

# Northwestern Ontario Regional Stroke Network

Fewer Strokes. Better Outcomes

## Inside

[Message from the Network Director](#)  
[Team Update](#)  
[Contact Us](#)  
[Highlighting our Partners](#)  
[Education Fund Application](#)  
[Highlights from the 2013 Canadian Stroke Congress](#)  
[Hemispheres](#)  
[strokebestpractices.ca](#)  
[Stroke Forum](#)  
[Network Activities](#)  
[New Online Resource](#)  
[Upcoming Education Events](#)  
[Stroke Champion Award](#)  
[Research Update](#)  
[New Changes to Triaging](#)  
[Stroke Evaluation Report](#)  
[LTC Resources](#)  
[Stroke Rehab Updates](#)  
[Stroke Prevention Clinics](#)  
[Telestroke Sites](#)

## Vision

**Fewer strokes.  
Better outcomes.**

## Mission

**To continuously improve stroke prevention, care, recovery and re-integration**

## Message from the Northwestern Ontario Regional Stroke Network's Regional Director, Caterina Kmill



On behalf of the Northwestern Ontario Regional Stroke Network (NWORSN), I would like to wish everyone a safe and healthy new year. The NWORSN mission is "To continuously improve stroke prevention, care, recovery, and reintegration" with a focus on improving stroke care throughout the Northwest LHIN. To this end with the direction and support of our steering committee we develop yearly activity plans and engage our regional partners through various committees, projects, and educational events. While there are many challenges associated with providing evidence based, integrated and cost effective stroke care in a region so vast and sparsely populated, the dedicated health care professionals that work in stroke care in this region understand the challenges and strive to use innovative approaches to ensure that the people of Northwestern Ontario receive the best care possible.

In May of 2013 updates to the hyperacute and acute care Canadian Best Practice Recommendations for Stroke Care were released <http://www.strokebestpractices.ca/> The NWORSN staff have been busy integrating the new recommendations into practice at the stroke centre as well disseminating them throughout the region.

An aging population, increasing numbers of people living with chronic conditions, rising health care spending and global

economic uncertainty has prompted the provincial government to develop Ontario's Action Plan for Health Care. Ontario's Action Plan for Health Care is a commitment from the provincial government to the residents of Ontario to "make this province the healthiest place in North America to grow up and grow old in". Health System Funding Reform (HSFR) and the Excellent Care for All Act (ECFAA) are strategies to improve the quality and value of patient care, providing the right care at the right time in the right place. The vision is to provide better patient care through better value from our health care dollars. Quality Based Procedures (QBPs) are clusters of patients with a similar clinical diagnosis where we have the potential for quality outcomes and to reduce health care costs. As the third leading cause of death and a leading cause of disability in Canada, Stroke was selected as a QBP. Available evidence indicates that when we implement standardized care and follow best practice we can improve stroke and TIA patient outcomes as well as reduce costs to the health care system. The NWORSN has reviewed our stroke centre's performance relative to QBP and has identified key areas for improvement. The next steps will be to institute improvement initiatives throughout the organization and region to ensure that we are providing exceptional stroke care. To learn more about QBP's you can access the OSN webcast: Taking Stroke Best Practices to the Next Level (An introduction to QBP and HQO Stroke Clinical Handbook) on the Ontario Telemedicine site at: <http://mediasite.otn.ca/Mediasite/Play/8cb89016a2e04bebab813567b1b9726a1d?catalog=fd668812-d87c-47f9-b1ba-6d979fed9af4>

In Northwestern Ontario we are committed to reducing health care costs and providing stroke care that is in the best interest of patients. We will build on our successes and continue to improve the quality of care across this vast region.

## Team Update

Welcome to  
**Dyane Lagadouro**  
Social Worker, HBSW, RSW  
Cardiovascular and  
Stroke Program



Social Work for the Stroke Program is serving our community and region's stroke survivors with support services that will honour, respect and dignify the human person.

Social Work is an integral part of the stroke interdisciplinary team, working to enhance quality of holistic care, promoting compassion, empathy and advocating for focus to remain patient and family-centered. Social work provides psychosocial assessments, individual and resource counseling, as well as crisis interventions for patients and their families in an acute care setting. Support services are influenced and directed by the knowledge and experience of the medical team, as well as quality-based practice recommendations, which help screen for post-stroke depression. Assisting patients within the standards of the Ontario College of Certified Social Workers and the Mission Statement and Code of Conduct of the Thunder Bay Regional Health Sciences Centre, social work acts as intentional, non-judgmental support for our patients, ensuring confidentiality, cultural sensitivity and overall, quality stroke care.

Welcome to  
**Katie Amadeo**  
Registered Dietitian  
Stroke Prevention Clinic



Primary duties of the stroke RD include nutrition assessment and development of nutritional care plans for both hospital inpatients and outpatients at

the Stroke Prevention Clinic. For inpatients, this may involve the implementation of enteral nutrition, therapeutic diets or providing education on nutrition for secondary stroke prevention. Duties at the outpatient Stroke Prevention Clinic include nutrition assessment and intervention, which involves education on nutrition for secondary stroke prevention. This may include a variety of different topics including low sodium, cholesterol lowering, weight loss, or diabetes diet education.

