**Figure 1: Service Provision Model for Assessment and Referral for Stroke Rehabilitation**

**STROKE EVENT**

- **Does the stroke survivor require an acute admission?**
  - Yes: Early initial assessment
  - No: Go to "A"

**SCREEN/ASSESS**

- **Comprehensive medical, functional and cognitive assessment by stroke rehab professional(s)**
  - Yes: Reassess daily or weekly **
  - No: Is the stroke survivor Rehab Ready?
    - Yes: Define Needs
      - Identify most appropriate setting to receive stroke rehab
      - Refer and transfer to most appropriate setting
      - Inpatient: Admit to inpatient rehab
      - Home-Based*: Refer to home-based services and discharged to community
      - Ambulatory*: Refer to ambulatory rehab service and discharged to community
      - Go to "B"

  - No: Go to "C"

  - **Will the stroke survivor benefit from rehab now?**
    - Yes: Reassess prior to end of program/service
    - No: Go to "B"

  - **Will the stroke survivor benefit from more rehab?**
    - Yes: Go to "C"
    - No: Go to "B"

**DEFINE**

- **Will the stroke survivor be Rehab Ready in the future?**
  - Yes: Define Needs
  - No: Comprehensiven medical, functional and cognitive assessment

**REFER/TRANSFER**

- **Will the stroke survivor benefit from more rehab?**
  - Yes: Go to "C"
  - No: Go to "B"

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* Some stroke survivors might receive home-based (including care in a LTC Home) and ambulatory services at the same time.
** The stroke survivor could be in acute care, complex continuing care, LTC Home or private residence. If so, arrangements must be made for the reassessment to be conducted periodically while the stroke survivor is in this setting, but on a less frequent basis.