

CHAMPLAIN REGIONAL STROKE NETWORK 3 YEAR STRATEGIC PLAN

2021/22 - 2023/24



We are pleased to present the **2021/22 – 2023/24 Strategic Plan for the Champlain Regional Stroke Network (CRSN)** which sets our direction for the next 3 years. This plan builds upon on our previous successes in addition to improvements to enhance stroke care across the region. The CRSN looks forward to the continued engagement and collaboration with the regional stroke system partners in delivering these strategic goals to improve stroke prevention, care, recovery and re-integration as we make progress towards our vision of fewer strokes, better outcomes.

Stroke is the third-largest killer of Canadian adults and the primary cause of physical disabilities. With the growing number of people surviving stroke plus the increasing number of strokes projected among the aging population, the demand for stroke services is on the rise. Through collaborating with our partners across the stroke system of care, CRSN supports the coordination of stroke care in the region in alignment with the provision of stroke care based on best practices and evidence.



VISION

Fewer strokes. Better outcomes.



MISSION

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



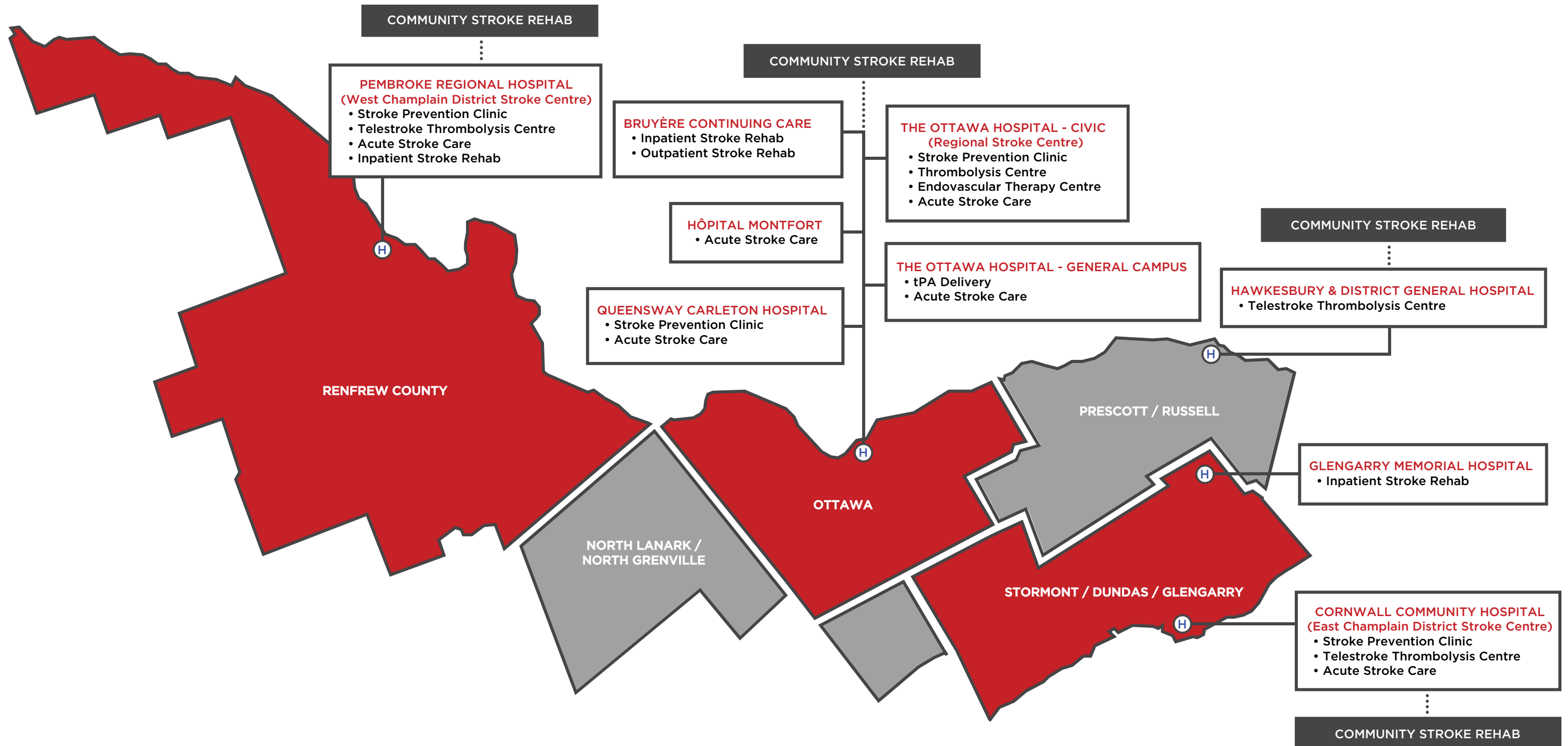
VALUES

- Equity and Comprehensiveness
- Accountability and Integrity
- Transparency and Engagement
- Learning and Performance Improvement
- Leadership and Innovation

The **Ontario Stroke System (OSS)** is a comprehensive approach to organized stroke care that includes the full continuum within 11 regional stroke systems across the province. In June 2000, the Ontario government had adopted the Ontario Stroke Strategy as the expected way to organize stroke services in the province. Today, the provincial leadership for stroke is provided by CorHealth Ontario. **The Champlain Regional Stroke Network (CRSN) is one of these 11 stroke networks.** In collaboration with the stroke system partners, the regional stroke networks are accountable for the leadership, development, implementation and coordination of stroke care within their region. The CRSN is a key healthcare partner supporting the coordination of stroke care throughout the Champlain region and across all points in the stroke care continuum.