Welcome to  
**Craig Kozlowski**  
BSCN, RN CNS  
Cardiovascular &  
Stroke Program



The position of **Clinical Nurse Specialist** for the Cardiovascular & Stroke program at the Thunder Bay Regional Health Science Centre is to advance nursing development

through the use of and education that adheres to evidence-based practice and promoting excellence in clinical practice.

The role further supplements excellence in nursing by serving as role models and advocates by providing leadership and by acting as clinicians, researchers, consultants and educators. Through the use of comprehensive knowledge and skills, advanced judgment and clinical experience in cardiovascular and stroke care, it is within the responsibility of the Clinical Nurse Specialist to support the interdisciplinary team in providing solutions at all levels of care.

The Clinical Nurse Specialist adheres to the conceptual foundation of Patient and Family Centered Care and Inter-Professional Practice. The Clinical Nurse Specialist advances our standard of care by assisting clinical staff to maintain their competence and manage their professional development.

## The Northwestern Ontario Regional Stroke Network Staff

Email: [nwostroke@tbh.net](mailto:nwostroke@tbh.net)

Website: [www.nwostroke.ca](http://www.nwostroke.ca)

**Caterina Kmill**  
Regional Director  
(807) 684-6702

**Elaine Edwards**  
Regional Stroke  
Educator  
(807) 684-6406

**Esmé French**  
Rehabilitation  
Specialist  
(807) 684-6498

**Pauline Bodnar**  
Community  
and LTC Specialist  
(807) 684-6468

**Kathleen Bulloch**  
Administrative  
Secretary  
(807) 684-6703

## Highlighting our Partners



Lucy Venne-Fecho started her career as a physiotherapist at Dryden District General Hospital, now named Dryden Regional Health Centre (DRHC), as a new grad from the University of Western Ontario in 1994. Lucy has had the opportunity to practice physiotherapy in a variety of settings with the DRHC, starting in a rotating position between inpatients and outpatients, that expanded into home care, a satellite clinic in Ignace, as well as the physiotherapist at Princess Court Long Term Care Facility. In 2007, Lucy became Director of Rehab Services within DRHC, which meant a change to an administrative role, as well as keeping a small clinical practice in the outpatient orthopedics department. In July 2013, Lucy gave up her clinical practice to become the Director of the Dryden Area Family Health Team, as well as continuing with her role as Director of Rehabilitation Services.

As a member and Co-chair of the Northwestern Ontario Regional Stroke Network's Rehabilitation & Community Engagement Advisory Committee, Lucy states:

"I feel that the committee is an extremely important avenue to collaborate and advocate for the best possible patient care throughout the region. Being able to have a voice regionally is so important for both health care members and patients alike. I value the expertise available to us, the ongoing education that is provided, and being able to be kept up to date on what is happening throughout the region to communicate back to the staff at DRHC. I look forward to continuing on this committee and also in my new role as member of the Northwestern Ontario Regional Stroke Network Steering Committee. Thank you."

We thank Lucy for her ongoing devotion to stroke care and recovery in Northwestern Ontario.

## Northwestern Ontario Regional Stroke Network Education Fund Application

### What is the Northwestern Ontario (NWO) Regional Stroke Network Education Fund?

It is a fund to assist clinicians working in stroke care across the continuum to incorporate best practices through learning opportunities or projects focused on evidence based practices in stroke care.

### Who can apply?

Health care providers working in stroke care across the continuum throughout the NWO region.

### How can you apply?

To obtain an application or for more information please contact:

**Elaine Edwards,**  
Regional Stroke Educator

Thunder Bay Regional Health  
Sciences Centre

807-684-6706

[edwardse@tbh.net](mailto:edwardse@tbh.net)

## Highlights from the 2013 Canadian Stroke Congress October 17-19, Montreal



### • Lipid Guidelines Update

The revised guidelines were presented with a discussion on targeting for LDL depending on risk stratification as well as how to manage intolerance to a specific statin medication. It was an interesting review as well as good discussion on the new non fasting lipid testing guidelines. The lively question/answer period always provides greater understanding and depth of the topic.

[www.ccsguidelineprograms.ca](http://www.ccsguidelineprograms.ca)

### • Benefits of Exercise and Primary Prevention Showcased

Physical activity interventions were more effective than drug treatment in mortality outcomes among patients with stroke. Take your medications out for a walk – they will work even better!

Naci H, Ioannidis JPA. Comparative effectiveness of exercise and drug interventions on mortality outcomes: metaepidemiological study. *BMJ* 2013;347:f5577.

### • Making the Connection: A Call to Action on Vascular Health

Recognizing the urgent need for collective action on vascular health, organizational partners –

Canadian Cardiovascular Society,  
Canadian Diabetes Association,  
Canadian Society of

Endocrinology and Metabolism,  
Canadian Stroke Network, Heart and  
Stroke Foundation and

Hypertension Canada – endorsed  
**Making the Connection: A Call to  
Action on Vascular Health.**

#### Objectives:

- 1) Focus attention on the scope and impact of vascular diseases in Canada
- 2) Identify unmet needs, and opportunities to improve prevention, treatment and recovery

3) Issue a call to collective action on vascular health by multiple stakeholders

The document provides a call to action to multiple stakeholder groups including:

**For all Canadians** – Make your health a priority. Adopt healthy behaviors. Advocate for healthy

communities. Work with your health care provider to modify your vascular risk.

#### For health care practitioners

– Maximize inter-professional collaboration to comprehensively manage vascular risk and prevention. Keep up-to-date on and follow best care practices.

