CHAMPLAIN REGIONAL STROKE NETWORK

3 YEAR STRATEGIC PLAN

BUILDING AN INTEGRATED STROKE CARE SYSTEM
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I am pleased to present the 2015/16 to 2017/18 Strategic Plan for the Champlain Regional Stroke Network (CRSN), which sets our direction for the next 3 years. This strategic plan builds on our previous work and aligns us with the Ontario Stroke Network’s (OSN) strategic directions and four core enablers. It is also aligned with the Champlain Local Health Integration Network’s (LHIN) Integrated Health Services Plan, and is based on the environmental scan completed with the CRSN Steering Committee and CRSN Operational Committees. Our mission is to continuously improve stroke prevention, care, recovery and re-integration as we make progress towards our vision of fewer strokes, better outcomes for the residents of the Champlain region.

As I reflect back on the past six years, I am proud of our CRSN Team and our many stakeholders for what they have accomplished for the residents of the Champlain region. The CRSN is accountable for more than $60 million in stroke care services delivered across the Champlain LHIN. The CRSN Steering Committee and Operational Committees have strong leadership and highly engaged members that are driving significant improvements in the quality of stroke care within our region. Our governance structure is considered a model for other Ontario stroke networks and regional networks/programs across the Champlain region. The CRSN Operational Committee Chairs and CRSN Management Team have diligently executed the direction set by the CRSN Steering Committee and we have seen many significant projects achieved under their leadership. Our CRSN Best Practice Team members are recognized across the region as experts in stroke care and are providing additional leadership on various CRSN projects. The Champlain Regional Stroke Prevention System is providing comprehensive secondary stroke prevention care across Champlain and has successfully achieved exceptional performance standards that lead Ontario. Over the last two years, the CRSN has implemented two new stroke units at the Cornwall Community Hospital and Montfort Hospital that are proven to reduce the chance of death or disability at one year after a stroke event by as much as 30%. The CRSN-RNOC Stroke Rehabilitation Sub-Committee has completed the first two phases of a comprehensive redesign of stroke rehabilitation services across the Champlain LHIN with the goal of shifting our region from the worst rehabilitation system performance in Ontario to the best in Canada. The CRSN has also taken its first steps towards establishing a regionalized system for community support services and the integration of vascular health care services between stroke, diabetes, and cardiac care.

The Ontario Stroke Evaluation Report clearly demonstrates how effectively organized stroke care can achieve improved patient outcomes and health system sustainability. These achievements include (02/03FY vs. 12/13FY):
- The lowest stroke hospitalization rate in Ontario.
- 541 inpatient stroke admissions prevented per year, saving the health system and Ontario taxpayers over $40 million per year.
- 13% increase in patients arriving by ambulance.
- 12% increase in patients arriving within the TPA treatment window.

- 85% increase in neuroimaging within 24 hours of ED arrival.
- 231% increase in ischemic stroke patients receiving TPA.
- Median TPA door-to-needle times reduced by 32 minutes.
- Stroke unit access increased from 0% to 54%.
- 85% reduction in median time to carotid intervention.
- 33% reduction in in-hospital mortality rates.
- 26% reduction in 30 day mortality rates.
- 42% reduction in the proportion of patients discharged to long term care from acute care.
- Access to stroke prevention care from the Emergency Department increased from 2% to 85%.

Despite these numerous successes, the Champlain Regional Stroke Network is still striving to overcome some significant challenges. These challenges include (12/13FY):

- 14% longer mean hospital length of stay than Ontario.
- 20% longer median time from stroke event to inpatient rehabilitation admission than Ontario.
- Median number of days between stroke onset and admission to stroke inpatient rehabilitation is 12 days compared to the provincial benchmark of 6 days.
- Only 4% of stroke patients have access to outpatient rehabilitation.
- Median time from discharge to first CCAC rehabilitation visit is 19 days.

