Regional Stroke Workplan 2021-23

Nov 2020

STROKE NETWORK *of* Southeastern Ontario

Workplan Priorities- Alignment with:

Stroke-Specific Context

- ✓ CorHealth Stroke Report / SE Stroke Dashboard Performance
- ✓ Stroke Workplan Progress Report
- ✓ Community Consultation Themes from patients and families
- ✓ Regional Stakeholder input via many stroke workgroups/committees
- ✓ Canadian Stroke Best Practices, Quality Based Procedures (QBP)
- ✓ Emerging Evidence in Stroke Care

Health Care Context

- ✓ MOHLTC Action Plan ("Team Ontario", Integrated/Bundled Care, ending "hallway medicine"; digital care)
- ✓ Ontario Health – Operational Model
- ✓ CorHealth Operational Plan
- ✓ Ontario Health East and local OHT priorities - still TBD

Aligns with Stroke Network Mandate

1. **Implement/Monitor/Sustain System Change to Support Essential Best Practices**
   - Quality Improvement and Change Management
   - Tools and resources, care algorithms, protocols, order sets
   - Virtual Care
2. **Build Integrated Care across Continuum to Improve the Patient Experience**
   - Navigation Links/Connections/Teamwork/Collaboration
   - Improved patient flow
   - Integrated Care "*ONE TEAM*"; prepare for Bundled Funding
   - Support a positive patient experience
3. **Build and Sustain Capacity for Stroke Expertise**
   - Sustain a pool of inter-professional stroke experts, champions, facilitators
   - Succession planning
   - Virtual Learning

This includes work to

1. Create (new build)
2. Improve (renovate)
3. Sustain

RECALL: 2019-21 Stroke Workplan Priorities

1. Prevention

   Expand/Improve timely equitable regional access to prevention supports and services

2. Hyperacute

   Improve timely regional access to hyperacute stroke treatment

3. Acute to Rehabilitation to Community Transitions

   Support providers in the clinical implementation of a patient and family-centred approach to bundled funding in acute/inpatient rehab/community stroke care

- Expertise and Capacity:

  Sustain/Enhance regional stroke expertise and capacity to deliver best practice stroke care; support connections, recruitment & retention

2021-23 Regional Workplan Priorities

1. **Prevention**: **Optimize Integrated Strategies for Secondary Stroke Prevention and Vascular Risk Factor Management across the Continuum**

2. **Integrated Hospital Care**: **Enhance the integrated system of stroke care to achieve best practice and improve the patient experience** (hyperacute, acute & rehabilitation)

3. **Community: Enhance access to stroke rehabilitation and supports in the community, including LTC, to optimize recovery, the patient experience and community re-integration**

Focus on care integration, patient experience, virtual learning/care, building expert stroke champions and resilient succession plans.

Priority 1: Optimize Integrated Strategies for Secondary Stroke Prevention & Vascular Risk Factor Management across the Continuum

1. Enhance linkages & communication between SPCs & primary care

2. Enhance efficiencies & decrease wait times to SPCs
   a) Maximize triage processes
   b) Enhance SPC workflow with virtual care
   c) Build pool of SPC experts

3. Support Vascular Risk Factor management
   a) Support Indigenous Blood Pressure screening
   b) Promote awareness of Indigenous cultural safety
   c) Determine & initiate one QI focus for improving anticoagulation rates for patients with stroke/TIA discharged with atrial fibrillation

4. Improve knowledge of prevention & self-management linkages, navigation & best practices
   a) Enhance awareness to navigate community prevention resources & supports
   b) Support interprofessional providers to include risk factor management & self-management strategies for a "holistic wrap around" best practice care approach.