Collaborate with other sectors to advocate for and address legislative, social and built environment factors that impact population health.

To see the full report:

[http://www.canadianstrokenetwork.ca/wp-content/uploads/2013/10/VascularDeclaration\\_ENG-1.pdf](http://www.canadianstrokenetwork.ca/wp-content/uploads/2013/10/VascularDeclaration_ENG-1.pdf)

### • Quotable quotes from Congress

*“The risk of being sedentary is greater than the risk of exercising.” Dr. Andrew Pipe, Canada*

*“Prevention is the only sustainable answer for health care to deal with coronary artery disease.” Dr. Jaako Tuomilehto, Finland*

### • Hypertension: What's New? What's Still Important?

For the 2013 Canadian Recommendations for the Management of Hypertension

Go to: [http://www.hypertension.ca/images/CHPEP\\_2013/2013\\_CHEP\\_Booklet\\_EN.pdf](http://www.hypertension.ca/images/CHPEP_2013/2013_CHEP_Booklet_EN.pdf)

### • Top Congress sessions available for credit online

Coming soon, three of the most well-attended and popular sessions from the congress will be available online as interactive courses approved for online learning and eligible for RCPSC.

Go to: <http://www.canadianstrokenetwork.ca/csnblog/category/congress/>

### • Highlights of “Practical Tools and Strategies for Managing Atrial Fibrillation”

- o Discussed programs and tools available to support healthcare professionals in delivering optimal care to patients with atrial fibrillation.
- o Demonstration of an Electronic Clinical Assessment Checklist for Atrial Fibrillation Care
- o Common Clinical Challenges and Practical Strategies to address them.

Full presentations are available at: [www.afibtools.ca](http://www.afibtools.ca)

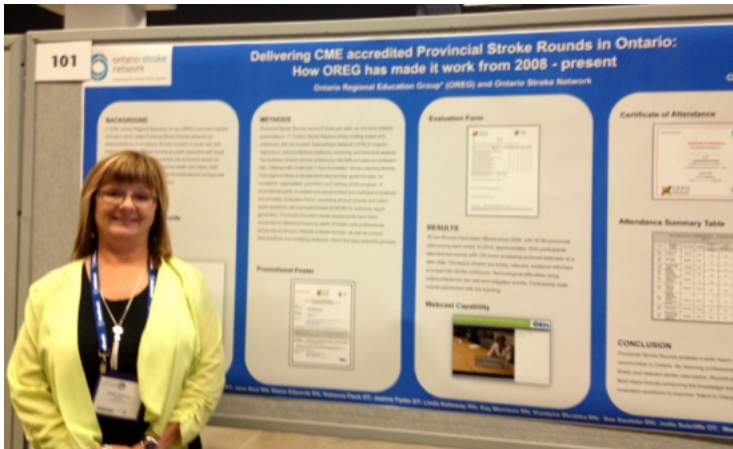
### • Every 10 seconds someone in Canada suffers a stroke

To access resource material for Healthcare Professionals and Patient Education...

Visit: [www.strokeconsortium.ca](http://www.strokeconsortium.ca)

The image is a screenshot of a website titled 'Healthcare Professional Online Resource Centre'. The header includes the CSC and CNC logos and the text 'Canadian Stroke Consortium / Consortium Neurovasculaire Canadien'. Below the header, there are two main sections. The left section is titled 'AFIB on a Page' and lists resources like 'Professional Education Videos', 'Assessment Tools', 'Practice Guidelines', 'Practice Reflection Tools', 'Learning Clinic Tools', and 'Articles'. The right section is titled 'Healthcare Professional Online Resource Centre' and describes the center's purpose: 'This online resource centre provides a collection of materials for education of healthcare professionals and tools for use in caring for patients with atrial fibrillation.' It also includes a 'How does it work?' section and a 'Questions or comments?' section with contact information.

## Highlights from the 2013 Canadian Stroke Congress October 17-19, Montreal



Elaine Edwards



Esmé French



Mary Adams and Esmé French

### • Northwestern Ontario Regional Stroke Network Contributions at Congress

- Sharon Jaspers: Oral presentation – Transient Ischemic Attack (TIA) Triage and Management
- Elaine Edwards: Poster presentation with the Ontario Regional Educator Group (OREG) – Delivering CME Accredited Provincial Stroke Rounds in Ontario. How OREG has made it work from 2008-present.
- Esmé French & Mary Adams (St. Joseph's Care Group): Poster & oral presentation – Implementation of a Volunteer-led Evening and Weekend Activity Program for Clients with Stroke in Inpatient Rehabilitation



Sharon Jaspers



## Are you interested in learning more about stroke? Do you like to learn independently?

....If you answered yes, take advantage of the Hemispheres Stroke Competency Series, available FREE from the NWORSN.

### What is Hemispheres?

- multi-level, interactive, comprehensive, web-based educational series
- Designed to train all levels of users: nurses, allied health professionals and physicians
- Curriculum is web-based - once you create an account you may log on from any computer
- You will be given a license key code to enter and you will create an account

- You will complete the test in the first module within 2 months of being provided the license key code
- You will complete the entire series within one year of being provided the license key code

### Computer Requirements

Your computer must meet the requirements below:

- Internet Explorer 7.0+ (8.0+ recommended), Firefox 1.5+, Safari 3.1+, Chrome 4.0+, Opera 9.64+
- Flash 11.0+

- Cookies must be enabled in your browser
- Screen resolution of 1024 x 768 or greater
- Popups must be allowed in order to view course material
- Adobe Reader is required to view completion and CE certificates.