THE CHAMPLAIN REGION

Champlain region is home to 1.3 million residents, close to 10% of Ontario's population. It encompasses a large geographical area that includes Renfrew County, the City of Ottawa, Prescott & Russell, Stormont Dundas & Glengarry, North Grenville, and North Lanark. Included in the map below are the key stroke service providers within the Champlain region, along with their respective stroke services.



CHAMPLAIN REGIONAL STROKE NETWORK STEERING COMMITTEE (CRSNSC)

The Champlain Regional Stroke Network Steering Committee (CRSNSC) provides strategic stewardship, governance and decision making for the development, implementation and coordination of regional initiatives. The CRSNSC helps set strategic priorities and holds the CRSN accountable to the strategic plan and achievement of the metrics for system improvement. The CRSNSC is comprised of Administrative Leaders from hospitals providing stroke care in the Champlain region, Acute Care and Rehabilitation Medical Directors, and subject matter experts across the stroke continuum.



CRSNSC MEMBERSHIP:

1. Chair
2. Vice Chair
3. CRSN Medical Director
4. Rehabilitation Medical Director
5. Regional Stroke Centre (The Ottawa Hospital) Administrative Leader
6. West Champlain District Stroke Centre (Pembroke Regional Hospital) Administrative Leader
7. Hôpital Montfort Administrative Leader
8. Queensway Carleton Hospital Administrative Leader
9. Bruyère Administrative Leader
10. East Champlain District Stroke Centre (Cornwall Community Hospital Administrative Leader)
11. Glengarry Memorial Hospital Administrative Leader
12. Hawkesbury & District General Hospital Administrative Leader
13. LHIN Integration Representative
14. LHIN Home and Community Care Representative
15. Long-term Care Representative
16. Education Representative
17. EMS Representative
18. Primary Care Representative

