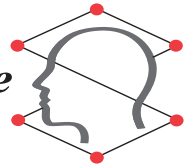


REGIONAL STROKE SYSTEM

**West GTA Stroke
Network**



a partner in the **Ontario Stroke System**

A NEWSLETTER FOR HEALTH CARE PROFESSIONALS ABOUT THE ACTIVITIES OF THE WEST GTA STROKE NETWORK

Welcome to the West GTA region's newsletter – Nadia Hladin, Regional Program Manager



Nadia Hladin, Regional Program Manager

Access, integration, coordination and sustainability of health services are familiar words in today's health care environment. As part of Ontario's Health Transformation agenda, the accountability for delivering health care services is now occurring at a local or regional level. This is creating opportunities for partnerships across the continuum of care which not only address acute health issues and chronic disease management but health, wellness and prevention as well.

Regional stroke networks as part of the Ontario Stroke Strategy have functioned this way since their inception in 1999-2000. Certainly many of the successes in the West GTA region are the result of committed stakeholders who partner and support regional initiatives and activities. The traditional boundaries and practices of service delivery by organizations and agencies are being challenged in order to offer appropriate quality care to stroke survivors and their families close to home. Although this may sound reasonable and simple to do, in reality it takes courage to release control and change existing practices. New relationships built on trust and respect have developed over the past few years and the status quo is no longer acceptable.

Many of the projects and activities initiated in this region, which are described throughout this newsletter, have been innovative and well received by health care professionals, stroke survivors and carers. It is evident that the expertise demonstrated in our region is being recognized and welcomed both at provincial and national forums.

With the addition of two new positions to the Network, the Community and Long Term Care Specialist and Rehabilitation Coordinator, the identified priorities and initiatives for this year reflect needs and issues across the continuum of care. These priorities will enable the West GTA Stroke Network to further develop its collaborative relationships, continue to improve service delivery and integration, enhance professional development based on evidence and best practices, facilitate evaluation of patient and system outcomes and promote health, wellness and stroke prevention to decrease the incidence of stroke.

Thanks to everyone for your continued interest, dedication and support over the past year. Your efforts are greatly appreciated by the Regional Stroke Team and most of all, stroke survivors and their families. Together, we are making a difference.

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FOCUS ON...

Education

Stroke education has always been key to the implementation of the initiatives of the Ontario Stroke System. The role of the Regional Stroke Education Consultant is to coordinate and implement the Regional Stroke Education Plan for health care providers working in the West GTA Stroke Region. Each year an Education Plan is developed based upon identified needs of health care providers. These needs may be identified by a formal learning needs assessment, from education event evaluations and input from the members of the Education Advisory Committee.

The Education Advisory Committee is comprised of members of the West GTA Stroke Region who have an educational responsibility within their role. Their role is to represent their organization and provide feedback and input into regional educational events and initiatives.

Planned Educational Events 2007-08:

- 2-day Nursing Best Practice Workshop for Nurses
- Rehabilitation Symposium for Allied Health and Nurses
- Full-day Tips and Tools Workshops for LTC front-line providers
- Half-day TOR-BSST Training for LTC/Community Providers
- Half-day Community Best Practices for CCAC Case Managers
- Half-day Stroke Best Practices in partnership with regional Psycho-Geriatric Resource Co-ordinators for Community Caregivers
- Half-day session on Primary Care Stroke Prevention for Physicians
- Evening session on Community Best Practices Secondary Stroke Prevention for LTC Physicians
- Stroke Best Practices for Family Health Clinics/Community Health Teams
- Education related to Rehab Consensus Panel recommended assessment tools for allied health across the rehab continuum
- Full-day workshop on Trunk Control for Physio and Occupational Therapists

The Regional Stroke Education Consultant also participates in the identification, development and evaluation of provincial educational initiatives.

