

# Southwestern Ontario Stroke Network Updates

## Know Your Stroke Continuum!

- SWOSN organizes its quality improvement work across the stroke continuum and within:
  - Prevention
  - Hyper-Acute & Acute Care
  - Inpatient & Outpatient Rehabilitative Care
  - Community Re-integration & Long-Term Care
  - Education – which occurs throughout the stroke journey in support of best practices and system improvement



Within each e-Blast edition, we will highlight a different update from each area of the stroke continuum. In this edition, we are focusing on **Hyper-Acute & Acute Care**.

## What's new in Hyper-Acute Acute Care?

### Canadian Stroke Congress Representation

The Canadian Stroke Congress provided an opportunity to celebrate the work that has been done to reduce Door to Needle (DTN) time across our region and which was summarized within the poster “Tic-Tok, Let’s Move the tPA Clock”. The genesis of this work was the SWOSN Hyper-Acute Forum (2018), which was organized to bring teams together from each District Stroke Centre (DSC) and Telestroke Site to learn about improvement strategies that reduce DTN time. Teams created an action plan at the event, which District Stroke Managers implemented with support from SWOSN. Organizations continue to be engaged in this work to support access to best practice and five DSCs have demonstrated a reduction in DTN time.



Bill Lewis, Deputy Chief of Huron County Paramedic Services, traveled to Canadian Stroke Congress to present the poster “Use of a Pre-Hospital Large Vessel Occlusion (LVO) Screening Tool in Acute Stroke by Rural Emergency Medical Services Providers”, sharing results from Huron and Perth County’s EMS pilot to implement and evaluate two screening tools to support the identification of stroke survivors in the field who may have a large vessel occlusion. From this work we learned that paramedics preferred the Los Angeles Motor Scale (LAMS) to the Vision Aphasia Neglect (VAN), and implementing these tools into their operations was relatively easy and effective. Findings from this pilot are informing system design and decision making for the use of LVO screening tools within Ontario.

## Provincial Prompt Card Update

Paramedics play an important role in stroke care by identifying patients experiencing acute stroke symptoms and urgently transporting them to a Stroke Centre for access to best practice care. The Basic Life Support Patient Care Standards (BCLS) for Paramedics supports best practice Paramedic care for patients experiencing signs and symptoms of acute stroke. This document was updated on September 3<sup>rd</sup>, 2019, with a change to the Acute Stroke Bypass Protocol, which lists the indications and contraindications for bypassing a community hospital in favour of a Designated Stroke Centre (Regional, District or Telestroke) where the patient would have access to specialized treatment. Previously the Paramedic Prompt Card allowed paramedics to transport a patient who meets specific criteria to the closest Designated Stroke Centre (DSC), but now they are authorized to transport the patient to the “most appropriate” DSC. The Southwestern Ontario Stroke Network is continuing its work to realign the stroke system to reflect the impact of this change. Destination Policies that Paramedic Service providers use to choose the most appropriate hospital for stroke care are being updated, along with walk-in protocols that are used in emergency departments.

## London Middlesex Oxford District Stroke Council



The London Middlesex Oxford District Stroke Council has been working to update the destination policies with Emergency Medical Services (EMS) providers as part of the realignment work for stroke services. This work coincides with an update to the provincial paramedic prompt card. Parallel work includes the review and update to walk-in protocols at Emergency Departments at Woodstock, Tillsonburg, Alexandra, Strathroy and Four Counties Hospital to reflect the expanding treatment window for endovascular thrombectomy. Once this work is completed, the Southwestern Ontario Stroke Network will review walk-in protocols at other sites across our region to ensure they support quick identification and access to best practice.

## Regional Stroke Distinction Acute Working Group



The Regional Stroke Distinction Acute Working Group has representation from multiple organizations that provide acute stroke care and are on this journey together. The group has been busy reviewing the acute standards as outlined in their regional work plan. Tools and resources are being developed to support compliance with the standards, and evidence to support priority standards has been documented. Some of this work has been done in conjunction with the Regional Stroke Distinction Rehabilitation Working Group to support co-design among common standards.