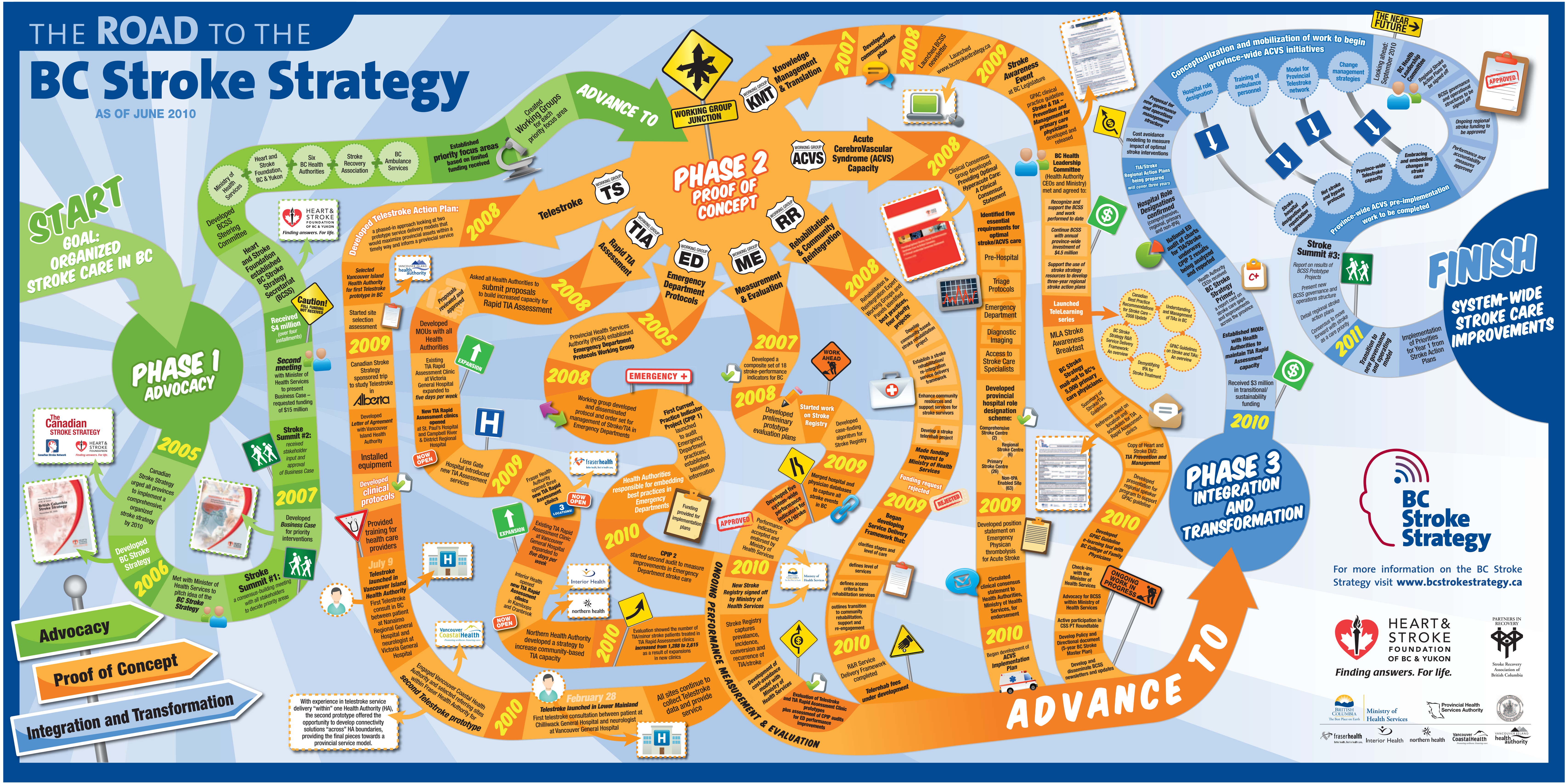
THE ROAD TO THE
BC Stroke Strategy
AS OF JUNE 2010
START
GOAL: ORGANIZED STROKE CARE IN BC
PHASE 1 ADVOCACY
2005
Canadian Stroke Strategy urged all provinces to implement a comprehensive, organized stroke strategy by 2010
The Canadian STROKE STRATEGY
Canadian Stroke Network
HEART & STROKE FOUNDATION
Finding answers. For life.
Developed BC Stroke Strategy
British Columbia Stroke Strategy
2006
Met with Minister of Health Services to pitch idea of the BC Stroke Strategy
Stroke Summit #1: a consensus-building meeting with all stakeholders to decide priority areas
Developed Business Case for priority interventions
2007
Stroke Summit #2: received stakeholder input and approval of Business Case
Second meeting with Minister of Health Services to present Business Case – requested funding of $15 million
Received $4 million (over four installments)
Caution! FULL FUNDING NOT RECEIVED
Heart and Stroke Foundation established BC Stroke Strategy Secretariat (BCSS)
HEART & STROKE FOUNDATION OF BC & YUKON
Finding answers. For life.