To view demo go to: <http://www.apexinnovations.com/>

For more information contact Elaine Edwards Regional Stroke Educator at [edwardse@tbh.net](mailto:edwardse@tbh.net) or 807-684-6706

## Have you visited [www.strokebestpractices.ca](http://www.strokebestpractices.ca) lately?



The recommendations provide evidence-based guidelines for the prevention and management of stroke and are updated on a rotating cycle every two years. Sections include: Awareness, Prevention, Hyperacute, Acute, Rehabilitation, Transitions, Mood & Cognition, Telestroke and Paediatric Stroke.

**A number of updates have been recently added to the website since June:**

- Rehabilitation - July
- Telestroke - September
- Transitions - October

Upcoming provincial videoconferences to review the recommendations are planned for Telestroke (January 30, 2014) and Transitions (February 27, 2014). Please contact your local telemedicine coordinator to book the event at your facility. If you would like to view any of the highlights of the Best Practice Recommendation series, they are available on the OTN webcasting centre <http://webcast.otn.ca/> under archived events.

## SAVE THE DATE

March 20 & 21, 2014

# Northwestern Ontario Regional Stroke Forum

## Focus on Hyperacute and Acute Stroke Care

The NWORSN is very excited to present an exceptional caliber of international level speakers and stroke care leaders at the March Forum.

### Featuring

#### **Dr. Leanne Casaubon, Neurologist**

- Assistant Professor of Medicine, University of Toronto, Division of Neurology-Stroke Program;
- Director, TIA and Minor Stroke Unit, Toronto Western Hospital / University Health Network.
- Currently, is the Ontario Stroke Network (OSN) Best Practice Champion
- Previously - Co-Chair of the Canadian Stroke Best Practices 2013 Acute Care Stroke Working Group

#### **Dr. Robert G. Hart, Neurologist**

- Professor of Medicine (Neurology) McMaster University
- Michael DeGroot Chair in Stroke Research
- Co-director of the McMaster/ Hamilton Health Sciences Stroke Fellowship Program
- Directed several randomized clinical trials serving as the principal investigator and participated in many trials

#### **Dr. Frank Silver, Neurologist**

- Currently the Director of the University Health Network's Stroke Program and the Medical Director of the Toronto West Stroke Region.
- Academic interests are in the areas of stroke management and improving stroke care delivery through regional organized care
- Involved in the implementation and monitoring of many clinical trials in stroke and publication of numerous journal articles
- Currently on the board of the Canadian Stroke Consortium
- Co-principal investigator of the Registry of the Canadian Stroke Network
- Founded Ontario's Telestroke program.

#### **Target Audience:**

Physicians, nurses, nurse practitioners, allied health professionals, paramedics, health care administrators with an interest in hyperacute and acute stroke care.

#### **Dates:**

##### **Thursday March 20, 2014:**

17:30 - Dinner and Guest Speaker

##### **Friday March 21, 2014:**

08:00 - 4:00 pm - Full day session

#### **Location:**

Valhalla Inn, Thunder Bay

#### **Topics include:**

TIA management, hyperacute stroke care, acute stroke management, the new oral anticoagulants, and "What's New in Stroke".

#### **Out of town participants:**

Block Booking rate will be available at the Valhalla Inn - details will be available on registration form.

*Registration is limited and is targeted to open in late January. Register early to ensure your spot!*

## Network Activities

### Stroke Month and Public Awareness Activities

June was Stroke Month and Network staff took part in a number of public awareness activities:



- Display at Thunder Bay 55+ Centre
- Thunder Bay Friendship Centre–presentation to Elders, volunteers and staff
- Patient and Family Centred Care exhibition at TBRHSC
- Display at Fort William First Nation Health Fair

### “Electrical Stimulation for the Treatment of Motor Deficits in Individuals Following a Stroke” Workshop

June 14, 2013

Airlane Hotel and Conference Centre, Thunder Bay, ON

Janet Brown and Troy Seely from the Western University in London, ON delivered this hands-on and evidence-based workshop. Twenty four occupational and physiotherapists from across the continuum of care attended. 5 clinicians from the region were financially supported to attend.

### Treaty Three Workshop

August 19-20, 2013

Fort Frances, ON

Sharon Jaspers and Pauline Bodnar were sponsored by Treaty Three to provide education related to prevention, stroke diagnostics, salt, and sleep apnea. Turning point technology (an interactive audience responses system)

was used for the first time with the audience. It was well received. The workshop was also very well attended and participants were engaged in the learning opportunity.

### Stroke Collaborative 2013

October 28, 2013

Toronto, ON

A number of clinicians and health care administrators from Northwestern Ontario attended the Stroke Collaborative. It was felt that this was one of the best Collaboratives to date. Alena Frowen and Esmé French presented “Implementation of Volunteer-Led Evening and Weekend Activity Program for Clients with Stroke in Inpatient Rehabilitation”, a program which takes place at St. Joseph’s Hospital’s special rehabilitation unit.

### Post Stroke Depression Workshop

November 8, 2013

Airlane Hotel and Conference Centre, Thunder Bay, ON

Dr. A. Sniderman was the key note speaker for the morning. Dr. Sniderman is a Psychiatrist with a specialist designation in Neuropsychiatry. Shelly Brown started the morning with an overview of Stroke; Laura Swancar, OT spoke about Function, Mood & Cognition; and Cindy Backen spoke about using the PIECES model & supportive care to address depression. Overall the workshop had very good evaluations. Dr. Sniderman was very well received!