Our region has benefited greatly from close relationships with our peers across the Ontario Stroke System and close proximity to national stroke organizations such as the Heart and Stroke Foundation. The effort of these organizations and the many other stakeholders involved in the delivery of stroke care has made measurable improvements in the quality of care available to the residents of the Champlain region. I believe that the Champlain Regional Stroke Network is well on its way to achieving our goal of being the national leader for stroke care.

Sincerely,

Jim Lumsden, B.Sc.P.T. MPA
Director, Champlain Regional Stroke Network
VISION, MISSION & VALUES

VISION: FEWER STROKES. BETTER OUTCOMES.

MISSION: TO CONTINUOUSLY IMPROVE STROKE PREVENTION, CARE, RECOVERY AND RE-INTEGRATION

VALUES:

- EQUITY AND COMPREHENSIVENESS: Our activities will be aligned with the health interests of all Ontarians and in doing so will improve access to the care continuum and respect the diversity of the population we serve.

- ACCOUNTABILITY AND INTEGRITY: We will demonstrate accountability and integrity in all of our activities and in the use and management of public resources.

- TRANSPARENCY AND ENGAGEMENT: We will foster and demonstrate a culture of responsive, interactive, open and respectful communication and collaboration.

- LEARNING AND PERFORMANCE IMPROVEMENT: We will contribute to and apply evidence and knowledge, advance new ideas and take action to continuously improve the stroke system.

- LEADERSHIP AND INNOVATION: We will look to the future, embrace change and innovation, challenge the status quo, grow more leaders and through partnership build capacity.
ONTARIO STROKE SYSTEM – ORGANIZATIONAL STRUCTURE

Ontario Stroke Network Organizational Chart

- OSN Board
  - Ministry of Health & Long-Term Care
  - Ministry of Health Promotion & Sport
  - Finance
  - Research
  - Executive
  - Governance
  - Stroke Evaluation & Quality

Executive Director, Ontario Stroke Network
- Best Practice Lead
- Evaluation Lead
- Sr. Admin Assistant

Regional stroke Programs/Networks
- Canadian Stroke Network/Canadian Stroke Strategy
- Heart and Stroke Foundation of Ontario
- LHIN CEO Designate/LHINC

- Task Teams/Working Groups FY 11/12
  - Strategic Plan Steering Committee
  - Stroke Reference Group
  - HSAA & Knowledge Translation

Board and Committees
OSN Staff
Program Committees (Team committees: Education, Rehabilitation and Community Long Term Care Coordinators)

Direct Reporting/Planning
Communication/Partnership
CHAMPLAIN REGIONAL STROKE NETWORK – ORGANIZATIONAL STRUCTURE
Champlain Regional Stroke Network Steering Committee Membership

1) LHIN Representative – Leah Bartlett
2) CRSN Medical Director – Grant Stotts
3) Rehabilitation Medical Director – Christine Yang
4) RSC Admin Liaison – Yvonne Wilson
5) DSC Admin Liaison – Sabine Mersmann
6) Hawkesbury Admin Liaison – Vacant
7) Cornwall Admin Liaison – Janice McCormick
8) Research Representative – Mary Egan
9) Education Representative – Heidi Sveistrup
10) Health Promotion Representative – Lesley James
11) RNOC Representative – Fred Beauchemin
12) Bruyère Admin Liaison – Anne Mantha
13) Community Representative – Jaime Constable
14) LTC Representative – Simon Akinsulie
15) Stroke Survivor Representative – Abe Schwartz
16) CCAC Representative – Claire Ludwig
CHAMPLAIN REGIONAL STROKE NETWORK – SCOPE OF RESPONSIBILITY

- Heart and Stroke Foundation
- Champlain Cardiovascular Prevention Network
- Champlain Regional Stroke Network
- Champlain Regional Stroke Network
- Champlain Regional Stroke Network
- Champlain Regional Stroke Network
- Champlain Regional Stroke Network
- Hospice Palliative Care Program
ONTARIO STROKE NETWORK

