REFERRAL TO ENHANCED COMMUNITY-BASED CCAC REHABILITATION SERVICES FOR STROKE SURVIVORS Hospital Stroke Team identifies if patient needs followup rehab services to support discharge home. Ask: Are outpatient services available AND Does the wait time meet the patient's needs AND Refer to outpatient Yes Is attending outpatient rehab services within the rehab services. patient's physical limits AND Does the patient have access to transportation to attend outpatient rehab? No Refer to Enhanced Community-Based CCAC Rehabilitation Services for Stroke Survivors Given the known benefits of the Team designate completes CCAC Referral a Discharge Link (DL)* meeting, the minimum 24-48 hours prior to discharge requesting No Enhanced Community STROKE Rehab and Hospital Stroke Team asks, "Is there is sufficient time for the DL includes suggested therapy plan with focus of meeting to occur prior to discharge intervention. date?" Yes Hospital Stroke Team designate completes CCAC Care Coordinator (CC) completes CCAC Referral with clear request for DL referral as per program guidelines. **Meeting and Enhanced Community** STROKE Rehab prior to discharge date. CCAC CC approves the Discharge Link CCAC confirms service plan with the meeting and then provides the Inpatient OT's client/family, referral source and primary care contact information to the Community OT via provider. a service offer. Community OT arranges DL meeting with Community Rehab Provider visits client within a Hospital OT. Hospital OT/delegate arranges maximum 5 days post-discharge or as per for patient/family and additional team CCAC Referral members to be present. Note: If meeting reveals a need for any additional services/equipment not already identified, an updated CCAC Referral is Ongoing communication between Care Coordinator, completed by the hospital team. community providers and other stroke team members as needed to support transition of client to community. *Purpose of DL Meeting is: To engage client in the transition process

 To improve the communication of client goals, therapy plans and treatment techniques through a faceto-face meeting of the inpatient OT and the Community OT