A portion of the Regional Education Learning Plan funds is available to support attendance at conferences or courses that are related to stroke. Interested clinicians are required to complete the Education Bursary Application and submit to the Regional Stroke Education Coordinator for consideration of funding.



West GTA Stroke Network display board outlining our regional partners and the Trillium Regional Stroke Centre with HSFO resource materials



OSS Update on Stroke Rehabilitation – Caroline Gangji Stroke Rehab Symposium Jan. 2007



*Linda Kelloway
Regional Stroke Education Consultant*

Linda Kelloway is a Registered Nurse who has worked the majority of her career in Neurosciences. She has a Masters in Nursing and has held her Certification in Neuroscience Nursing since 1995. She has been involved in the Ontario Stroke Strategy/System since 1999 and has also participated in the Canadian Stroke Strategy Professional Development and Training Workgroup and is one of 2 representatives for Ontario on the National Stroke Nurses Council. Currently, Linda has been seconded by the Canadian Stroke Network for one year. Linda's replacement will be commencing work as of March 26, 2007.

FOCUS ON...

Rehabilitation with Carmel Forrestal

In April 2005, the MOHLTC approved the addition of 10 Regional Stroke Rehabilitation Coordinators across the province to facilitate the development of regional rehab services.

Role of the Coordinator:

- Develop links with rehab providers in facilities and agencies in the region and work with them with respect to utilization of common assessment and triage tools and regional referral processes.
- Develop and implement an information system (in consultation with provincial evaluation planning).
- Identify regional needs and opportunities for partnership to enhance access to stroke rehab expertise.

The Rehab coordinator works closely with the Education Consultant, CLTC Specialist and Program Manager and supports the Regional Steering Committee in the development and implementation of the rehabilitation component of the Regional Stroke Work Plan.

Activities to date:

- Developed an inventory of rehab services within the West GTA.
- Made site visits to all hospital facilities in the region.
- Convened a Stroke Rehab Best Practice Committee to prepare and assist with the implementation of national and provincial Best Practice Guidelines & recommendations of the Rehab Consensus Panel.
- Set up a Regional Stroke Interest group; for rehab professionals working with stroke clients, currently meeting 3 times per year. At the first meeting in Sept 2006, there was a presentation on Stroke Recovery Canada and in February, the topic was admission criteria for in-patient rehab.
- In conjunction with the Regional Education Consultant, planned and delivered the Regional Stroke Symposium January 19, 2007 at the Mississauga Convention Centre.
- Participated on various committees for rehab education, rehab definitions and the revised Living with Stroke program.

Future Activities:

- Implementation and follow up of Community Best Practice Guidelines.
- Collaborate with Community & LTC Specialist re: delivery of rehabilitation in long term care facilities.
- Implementation of provincial Rehab Consensus Panel recommendations, CSS and HSFO guidelines.

Biography:

Carmel Forrestal is a UK trained, registered physiotherapist with 27 years experience. She has worked in stroke care across the continuum from acute inpatient to community settings both in the public and private sectors in the UK and Canada.



*Carmel Forrestal
Regional Stroke Rehabilitation
Coordinator*

Websites:

SCORE (Stroke Canada Optimization of Rehabilitation through Evidence)
www.canadianstrokenetwork.ca

Evidence Based Review of Stroke Rehabilitation:
www.ebrsr.com

Stroke Engine: www.medicine.mcgill.ca/strokeengine/

Comprehensive Stroke Unit

Trillium's Comprehensive Stroke Unit (CSU) adds a valuable component to delivery of stroke services through the continuum of care for patients. This specialized unit has 12 acute and 8 rehab beds for our regional stroke patients on a 24/7 basis. Patients can be admitted directly to the CSU from Emergency. It provides a patient-centered model of care delivered by a team of expert clinicians, for the duration of their hospital stay.

The team delivers care based on the Stroke Care Guidelines developed by the West GTA Stroke Network Stakeholders in 2001. Patient treatment plans and discharge goals are managed through daily and weekly rounds with the attending stroke neurologist, physiatrist, and the interdisciplinary team.

