

Secondary Prevention during COVID-19

Ambulatory Rapid TIA/Minor Stroke and Secondary Prevention Clinics play a critical role in supporting patients who are high risk for acute care utilization by limiting recurrent visits to the emergency department and preventing subsequent hospital admissions. These services should continue to operate during the current COVID-19 outbreak and should optimize the use of virtual care options when possible.



AVAILABLE RESOURCES: TO HELP YOU CONTINUE DELIVERING SECONDARY PREVENTION SERVICES



CorHealth COVID-19 Stroke Memo #1

Ambulatory Imaging & Cardiac Investigations for TIA and Minor Stroke During COVID-19 (March 31, 2020)

Core Elements of Ontario's Stroke Prevention Program

The following resources were produced by the Secondary Prevention Provincial Integrated Workgroup to support the operationalization of the core elements of Ontario's Stroke Prevention Clinics and to further enhance and support system-wide performance and outcomes for a person with a transient ischemic attack (TIA) or minor non-disabling stroke. Sections of the tools are modifiable to reflect available resources in regional and local settings and the ability to add logos:

- Stroke Infographic for Primary Care Providers
- Standardized Secondary Stroke Prevention Clinic Referral Criteria Coming Soon!
- Patient Oriented Summary for Stroke Prevention Clinics Coming Soon!

IN THE SPOTLIGHT: ADAPTING QUALITY STROKE CARE TO COVID-19



"In response to COVID-19, Health Sciences North rapidly started using OTN visits in the Stroke Prevention Clinic (SPC). To support patients with technology, the SPC Clerk schedules a "test visit" prior to the real visit to ensure the patient is comfortable, the technology is working, and the visit runs smoothly."

SUSAN BURSEY, REGIONAL DIRECTOR, NORTHEASTERN ONTARIO STROKE NETWORK

"In order to decrease unnecessary hospital visits, our stroke neurologists do all their follow-ups and new consults via phone. All new consults are initially called by our SPC RNs and that information, plus any test result, is scanned to the physicians, if not in-house prior to their phoning the patients. Any patients that need more detailed exams are then asked to come in to the clinics for a face to face exam. We are now in the process of introducing Webcams for virtual visits. We are anticipating that moving forward, after COVID-19, all follow ups will continue to be done over the phone if all test results are normal and some virtual OTN visits will be done for our more distant patients."

NICOLE PAGEAU

REGIONAL DIRECTOR, WEST GTA STROKE NETWORK

"Prior to COVID-19, the majority of Urgent TIA Clinic visits were completed in person, with patients, families and caregivers. As a result of the pandemic, Urgent TIA Clinics now leverage virtual care platforms to meet with patients and families so that they are not required to visit the hospital in-person. In those cases when a patient is required to attend an appointment, their interview is conducted over the phone in order to streamline the process and decrease in-person time required at the clinic."

SANDY STEINWENDER

REGIONAL STROKE PREVENTION COORDINATOR, SOUTHWESTERN ONTARIO STROKE NETWORK

Be Inspired by the Power of Hope

Watch Chris Munn's story, the fourth of four inspirational videos in the Royal Victoria Health Centre's Power of Hope series for #StrokeMonth: youtu.be/f5el3YW0yqs





Unfortunately, people will continue to have strokes, even during a pandemic. Fortunately, our stroke stakeholders are dedicated to delivering high-quality stroke care. From all of us at CorHealth Ontario, a heartfelt thank you.