

ASC Operations

ASC face-to-face meeting—4 April 2012

Twenty-seven delegates attended the annual ASC face-to-face meeting and reviewed current activities including the “My Stroke Care Plan” pilot, TIA models of care paper, Stroke Specific Education Framework and the rehabilitation assessment project and set new goals for the coming year. There were a number of new member representatives this time and the level of engagement throughout the meeting was very high. For the minutes of this meeting [click here](#)

Change in ASC representatives

There have been some changes to ASC representatives in 2012. Helen Dewey and Janelle Devereux have replaced Chris Bladin and Sonia Denisenko as Victorian Stroke Clinical Network representatives. Sandra Lever has replaced Pip Galland for Stroke Services NSW. Alasdair McDonald replaced Chris Levi as the Royal Australasian College of Physicians representative. Rohan Grimley replaced Kong Goh for the Queensland Statewide Stroke Network and consumer representative Annette McGrath has replaced Paul Howells. Thank you to all outgoing ASC representatives for your time, commitment and enthusiasm.

ASC website

The ASC web content will be moved from the National Stroke Foundation (NSF) website to a dedicated ASC site. The new address will be www.australianstrokecoalition.com.au and the site will go live in June.

Government submission

The ASC provided a comprehensive submission to the Australian Commission on Safety and Quality in Health Care. The submission was in response to the public consultation document Australian Safety and Quality Goals for Health Care. Amongst other things, the submission supported the Commission’s proposal to include stroke as a priority for the goal that people receive appropriate, evidence-based care.

Current Projects

Stroke rehabilitation assessment tool for the acute setting

The ASC has determined that every person who has a stroke should be assessed for their rehabilitation needs. The ASC Rehabilitation Working Group has been working on a project to develop a nationally consistent assessment process for post acute rehabilitation needs. The aim of this project is to document a recommended process and develop a tool to facilitate the assessment of stroke survivors' rehabilitation needs while still in the acute setting. Following an assessment of current practice in Australia and internationally, a national survey and a literature review, the Expert Working Group developed an assessment process that incorporates a decision-making pathway with supporting assessment tools. The assessment process was piloted in six hospitals across Australia. Telephone follow-up evaluations have been completed for all sites. Next steps are to complete the evaluation report; Modify the pathway and the supporting package based on feedback; and implementation.

The ASC executive has agreed that the pathway should be implemented nationally. The pathway may also potentially be used as part of a PhD research project. An abstract has been accepted by the Stroke 2012 scientific committee for oral presentation.

For more information contact ASC Secretariat Leah Wright (lwright@strokefoundation.com.au) or current Rehabilitation Working Group Chairperson Dr Susan Hillier (susan.hillier@unisa.edu.au).

My Stroke Care Plan

Another priority of the ASC is to ensure that all patients experience a well-coordinated and supported discharge and that stroke survivors have access to appropriate care that meets their needs.

My Stroke Care Plan template has been developed for use in all hospitals in Australia. The template was piloted in a number of public and private hospitals across Australia. Healthcare professional feedback has been received and consumer evaluations have been completed. A report summarising the results and providing a rationale for modifying the Care Plan was also completed and ratified by the working group members.

The Care Plan has been modified based on the feedback from the pilot. The Care Plan will form one component of a new comprehensive written resource for stroke survivors and carers known as *My Stroke Journey* which will be piloted by the NSF in May 2012.

The new hard-copy consumer resource will provide evidence-based information that meets the needs of the stroke survivor and carers at day one, point of hospital discharge and while living in the community. The resource will:

- increase understanding of stroke and treatments
- encourage and facilitate survivor/carer participation in decision making
- provide practical strategies for managing life after stroke.

An abstract for My Stroke Care Plan has been accepted by the Stroke 2012 scientific committee for oral presentation.

For more information, contact ASC Secretariat Leah Wright (lwright@strokefoundation.com.au) or Rebecca Naylor (rnaylor@strokefoundation.com.au).

Stroke-Specific Education Framework

The ASC has identified Workforce, professional development and training as one its priority areas. Currently, Australia currently has no nationally agreed strategy or framework for stroke education needs. The ASC has developed a Stroke-Specific Education Framework (SSEF) that aims to:

- assist education providers to develop consistent stroke training, programs and curriculum for all stroke clinicians
- increase the number of stroke clinicians participating in recognised training that furthers their specialisation in stroke
- encourage delivery of evidence-based stroke care as outlined in the national stroke guidelines by encouraging stroke-specific education.

The SSEF is based around the Stroke Continuum and relates to the 14 elements of care. It has been developed to promote strong inter-professional education and training, and those who use the framework are encouraged to apply the framework in that context.

The SSEF was presented by Andrew Lee at the SSA conference in September 2011 and this has generated interest in its use. It has also been disseminated to all ASC member organisations for incorporation into their training and professional development curricula.

Next steps include the ASC secretariat working with ASC organisations and their education and professional development coordinators to promote the use of the SSEF; and the submission of a journal article to the MJA.