CHAMPLAIN REGIONAL COMMITTEES

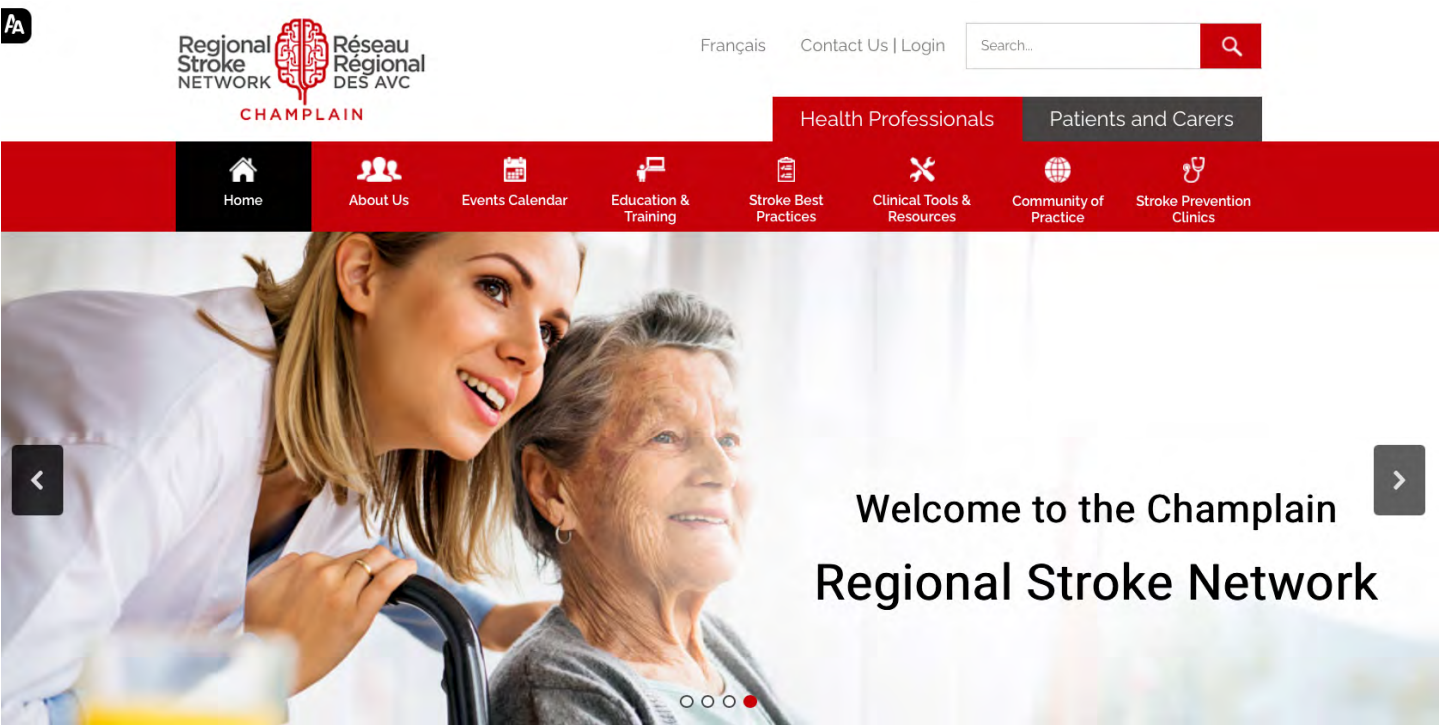
The strategic objectives and associated activities are supported by regional committees that include subject matter experts across the stroke system of care.

REGIONAL COMMITTEES

- Stroke Prevention Committee
- Hyperacute Committee
- Rehabilitation Committee
- Community and Long-term Care Committee
- Summit Planning Committee

CHAMPLAIN REGIONAL STROKE NETWORK (CRSN) TEAM

The Ottawa Hospital (TOH) has been the host site of the Champlain's Regional Stroke Centre for over the past decade, as designated by the Ministry of Health and Long-Term Care (MoHLTC). The Champlain Regional Stroke Network (CRSN) team is based out of the Regional Stroke Centre at The Ottawa Hospital, Civic Campus. Following the Ontario Stroke System guidelines the CRSN team enacts the strategic plan in collaboration with the regional stroke system partners and supports the provision of stroke care based on best practices and evidence. The team is composed of administrators, coordinators, and designated health professionals.