STRATEGIC DIRECTIONS
1) **Credible leader**, strategic partner and effective advocate for fewer strokes and better outcomes
2) **Catalyst to drive** for excellence in stroke care and vascular health

CORE ENABLERS
1) **Evaluation**: Applying Evidence to Action
2) **Strategic/Meantingful Collaboration**: Harnessing the Power of Partnerships
3) **Powerful & Visible Communications**: Becoming the “Voice” of Stroke Care & Prevention
4) **Focused Innovation & Knowledge Translation**: Becoming a “Hub” for New Knowledge and Information Exchange

CHAMPLAIN LOCAL HEALTH INTEGRATION NETWORK

The Champlain Local Health Integration Network’s Integrated Health Services Plan 2013-2016 identified the following goal and six key result areas:

**GOAL:** Improved health, access to a high-performing health system and better experience with their care.

**KEY RESULT AREAS:**
1) More people involved in planning their health services.
2) More people receive quality, evidence-based care.
3) More people with mental health conditions & addictions having access to services.
4) More seniors cared for in their communities.
5) More people with complex chronic conditions able to manage their conditions.
6) More people at end of life, families & caregivers satisfied with their palliative care supports.

**STRATEGIC PRIORITIES:**
1) Build a strong foundation of primary, home, and community care.
2) Improve coordination and transitions of care.
3) Coordinate and integrate services among hospitals.

**ENABLERS**
1) Accountability Management
2) Information Management & eHealth
3) Health System Funding
4) Community Engagement & Partnerships
5) Collaborative Governance
6) Communications

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2 The term “vascular” is defined as all forms of vascular and related diseases, encompassing heart disease, stroke, and diseases of other major blood vessels (Joint Statement of Commitment, *Toward an Integrated Vascular Health Strategy for Ontario*, July 23, 2010).
CRSN ENVIRONMENTAL SCAN – PROCESS

A SWOT analysis was conducted with each member of the CRSN Steering Committee to draw out their knowledge and expertise on stroke care in our region. The purpose of this analysis was to collect information about the internal and external environment in which the Champlain Regional Stroke Network operates.

<table>
<thead>
<tr>
<th>POSITIVE/ HELPFUL to achieving the strategic directions</th>
<th>NEGATIVE/ HARMFUL to achieving the strategic directions</th>
</tr>
</thead>
</table>
| **INTERNAL ORIGIN**
  facts/ factors of the Champlain Regional Stroke Network | Strengths
  Things that are good now - maintain them, build on and leverage them. | Weaknesses
  Things that are poor now - remedy, change or stop them. |
| **EXTERNAL ORIGIN**
  facts/ factors of the environment in which the Champlain Regional Stroke Network operates | Opportunities
  Things that are good for the future - prioritize, capture, build and optimize them. | Threats
  Things that are bad for the future - plan to manage or counter them. |

In addition to the SWOT analysis, a survey was conducted with all CRSN Operational Committee members. The survey of the CRSN Operational Committee members included the following questions:

1) Based on the Champlain LHIN Stroke Report Card and the Ontario Stroke Evaluation Report which performance indicators can we significantly improve over the next 3 years?

2) Based on the Canadian Best Practice Recommendations for Stroke Care which activities have the most evidence to support changes in how we deliver stroke care for our region?

3) Which Ontario Stroke Network initiatives have the best alignment with the needs of stroke patients within our region?

