

Sunrise Health Region Integrated Stroke Strategy

Background

- Stroke is the leading cause of adult disability and the third leading cause of death in Saskatchewan.
- Each year in the province about 2,000 people suffer a stroke, half of whom are left with a disability.
- In Sunrise Health Region, statistics, and population age, provide predictions that more than 100 people each year will suffer from a stroke.
- Integrated stroke care has been shown to decrease risk and occurrence as well as significantly improve both the speed and extent of patients' recoveries from stroke.

Background:

Integrated Stroke Services Pilot Project

- December 2008 - The Stroke Pilot Project was launched in partnership with the Heart and Stroke Foundation of Saskatchewan and the Ministry of Health.
- January 2009 - Integrated Stroke Strategy Steering Committee established with Terms of Reference
- June 2009-Stroke Services Manager hired
- August and September 2009 – Stroke Services Team hired
- June 18, 2010 Mock clinic via Telehealth with Neurology team attending Yorkton Regional Health Centre
- September 29, 2009 – Initial Stroke Prevention Clinic walk through to assess location and client flow.
- Sept 20,2010- Celebration of successful rehabilitation for Stroke victims

Integrated Stroke Services Pilot

4 key areas:

- Stroke Prevention Clinic
- Telehealth
- Stroke Care Continuum:
 - a) Acute –including Bypass protocol
 - b) Rehabilitation
 - c) Community services
 - d) Public Education
- Evaluation

Stroke Prevention Clinic

- The Stroke Prevention Clinic model was determined through:
 - a) Viewing of and discussion with staff from Saskatchewan's other clinics in Regina and Saskatoon
 - b) Review of and contact with clinics in Brandon, Manitoba and Campbell River, British Columbia
 - c) Support and suggestion from the Neurology team in Regina
 - d) Attendance at the First Canadian Stroke Congress and networking with sites that provide telehealth support for Stroke prevention clinics

The Stroke Prevention Clinic model:

- Referrals received from physicians, nurse practitioners, working in hospitals, clinics and individual practices.
- Patients may be screened by Regina's Stroke Prevention Clinic Nurse or through the Yorkton site (process to be confirmed), and those with a low to moderate risk level are seen by a Neurologist via Telehealth in Yorkton

Telehealth: In the Stroke Prevention Clinic

- The ICU registered nurse gathers information and completes the exam with the Neurologist linked by Telehealth. Many patients will be able to have the neurological assessment completed “here at home” at the Yorkton Regional Health Centre.
- A new mobile Telehealth cart has been purchased to support the Stroke Prevention Clinic in operation and build capacity.
- A new state of the art desk top Telehealth system was also installed at the Regina General Hospital Neurology unit to facilitate access for the neurologists supporting the clinic

Telehealth: In the Rehabilitation setting

- The Telehealth unit for the Yorkton and District Nursing Home in support of rehabilitation needs is being provided by the South Sask Stroke Care Network through the Hospitals of Regina Foundation. This Telehealth unit provides a connection to specialist support as well as support the Children's Therapy Program at Cornerstone Therapies and general patient and staff education needs.

Telehealth: Rural Development

- The possibility of additional Telehealth sites within the rural areas of Sunrise Health Region will allow the education components of the stroke pilot project to fully develop. The added Telehealth would also support the rural Physicians, Nurse Practitioners and other Sunrise Health Region staff to provide care and support to the patients closer to home with other clinics and education services they require locally.

Stroke Care Continuum

- a) Acute –including Bypass protocol
- b) Rehabilitation
- c) Community services
- d) Public Education
- e) Stroke Prevention Clinic

Bypass protocol implemented

- The bypass protocol supports all clients with neurological symptoms being transported to the Yorkton Regional Health Centre Emergency Dept. for assessment, CT scan and if applicable and administration of clot busting medication.

Acute Care

- Patients are admitted to Acute Care at the YRHC for stabilization and medical management
- Rehabilitation begins in acute care. A team of nurses and therapists are available to support early mobilization of clients once medically stable.

Acute Care

- 3 beds will be identified on the medical floor to support stroke survivors following stabilization in Intensive Care Unit
- Staff have been identified as champions of the stroke services to follow clients through the acute phase of recovery
- Extra training of staff has occurred to support consistency of rehabilitation goal in both acute care and rehabilitation

Rehabilitation beds

- 3 long term care beds were reassigned as rehabilitation beds.
- First stroke rehabilitation clients admitted Nov 09.
Nursing supports identified for rehabilitation bed patients
- Stroke Services Team hired including Physical Therapist, Occupational Therapist, Speech Language Pathologist ,a Therapy Assistant, and a Social Worker
- Design of Jowsey House in Yorkton and District Nursing Home is ideal to support rehabilitation
- To date 14 clients have been admitted to the rehab beds. Of these 8 have returned home or to supportive living in the community, 4 to long term care and 2 to community hospitals for further medical management

Community Services

- Stroke Services Team continue service in the community outpatient setting as required after discharge from the rehabilitation bed.

Professional Education

- Functional Independence Measurement (FIM) training Oct 2009 including PT, OT and RN
- Neurodevelopment training for Therapies and Nursing staff in acute care and rehab-Feb 2010
- An educational event on **“Triage and Management of TIA was sponsored by Sanofi Aventis and presented by Dr. Rehman,** neurologist for RQHR with local physicians and Registered Nurses attending
- Living with Stroke Facilitator Training is taking place in Yorkton in October with members of the Stroke Rehab team attending.

Professional Education

- Speech-Language Pathologist attended Canadian Aphasia Institute training- March 2010
- Two Speech-Language Pathologists trained in Torbsst- Toronto Bedside Swallowing Test
- Director of Therapies and Stroke Services Manager attended First Canadian Stroke congress

Public Education

- The Heart and Stroke Foundation of Saskatchewan, with pharmaceutical sponsorship, conducted 2 public awareness campaigns in the Sunrise Health Region in support of the regional stroke pilot in June 2009 and 2010 focusing on the 4 key warning sign
- Media event in Sept 2010 celebrating the success of the Rehab unit with client stories

Stroke Services Pilot Evaluation

- **An Evaluation consultant has been hired by the Heart and Stroke Foundation of Saskatchewan to carry out the evaluation of the two-year Integrated Stroke Services Pilot Project in Sunrise Health Region. The Heart and Stroke Foundation of Saskatchewan will continue in an oversight and contract management capacity throughout the life of the pilot.**

Challenges and Solutions

- Stroke Prevention Clinic- presentation to the RQHR Neurology team on the use of Telehealth in assessing clients took place with a follow up meeting in Yorkton to demonstrate the application of the telehealth equipment
- Registered Nurse from RQHR Stroke Clinic came to Yorkton to assist in the clinic set up
- Nurse Practitioner practiced neuro scan with RQHR neurologists- suddenly passed away in august
- Training of ICU nurses initiated with target start date of November

Performance Management and Measurement:

- Accountability for the Integrated Stroke Strategy will be monitored through the progress update portion of the action plan and by meeting criteria set by established Ministry of Health targets and meeting Best Practice Guidelines.

Summary

The Sunrise Health Region is extremely excited to have been identified as a location for the Stroke Pilot Project for Saskatchewan. We believe that this service will reach out to those at risk of, and those who have experienced stroke, as well as their families and friends who support them “at home” in our own Region.

We will make a difference in prevention and treatment of stroke by providing our population with the education and care that will greatly assist in optimizing the Health of the Individual.

We trust that the contributions of the Sunrise Health Region in the development and pilot of the integrated stroke pilot project will become a model for the remainder of Saskatchewan as we all strive to provide excellent health care services with an unwavering focus on the patient.