CONTINUUM OF STROKE CARE

STROKE PREVENTION



Primary prevention of stroke focuses efforts to prevent an initial stroke occurrence, and secondary prevention of stroke is aimed at reducing the risk of a recurrent stroke event. Regional Secondary Stroke Prevention Clinics (SPC) across Champlain ensure that individuals with TIA and non-disabling stroke receive comprehensive services close to home. The SPC provides rapid assessment, diagnostic services, counselling, and treatment for patients at high risk of suffering a stroke.

HYPERACUTE & ACUTE CARE



Acute stroke care is committed to ensuring access to equitable, high-quality, evidence-informed care, across the hyper-acute and acute continuums. Our partnerships, commitment to education and best practices with the pre-hospital and hyper-acute sectors will support the optimization of access to appropriate new treatments such as Endovascular Therapy (EVT). Equally valued is the ongoing commitment to maintaining and organizing designated stroke units, recognizing the significant impact on positive patient outcomes.

REHABILITATION



The severity of stroke complications and each person's ability to recover vary widely. The goal of stroke rehabilitation is to support stroke survivors to relearn skills, regain independence and improve quality of life. The CRSN Rehabilitation Committee in collaboration with the Rehabilitation Advisory Committee (RAC) strives to establish a stroke rehabilitation system that delivers timely access to high quality, specialized stroke rehabilitation in the Champlain LHIN.

COMMUNITY AND LONG-TERM CARE



Community re-integration as part of the stroke recovery often requires education, support, and skills training to enable each person to manage their recovery and to optimize participation and fulfillment of life roles. The CRSN Community and Long-Term Care Committee focuses its efforts on supporting initiatives to improve transitions of care for stroke survivors as they return to the community.

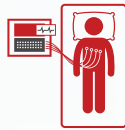
EDUCATION



The regional education strategy ensures that educational programs delivered by the CRSN are in alignment with the strategic goals and support the delivery of new evidence throughout the continuum of care.



