



Trillium
Health Partners
Better Together



The Importance of Clinical Champions in Quality Work: An Example of Improving Access to Outpatient Rehab Post-Stroke

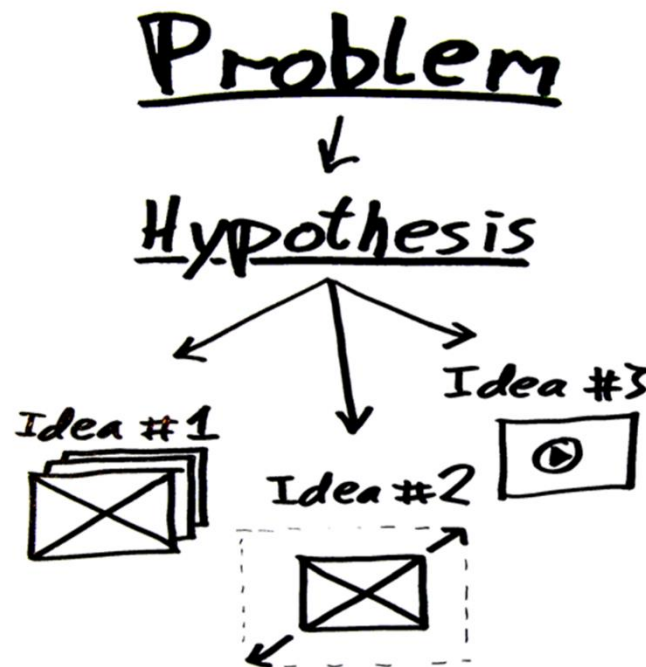
Pamela Rahn, Speech Language Pathologist
Stacey Williams, Community Stroke Navigator

The Problem

- Service in Trillium Health Partners' Outpatient Neuro Rehab Program was not meeting the Canadian Stroke Best Practice Recommendation of patients accessing outpatient rehabilitation services 48 hours post-discharge from acute care and 72 hours post-discharge from inpatient rehab. A baseline snapshot collected manually from March to May 2017 showed an average wait time of 100 days for OT, 49 days for PT, and 83 days for SLP.
- This had a negative impact on *patient flow* through the health system, stroke *patients' quality of life* and the overall *patient experience*.
- It also negatively impacted outpatient staff morale due to an *increase in administrative tasks* required to manage the waitlist, and their *perception of not providing optimal care* for patients.

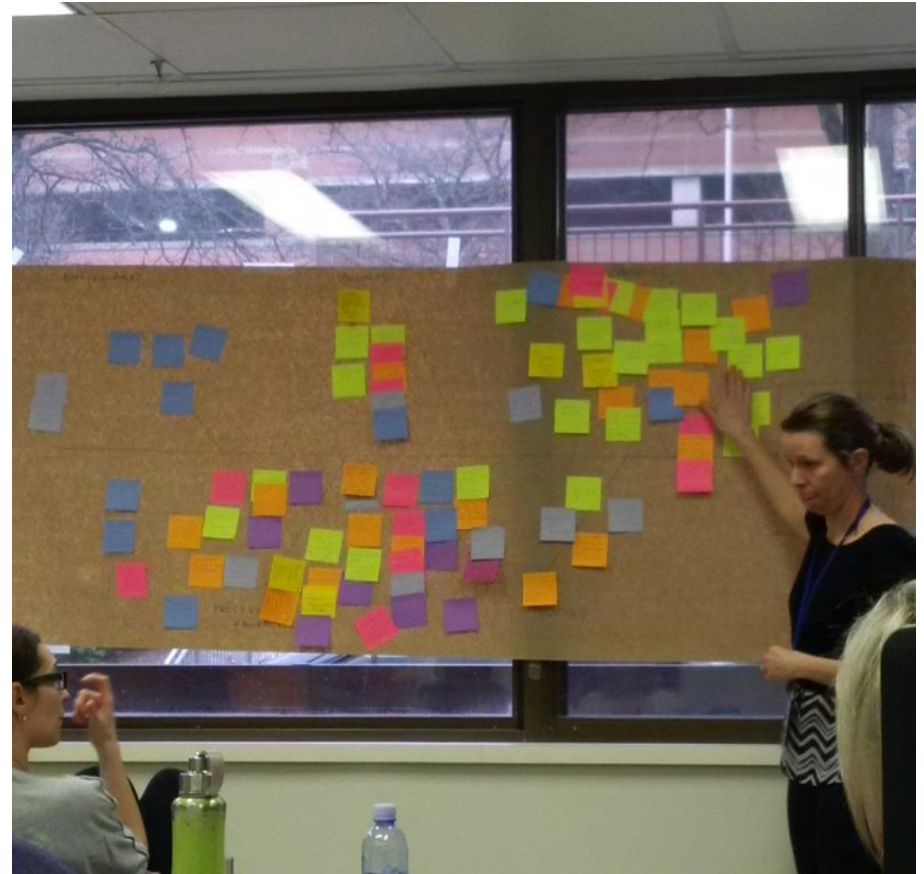
Quality Improvement Framework – IDEAS Advanced Learning Program

