

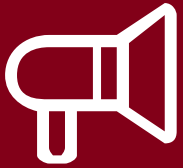
STANDARDIZING

Interprofessional Education

PATIENT & FAMILY

Upon Leaving the Hospital After Stroke



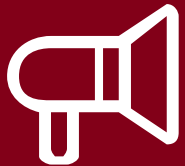


PRESENTER DISCLOSURE

Presenter: Isabelle Martineau

Relationships with commercial interests:

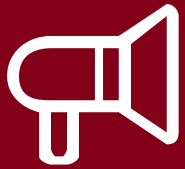
- **Grants/Research Support:** No
- **Speakers Bureau/Honoraria:** No
- **Consulting Fees:** No
- **Other:** No



MITIGATING POTENTIAL BIAS

Presenter: Isabelle Martineau

Mitigation of conflict: None



LEARNING OBJECTIVES



Review the methodology of the project



Review performance data



Project next steps



DEFINE



Problem

Identified gaps and variations in the provision and documentation of education and materials shared with patients and their families and caregivers upon discharge.



Project Goals

To standardize stroke discharge education across the interprofessional team including physician, nursing, occupational therapist, physiotherapist, speech language pathologist and social work.

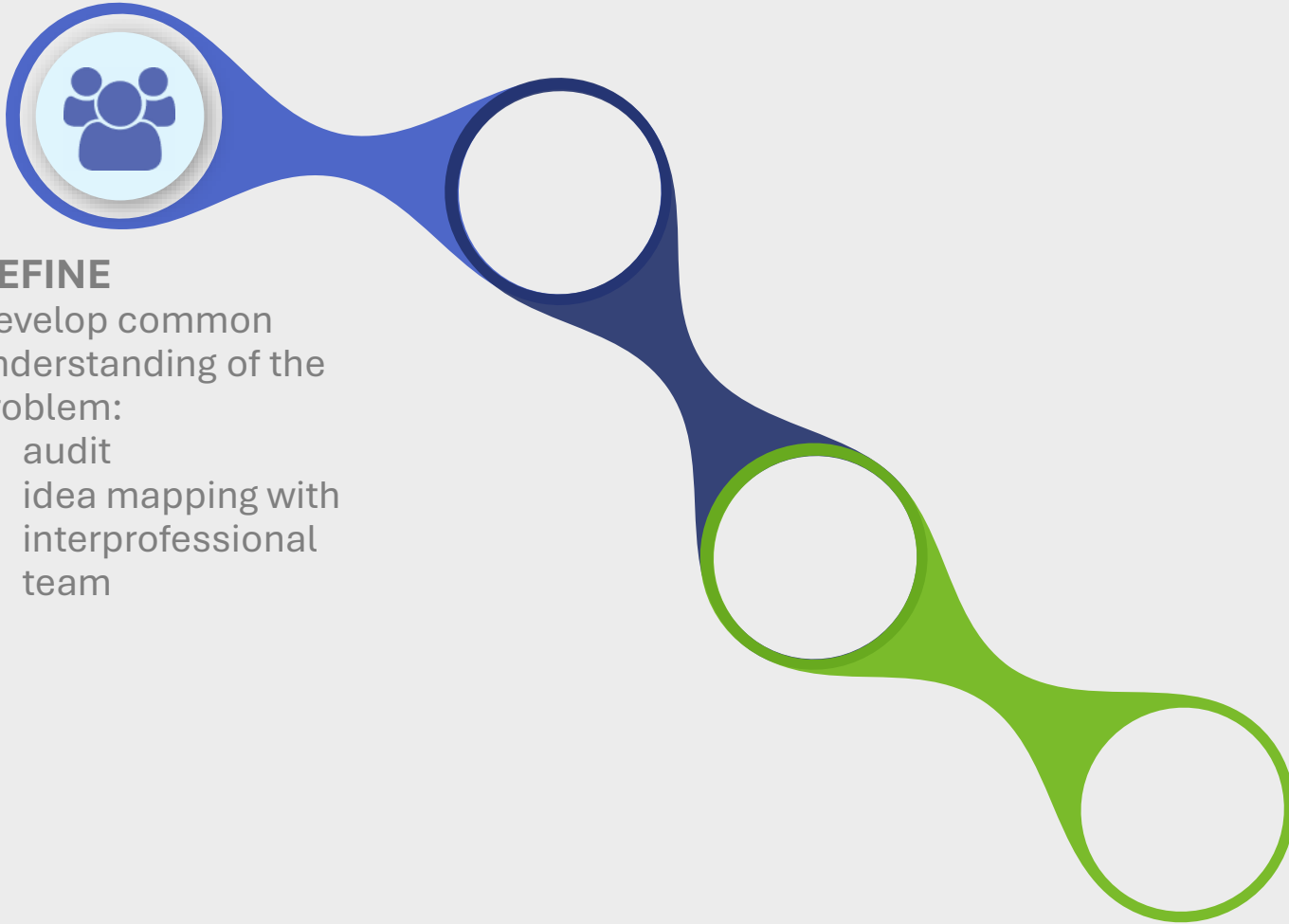


Patient Goal

To provide stroke patients with consistent key messages and aphasia-friendly resources when discharged from the Acute Stroke Unit.

PROJECT

METHODOLOGY



DEFINE

Develop common understanding of the problem:

- audit
- idea mapping with interprofessional team



DEFINE



IDEAS BOARD

- Engagement of front-line staff nurses to:
- better define their practices
 - Ideas for improvement

IDEAS Board

Objective 1 Brainstorm Ideas



Patient & Family Education Scoping



SCOPE

What does stroke education to patients and families look like on D5?



PERFORMANCE

D5 audit completed in June 2021 looking at patient education practices on D5

- 61% (30/49) of patients had documented patient education in the EPIC "Education" tab at time of d/c or <48 hrs before
- 35% (17/49) had no documented patient education in the EPIC "Education" tab

Topics

What topics do you cover in stroke patient and family education?



Tools

What tools do you use to support education with stroke patients (i.e., pamphlets, brochures)?





Improvement


What ideas do you have to improve patient education?



PROJECT OBJECTIVES

- 1**  Identify current state practices
- Tools used to support education
 - Topics covered prior to discharge

- 2**  Categorize in themes:
- Teaching topics
 - Tools and approach
 - Ideas for Improvement

- 3**  Team huddle to review the findings
- Selection of tools and teaching topics to focus for improvement project



