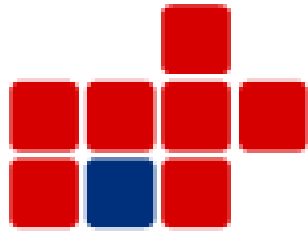


Evaluation of the Specialized Community Stroke Rehabilitation Teams

Making Possibilities Come to Life



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Canadian **Best Practice**
Recommendations for
Stroke Care

5.6 After leaving hospital, stroke survivors must have access to specialized stroke care and rehabilitation services appropriate to their needs.

Evidence Level A

Current State

CCAC data for stroke 2007/08*

	# Clients with Stroke	PT, OT, SLP and SW Services				
		# Clients	Mean # visits per client	Median # visits per client	Mean Days to first visit	Median Days to first visit
Ontario	5,954	3,430	4.1 (3.5 - 5.2)	3 (2-4)	33.3	27

*Stroke Evaluation Quality Committee: Ontario MOHLTC Home Care Database

Three Specialized Interprofessional Teams



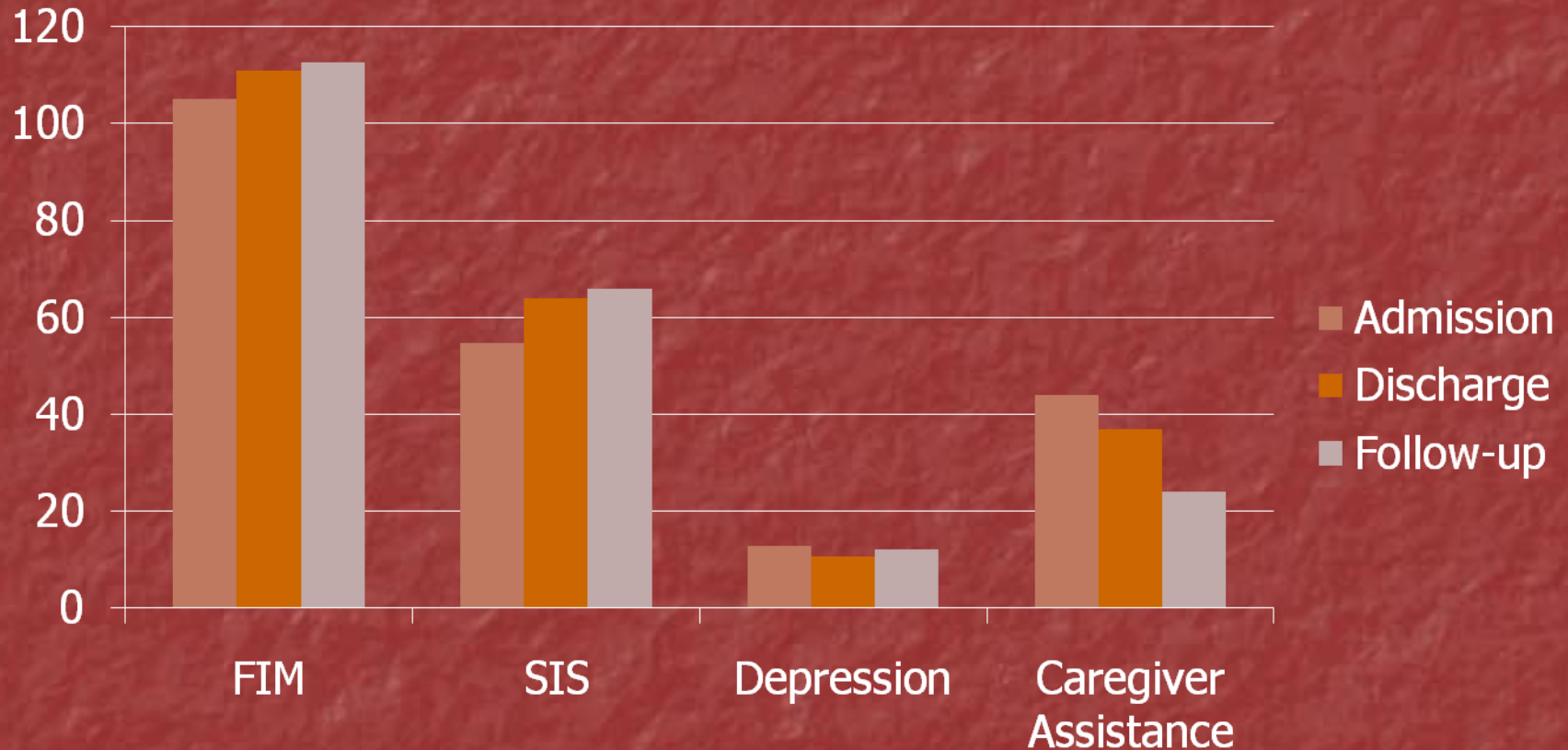
- Nurse
- Physiotherapist
- Occupational Therapist
- Speech Language Pathologist
- Social Worker
- Therapeutic Recreation Specialist
- Rehabilitation Therapist

Outcomes: Service Numbers

- Total # Clients served to date: 521
- Ave age 68 years (Range 29-92)
- Ave time post-stroke 4 weeks (3 weeks - 9 years)
- Wait List: 1-4 weeks
- ALOS 20 weeks
- 38 visits/client
- Number D/C home from LTC: 4



Outcomes: Clinical



Functional Independence Measure and Stroke Impact Scale improvements from admission to discharge ($p < 0.001$); maintained at follow-up.
Less depressive symptoms ($p < 0.001$) at discharge; less caregiver assistance ($p = 0.01$)

Satisfaction Survey/Interviews

Clients

Team services:

- met their needs (97%)
- enabled them to stay at home (93%)
- ↑ QOL (96%)
- ↑ independence (88%)

Stakeholders

Reported team impacts:

- shorter hospital LOS
- ↓ER visits
- ↓ hospital re-admissions
- stroke risk factors managed

Caregivers

100% reported that the team helped reduce the stress of caregiving

Community Re-Engagement

- Helped return to family roles (69%)
- Helped return to social activities (59%)
- Improved knowledge of where and how to get help in the community (61%)



“We got out to some activities with other people that we would never have gotten without them.”

Outcomes: System Impacts

Inpatient Rehabilitation Program:

- 32% decrease in ALC days
- 18% decrease in ALOS
- 44.9% decrease in days waiting for admission to rehab

Cost \$1.8 million for 300 clients/year

Conclusion

The results confirm that this new model of specialized interprofessional teams providing rehabilitation and community reintegration over a period of several months was effective for improving function and quality of life for stroke survivors.

Next Steps:
Economic Analysis
Advocate for Model

(see video which follows)



COMMUNITY **Stroke**
Rehabilitation TEAM

[Watch Video](#)