- IDEAS (Improving & Driving Excellence Across Sectors)

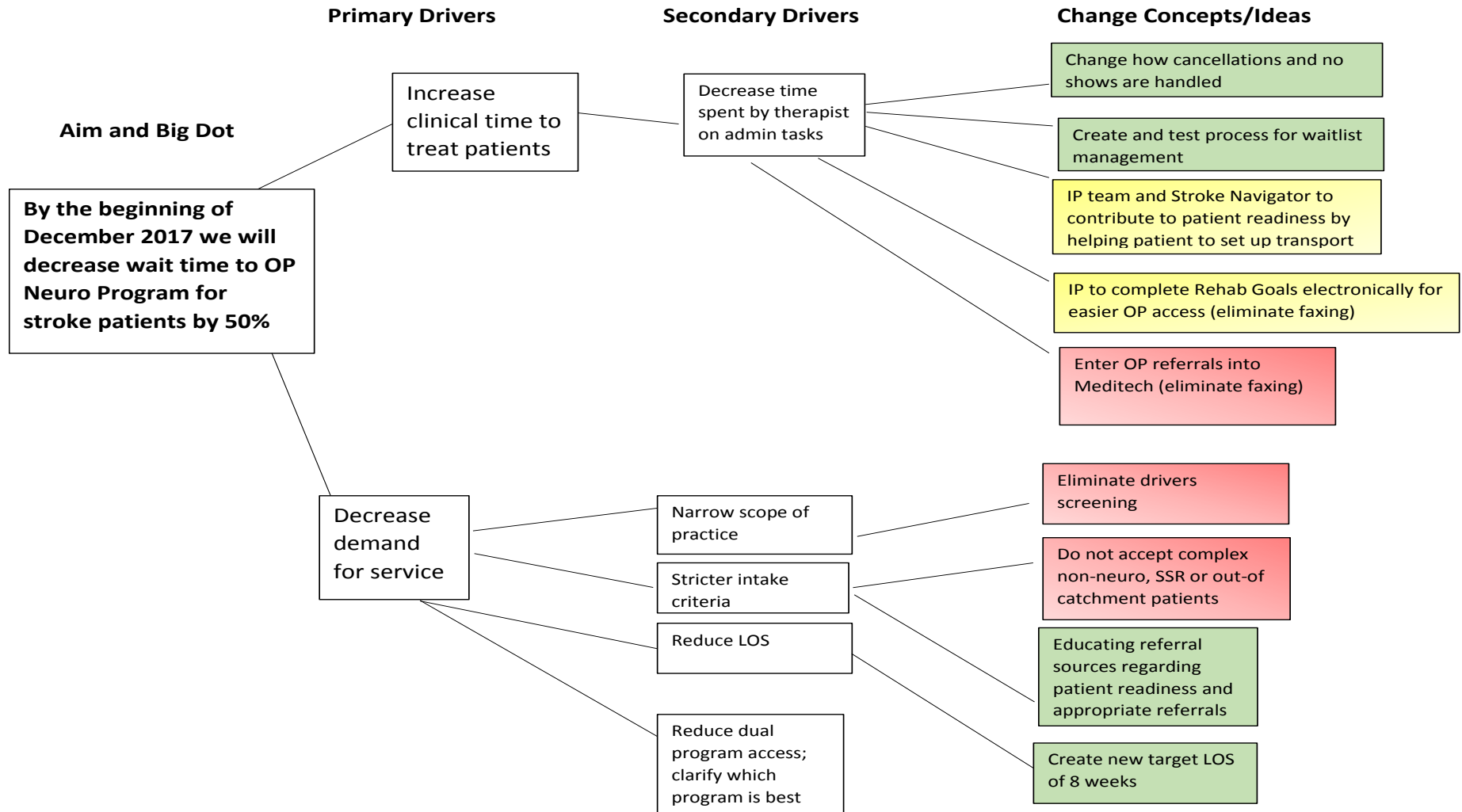


Quality Improvement Diagnostic Journey

A *brainstorming* session and *process map activity* were utilized to engage the front line team in identifying areas of concern as well as opportunities for change/improvement.