DEFINE

Develop common understanding of the problem:

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DEVELOP IMPROVEMENT

Patient & family education

- aphasia-friendly, health-literacy review
- align with best practices
- translation in French
- build in electronic chart
- dissemination plan



PROJECT

METHODOLOGY



Instructions from your nurse



Take your blood pressure at home



Checking your blood pressure at home is one of the best ways to know if it is under control.

Take your blood pressure two times a day at the same time using the same arm each time for 1-2 weeks.

Keep a record of your readings including the date and time.

Review your blood pressure results with a health care provider.



Look at the home blood pressure monitoring information sheets provided to you by your nurse:

- Home Blood Pressure Monitoring
- Blood Pressure Log

You can also watch home blood pressure videos by:

- Visiting www.crsn.ca.
- Clicking on the "Patients and Caregivers" button
- Then click on the tab called "Stroke Videos and Guides"

Watch the following videos:

- Home Blood Pressure Monitoring Part 1 – Buying a Home Blood Pressure Monitor
- Home Blood Pressure Monitoring Part 2- How to Use a Home Blood Pressure Monitor

TAKING DABIGATRAN

(Also known as Pradaxa®)



Your doctor prescribed dabigatran to keep blood clots from forming



Dabigatran along with other medicines will help prevent stroke



Dabigatran is an oral anticoagulant and it is often called a "blood thinner"



Dabigatran should be taken **two times a day** with or without food



A blood test to check your kidneys will be done **prior to starting dabigatran** and at least every year



A **common reason** to take this medicine is atrial fibrillation



Atrial fibrillation is an irregular heart rhythm that can cause blood clots to form which **can lead to stroke**

Most people who have been prescribed dabigatran to prevent Stroke **take it for the rest of their lives**



The Capsule must be **swallowed as a whole** - do not chew it or break it

TELL YOUR DOCTOR IF YOU HAVE:



Bleeding gums



Bruising too much



Nose bleeds

CALL YOUR DOCTOR OR GO TO AN EMERGENCY ROOM IF YOU DEVELOP:



Difficulty breathing or wheezing



Stomach pain/vomiting blood



Black or bloody stools



Severe headache with nausea

WHAT YOU CAN DO:



Take your dabigatran at the same time every day, 12 hours apart

- Do not stop taking your dabigatran without talking to your doctor
- Missing a dose can put you at risk for forming clots