4) How can your organization contribute to improving stroke care for our region?
CRSN ENVIRONMENTAL SCAN – IDENTIFIED THEMES

Responses from the CRSN Environmental Scan interviews and surveys were consolidated into 39 separate themes. Listed below, these themes were used to facilitate the strategic goal development process.

| Standardize and integrate rehabilitation system | Reduce LTC home admission rates | Integrate stroke prevention clinics, diabetes education, and cardiac rehabilitation |
| Centralized post-acute/rehab referral | Increase outpatient services for stroke/vascular patients | Establish high risk vascular health patient screening |
| Increase transparency of rehab admission | Integrate community vascular health care services | Increase stroke warning sign recognition in Eastern Counties |
| Decrease door-to-transfer time | Systematic community support service referrals across care continuum | Excellent Ontario Stroke Network evaluation system |
| Champlain bed capacity planning | Community stroke navigation | Reduce timelines and increase site specificity of performance reporting |
| Establish consistent baseline assessments | Implement stroke best practices in the community sector | Establish Champlain client satisfaction survey |
| Increase AlphaFIM® completion rates | Strengthen CRSN Community & Long-Term Care portfolio | Excellent Champlain Hyper-Acute Stroke Care System |
| Stroke unit implementation | Support shift to Stroke Quality Based Procedures Funding Model | Establish vascular health governance structure |
| Stroke unit patient consolidation | Increase service standards to match Stroke Quality Based Procedures Funding Model | Equity of access to stroke care regardless of language or culture |
| Increase integrated stroke units | Educate clinicians on Stroke Quality Based Procedures Funding Model | High quality vascular health care close to home |
| Support change to new Ontario Stroke Network stroke unit definition | Excellent Champlain Regional Stroke Prevention System | Increase client perspective in governance structure and system planning |
| Increase use of Community Care Access Centre as central referral hub | Decrease carotid endarterectomy timelines | Increase CRSN publications |
| Reduce complex continuing care admissions from acute care | Increase vascular health care focus | Increase CRSN conference presentations |
CRSN STRATEGIC GOALS 15-16FY TO 17-18FY

Based on the responses from the environmental scan, the CRSN Management Team developed a series of 11 strategic goals which were presented to the members of the Champlain Regional Stroke Network Steering Committee. The committee members were asked to vote for the 5 strategic goals they thought were most important for the region. An operational plan which identifies the specific deliverable, lead, champion, and care continuum was developed based on the 5 strategic goals that received the most votes. Targets for deliverables were set using the Ontario Stroke Report Card provincial benchmark where available. The operational plan below contains the 6 remaining operational goals from the current strategic plan and adds 9 new operational goals to complete the new three year plan.