"The regional ambulance bypass system enables Trillium to offer tPA (clot busting medication) on a 24/7 basis to patients from the entire Network region who meet the clinical criteria and can be treated within three hours of the stroke onset," says Dr. Daniel Selchen, Trillium's Chief of Neurology and Medical Director of the Regional Stroke Program.

Newsletter Facts, Quotes Etc....

- December 7, 2006 – New expert recommendations for improving stroke care in Canada – The Canadian Best Practice Recommendations for Stroke Care 2006 – were released by the Canadian Stroke Network and The Heart and Stroke foundation of Canada. The document is posted at www.canadianstrokestrategy.ca
- 40% of stroke survivors require help with Activities of Daily Living with 10% of these requiring Long Term Care Accommodation
- Canadian women are five times more likely to have a stroke than develop breast cancer
- Every 20 minutes in Canada, a woman has a stroke
- In Ontario, 6000 die from stroke every year
- 50% of family caregivers will show clinically relevant depression within a year
- The Ontario Stroke Strategy Evaluation 2005 showed a 54% increase in patients receiving referrals to stroke prevention clinics following initial stroke/TIA to prevent a more serious event (2000-2003)
- Some breakfast cereals, consumed in large quantities by Canadian children, contain up to 85% more salt per serving than the same cereals purchased elsewhere
- Studies show that as many as 50% of stroke recoverers report that they do not have a meaningful activity to fill their day
- The West GTA Stroke Network region stretches from Orangeville in the North to the lake in the South and from Kipling Avenue in the East to Highway 25 in the West and crosses 3 LHINS. (Halton/Mississauga, Central West, Central Toronto)

The Regional Stroke Prevention Clinic

The Regional Stroke Prevention Clinic (RSPC) is located at the Trillium Health Centre-Mississauga site and provides rapid assessment and access to diagnostic services and management for people at risk for stroke. The clinic has been in operation since June 2001. The overall goals of the RSPC are to reduce the incidence of stroke within the region, enhance public and professional education on the warning signs of stroke and risk factor management. The RSPC has two main functions within the stroke care continuum. First, it provides an integrated, comprehensive and interdisciplinary approach to primary and secondary prevention for high risk patients. These include assessment of the patient for risk factors and presenting complaint, patient and caregiver education, diagnostics and identification of a treatment plan that is communicated to the Family Physician. Secondly, the RSPC also participates in the planning and implementation of regional stroke prevention strategies.

Patients are referred to the RSPC from emergency departments, family physicians and other specialists such as neurosurgeons or internists. Referrals are processed within 24 hours and patients are seen in the clinic, on average, within 72 hours .

Since its opening in June 2001, the clinic has grown annually an average of 44%. Total number of patient visits in 2001-2002 was 275 and in 2005-2006, the total number was 4319. The clinic is staffed by the Manager, Nicole Pageau, an Advanced Practice Nurse, Barb Neabel and a Registered Nurse, Helen Winiarz and 4 Stroke Neurologists, Dr. Andre Douen (Medical Director), Dr. Dan Selchen, Dr Bryan Temple, and Dr. Al Dhanani.

Meet... Maria Atzori



Maria Atzori, Administrative Services Associate, has been with the West GTA Stroke Network since March, 2000.

Maria has over 18 years of administrative support background and currently supports the OSS, Regional Program Manager, Regional Stroke Education Consultant, Community and LTC Specialist and Rehab Coordinator.

Maria also supports the regional stakeholders, other Regional Networks and Provincial bodies to facilitate delivery and education of Best Practice Stroke Care. Contact Information: Phone: 905-848-7580, ext. 5475, Fax: 416-521-4185, email: matzori@thc.on.ca

FOCUS ON...

