

CRSN-RNOC Stroke Rehabilitation Sub-Committee 2018/19 – 2020/21 Work Plan

Purpose and Scope

To advise the Rehabilitation Network of Champlain (RNOC) and Champlain Regional Stroke Network Steering Committee (CRSN) regarding the development, implementation, and evaluation of regional stroke rehabilitation best practice initiatives and activities throughout the Champlain region.

The CRSN-RNOC Stroke Rehab Sub-Committee will ensure the alignment of initiatives and activities with CRSN’s **vision**: Fewer Strokes. Better Outcomes., **mission**: To continuously improve stroke prevention, care, recovery and re-integration., and **values**: equity and comprehensiveness, accountability and integrity, transparency and engagement, learning and performance improvement, leadership and innovation.

CRSN Strategic Goal	Operational Goal	Goal #	Deliverable: Actions and Resources Required	Lead	Target Date	Status
Ensure equitable access to high quality stroke care across the continuum of care	Enhance the voice of the stroke survivor and their families in the development of stroke services in the Champlain LHIN	4	Be responsive to requests and input from CRSN’s Patient and Family Advisory Committee (PFAC). Engage PFAC for advice and feedback on decisions where their input adds value. Share Sub-Committee quarterly meeting agendas with PFAC.	Regional Director (as liaison between groups)	Ongoing throughout duration of strategic plan period. Will keep a list of interactions between Sub-Committee and PFAC for reference.	
Work in partnership to implement a standardized system for stroke care according to best practices	Maintain the Champlain Stroke System in alignment with Canadian Stroke Best Practice Recommendations and Stroke Quality-Based Procedures	5	1. Continue Stroke Partnership work with Elisabeth Bruyere 2. Determine timing and process for implementing knowledge-to-action model at Glengarry and Pembroke (likely in conjunction with acute care)	Rehab Coordinator	1. Ongoing 2. Spring 2018	1. Many opportunities for improvement have been actioned at EB. Next step to explore therapy schedule. 2. -

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Work in partnership to implement a standardized system for stroke care according to best practices.	Increase rehab intensity at stroke rehabilitation units in Champlain	6	<p>Tailored approach is needed for each stroke rehab program to reach 90 minutes of rehab intensity.</p> <p>Note GMH is not quite resourced to achieve 90 minutes at present (missing 0.2FTE).</p>	Rehab Coordinator with Managers or Lead from each site	<p>Achieve 90 minutes of rehab intensity (median) by the end of 2018/19</p> <p>If added resources permit, achieve 120 minutes of rehab intensity (median) in 2019/20</p>	Managers agree to report data and QI progress at Sub-Committee quarterly.
Ensure equitable access to high quality stroke care across the continuum of care	Establish Community Stroke Rehabilitation (CSR) throughout the Champlain LHIN	7	<ol style="list-style-type: none"> 1. Operationalize CSR in Renfrew County 2. Continue to advocate for CSR and outpatient stroke rehab programming across the LHIN: <ol style="list-style-type: none"> a. Advocate for funding for CSR in: (i) all of Eastern Counties, (ii) West of Ottawa catchment, and (iii) Ottawa city catchment. b. In Ottawa city, explore options for the coordination and co-existence of outpatient stroke rehab (existing at Bruyere) and CSR. Make a recommendation to the LHIN (may include increased resources for OP). 3. CRSN will support CSR program by providing education to staff, contributing to QI initiatives, and contributing to program evaluation or report writing. 	<p>Rehab Coordinator in collaboration with LHIN HCC (Jeanne Bonnell)</p> <p>In collaboration with LHIN HCC, Elisabeth Bruyere, and TOH</p> <p>Rehab Coordinator</p>	<ol style="list-style-type: none"> 1. By beginning of 2018/19 2. Ongoing <ol style="list-style-type: none"> a. – b. – 3. Ongoing – education for Renfrew County CSR team to be provided by CRSN in April 2018 	<ol style="list-style-type: none"> 1. Operational planning underway 2. Ongoing <ol style="list-style-type: none"> a. – b. – 3. Ongoing

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Collaborate on the design and implementation standardized processes for seamless transitions across the continuum of care	Improve appropriate and timely access to sub-acute stroke care in Champlain LHIN	10	<p>Continue work of both Door-to-Transfer Time Working Groups: (i) Ottawa (TOH (both sites), EB, HM, QCH) and (ii) Eastern Counties (CCH and GMH). Working groups meet quarterly to identify issues and opportunities for improvement related to achieving target 5 day acute LOS for ischemic stroke.</p> <ol style="list-style-type: none"> 1. In Ottawa: <ol style="list-style-type: none"> a. At the Civic Stroke Unit, sustain performance of referral to rehab by day 3 for all patients with AlphaFIM scores 40-90 b. Continue to work with TOH/EB Manager of Sub-Acute Transitions and monitor time for processing rehab applications c. Collect similar data for General, QCH, Montfort and determine next initiative for patients referred to inpatient rehab from the General, Montfort, and QCH 2. In Eastern Counties: <ol style="list-style-type: none"> a. At CCH, continue efforts to refer stroke patients to rehab by day 3 	Rehab Coordinator with working group members	<ol style="list-style-type: none"> 1. – <ol style="list-style-type: none"> a. Ongoing, monitored monthly b. Ongoing, monitored monthly c. Spring & Summer 2018 2. – <ol style="list-style-type: none"> a. Ongoing, monitored quarterly 	<ol style="list-style-type: none"> 1. – <ol style="list-style-type: none"> a. Jan 2018 average 6 days (all except 1 patient ref by day 3) b. Jan 2018 average 2 days (standard) c. – 2. – <ol style="list-style-type: none"> a. Oct 2017 average 8 days

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			b. At GMH, continue efforts to streamline processing and acceptance of rehab application to 2 days 3. Pilot Patient Flow Algorithm in Renfrew County (PRH) Note: lack of capacity in inpatient rehab dealt with under sub-acute capacity planning.		b. Ongoing, monitored quarterly 3. Discuss as part of KTA cycle in 2018/19	b. Oct 2017 average 5 days 3. -
Support the exploration, development and adoption of innovative stroke services	Placeholder for Champlaine LHIN Sub-Acute Capacity Planning work	8	To be determined based on recommendations and direction from LHIN	Rehab Coordinator with Organizations Involved		
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