STROKE PREVENTION



HYPERACUTE & ACUTE CARE



REHABILITATION

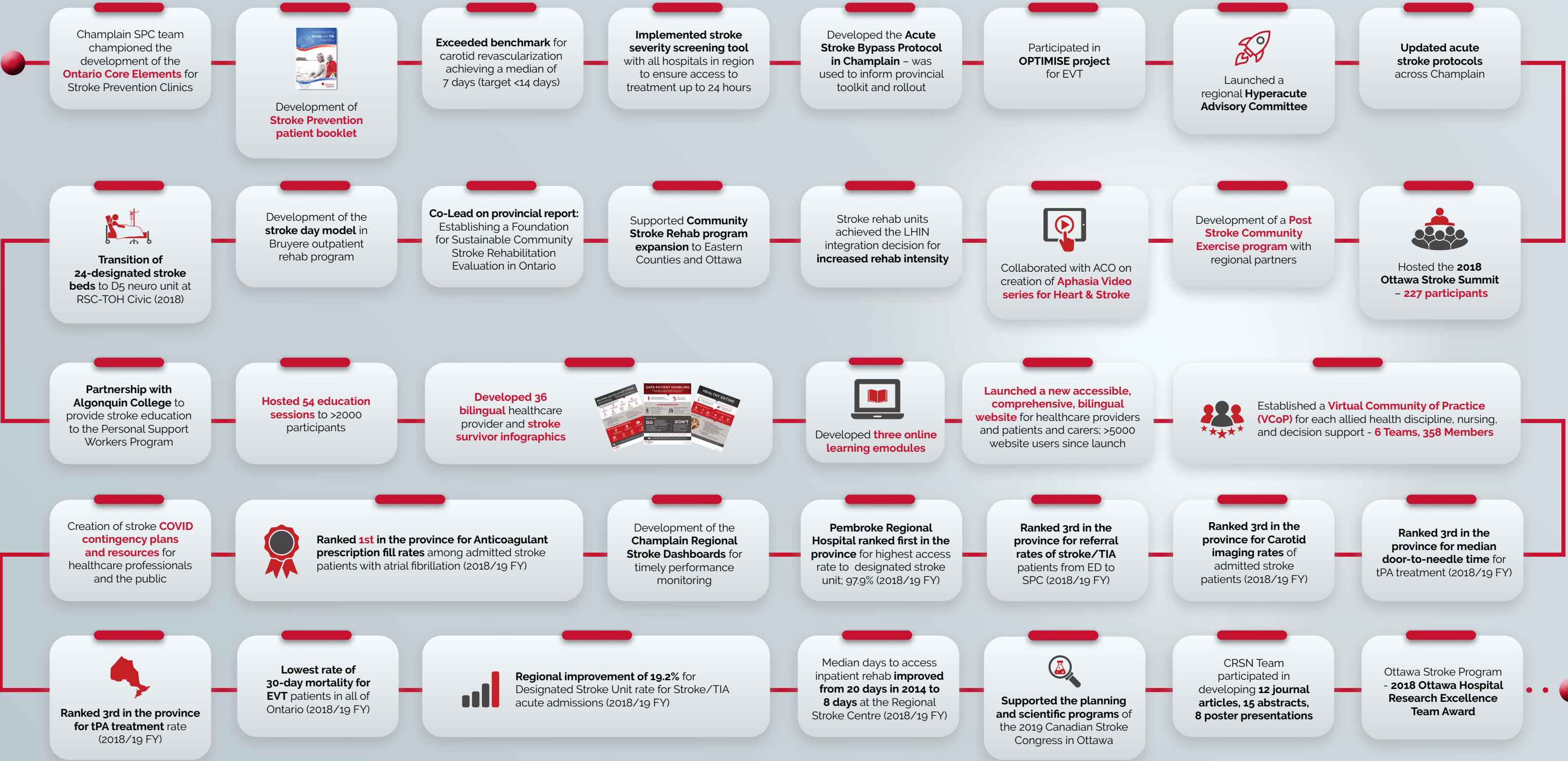


COMMUNITY AND LONG-TERM CARE



EDUCATION

3-YEAR HIGHLIGHTS | 2018/19 – 2020/21



REFERENCES

<https://crsn.ca/en/education-training>

<https://crsn.ca/en/clinical-tools-resources/clinical-tools-resources-3>

<https://crsn.ca/en/resources-for-stroke-care-and-recovery>

<https://crsn.ca/en/education-training/lms-emodules>

<https://www.corhealthontario.ca/resources-for-healthcare-planners-&-providers/covid19/stroke>

<https://crsn.ca/en/what-you-need-to-know-about-stroke>

<https://crsn.ca/en/clinical-tools-resources/clinical-tools-resources-4>

www.youtube.com/watch?v=VQYd2spaFkl

<https://crsn.ca/en/virtual-community-of-practice>

www.corhealthontario.ca/resources-for-healthcare-planners-&-providers/stroke-general/piwp/secondary-prevention