For more information contact ASC Secretariat (lwright@strokefoundation.com.au) or Workforce, Training and Professional Development Working Group Chairperson Andrew Lee (Andrew.Lee@health.sa.gov.au).

TIA models of care project

The ASC has identified acute care and, in particular, management of transient ischaemic attack (TIA) as a priority. To assist in the implementation of the NHMRC Guideline recommendations for the management of patients with TIA in the local setting, a project team has been formed to develop a national consensus statement to outline evidence-based best practice models of care for TIA.

The position paper has been circulated to the project team for review and feedback, and their comments are now being integrated. The next steps will include further consultation to a wider audience. It is anticipated that the paper will be completed late June 2012. An abstract has been accepted by the Stroke 2012 scientific committee for oral presentation.

For more information contact ASC Secretariat (lwright@strokefoundation.com.au) or Project Lead Mark Parsons (Mark.Parsons@hnehealth.nsw.gov.au)

ASC Member Organisation reports

Prior to the face-to-face meeting, ASC members reported on the work their organisations have been doing in stroke for the past quarter:

Consumer representation

Consumers are represented by Eleanor Horton and Annette McGrath.

Eleanor is a long-standing member of stroke support groups and the carer of a stroke survivor for the past 11 years. Over the past 12 months, Eleanor has been a consumer representative on the Queensland State Stroke Clinical Network and more recently was appointed to the NSF's inaugural Consumer Council.

Annette is a long-term carer of a stroke survivor. Annette has been a member of the South Australian Stroke Clinical Network since March 2010 and is also a member of the Safety and Quality Consumer and Community Advisory Committee and of the SA NT Data Link Consumer Advisory Committee.

Australasian Faculty of Rehabilitation Medicine (AFRM)

AFRM is represented by Dr Steven Faux, Director at the Rehabilitation Unit, St Vincent's Public Hospital, Sydney.

Council of Australian Governments funding has been provided for inReach rehabilitation models and currently there are teams established in NSW and SA. Rehabilitation in the home services are currently being established in NSW and QLD and are already well established in Victoria. Speech pathology resources are currently a limiting factor.

For their full report [click here](#)

Australian Physiotherapy Association (APA)

The APA National Neurology Group (NNG) is represented by Associate Professor Julie Bernhardt, Director, AVERT Early Intervention Research Program, National Stroke Research Institute.

The NNG have developed an acute care and upper limb management booklet and revamped the 'stroke card' to promote stroke rehabilitation as the original card was about prevention.

For their full report [click here](#)

National Stroke Foundation (NSF)

NSF is represented by Dr Erin Lalor, Chief Executive Officer, and Chris Price, Divisional Director – Stroke Services.

The consumer resource *My Stroke Journey* which includes the revamped My Stroke Care Plan will be piloted in May in hospitals nationally with a view to implementation in June/July. The intention is to pilot with 200 consumers across 20 hospitals nationally.

For their full report [click here](#)

NSW Agency for Clinical Innovation (ACI) Statewide Stroke Services

NSW ACI Statewide Stroke Services is represented by Sandra Lever, Clinical Nurse Consultant Rehabilitation, Royal Rehabilitation Centre Sydney; Dr Michael Pollock,

Director, Rehabilitation Medicine and Chairman, Hunter Stroke Service John Hunter Hospital, and Mark Longworth, Manager, NSW ACI Statewide Stroke Services.

The network is collaborating with four stroke outreach services (Central Coast Neurological Support Service, Central Sydney Stroke Outreach Team, Blacktown/Mt Druitt Outreach Team & Shoalhaven District Memorial Hospital Community Rehabilitation and Domiciliary Stroke Service) to identify common areas such as team composition (discipline/FTE), outcomes measures (patient/service) and education programs (generic/specific).

These are unique services that form part of the stroke patient journey and the collaboration is to consider a model of care for metropolitan/rural stroke services. For their full report [click here](#)

Occupational Therapy Australia Limited (OTA)

OTA is represented by Dr Louise Gustaffson, Undergraduate Program Coordinator, Division of Occupational Therapy, School of Health and Rehabilitation Sciences, The University of Queensland.

OTA has been recently represented on rehabilitation-related committees including NAERA (National Aids and Equipment Reform Agenda) and NRA (National Rehabilitation Alliance). For their full report [click here](#)

Queensland Statewide Stroke Network

The Queensland Statewide Stroke Network is represented by Greg Cadigan, Principal Project Officer, and Dr Rohan Grimley, Clinical Service Director, Community Integrated Aged & Subacute Service Group.

The recent NSF Acute Services Organisational Survey Report highlighted that there is a gap in the number of existing stroke units in Queensland.

The Statewide Clinical Network has determined that performance within Queensland could be improved on two measures, providing stroke units in hospitals with greater than 100 admissions and increasing the proportion of patients with stroke accessing a stroke unit.

