemetry; Pharmacology; Hospital-Specific Chart Forms; Other Resources)

9. Which modules were most helpful? (check all that apply)

Module 1: Pathophysiology of a Stroke, Neuroanatomy, and Stroke Syndromes

Module 2: Acute Stroke Management

Module 3: Pre-hospital and Emergency Management

Module 4: Diagnostics and Assessments

Module 5: NIHSS or CNS Training

Module 6: Swallowing, Feeding and Oral Care

Module 7: Mobility, Positioning and Transfers

Module 8: Secondary Stroke Prevention

Module 9: Cognition, Perception, and Behaviour

Module 10: Stroke and Depression

Module 11: Intimacy Post-Stroke

Supplemental Modules (Dysphagia Screening; Monitoring/Telemetry; Pharmacology; Hospital-Specific Chart Forms; Other Resources)

10. For the modules that you indicated as helpful in question 9, why were these modules helpful? Please explain:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

11. For each module you completed please rate the module for content quality using the rating scale. Feel free to provide any additional comments or ideas on how the module could be improved:

**Module 1: Pathophysiology of Stroke, Neuroanatomy, and Stroke Syndromes**

Poor

Good

Excellent

N/A

Comments: \_\_\_\_\_

**Module 2: Acute Stroke Management**

Poor                  Good                  Excellent                  N/A

Comments: \_\_\_\_\_

**Module 3: Pre-Hospital and Emergency Management**

Poor                  Good                  Excellent                  N/A

Comments: \_\_\_\_\_

**Module 4: Diagnostics and Assessments**

Poor                  Good                  Excellent                  N/A

Comments: \_\_\_\_\_

**Module 5: NIHSS or CNS Training**

Poor                  Good                  Excellent                  N/A

Comments: \_\_\_\_\_

**Module 6: Swallowing, Feeding and Oral Care**

Poor                  Good                  Excellent                  N/A

Comments: \_\_\_\_\_

**Module 7: Mobility, Positioning, and Transfers**

Poor                  Good                  Excellent                  N/A

Comments: \_\_\_\_\_

**Module 8: Secondary Stroke Prevention**

Poor                  Good                  Excellent                  N/A

Comments: \_\_\_\_\_

**Module 9: Cognition, Perception, and Behaviour**

Poor                  Good                  Excellent                  N/A

Comments: \_\_\_\_\_

**Module 10: Stroke and Depression**

Poor                  Good                  Excellent                  N/A

Comments: \_\_\_\_\_

**Module 11: Intimacy Post-Stroke**

Poor                  Good                  Excellent                  N/A

Comments: \_\_\_\_\_

**Supplemental Modules** (Dysphagia Screening; Monitoring/Telemetry; Pharmacology; Hospital-Specific Chart Forms; Other Resources)

Poor                  Good                  Excellent                  N/A

Comments: \_\_\_\_\_

12. Please provide 2 examples of how your practice with stroke patients will change or has changed as a result of the knowledge gained from the Acute Stroke Unit Orientation binder:

a. \_\_\_\_\_  
\_\_\_\_\_

b. \_\_\_\_\_  
\_\_\_\_\_

13. How much time did you require to complete one module? Please specify:

\_\_\_\_\_

14. Additional comments:

\_\_\_\_\_  
\_\_\_\_\_

**Thank you for your feedback!**