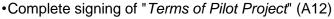
KGH Stroke Endovascular Thrombectomy Plan Key Deliverables required by May 2016 - as of March 15 2016



- •Finalize communications & key best practice messages (B3, E10)
- •Confirm communication plan who, when (B2)
- •Confirm evaluation indicators; prepare data collection sheet (C1,2)
- •Complete updates of Thrombolysis/Thrombectomy Rationale /Guidelines, Roles and Responsibilities Document, Stroke/CC Order Sets, Collaborative Care Plan (E1,6) and IVR Policies, Order Sets (E5)
- •Follow up on DTN strategies from meeting held March 11 set date for trial of patient staying on EMS stretcher through to CT (E2,3)
- Complete documentation of new KGH EVT imaging protocol (E4)
- •Continue work on OTN telementorship between IVR and Hamilton (E5)

March 2016

- Patient and Family Education Resource Ready for Use (B4)
- Order equipment needed (D2)
- Deliver Key Messages to stakeholders (B5)
- •Deliver Best Practice Education to staff in ED, IVR, CC using document on key Best Practices (E3,5,6,7)
- •Trial of patient staying on EMS stretcher through to CT- early April (E2,3)
- •April 7/8 IVR and Neurology training simulation with Dr Van Adel (E5,E8)
- Finalize OTN technical arrangements for IVR mentorship with Hamilton (E5)
- •Communication with EMS, ED, DI, IVR, CC, K7 and neurology confirming roles and responsibilities (E3,4,5,6,7)
- •Ensure clear communication plan for transitions from ED, IVR, CC, K7 (E1)
- •Ensure clear protocol for notifying anesthesiology (E9)
- April 14th meeting with all EMS Chiefs re processes for DTN time (E2,3)
- MOCK trial of EVT process and debrief April 27 9:30 to 11:30 -use data collection sheet to simulate tracking times; use telementoring - (E11)
- Confirm date of launch based on MOCK (E12)

April 2016

- Launch tentatively May 2nd (E12)
- •Debrief process ready to implement (early May) (E13)
- Prepare draft evaluation reporting template (C3)
- •Follow up on each debrief to improve processes (E13)

May 2016