Priority 2: Enhance the integrated system of stroke care to achieve best practice and improve the patient experience

1. Hyperacute
2. Acute and Rehab Stroke Units – access/flow
3. Acute and Rehab Stroke Units – quality care
4. Patient Experience

Priority 2: Part 1 - Hyperacute

1. **Sustain and enhance organized regional pathways for access to hyperacute treatment**

   a) Monitor & Sustain Regional/District Acute Stroke Protocol and EVT Service

   b) Trial KHSC local telestroke

   c) Assist with Telestroke Reassessment at BrGH

   d) Support planning and implementation of the regional cerebral aneurysm coiling service at KHSC

Priority 2: Part 2 - Acute & Rehab Stroke Unit Care - FLOW

2. **Enhance timely access to acute and rehabilitation stroke unit care (FLOW)**

a) Monitor flow to Acute and Rehab Stroke Unit Care & Support Associated QI related to flow

b) Facilitate continued bundled/integrated care best practices to sustain full stroke pathway

c) Develop understanding of use of low intensity (LI) rehabilitation in the South East

Priority 2: Part 3 -Acute & Rehab Stroke Unit Care - QUALITY

3. **Deliver quality expert acute and rehabilitation stroke unit care (QUALITY Core Best Practices)**

a) Support expertise in delivery of essential core stroke best practices in critical care, acute care, and rehabilitation

b) Monitor key indicators that reflect key care processes including impact of Integrated Stroke Units at QHC and BrGH.

c) Support teams in development of QI action plans

d) Participate in Stroke Distinction Program

Priority 2 – Part 4
Learn about the Patient Experience

4. **Learn more about the patient experience and apply this knowledge to Parts 1,2,3**

   a) Support/Develop local initiatives to learn about patient experience

   b) Share learning regionally and apply learning to improving the patient experience (e.g. toolkits, provider education sessions).

Priority 3: Enhance access to stroke rehabilitation and supports in the community, including LTC, to optimize recovery, patient experience & community re-integration

1. **Patient Centered Skilled Stroke Care & Rehab**
   a) Evolve **Community Stroke Rehabilitation** (in home &outpatient) using innovative approaches to deliver best practice in the context of the increasing volumes, pressures of patient flow and shifting demographics
   b) Evolve regional approach to **aphasia supportive conversation groups** and expand reach
   c) Support best practice **expertise in LTC and Community;** advocate for adequate skilled resources

Priority 3 cont'd: Enhance access to stroke rehabilitation and supports in the community, including LTC, to optimize recovery, patient experience & community re-integration

2. **Individual Well-Being and Meaningful Engagement**: Enhance the scope of **post-stroke community services and resources** to effectively meet the needs of the changing demographic groups (survivors and caregivers)
   a) Community Support Groups and Programs
   b) Community Stroke-Specific Exercise Programs

3. **Community Co-Navigation**: Develop a more robust **stroke navigation** network of providers with the relevant skills and resources to respond to individual patient/family needs.

4. **Access to Supports and Services /Supported Mobility in the Community**: Enhance awareness of psychosocial needs of stroke survivors and care givers and access to relevant services/supports

Leadership and Coordination

1. Develop stroke team leadership; succession planning
2. Build a resilient network - flexible & responsive to change
3. Monitor stroke care performance against best practice
4. Develop, monitor and implement regional stroke workplan
5. Engage stakeholders; effective communication strategy
6. Sustain governance infrastructure for effective oversight
7. Build stroke communication & accountability links with ON Health East and OHTs
8. Sustain/Grow partnerships – CorHealth ON, H&S, Qs/SLC
9. Manage fiscal and human resources
10. Contribute to innovation and knowledge translation
    - Emphasis on virtual learning and virtual care

2021-23 Regional Education Plan

Expertise and capacity to address the priorities

1. Prevention
2. Integrated Hospital Care (hyperacute, acute, rehab)
3. Community Rehabilitation and Community Support

Virtual learning

Innovation in virtual care

Building stroke champions

Succession plans

***Note: please forward any education requests for 2021-22 to Heather Jenkins by December 4th.**

DISCUSSION

1. Do these priorities make sense/fit with current needs?
   - Anything missing?
   - Anything you would remove?

2. Implementation suggestions
   - Any advice?
   - Steps for populating local plans?

Regional and Local Components

Regional Plan for Southeastern Ontario
Quinte District Stroke Plan - Counties of Hastings & Prince Edward (HPE)
Kingston, Frontenac, Lennox & Addington Counties (KFLA)
Leeds & Grenville Counties (L&G)
Lanark County
Community Care

"It should look ALL ONE COLOUR to me"

Dr. Dan Brouillard