If you miss a dose:

- If it is within 6 hours of usually taking it, take the missed dose
- If it is more than 6 hours skip the dose
- Do not take two doses at the same time
- Never take an extra dose to catch up



Make an appointment with your doctor before your prescription runs out

- Tell your doctor or dentist that you are on dabigatran if you need any surgery or procedure



Obtain a medical alert bracelet to indicate you are on dabigatran - in case of emergency, it would be important for your health care team to know



Tell your pharmacist or doctor about all the medicines you may be taking, including vitamins, herbal products or recreational drugs



Report any side effects to your doctor or pharmacist so that they can give you tips on how to minimize them



TALK TO YOUR HEALTHCARE PROVIDER IF YOU HAVE QUESTIONS ABOUT OR ARE HAVING TROUBLE TAKING YOUR MEDICATIONS

PROJECT

METHODOLOGY



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TRIAL IMPROVEMENT

- Implementation of education in patient-oriented discharge summary: November 2023
- Performance measurement plan: creation of dashboard

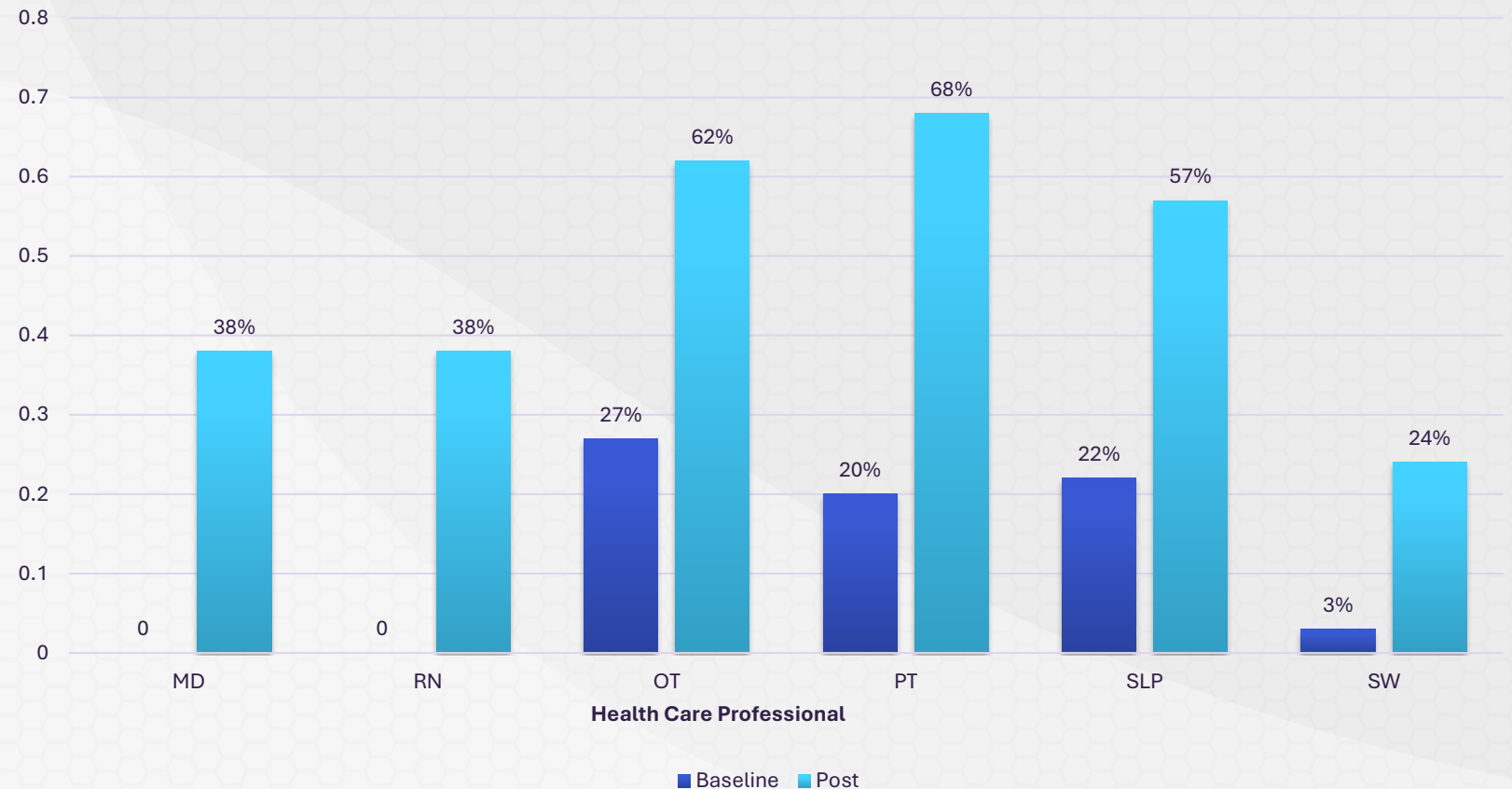
»» Performance



Performance Levels

This table illustrates the overall completion rate of the AVS by discipline for the month of January to May compared to baseline, pre-launch data.

DISCHARGE EDUCATION COMPLETION RATE BY HEALTH CARE PROFESSIONAL



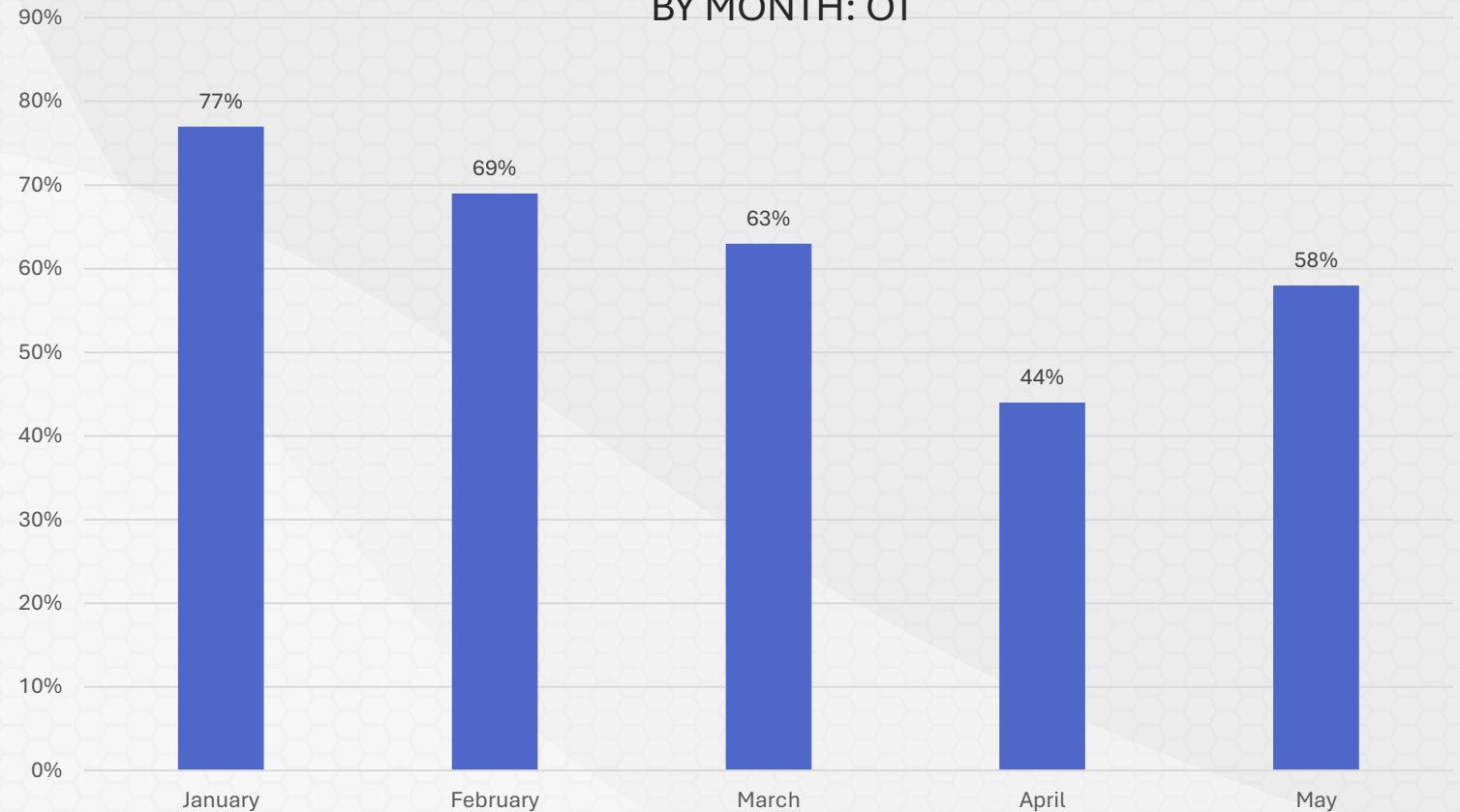
»» Variability



Performance Levels

This table illustrates the completion rate of the AVS by OT and by month from January to May 2024.