STRATEGIC GOALS & OBJECTIVES

GOAL	#	OBJECTIVES	Continuum / Focus
Expand and improve regional access to prevention supports and services.	1	Improve access to timely stroke prevention clinic services based on best practice recommendations across all Stroke Prevention Clinics.	Prevention
	2	Support transitions and long-term management post stroke/TIA for secondary prevention through primary care and community partnerships.	Prevention
	3	Develop and implement a standardized model of virtual care delivery for regional Stroke Prevention Clinics.	Prevention
Improve efficiency of timely assessment, rapid decision-making and transfer processes for hyperacute treatment.	4	Reduce variability in Telestroke site performance to achieve a door-to-needle time <42 minutes.	Hyperacute
	5	Strive for a door-to-needle time at the Regional Stroke Centre <= 30 minutes.	Hyperacute
	6	Improve capture of Door-In-Door-Out (DIDO) analytics and support timeliness in DIDO transfers.	Hyperacute
	7	Develop and disseminate regional protocols pertaining to hyperacute stroke care across Telestroke and community hospitals.	Hyperacute
Improve access to inpatient acute stroke care based on best practices.	8	Continue to advocate for the transition to a fully designated stroke unit at the Regional Stroke Centre to improve flow, utilization of appropriate resources and to consolidate stroke care across The Ottawa Hospital. Increase the proportion of stroke patients cared for in 'designated' stroke beds to >75%.	Acute
	9	Support hospitals providing inpatient acute stroke care via alternate stroke care models to progress to a designated stroke unit model of care in which stroke patients occupy 'designated' stroke beds >75% of the time supported by a dedicated interprofessional team with stroke expertise.	Acute
	10	Increase engagement with the Regional Stroke Centre to enhance quality of care in alignment with stroke best practices.	Acute
	11	Support hospitals providing inpatient acute stroke care via alternate stroke care models to enhance quality of care in alignment with stroke best practices.	Acute
Improve access to stroke rehabilitation.	12	Achieve median length of stay (LOS) of <10 days for stroke patients discharged to stand-alone inpatient rehabilitation programs through continued process improvements via the stroke transitions committee and door-to-transfer working group.	Rehabilitation
	13	Assess the rate of access to post-acute inpatient rehabilitation relative to the provincial target of >30% for stroke survivors across the region. Submit an updated calculation of "right-sized" inpatient stroke rehabilitation capacity for Ottawa and Eastern Champlain to the Regional Rehabilitation Advisory Committee and Sub-Acute Network.	Rehabilitation
	14	Support the alignment of outpatient and community stroke rehabilitation program delivery in the Ottawa sub-region.	Rehabilitation
	15	Reduce wait times for allied health services within the outpatient stroke clinic and deliver a more integrated stroke program model through full adoption of the stroke day model at Bruyere.	Rehabilitation
	16	Develop a regional contingency plan to support the continued provision of stroke rehabilitation services, in collaboration with the Regional Advisory Committee (RAC).	Rehabilitation
Increase rehabilitation intensity at stroke rehabilitation units across the region.	17	Sustain rehabilitation intensity as per the LHIN integration decision, and progress towards further increased rehabilitation intensity to maximum allowable minutes within current resources.	Rehabilitation
Improve standardization of post-stroke depression screening and management.	18	Standardize the process for stroke depression screening in inpatient, outpatient, and community stroke rehabilitation programs across the region.	Rehabilitation
Improve access to aphasia-friendly patient information and education.	19	Implement aphasia-friendly patient information in inpatient, outpatient, and community rehabilitation settings.	Rehabilitation

STRATEGIC GOALS & OBJECTIVES

GOAL	#	OBJECTIVES	Continuum / Focus
Support the development of stroke expertise for health care professionals in the community.	20	Sustain the academic partnership with Algonquin College to provide stroke education to the Personal Support Workers Program and evaluate impacts. Determine the scalability to other programs that educate professionals interfacing with stroke patients in the community and long-term care sector.	Community
Increase access to communities of support for stroke.	21	Build partnerships with regional organizations and support capacity to expand the provision of peer support resources in the region.	Community
Continue work to improve transitions of care for stroke survivors as they return to the community.	22	Increase uptake and integration of eReferral processes within regional stroke programs.	Community
	23	Engage persons with lived experience and caregivers to validate needed supports and education within transitions of care across the stroke continuum.	Community
	24	Host annual forum(s) to share stroke-related community resources with healthcare providers in the region to support awareness and knowledge.	Community
	25	Improve access to evidence-based community exercise programs for stroke survivors across the region through the development of fitness instructor training and expansion of community stroke-specific exercise classes.	Community
Work in partnership with stroke system stakeholders to implement a standardized system for stroke performance monitoring in accordance with best practices.	26	Monitor and evaluate stroke care in the region against provincial performance standards by completing an annual review with stroke system hospitals on their provincial stroke report card performance, and a bi-annual review of the regional dashboards supported by targeted initiatives to improve performance.	Performance Monitoring
	27	Sustain standardized stroke orientation for data analysts in acute care to minimize challenges with reporting and coding stroke data.	Performance Monitoring
	28	Perform annual reviews to assess adherence to stroke protocols and compliance with best practices in collaboration with stroke system hospitals.	Performance Monitoring
Monitor and evaluate stroke prevention performance to support performance management.	29	Collect quarterly stroke prevention dashboard indicators to monitor performance of Stroke Prevention services and inform ongoing quality improvement initiatives with the Stroke Prevention Committee.	Performance Monitoring
Monitor and evaluate hyperacute stroke performance to support performance management.	30	Monitor outcomes for the acute stroke bypass protocol and provide annual feedback in collaboration with Regional Paramedic Program for Eastern Ontario (RPPEO) to regional paramedic services.	Performance Monitoring
	31	Continue to monitor thrombolysis and endovascular treatment metrics to assess service levels and ensure data quality.	Performance Monitoring
Monitor and evaluate stroke rehabilitation performance to support performance management.	32	Continue monitoring rehabilitation indicators quarterly and review with the Regional Rehabilitation Committee to inform quality improvement initiatives.	Performance Monitoring