Driver Diagram

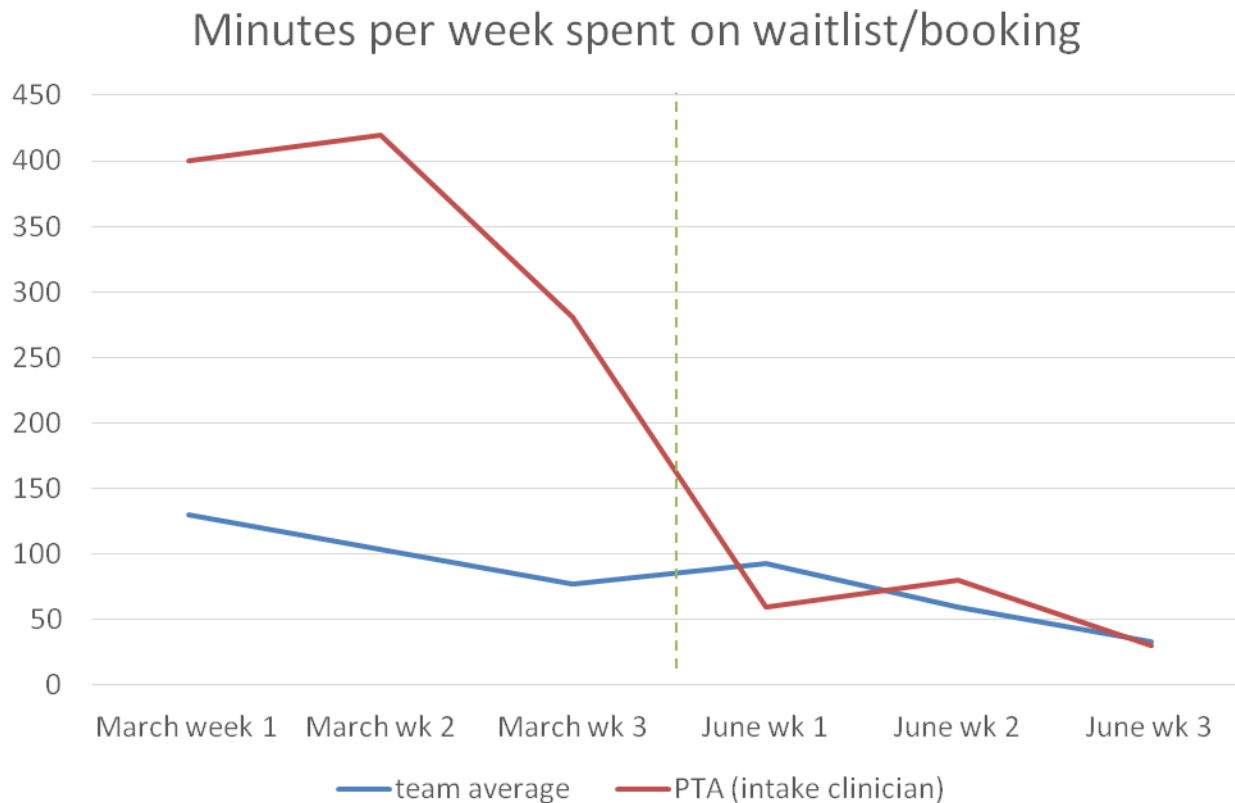


The Goals

- Overall Project Aim: We hoped to decrease the amount of time stroke patients **wait** for the Outpatient Neuro Rehab program by 50% by December 2017
- IDEAS AIM 1: To reduce the **maximum length of stay** in the outpatient program from 12 weeks to 8 weeks by May 2017
- IDEAS AIM 2: To reduce the amount of time **therapists spend on administrative tasks** related to waitlist management by 30% (compared to baseline) by June 2017