### Stroke Best Practices Workshop

November 27, 2013

Airlane Hotel and Conference Centre, Thunder Bay, ON

This workshop was targeted to nurses who provide direct care to people with stroke in the acute care setting. Other health care providers with this focus; as well as nurses working in other settings, with an interest in stroke care in the acute care setting were invited to attend. A total of 52 participants from acute care, rehab, community and educational settings attended. Three

participants from the region received financial support from the NWORSN. This workshop was unique as interactive technology was incorporated throughout the day and the focus was specific to posterior circulation stroke.





## Screening for Cognitive Impairment in Stroke and TIA Toolkit: New Online Resource Available

A new online resource has been developed to assist health care providers working with clients with stroke to screen for vascular cognitive impairment.

The resource is free and available through Ontario Stroke Network Website (see below for link).

It includes seven chapters that address:

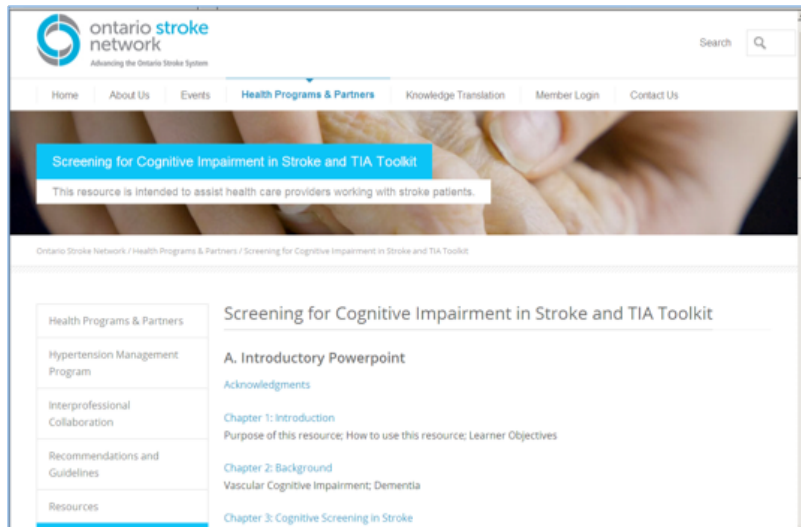
- background information on vascular cognitive impairment and dementia
- Canadian Best Practice Recommendations for Stroke Care
- the use of cognitive screening in stroke
- how to administer cognitive screening including use of the Montreal Cognitive Assessment (MOCA)

- discussion about screening limitations
- next steps.

The chapters are augmented with a video clip presentation on **Cognitive Impairment in Stroke** Patients, presented by Dr. Demetrios J. Sahlas, MSc, MD, FRDPC, MG DeGroot Professor in Stroke Management, McMaster University, Central South Ontario Regional Stroke Centre, Hamilton Health Sciences.

Access to the free online resource can be found at:

<http://ontariostrokenetwork.ca/best-practices-resources/screening-cognitive-impairment-stroke-tia-toolkit/>



### Upcoming Stroke Education Events

Events marked with (VC) will be available through videoconference to the region.

- January 21, 2014: A Practical Management Series on the Newer Oral Anticoagulants (NOACs). (VC)
- Mid January (weekly sessions for 6-7 weeks at TBRHSC on 2A): Series on Acute Stroke Topics
- January 30, 2014: Update on 2013 Canadian Best Practices Recommendations for Stroke Care: Telestroke (VC)
- February 12-14, 2014: International Stroke Conference 2014, San Diego, CA
- February 27, 2014: Update on 2013 Canadian Best Practices Recommendations for Stroke Care: Managing Stroke Care Transitions (VC)
- March 5, 2014: Provincial Stroke Rounds (VC)
- March 20 (evening) & March 21st (full day): NWO Regional Stroke Forum
- March 27, 2014 (tentative): Update on 2013 Canadian Best Practices Recommendations for Stroke Care: Public Awareness (VC)
- May 6, 2014 and June 3, 2014: Provincial Stroke Rounds (VC)

### Dates to be determined (all tentatively available via VC)

- Videoconference presentation on Acute Care Topic to the Region
- Tips and Tools Series for KO Telemedicine
- Highlights of 2013 Canadian Stroke Congress
- Highlights of 2013 Stroke Collaborative
- Highlights of 2013 Clinical Update

## Irene Erickson – 2013 Recipient of the Northwestern Ontario Stroke Champion Award



Each year the Northwestern Ontario Regional Stroke Network honours a champion in stroke care from our region. The recipient of the NWO Stroke Champion Award is an individual or organization who demonstrates strong leadership, and who goes above and beyond in the areas of professionalism, innovation, advocacy, and communication. They may be described as someone who “inspires by example”.