The network has identified that Activity Based Funding (ABF) and healthcare purchasing incentives could be used to improve the quality of care for people with acute stroke. This proposal aims to remove the major barriers to establishing stroke units, 'set up costs' and 'adequacy of funding', with the intent of financially incentivising stroke unit care. LHHNs will work on overcoming other barriers identified to implementing designated stroke units if there is an incentive to do so. For their full report [click here](#)

Royal College of Nursing Australia (RCNA)

The RCNA is represented by Sandra Lever, Rehabilitation Clinical Nurse Consultant at the Royal Rehabilitation Centre Sydney.

RCNA has actively liaised with member experts to provide a professional nursing response to The Heart Foundation and Cardiac Society of Australia and New Zealand (CSANZ) Reducing Risk in health disease – Guidelines for preventing cardiovascular events in people with coronary heart disease Secondary Prevention Guidelines.

RCNA's response was in support of the document and highlighted the need for its widespread distribution. In particular, RCNA recommended distribution to community and primary healthcare services in rural and

remote settings, or within Aboriginal Medical Services, where the risk of heart disease can be heightened. For their full report [click here](#)

Royal Australasian College of Physicians (RACP)

The RACP is represented by Dr Alasdair MacDonald, Director of Medicine, Launceston General Hospital.

The educational areas of the RACP has increased its engagement with the SSA to facilitate a greater level of education within basic physician training on stroke. The first in a series of stroke teaching modules is shortly to commence with competencies for basic physicians trainees the primary target. For their full report [click here](#)

South Australian Stroke Clinical Network

The South Australian Stroke Clinical Network is represented by Dr Andrew Lee, Regional Director of Stroke Medicine, Flinders Medical Centre, Repatriation General Hospital and Noarlunga Hospital, and Dr Susan Hillier, Senior Lecturer – Biomechanics and Neuroscience, School of Health Sciences, University of South Australia.

Members of the SA Steering Committee attended site visits at Mt Gambier and Whyalla to establish clear stroke pathways from ambulance retrieval to community rehabilitation. Part of this will include e-health processes for the administration of rt-PA as well as for rehabilitation decision making with clinicians from the metropolitan units. For their full report [click here](#)

Speech Pathology Australia (SPA)

Speech Pathology Australia is represented by Christina Wilson, Senior Advisor – Professional Issues.

The SPA have conducted a number of Continuing Professional Development workshops for stroke. For their full report [click here](#)

Stroke Society of Australasia (SSA)

The Stroke Society of Australasia is represented by Professor Richard Lindley, Moran Foundation for Older Australians and Professor of Geriatric Medicine, Sydney University; Dr Mark Parsons, Senior Staff Neurologist John Hunter Hospital; and Dr Tissa Wijeratne, Consultant Neurologist and Director, Stroke Unit at Western Hospital.

Professor Stephen Davis has been elected as President-Elect of the World Stroke Organisation. He will take up office during the World Stroke Organisation conference in Brasilia in October 2012.

The next Annual Scientific Meeting (ASM) of the SSA will be a combined meeting with SMART Strokes and will be held in Sydney from 29–31 August 2012.

SAVE THE DATE — The 2013 ASM of the SSA will be held at the Darwin Convention Centre from 31 July 2013 to 2 August 2013. For their full report [click here](#)

Tasmanian Branch ASUN (TASSUN)

The Tasmanian Stroke Unit Network is represented by Dr Helen Castley, Head of Stroke Services, Royal Hobart Hospital.

Despite challenges in the Tasmanian health system over the last 12 months, the Tasmanian Stroke Unit Network has managed to maintain organised and co-ordinated stroke care in the major metropolitan centres. The rapid-access TIA clinic has continued to develop with more opportunity to review patients.

For their full report [click here](#)

Victorian Stroke Clinical Network (VSCN)

The Victorian Stroke Clinical Network (VSCN) is represented by Janelle Devereux, Program Manager, Victorian Stroke Clinical Network, and Associate Professor Helen Dewey, Deputy Director Department of Neurology and Head of Stroke Services, Austin Health.

A series of new projects have been funded that will commence in the coming months. These include:

- Bass Coast Regional Health stroke project, which aims to undertake a gap analysis comparing current service provision for stroke patients against the recommendations in the stroke care strategy for Victoria and the clinical guidelines to inform service planning.
- Echuca stroke project, which aims to implement a sustainable model of care for stroke that is consistent with evidence-based care.
- Kingston stroke unit project, which aims to develop and implement an improved model of care on a dedicated unit for patients accessing stroke rehabilitation at Southern Health.
- GP liaison project, which aims to develop a change strategy to improve discharge practice for stroke/TIA patients at five major public hospitals.

For their full report [click here](#)

Western Australia

Western Australia is represented by Dr Andrew Granger, Geriatrician, Director of Stroke Services, Osborne Park Hospital, and Jacqueline Ancliffe, Specialist Neurological Physiotherapist, Royal Perth Hospital.

Organised stroke care in Western Australia is in a state of flux and WA stroke clinicians are advocating very strongly for funding of improvement to stroke services.

For their full report [click here](#)