Developed BCSS Steering Committee
Ministry of Health Services
Heart and Stroke Foundation, BC & Yukon
Six BC Health Authorities
Stroke Recovery Association
BC Ambulance Services
Established priority focus areas based on limited funding received
Created Working Groups for each priority focus area
ADVANCE TO
WORKING GROUP JUNCTION
PHASE 2 PROOF OF CONCEPT
WORKING GROUP KMT
Knowledge Management & Translation
2007
Developed communications plan
2008
Launched BCSS newsletter
Launched www.bcstrokestrategy.ca
2009
Stroke Awareness Event at BC Legislature
GPAC clinical practice guideline Stroke & TIA – Prevention and Management for primary care physicians developed and released
BC Health Leadership Committee (Health Authority CEOs and Ministry) met and agreed to:
Recognize and support the BCSS and work performed to date
Continue BCSS with annual province-wide investment of $4.5 million
Support the use of stroke strategy resources to develop three-year regional stroke action plans
Launched TeleLearning series
Canadian Best Practice Recommendations for Stroke Care – 2008 Update
Understanding and Management of TIAs in BC
BC Stroke Strategy R&R Service Delivery Framework: An overview
Demystifying tPA for Stroke Treatment
GPAC Guidelines on Stroke and TIAs: An overview
MLA Stroke Awareness Breakfast
BC Stroke Strategy mail-out to BC's 5,000 primary care physicians:
Summary of Stroke/TIA Guideline
Reference sheet on location and schedules for TIA Rapid Assessment clinics
Copy of Heart and Stroke DVD: TIA Prevention and Management
Developed presentation for regional speaker program to support GPAC guideline
2010
Developed GPAC Guideline e-learning tool with BC College of Family Physicians
Check-ins with the Minister of Health Services
Advocacy for BCSS within Ministry of Health Services
Active participation in CSS PT Roundtable
Develop Policy and Directional document (5-year BC Stroke Master Plan)
Develop and disseminate BCSS newsletters and updates
ONGOING WORK IN PROGRESS
WORKING GROUP ACVS
Acute CerebroVascular Syndrome (ACVS) Capacity
2008
Clinical Consensus Group developed Providing Optimal Hyperacute Care: A Clinical Consensus Statement
Identified five essential requirements for optimal stroke/ACVS care
Pre-Hospital
Triage Protocols
Emergency Department
Diagnostic Imaging
Access to Stroke Care Specialists
Developed provincial hospital role designation scheme:
Comprehensive Stroke Centre (2)
Regional Stroke Centre (6)
Primary Stroke Centre (26)
Non-tPA Enabled Site (63)
2009
Developed position statement on Emergency Physician thrombolysis for Acute Stroke
Circulated clinical consensus statement to Health Authorities, Ministry of Health Services, for endorsement
2010
Began development of ACVS Implementation Plan
WORKING GROUP RR
Rehabilitation & Community Reintegration
2008
Rehabilitation & Reintegration Expert Working Groups and Panels identified best practices, four priority projects:
Develop community-based stroke rehabilitation project
Establish a stroke rehabilitation/re-integration service delivery framework
Enhance community resources and support services for stroke survivors
Develop a stroke telerehab project
Made funding request to Ministry of Health Services
Funding request rejected
REJECTED
2009
Began developing Service Delivery Framework that:
clarifies stages and level of care
defines level of services
defines access criteria for rehabilitation services
outlines transition to community rehabilitation, support and re-engagement
2010
R&R Service Delivery Framework completed
Telerehab fees under development
WORKING GROUP ME
Measurement & Evaluation
2007
Developed a composite set of 18 stroke-performance indicators for BC
2008
Developed preliminary prototype evaluation plans
Started work on Stroke Registry
Developed case-finding algorithm for Stroke Registry
2009
Merged hospital and physician databases to capture all stroke events in BC
Developed five system-wide performance indicators for TIA/stroke
APPROVED
Performance indicators accepted and endorsed by Ministry of Health Services
2010
New Stroke Registry signed off by Ministry of Health Services
BRITISH COLUMBIA Ministry of Health Services
Stroke Registry captures prevalance, incidence, conversion and recurrence of TIA/stroke
Development of cost-avoidance model with Ministry of Health Services
Evaluation of Telestroke and TIA Rapid Assessment Clinic prototypes plus assessment of CPIP audits for ED performance improvements
ONGOING PERFORMANCE MEASUREMENT & EVALUATION
WORKING GROUP ED
Emergency Department Protocols
2005
Provincial Health Services Authority (PHSA) established Emergency Department Protocols Working Group
2008
EMERGENCY +
Working group developed and disseminated protocol and order set for management of Stroke/TIA in Emergency Departments
First Current Practice Indicator Project (CPIP 1) launched to audit Emergency Department practices; established baseline information
Health Authorities responsible for embedding best practices in Emergency Departments
Funding provided for implementation plans
2010
CPIP 2 started second audit to measure improvements in Emergency Department stroke care
WORKING GROUP TIA
Rapid TIA Assessment
2008
Asked all Health Authorities to submit proposals to build increased capacity for Rapid TIA Assessment
Proposals reviewed and approved
Developed MOUs with all Health Authorities
Existing TIA Rapid Assessment Clinic at Victoria General Hospital expanded to five days per week
EXPANSION
New TIA Rapid Assessment clinics opened at St. Paul's Hospital and Campbell River & District Regional Hospital
