

LLG Integrated Stroke Project News – June 2016

Congratulations to all those involved in launching Integrated Stroke Care in the Lanark, Leeds and Grenville (LLG) area. As of June 17th there have been 8 patients referred to BGH from the Perth and Smiths Falls District Hospital (PSFDH) since the launch of Integrated Stroke Care for LLG on May 2, 2016. These patients are directly admitted to the Acute Stroke Unit on 1East at Brockville General Hospital.

Patient and Family Resources: Please see the Acute Stroke Unit [video](#) on the BGH website (patient services section) to learn more from stroke survivors about their experience of stroke units, how much it means to them and to their families. Please share this video link and the [acute stroke unit brochure](#) with your patients and families. Brochures are available in hard copy in the PSFDH ED departments, as well as on the Acute Stroke Unit in Brockville General Hospital.

Please Remember:

- **The first 24 hours are critical to stroke outcomes:** Canadian Stroke Best Practice Recommendations state that stroke patients should be admitted to an acute stroke unit within 6 hours of stroke onset. The earlier a patient is admitted to the stroke unit, the sooner the patient can be assessed and started on the BGH stroke care pathway. For this reason, the patients are transferred urgently by EMS from the Perth or Smiths Falls EDs using a direct admit process. They usually bypass the Brockville ED to avoid a second ED visit and are admitted directly to 1East. The Perth and Smiths Falls EDs call 1East and ask to speak to the hospitalist on call. This is a priority call to enable a timely link with the hospitalist.
- **BGH and PSFDH ED and Patient flow staff:** If KGH neurology/ED calls to repatriate – please help to remind them to send patients who need admission to BGH and help link to the direct admit process.
- **For Transfers between sites:** Please remember that the standard nurse to nurse report should continue to occur as with any inter facility transfer; this is important for continuity of patient care.
- **Patient Flow:** Patients who are candidates for inpatient rehabilitation may be discharged back to Perth for their rehab via consultation with Dr. Stolee, Perth physiatrist. Those who are not rehab candidates or can't be discharged directly home may be repatriated back to PSFDH via patient flow coordinators following usual hospital repatriation processes.
- **Community Linkages:** Patients from the Perth and Smiths Falls area who are being discharged straight home will need to be linked to local community resources including referral to the Perth Vascular Protection Clinic. They may be referred to the Perth Day Hospital for Outpatient Rehabilitation or referred to CCAC for Home-based Enhanced Stroke Rehabilitation Services.

Coming Soon: Patient/Family surveys for the Acute Stroke Unit at BGH and Rehab Sites at both BGH and PSFDH.

Thank you for your part in providing excellent stroke care. If you have questions/feedback about processes, please discuss these with your Manager.