Increase Supply

- Goal: less time spent on waitlist management and booking

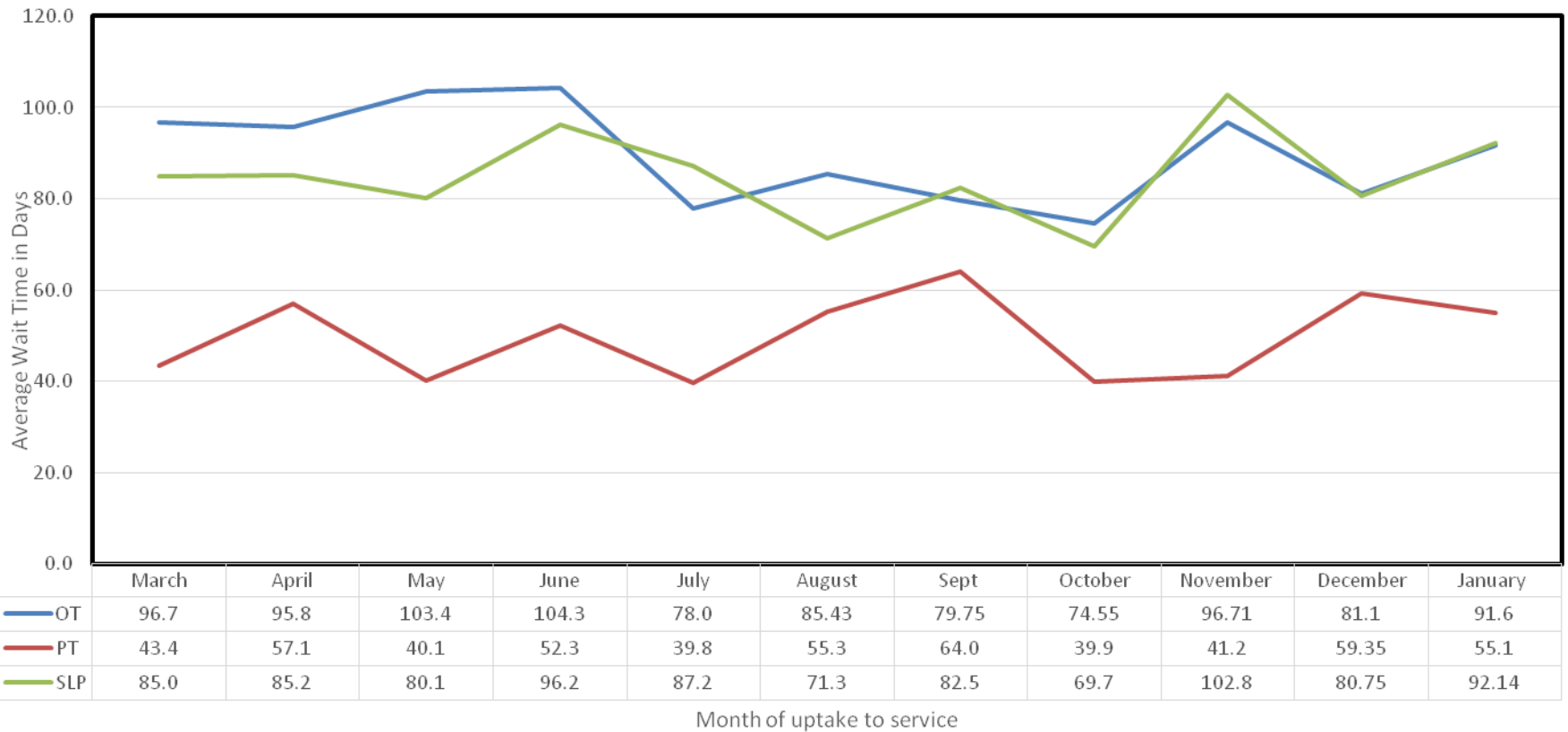


Balancing Measures

- Team and clinicians were worried about possible negative effects, especially of shortened length of stay
- Tracked ability of clinicians to set meaningful and achievable goals for an 8-week LOS (clinician rating and comments collected)
- Tracked patient satisfaction with the program overall and with progress towards their goals

Wait Time per Month per Discipline

Average Wait Time in Days per Discipline



— OT — PT — SLP

Lessons Learned and Take Away Messages

- Month-to-month variability was greater than we expected – will need to measure results over a long term
- Involve as much of the frontline team as you can in making the initial plan and ongoing feedback/updates
- Communicate frequently with all stakeholders
- Clinical Champions – Change ideas were frontline developed and supported by hospital leadership

The Core Project Team

- Janine Theben, West GTA Stroke Network – Regional Stroke Rehabilitation Coordinator
- Pamela Rahn, SLP, Outpatient Neuro Rehab Services, Trillium Health Partners
- Holly Sloan, SLP, Inpatient Stroke Unit, Trillium Health Partners
- Stacey Williams, West GTA Stroke Network – Community Stroke Navigator

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