The award winner is an individual who:

- is well known in the stroke community
- has increased the awareness of stroke in NWO or their community
- has promoted best practices in stroke care by being involved with community groups, raising issues with local government or by interacting with the media
- may have served on local committees/groups in their community to make positive changes to improve quality of life for persons living with stroke
- shows commitment, dedication, and above all excellence in improving stroke prevention, care, recovery or community reintegration

In June, the 2013 Stroke Champion Award was presented to Irene Erickson, a now retired physiotherapist from St. Joseph’s Hospital in Thunder Bay. Highlights from her nomination letter include:

“Over her 39 years of working as a physiotherapist, Irene has embodied physiotherapy for stroke survivors and their families and her retirement left many people wondering: “What will we do when Irene retires?” She has been a source of knowledge, skills, and experience in the field of neurological and stroke rehabilitation to physiotherapists at St. Joseph’s Care group, Thunder Bay Regional Hospital, and hospitals throughout the region from Kenora to Manitouwadge”.

“She has always been willing to share her knowledge to others and is humble of her vast amount of expertise in the area of stroke rehabilitation. Irene daily shares her skills with both her clients and their family members teaching them to walk, climb stairs, and transfer in and out of bed or cars so they may be able to return home successfully.”

We congratulate Irene on her long career of providing exemplary care for people with stroke in Northwestern Ontario.

Past winners of the NWO Stroke Champion Award include:

2008 [Todd Kennedy, Ontario March of Dimes – Stroke Recovery Network](#)

2009 [Denise Taylor, Physiotherapist – Special Rehabilitation](#)

2010 [Brenda Mason, Stroke Aboriginal Advisory Committee](#)

2011 [Trish Nelson, Director – Physical Rehabilitation](#)

2012 [Dr. John Hargadon, Physiatrist](#)

Nomination forms for the 2014 award will be distributed in January 2014 or are available on request by contacting Esmé French at 684-6498 or [frenche@tbh.net](mailto:frenche@tbh.net). Please consider nominating another worthy stroke champion in 2014.

### RESEARCH UPDATE

#### 1. Recruiting/Open Dr. Margaret Sweet

Accelerate IIV-MC-EIAN - Assessment of Clinical Effects of Cholesteryl Ester Transfer Protein Inhibition with Evacetrapib in Patients at a High Risk for Vascular Outcomes (HRVD).

CLOTBUST-ER - A Phase 3, Randomized, Placebo-Controlled, Double-Blind Study of the Combined Lysis of Thrombus with Ultrasound and Systemic Tissue Plasminogen Activator (tPA) for Emergent Revascularization (CLOTBUST-ER) in Acute Ischemic Stroke

#### 2. Not Recruiting/Open Dr. Margaret Sweet

IRIS: A randomized, placebo-controlled trial of pioglitazone, compared with placebo, for prevention of stroke and myocardial infarction after ischemic stroke and transient ischemic attack.

#### 3. Approved/Not administered by Clinical Teams Esme French/Pauline Bodnar

Stroke Self-Management Rehabilitation Trial (SMART)

#### Jill Cameron & NWORSN

Optimizing stroke family caregiver support across the care continuum by improving the timing of intervention delivery

#### 4. Pipeline Dr. Ayman Hassan

The Incidence of Carotid Artery Disease in Northwestern Ontario

## NEW Changes to TRIAGING TIA/or Non-Disabling Stroke Symptoms

Based on 2013 Canadian Best Practice Recommendation for Stroke Care

Focus is on **TIME**,  
**MOTOR** and **SPEECH**

The Northwestern Ontario Stroke Network (located at Thunder Bay Regional Health Sciences Centre-TBRHSC) is aligning the triage of patients with possible TIA or non-disabling ischemic stroke with the revised Canadian Best Practice Recommendations for Stroke Care. The focus is now on **MOTOR, SPEECH** symptoms and **TIME**. TBRHSC Stroke Prevention Clinic has developed a new referral form reflecting these changes.

**MOTOR and SPEECH** symptoms are the **highest priority** as they present the **highest risk** for stroke

re-occurrence. [Rationale: MOTOR and SPEECH symptoms reflect anterior brain circulation and the focus is on rapid assessment of the internal carotid arteries for possible endovascular procedure].

Also, patients with possible TIA or non-disabling ischemic stroke symptoms that have a previous history of atrial fibrillation require rapid evaluation to consider initiation of oral anti-coagulation if not previously initiated.

In early 2014, a package will be sent to primary care providers and emergency departments throughout Northwestern

Ontario outlining the new TIA Triage criteria; along with the new Stroke Prevention Clinic referral form.

For more information on the new TIA triage criteria, please go to the link at Canadian Best Practice Recommendations for Stroke Care [http://www.strokebestpractices.ca/wp-content/uploads/2013/05/Ch3\\_SBP2013\\_Hyper-Acute-\\_23MAY13\\_EN\\_-FINAL4.pdf](http://www.strokebestpractices.ca/wp-content/uploads/2013/05/Ch3_SBP2013_Hyper-Acute-_23MAY13_EN_-FINAL4.pdf)

For further information, please contact Sharon Jaspers NP at the Stroke Prevention Clinic at 807-684-6700 or email [jaspers@tbh.net](mailto:jaspers@tbh.net)

## 2013 Ontario Stroke Evaluation Report Released

*Hall R, Khan F, O'Callaghan C, Kapral MK, Hodwitz K, Kapila S, Li S, Zhou L, Bayley M. June 2013*

This comprehensive report documents progress made by the Ontario Stroke System in the provision of stroke care from 2003/04 to 2011/12, with a particular focus on findings from the first Ontario Stroke Audit of Secondary Prevention Clinics. Variations in adult and paediatric stroke care and services are presented by health care sector, regional health authority and type of health care facility, as well as by patient age group and sex. Recommendations for improving Ontario's stroke care system are provided.

