Objectives:

- To provide an overview of the development of an electronic referral system for stroke rehabilitation
- To understand the barriers, enablers and strategies used to implement electronic systems for referral
Background: SCRIPT Project
2002-2005

- Ontario Stroke Strategy Rehab Pilot Project
- Pre SCRIPT Project:
  - No standard assessment or measures used for rehab referral
  - Faxed referrals (content varied, based on perceived relevance to intake decision)
  - No system for collecting data about rehab system wait times

SCRIPT Project Interventions

- Standardized assessment and referral form
- Evidence based outcome measures
- Common definitions for “rehab readiness”
- Electronic referral and tracking process
- Triage tool
- Checklist of information required at discharge
- Transition information guide for stroke clients and families
E Stroke Rehab Referral System

Client needs Rehab Referral

E-referral
Summary report of standardized assessment simultaneously sent to selected facilities

Facility A
Facility B
Facility C

Standardized Response Provided. Response Time 1 business day.

Decision

Decision

Decision

Referral Response

Pre SCRIPT 2003
SCRIPT 2004
SCRIPT 2005
E Stroke 2006

% response

No Response
Declined
Required More Information
Transition from Acute Care to High Tolerance Short Duration Rehab

Inpatient Wait Time by Rehab Facility

n=359
“Looks like a good system but how do I implement e-referral for my rehabilitation population?”

Prior to implementation need to understand the barriers and enablers

“E System” Barriers

- Variation in organization structures
  - Teaching/community facilities
  - Variation in professional roles and responsibilities
- Variation in potential adopters environments
- Nature of practice changes required by the Project
Inter-organizational Issues

Lack of Trust
Lack of Understanding

Practice Changes
- Standard language
- Standard tools
- Evidence based outcome measures

Variation in Organizations Structures
Impact Practice
- Different referral/intake service models across organizations
- Who coordinates intake/referral?
- Who are the decision makers?
  - Service coordinator model/Intake committee/Rotating decision makers
- Who is responsible for use of electronic systems?
Variation in Practice Environments

- Integrated vs. non integrated teams
- Not just a list of professionals but how well do they work together
- Inter professional roles and responsibilities
- Accountable to each other
- Don’t underestimate the impact of change on the practice environment

Critical Enablers

- Advisory Committee
  - Managers who can influence change in organizations
  - Manage resources
- Local Champions
  - Front line workers
  - Understand the practice environment
- Content Experts
  - Evidence based practice
  - Development of new tools/resources
Successful E Stroke Adopters

- Presence of change agents who communicate the vision
- Promote the incentives and benefits of the process
- Managerial support for process
  - Evaluate and manage the impact on workload
  - Adequate resources

Strategies for Implementation

Developing Ownership Through Participation

- Engage participants at all levels
  - Perceived relevance to role
- Redistribution of workload – across more professionals
- New “system” champions – testimonials from within
“You mean I have to open my email?!”

- Training needs vary
- Learning styles vary
- Adoption time varies
- Provide interactive education sessions
- Tailor training to individuals
- Ongoing support

Communicate, Communicate, Communicate

- Vision
- Stakeholders consultations
- Acknowledge the challenges
- Be responsive to concerns
- Open dialogue – regular meetings/forums
- Audit and feedback
- Education
- Evidence
Planning for Sustainability

- Plan early for sustainability
- One model of implementation across a system doesn’t necessarily fit all organizations
- Redefining roles and responsibilities
- Be prepared to adapt as time goes on

Sustainability - Challenges

- Sustaining trust
  - In the quality of the information sent between organizations
  - Explore system and organizational issues
  - Collaboration and consensus on new strategies
  - Evidence of practice change
- Ongoing training
E Stroke - Conclusions

1. Electronic system
   - Promotes best practice in rehab referral
   - Decreased non-response rate
   - Reduced time to respond to referrals
   - Increased provider satisfaction

2. Implementation requires knowledge of the barriers, enablers in the various organizations

3. Successful implementation requires committed champions and managers with ongoing training and adaptation to the needs of the users