

This orientation is intended to be a generic orientation to the Provincial Stroke Services. It is not intended to replace the site, service and role specific orientations that address operational policies, protocols and processes including and not limited to: documentation, workload measurement (if applicable), location of assessment tools/equipment, tour of work unit, etc. Once you are finished, please complete the 10 minute survey to help us keep the information current and relevant.

Section	Content	Details	Date Completed
Provincial Information	Assessment Tools <ul style="list-style-type: none"> ○ List of Standardized Assessments ○ Mini-Nutritional Assessment 		
	Background Information <ul style="list-style-type: none"> ○ Heart & Stroke Poster (Stroke Congress '10) ○ Orientation to Stroke Strategy and Coordinated Stroke Care Model (ppt) 		
	Resources <ul style="list-style-type: none"> ○ Healthy Eating for Secondary Prevention (Hamilton, 2009) ○ List of Resources <ul style="list-style-type: none"> - Assessment Tool information - Heart & Stroke website - Order Sets ○ Stroke – UE Toolkit (Manitoba, 2015) ○ Supported Conversation with Adults with Aphasia (ppt) 	<ul style="list-style-type: none"> ○ Basic Stroke Info ○ Best Practice Recommendations ○ Public Materials ○ 1:1 training with SLP 	
	Telestroke <ul style="list-style-type: none"> ○ Scheduling Rehab Telestroke Appt ○ Telestroke Program Model ○ Telestroke Updates (Stroke Conference ppt) 		
	Other <ul style="list-style-type: none"> ○ Orientation Checklist ○ Orientation to Stroke Services (ppt) ○ Professional Development Information ○ Provincial Stroke Coordinator, Psychiatrist, Psychologist, Stroke Navigator descriptions ○ Provincial Stroke Services Staff Listing ○ Sample Quiz 		
	Provincial Acute Stroke Unit	Policies & Protocols <ul style="list-style-type: none"> ○ Discharge and Transfer Criteria ○ Bowel and Bladder Management for Stroke Patients ○ Oral Care – Stroke Patients ○ Venous Thromboembolism (VTE) Prophylaxis – Stroke Patients 	
Other <ul style="list-style-type: none"> ○ Acute Stroke Clinical Pathway ○ Alpha FIM, Barthel Index & Modified Rankin 			

	<ul style="list-style-type: none"> ○ Toronto Bedside Swallowing Screening Test (TOR-BSST©) ○ Nutrition Screening for Stroke Survivors 		
Provincial Rehabilitation Unit	<ul style="list-style-type: none"> ○ Admission Criteria (Draft) ○ National Rehabilitation Reporting System (NRS) Pamphlet ○ Provincial Rehabilitation Unit Handbook 	<ul style="list-style-type: none"> ○ NRS Training 	
Secondary Stroke Prevention Clinic	<ul style="list-style-type: none"> ○ Pamphlet ○ Referral Form 		
Ambulatory Stroke Rehabilitation Services	Charter, Pamphlet, Protocols,		
	<ul style="list-style-type: none"> ○ Charter ○ Pamphlet ○ Post Botox Stretching Protocol 		
	Forms		
	<ul style="list-style-type: none"> ○ District – Patient Information Sheet and Frequently Asked Questions ○ Provincial Clinic Referral Form ○ Psychology Referral (QEH) 		
	Other		
	<ul style="list-style-type: none"> ○ Making Health Last in Longterm Care (ppt) 		
Community Reintegration	<ul style="list-style-type: none"> ○ Poster for Stroke Congress ○ Respite & Rehab Pilot Handout for Patients & Caregivers 		

*After you complete the Provincial Stroke Services Orientation:
Fill out, sign, date, and submit this document to your supervisor/manager.*

Keep a copy of this document for your records.

Health PEI is committed to preparing its employees for work within the system. Orientation is the first step in that effort. Employees are encouraged to revisit the orientation at any time to refresh their memory of specific information and procedures. It is the employee's responsibility to remain informed about official Health PEI and site specific information and procedures.

By signing this document, I, _____ / _____ do attest that:
Print Name
Employee #

- 1) I have completed Orientation to the Provincial Stroke Services
- 2) I am aware of the policies and requirements applicable to me in my role as an employee in Health PEI.

I fully understand that it is my responsibility as a Health PEI employee to have knowledge of official Health PEI and site specific information and procedures.

Signature

Date

Email

Phone

Email the complete document to your supervisor/manager within ___ days of your employment start date.
(Title the email: *Orientation Completion Form*)

Faxes are not accepted.