Report cards that grade progress in the delivery of stroke care for each of Ontario's 14 Local Health Integration Networks are also presented.

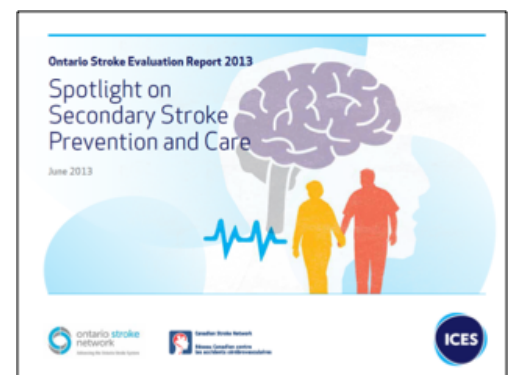
Access the links below to view the full report, supplementary exhibits and LHIN report cards.

Ontario Stroke Evaluation Report 2013

Ontario Stroke Evaluation Report 2013: Supplementary Exhibits

Ontario Stroke Report Cards 2013

Or through visiting [www.ices.on.ca](http://www.ices.on.ca) under Publications, then Reports



## LONG TERM CARE RESOURCES:

The Regional Geriatric Program central (RGPC), located at St. Peter's Hospital in Hamilton, is one of 5 regional geriatric programs (RGPs) located in Ontario.

RGP Fact Sheet "The Role and Value of Specialized Geriatric Services" can be found at:

Additionally, RGP hosts considerable resources for long term care at this site:

<http://www.rgpc.ca/resource/index.cfm>

The "Blogger" is sent throughout the province to all long term care homes. A team of Community & Long Term Care Specialists from the Ontario Stroke Network contributed to a number of "Bloggers" which can be found if you

click on the "stroke" resource.

For more information on Best Practices, you can find them at: <http://rnao.ca/> Click on Nursing Best Practice Guidelines and select LTC BP Initiative

<http://shrtn.on.ca/> Click on Seniors Health

<http://www.strokebestpractices.ca/>

## Stroke Rehabilitation Updates



### Rehabilitative Care Alliance

#### Rehab Care Alliance Established in April 2013

"Rehabilitative Care" is a broad range of interventions that result in the improved physical, mental and social well-being of those suffering from injury, illness or chronic disease. The Rehabilitative Care Alliance, an Ontario-wide collaborative, is working together with stakeholders to standardize rehabilitative care. Funded by all 14 LHINs, the Alliance aims to improve long term clinical outcomes for Ontarians and increase community capacity so that people have access to rehabilitative care when and where they need it.

To help advance its work over the next two years, the Alliance has established four province-wide working groups: capacity planning and system evaluation, definitions, frail senior/medically complex, and outpatient/ambulatory. For more information please visit: <http://rehabcarealliance.ca/>

The Alliance has launched a set of communication tools to help keep key stakeholders up-to-date on Alliance governance and working group activities:

- Website
- Key Messages - distributed via email to key stakeholders and posted to the Alliance website

- e-Newsletter - published quarterly
- e-Flash Bulletin - updates on time-sensitive information

For regular updates, subscribe to the Rehab Care Alliance mailing list by contacting: [info@gtarehabnetwork.ca](mailto:info@gtarehabnetwork.ca).

#### December 2013 - Release of the Auditor General's Report on Rehabilitative Care in Hospitals

The Auditor General of Ontario has called for a better coordinated system for hospital rehabilitation services to ensure patients aren't treated differently depending on where they live.

Among findings identified in the 2013 Auditor General's Report:

- There is a wide variation in the supply of short-term rehabilitation inpatient beds across the province, which means patients could have to travel outside their areas to get the services they need;
- Lack of information on the use or outcomes of long-term inpatient rehabilitation or on outpatient rehabilitation means the Ministry does not know if those services are sufficient or effective;
- Patients who no longer require hospital care may be occupying beds needed by other patients. With the exception of stroke, for most conditions requiring rehabilitation, there are few best practice standards in Ontario for such matters as when therapy should start and frequency

of treatment. As a result, practices varied at the hospitals visited during the audit.

To read the full report of the Auditor General's findings on Rehabilitation Services at Hospitals, please visit: [http://www.auditor.on.ca/en/reports\\_en/en13/308en13.pdf](http://www.auditor.on.ca/en/reports_en/en13/308en13.pdf)

#### Stroke Quality-Based Procedures - Inpatient Rehabilitation

Quality-Based Procedures (QBPs) are an integral part of Ontario's Health System Funding Reform (HSFR). This reform plays a key role in advancing the government's quality agenda and its Action Plan for Health Care. HSFR has been identified as an important mechanism to strengthen the link between the delivery of high quality care and fiscal sustainability. QBPs involve clusters of patients with clinically related diagnoses or treatments. Stroke was chosen as a QBP using an evidence- and quality-based selection framework that identifies opportunities for process improvements, clinical redesign, improved patient outcomes, enhanced patient experience, and potential cost savings.

Module 5 in the Clinical Handbook, Admission to Inpatient Rehabilitation, identifies best practices for inpatient rehabilitation of people with stroke. In general, patients who qualify for inpatient rehabilitation are those with an early AlphaFIM® score of

## Stroke Rehabilitation Updates

40–80. Age, availability of a caregiver, severity of cognitive/perceptual needs, severe aphasia/dysphagia, and profound inattention/neglect are other considerations.