Long Term Care and Community Highlights

with Sharon Trottman

The Community and Long Term Care Specialist (C<CS) collaborates with community partners to identify strategies to further develop or enhance resources and services for stroke survivors and their caregivers.

This includes:

- partnering with community agencies, long-term care homes and related organizations
- becoming familiar with the services provided for stroke survivors and their families and increasing public awareness of these resources
- identifying gaps in services
- developing a clear local vision of what stroke care could look like within their region
- supporting the Community & LTC sectors in the development of strategies to enhance staff knowledge and skills and integrate best practices into care provision
- sharing successful initiatives with other members of the regional stroke teams.

Activities to date:

- facilitation of front line staff education in LTC homes using Tips and Tools material from HSFO
- partnering with the Ontario Prevention Clearinghouse to deliver a community forum about Stroke Prevention
- initiating a new stroke recovery group with Stroke Recovery Canada
- creating a new client stroke resource tool
- fostering CCAC partnerships for staff education and delivery of best practice stroke care in the community
- partnering with our regional psycho-geriatric consultants to deliver stroke/geriatric education to community care providers
- creating advertising materials regarding The West GTA Network
- disseminating new Speech and Language Pathologist generated Communication kit to all LTC homes in our region
- partnering with the RNAO Best Practice Coordinator and LTC home staff to create a best practice education package on the topic of resident intimacy in the LTC setting
- continuing to collaborate with community partners on initiatives such as : marginalized women and stroke, chronic disease self-management, diabetic fair, rehab delivery in LTC etc.



*Jim Amesbury, Custom Orthotic Design Group Ltd. -
One of the sponsors for the Stroke Rehab
Symposium Jan. 2007*

Useful Websites:

www.heartandstroke.ca
www.oaccac.on.ca
www.selfhelp.on.ca
www.strokerecovery.org
www.preventstroke.ca
www.ocsa.on.ca/carefinder.html



*Sharon Trottman
Community and Long Term Care
Specialist (C<CS)*

After graduating from the University of Toronto as a combined Physio & Occupational Therapist Sharon worked as a front-line Physiotherapist in the fields of Neurology, Geriatrics & Medicine for 35 years. She has experience in the community and LTC sectors, in train the trainer education and brings a variety of knowledge about healthcare delivery and relationship building from across the continuum of health care.

Key Educational Initiatives 2006-2007

Course	Dates	Objectives
Stroke Best Practice Workshops for Nurses	November 2006 and April 2007	A 2 day workshop providing an educational opportunity that incorporates best practices in the management of the acute stroke survivor related to the nursing scope of practice across the continuum of care. Target audience: Clinical Nurse Educators, CCAC Nurse Case Managers, Clinical Nurse Leaders, RN, RPN
Primary Care Stroke Prevention Education	May – June 2006	Directed at Family Practitioners and presented by professional staff from The Regional Stroke Centre at Trillium Health Centre
Tips and Tools Stroke Education	April 2006 and February 2007	Providing an overview of stroke including mechanism of stroke, changes related to perception and cognition, hydration and swallowing, communication and continence. Target audience: PSW, RPN, RN, Restorative Aides, Clinical Nurse Educators, Recreational Therapists.
Motivational Interviewing Workshop	February 28, 2007	Introduction of the 4 principles of change explaining why motivational interviewing works. Learning how to apply principles, spirit and skills of MI through experiential exercise, demonstrations & role playing. Target audience: all clinicians working with stroke survivors.
Understanding trunk Control and Core Trunk Stability	March 3, 2007	A practical workshop on understanding normal components of trunk movement and core stability and its application to improving movement control post stroke. Target audience: OT, PT
West GTA Stroke Rehabilitation Symposium	January 19, 2007	A one day symposium consisting of a series of presentations by leaders in clinical stroke research and stroke rehabilitation. Topics ranging from nutrition to management of pain and spasticity. Target audience: those working in stroke rehab across the continuum and disciplines.

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