NOW OPEN
Lions Gate Hospital introduced new TIA Assessment services
2009
Fraser Health Authority opened three new TIA Rapid Assessment clinics
NOW OPEN
3 LOCATIONS!
fraserhealth
Better health. Best in health care.
EXPANSION
Existing TIA Rapid Assessment Clinic at Vancouver General Hospital expanded to five days per week
Interior Health opened new TIA Rapid Assessment clinics in Kamloops and Cranbrook
NOW OPEN
Interior Health
northern health
Northern Health Authority developed a strategy to increase community-based TIA capacity
2010
Evaluation showed the number of TIA/minor stroke patients treated in TIA Rapid Assessment clinics increased from 1,288 to 2,615 as a result of expansions in new clinics
WORKING GROUP TS
Telestroke
2008
Developed Telestroke Action Plan: a phased-in approach looking at two prototype service delivery models that would maximize provincial assets within a timely way and inform a provincial service
Selected Vancouver Island Health Authority for first Telestroke prototype in BC
VANCOUVER ISLAND health authority
Started site selection assessment
2009
Canadian Stroke Strategy sponsored trip to study Telestroke in Alberta
Developed Letter of Agreement with Vancouver Island Health Authority
Installed equipment
Developed clinical protocols
Provided training for health care providers
July 9
Telestroke launched in Vancouver Island Health Authority
First Telestroke consult in BC between patient at Nanaimo Regional General Hospital and neurologist at Victoria General Hospital
Engaged Vancouver Coastal Health Authority and selected referring sites within Fraser Health Authority for second Telestroke prototype
Vancouver CoastalHealth
Promoting wellness. Ensuring care.
With experience in telestroke service delivery "within" one Health Authority (HA), the second prototype offered the opportunity to develop connectivity solutions "across" HA boundaries, providing the final pieces towards a provincial service model.
2010
February 28
Telestroke launched in Lower Mainland
First telestroke consultation between patient at Chilliwack General Hospital and neurologist at Vancouver General Hospital
All sites continue to collect Telestroke data and provide service
ADVANCE TO
PHASE 3 INTEGRATION AND TRANSFORMATION
2010
Received $3 million in transitional/sustainability funding
Established MOUs with Health Authorities to maintain TIA Rapid Assessment capacity
Health Authority CEOs received BC Stroke Strategy Primer, a report card on stroke care gaps and improvements across the province
C+
National ED audit of charts for TIA/Stroke underway; CPIP 2 results being analyzed and reported
Hospital Role Designations confirmed (comprehensive, regional, primary and non-tPA)
TIA/Stroke Regional Action Plans being prepared will cover three years
Cost avoidance modeling to measure impact of optimal stroke interventions
Proposal for new governance and operations management structure
Conceptualization and mobilization of work to begin province-wide ACVS initiatives
Hospital role designation
Training of ambulance personnel
Model for Provincial Telestroke network
Change management strategies
Province-wide ACVS pre-implementation work to be completed
Stroke hospital designation and repatriation agreements
Hot stroke and bypass protocols
Province-wide Telestroke capacity
Embracing and embedding changes in stroke care
THE NEAR FUTURE
Looking ahead: September 2010
BC Health Leadership Committee
Regional Stroke Action Plans to be signed off
BCSS governance and operational structures to be signed off
APPROVED
Ongoing regional stroke funding to be approved
Performance and accountability measures approved
Stroke Summit #3:
Report on results of BCSS Prototype Projects
Present new BCSS governance and operations structure
Detail regional stroke action plans
Consensus to move forward with stroke as a care priority
2011
Transition to new governance and operating model
Implementation of Priorities for Year 1 from Stroke Action Plans
FINISH
SYSTEM-WIDE STROKE CARE IMPROVEMENTS
Advocacy
Proof of Concept
Integration and Transformation
BC Stroke Strategy
For more information on the BC Stroke Strategy visit www.bcstrokestrategy.ca
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VANCOUVER ISLAND health authority