Some recommended practices included in the Clinical Handbook are as follows:

- All patients who require rehabilitation should be referred to a specialist rehabilitation team in a geographically defined unit as soon as possible after admission
- Procedures should enable admission 7 days/week
- The interprofessional rehabilitation team should assess patients within 24–48 hours of admission and develop a comprehensive individualized rehabilitation plan that reflects the severity of the stroke and the needs and goals of the stroke patient
- The interprofessional rehabilitation team should consist of a physician, nurse, physical therapist, OT, S-LP, psychologist, SW, recreation therapist, pharmacist, patient, and family and/or caregivers
- Recommended staffing ratios for inpatient rehabilitation are:
  - PT/OT: 1 each per 6 inpatient beds
  - S-LP: 1:12
- Stroke patients should receive, through an individualized treatment plan, at least 3 hours of direct task-specific therapy per day by the interprofessional stroke team
- Stroke patients should receive the above therapy for at least 6-7 days a week
- ... To see the full list of recommended practices – please review the Ministry

of Health and Long Term Care, Quality Based Procedures: Clinical Handbook for Stroke, March 2013.

Available at: [http://health.gov.on.ca/en/pro/programs/ecfa/docs/qbp\\_stroke.pdf](http://health.gov.on.ca/en/pro/programs/ecfa/docs/qbp_stroke.pdf)

### New name and bigger mandate for Canadian organization leading the world in research on stroke recovery

The Heart and Stroke Foundation (HSF) and six of Canada's leading stroke research centres have a new name and bigger mandate for the HSF Centre for Stroke Recovery, the Canadian organization that leads the world in stroke recovery research. The Centre will now be known as the HSF Canadian Partnership for Stroke Recovery to reflect a greater number of institutional partners, a new national scope and additional sources of funding.

Over and above targeted research on brain repair, exercise after stroke, small vessel disease and dementia, the expanded Partnership will:

- conduct clinical trials to test new rehabilitation therapies;
- fund emerging and innovative stroke recovery research;
- advocate for better services for patients and families;
- produce resources and tools to deliver the latest research knowledge to the people who can use it;
- foster networking and collaboration in the stroke recovery community.

To learn more about the Partnership, please visit [www.canadianstroke.ca](http://www.canadianstroke.ca)

### CLINICAN RESOURCES

The partnership has produced a 45-minute video of Janice Eng's Dec. 4, 2013 talk to clinicians and researchers on "Strategies to Increase Upper and Lower Extremity Physical Activity After Stroke."

Available at [www.canadianstroke.ca](http://www.canadianstroke.ca) – Look under Resources – then Videos

### Ontario Telemedicine Network (OTN) Highlights Denise Taylor and the Moving on After Stroke (MOST) Program

OTN published a case study titled, Telemedicine: A tool for the rehabilitation and socialization of stroke patients in remote communities. Available at: <http://otn.ca/sites/default/files/otn-telemedicine-case-study-taylor.pdf>.

The publication highlights the value of the Moving on After Stroke (MOST) program which is offered through St. Joseph's Care Group to people with stroke across Northwestern Ontario. MOST is a 9-week self-management program which features education, goal setting and exercise. It is offered face-to-face in Thunder Bay and through videoconference to two regional sites per session.

"Facilitating a support session that has a videoconferencing element is harder than an in-person session. It takes extra energy," according to Denise. "We do it," she says, "because there is no other option."

For more information on these initiatives or any other stroke rehabilitation inquiries, please contact Esmé French at [frenche@tbh.net](mailto:frenche@tbh.net) or 807-684-6498.

## Stroke Prevention Clinics ●

**Fort Frances (CSPC)**  
La Verendrye General Hospital  
807-274-3266 ext. 4542

**Kenora (CSPC)**  
Lake of the Woods District Hospital  
807-468-9861 ext. 2528

**Marathon (CSPC)**  
Wilson Memorial General Hospital  
807-229-1740 ext. 289

**Sioux Lookout (CSPC)**  
Meno Ya Win Health Centre  
807-737-2877 ext. 5112

**Thunder Bay (SSPC)**  
Thunder Bay Regional Health Sciences Centre  
807-684-6700

## Secondary Stroke Prevention Clinic (SSPC)

Upon referral, patients who experience a transient ischemic attack (TIA) or who have had a stroke see a neurologist, nurse practitioner and dietitian. This program addresses stroke prevention in a coordinated and interprofessional manner based on best practices and also educates patients regarding lifestyle changes to modify risk factors for stroke.

## Community Stroke Prevention Clinics (CSPC)

Patients with stroke and TIA are seen to monitor risk factors and assist with strategies to prevent reoccurrence.

## Telestroke Sites ●

**Dryden**  
Dryden Regional Health Centre  
807-223-8200

**Fort Frances**  
La Verendrye General Hospital  
807-274-3266

**Kenora**  
Lake of the Woods District Hospital  
807-468-9861

**Sioux Lookout**  
Meno Ya Win Health Centre  
807-737-3030

## Telestroke

The Telestroke Program provides stroke patients in remote areas of the province with 24/7 access to life-saving emergency care that they might not receive without this real-time expert neurological assessment.

Emergency Physicians use Ontario Telemedicine Network to connect with neurologists to obtain urgent diagnosis and treatment advice, including the administration of time-sensitive medication.

