

PEI Organized Stroke Care Program Description

The (Health) PEI Organized Stroke Care Program (OSCP) vision is “**Optimal Stroke Care for All Islanders**”. Health PEI (HPEI) promotes a “One Island Health Care System” and the HPEI OSCP provides care on a province wide scale, based on evidence informed practice across the care continuum.

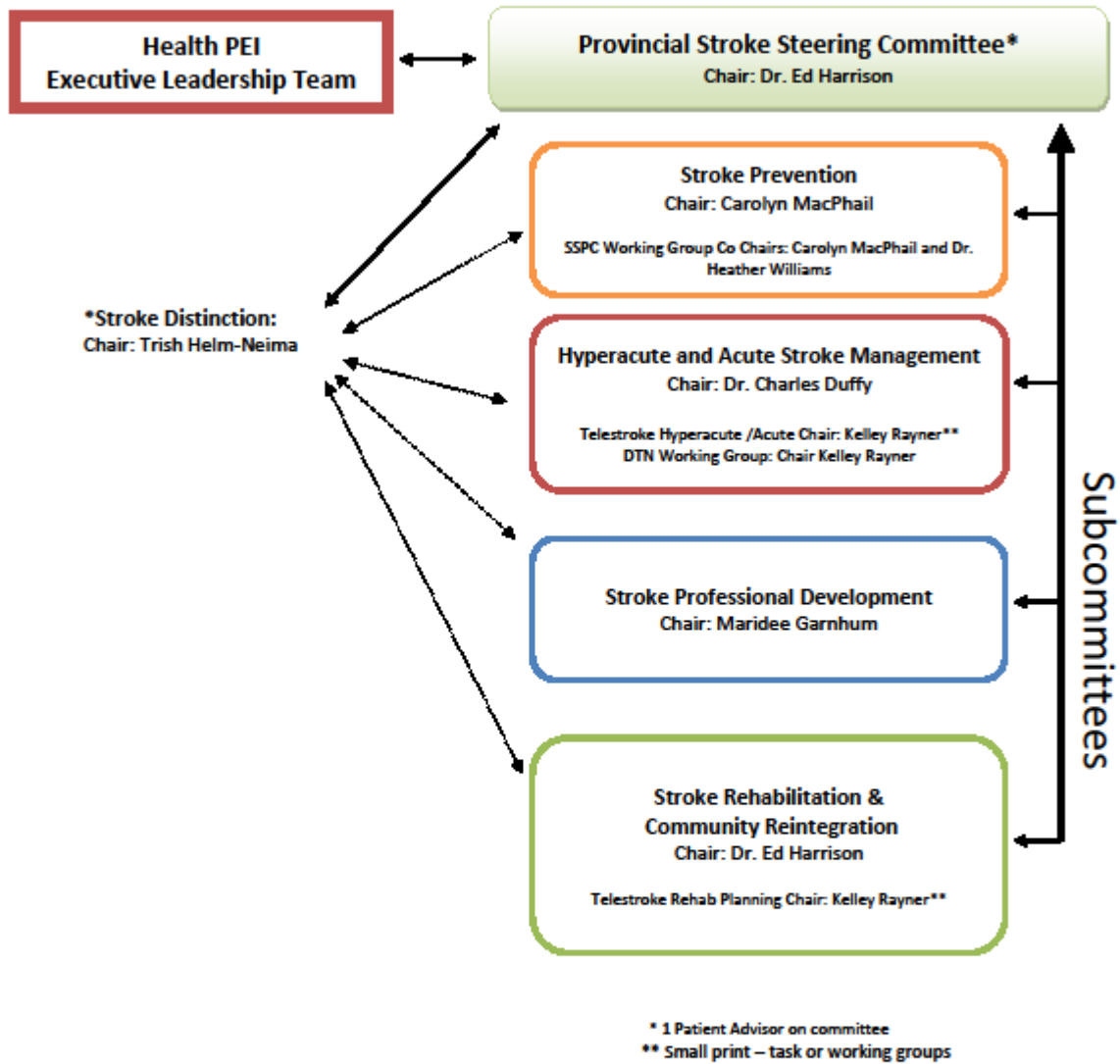
The HPEI OSCP is a coordinated, integrated system of stroke care delivered across the continuum. The domains of care are linked by a system of governance, communications, and evaluation and monitoring. The program is supported by the Provincial Stroke Coordination Office (Provincial Stroke Coordinator, Stroke Coordination Administration Assistant and Stroke Navigator). The office is under the direct supervision of the Manager, Chronic Disease Prevention and Management, who reports to the Director, Primary Care and Chronic Disease. (see Org Charts).