STRATEGIC GOALS & OBJECTIVES

GOAL	#	OBJECTIVES	Continuum / Focus
Sustain and enhance regional stroke expertise and capacity to deliver best practice stroke care.	33	Standardize stroke orientation across the continuum of care to ensure the provision of evidence-based, best practice stroke care is provided to patients.	Education
	34	Develop and provide regionally based education and training in relation to stroke care.	Education
	35	Maintain a leadership role in hosting the Ottawa Stroke Summit as the region's largest gathering of stroke care professionals.	Education
Sustain accountability for the leadership, development, implementation and coordination of stroke care in the Champlain region.	36	The Champlain Regional Stroke Network, Regional Stroke Centre, District Stroke Centres and Stroke Prevention Clinics will act in accordance with the Ontario Stroke System service guidelines and sustain the governance infrastructure for effective program oversight and stakeholder engagement. The Champlain Regional Stroke Network will continue to collaborate with CorHealth to operationalize provincial mandates locally.	Leadership
	37	Support the implementation of a Designated Stroke Centre that is accountable for the leadership, development, implementation and coordination of stroke care within Eastern Champlain.	Leadership
	38	The Regional Stroke Centre will act in an advisory role for stroke care to support the Qikiqtani General Hospital in Iqaluit by providing guidance on stroke protocols, processes and bi-annual case-based reviews.	Leadership
	39	The Regional Stroke Network will support regional stroke system hospitals pursuing Accreditation Canada's Stroke Distinction program to demonstrate excellence, commitment and leadership in stroke care.	Leadership
	40	Sustain and enhance the Champlain Regional Stroke Network website as a platform to provide communication updates, resources, tools, and a community of practice to regional stakeholders, patients and carers.	Leadership



NEXT STEPS

Regionally, stroke performance is progressing favorably in the areas of Prevention and Public Awareness of Stroke and TIA and Hyperacute Care Access and Outcomes for Ischemic Stroke. Access to designated stroke unit beds has improved however greater advances are needed across the region due to its evidence-based impacts on stroke outcomes. Progress has been made in more timely transitions to post-acute rehabilitation and rehab intensity. Further improvements in timeliness to rehabilitation access are warranted and will require continued efforts in the Ottawa sub-region and Eastern Champlain. Supporting regional stroke system hospitals in delivering and achieving best practice stroke care will remain a priority. Increased efforts to support community re-integration for stroke survivors will be an important area of focus in this plan. Over the past three years, the regional education strategy has seen its highest rate of engagement, and efforts will be made to continue this commitment.

This new plan was developed collaboratively with our regional stroke system partners and was approved at the CRSN Steering Committee (CRSNSC) in April 2021. The directions outlined in this strategic plan will continue the progress the Champlain Regional Stroke Network (CRSN) and the stroke system partners have achieved in the past three years. The Regional Director and Coordinators will provide updates on the progress of the goals and objectives embedded in the Strategic Plan quarterly to the CRSNSC. This will ensure that monitoring, reporting and accountability are embedded in the CRSNSC processes for the duration of this plan.

In closing, thank you to our regional stroke system partners for your dedication and perseverance in delivering quality, evidence-informed care across the stroke continuum. **Without your support, dedication and engagement none of this would be possible.**





crsn.ca