DISCHARGE EDUCATION COMPLETION RATE
BY MONTH: OT



PROJECT

METHODOLOGY



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ANALYZE

- Analyze performance to ensure continued success, prevent backsliding
- Engagement at all levels, from frontline to leadership



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NEXT STEP

We Are Here!

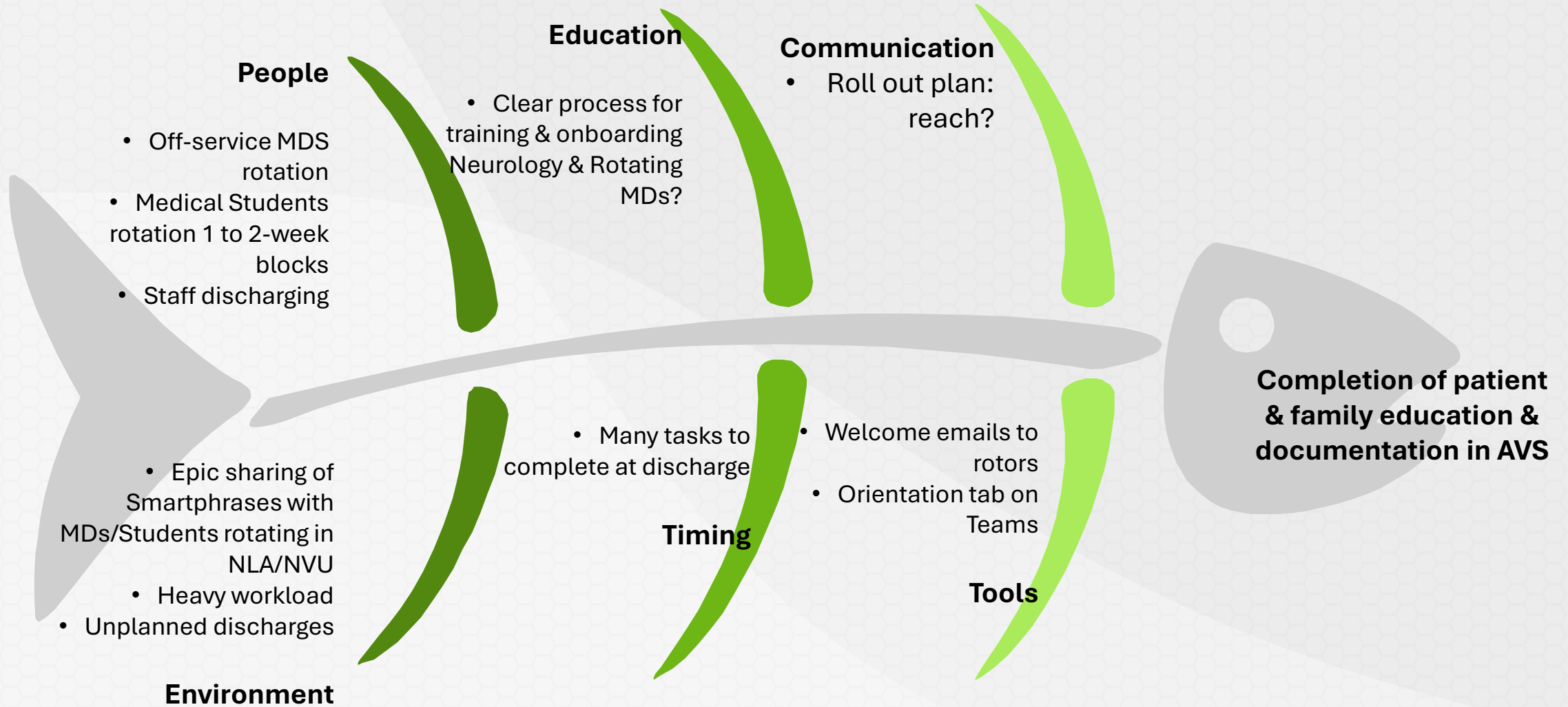
Analyze Root Causes

- Fishbone
- Five Whys

Improve

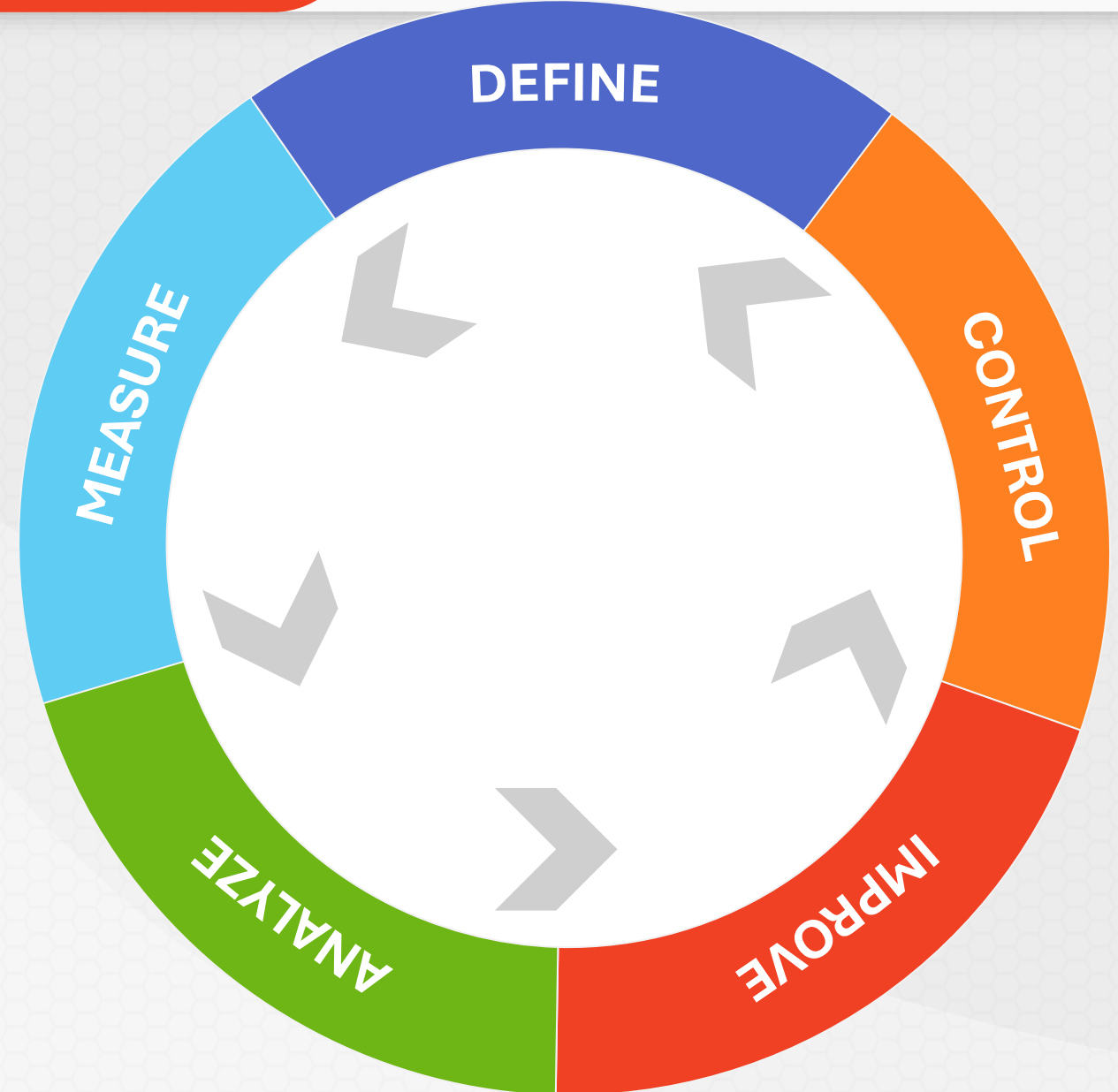
- Select strategies according to top ranked root causes with best feasibility and impact

Fishbone Chart



Next Steps

- MEASURE
 - ANALYZE
 - IMPROVE
-
- **ENGAGING PATIENT WITH LIVED EXPERIENCE**



*You are invited to
come to the mic
...for Q&A!*