The Provincial Stroke Steering Committee, comprised of representatives of HPEI divisions as well as IEMS and Heart and Stroke, is responsible for the strategic oversight of the program. Subcommittees are responsible for making recommendations related to specific areas of practice along the stroke care continuum (Stroke Prevention, Hyperacute/ Acute, Rehabilitation and Community Re Integration). The Professional Development Subcommittee makes recommendations for staff education. Working groups are struck for specific time limited tasks. (see Governance document)

The clinical components of the OSCP function under various branches of the Health PEI organizational structure. Pre-hospital care is provided by Island EMS in partnership, not direct supervision. Hyperacute services (CT, CTA, tPA) are located in EDs at Prince County Hospital (PCH) Summerside and Queen Elizabeth Hospital (QEH) Charlottetown. The OSCP has interprovincial partnerships with Nova Scotia (EVT) and New Brunswick (neurosurgery care). Acute inpatient services are provided at the Provincial Acute Stroke Unit at the QEH. Tertiary care can be provided at the PCH ICU/IMCU or QEH ICU/CCU. The Inpatient Stroke Rehabilitation Unit is housed at the QEH. Ambulatory Rehabilitation services are delivered in a number of settings: the Provincial Stroke Ambulatory Rehabilitation Team and the District East Ambulatory Stroke Rehabilitation Team are located at the QEH; the District West Ambulatory Stroke Rehabilitation Team is at the PCH and the Community Transition Service Rehabilitation Assistant is located at the Montague Home Care and Support office. The Provincial Secondary Stroke Prevention clinic is located at the Polyclinic in Charlottetown with a satellite site at the PCH in Summerside. The OSCP partners with Primary Care Networks for prevention and risk factor management.

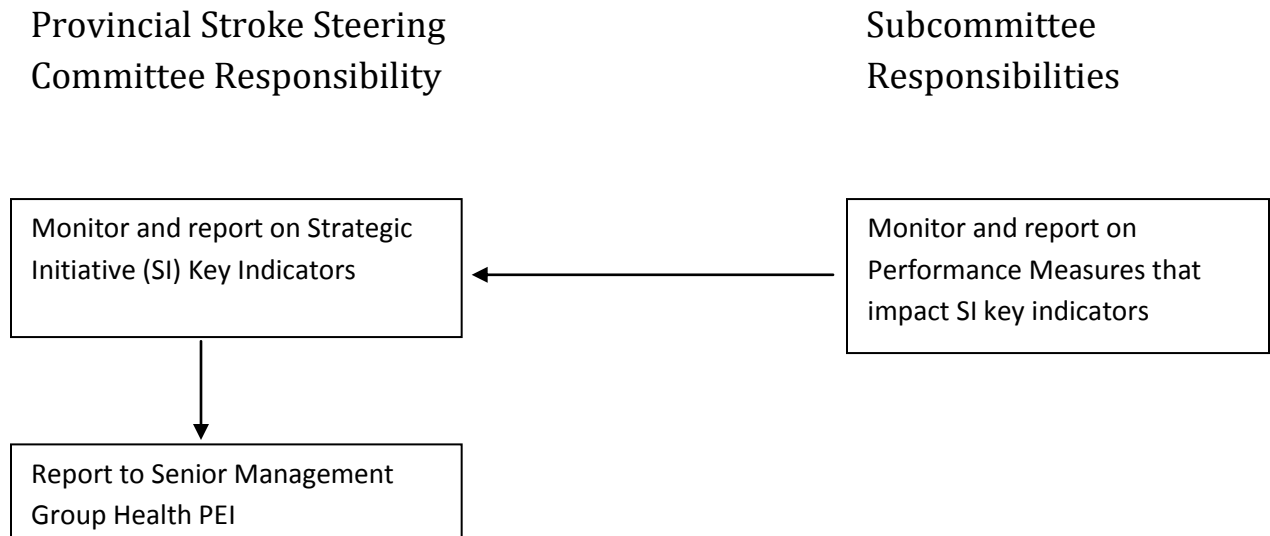
PEI Organized Stroke Care Program Description

Organized Stroke Program Committee Governance



PEI Organized Stroke Care Program Description

Evaluation and Monitoring Accountability framework:



- Each subcommittee monitors and reports on select performance measures aimed at impacting the identified strategic initiative indicators. Each subcommittee makes recommendations to the Stroke Steering Committee regarding specific implementation strategies for improvements.
- The Provincial Stroke Steering Committee monitors the Strategic Initiative key indicators and provides regular reports to the Health PEI Senior Management Group (SMG) through the Provincial Stroke Coordinator.
- Issues requiring escalation to SMG will be brought forward by the Chief Administrative Officer, Family and Community Medicine & Hospital Services West (Program Sponsor) on behalf of the Provincial Stroke Steering Committee. Another avenue for bringing issues to SMG is through the Directors of Hospital Services (QEH and PCH) via their Executive Directors.