<table>
<thead>
<tr>
<th>Year 1 – 2015-16 fiscal year</th>
<th>Year 2 – 2016-17 fiscal year</th>
<th>Year 3 – 2017-18 fiscal year</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Strategic Goal</strong></td>
<td><strong>Operational Goal #</strong></td>
<td><strong>Operational Goal</strong></td>
</tr>
<tr>
<td>Ensure equitable access to high quality stroke and vascular health care across the care continuum and the Champlain region.</td>
<td>1</td>
<td>Support the creation of acute stroke units at hospitals that provide specialized stroke services within the Champlain region.</td>
</tr>
<tr>
<td>Ensure equitable access to high quality stroke and vascular health care across the care continuum and the Champlain region.</td>
<td>2</td>
<td>Improve stroke care knowledge among existing staff in the region's LTC facilities.</td>
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<tr>
<td>Strategic Goal</td>
<td>Operational Goal #</td>
<td>Operational Goal</td>
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<tr>
<td>Support health care organizations to adapt to Stroke Quality Based Procedures Funding Model.</td>
<td>3</td>
<td>Reduce time from stroke event to sub-acute stroke care.</td>
</tr>
<tr>
<td>Implement a standardized system for stroke and vascular health care according to best practices within the Champlain region.</td>
<td>4</td>
<td>Maintain the Champlain Regional Stroke Care Systems in alignment with Canadian Best Practice Recommendations for Stroke Care.</td>
</tr>
<tr>
<td>Support health care organizations to adapt to Stroke Quality Based Procedures Funding Model.</td>
<td>5</td>
<td>Increase 72 hour Alpha-FIM completion rate at all stroke units in the Champlain region.</td>
</tr>
<tr>
<td>Support the exploration and development of innovative services for stroke and vascular care within the Champlain region.</td>
<td>6</td>
<td>Increase telerehab capacity in the Champlain region.</td>
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<tr>
<td>Strategic Goal</td>
<td>Operational Goal #</td>
<td>Operational Goal</td>
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<tr>
<td>Implement a standardized system for stroke and vascular health care according to best practices within the Champlain region.</td>
<td>7</td>
<td>Ensure all admitted patients with new stroke events are consolidated to stroke specialized facilities.</td>
</tr>
<tr>
<td>Ensure equitable access to high quality stroke and vascular health care across the care continuum and the Champlain region.</td>
<td>8</td>
<td>Complete a stroke rehabilitation system capacity and allocation analysis for the Champlain region.</td>
</tr>
<tr>
<td>Design and implement standardized processes for seamless transitions across the stroke and vascular health care continuum.</td>
<td>9</td>
<td>Establish a system for systematic referral to community support services across the care continuum.</td>
</tr>
<tr>
<td>Design and implement standardized processes for seamless transitions across the stroke and vascular health care continuum.</td>
<td>10</td>
<td>Establish carotid intervention referral process for Champlain region that ensures stroke patients are treated within 2 weeks of their stroke event.</td>
</tr>
<tr>
<td>Strategic Goal</td>
<td>Operational Goal</td>
<td>Deliverable</td>
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<tr>
<td>Design and implement standardized processes for seamless transitions across the stroke and vascular health care continuum.</td>
<td>Establish a Community Stroke Rehabilitation System within the Champlain region.</td>
<td>Pilot a Community Stroke Rehabilitation System within one Champlain Sub-LHIN.</td>
</tr>
<tr>
<td>Design and implement standardized processes for seamless transitions across the stroke and vascular health care continuum.</td>
<td>Establish a centralized referral process to post-acute care.</td>
<td>Implement a centralized inpatient stroke rehabilitation referral and triage process using the Resource Matching &amp; Referral System within the Champlain region.</td>
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<tr>
<td>Support the exploration and development of innovative services for stroke and vascular care within the Champlain region.</td>
<td>Develop online stroke and vascular health education modules for Champlain region.</td>
<td>Implement an online education module to improve modifiable risk factors for patients with vascular disease across the Champlain region.</td>
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<tr>
<td>Support health care organizations to adapt to Stroke Quality Based Procedures Funding Model.</td>
<td>Provide education to frontline clinicians on the impact of the Stroke QBP funding model.</td>
<td>Deliver education on Stroke Quality Based Procedures at each facility that provides specialized stroke services within the Champlain region.</td>
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<tr>
<td>Strategic Goal</td>
<td>Operational Goal #</td>
<td>Operational Goal</td>
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</tr>
<tr>
<td>Implement a standardized system for stroke and vascular health care within the Champlain region.</td>
<td>15</td>
<td>Maintain the Champlain Regional Stroke Care Systems in alignment with Canadian Best Practice Recommendations for Stroke Care and Stroke Quality Based Procedures.</td>
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</table>
The strategic plan will be presented for approval to the CRSN Steering Committee on December 19th 2014. The CRSN Management Team’s work plans will be finalized by February 2015; CRSN Best Practice Team and CRSN Stroke Prevention Team work plans will be finalized by March 2015. The three CRSN operational committees (CRSN Education Committee, Champlain Regional Stroke Prevention and Acute Care Committee, and CRSN-RNOC Stroke Rehabilitation Sub-Committee) will finalize their work plans by May 2015. The CRSN Budgets, performance evaluations, and quarterly reporting will be aligned with the strategic plan. The strategic planning process will be repeated biennially in alignment with the Ontario Stroke Network planning cycle.

Thank you for your support in developing the 2015/16 to 2017/18 CRSN Strategic Plan.

Sincerely,

Jim Lumsden, B.Sc.P.T. MPA
Director, Champlain Regional Stroke Network
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