

DRAFT 2 Jan 19 2017

Project Plan														Green ✓ = completed		Yellow O = in progress		Pink X = not started	
Key Activities/Deliverables		MRP	Status	July - Sept 2016	Oct 2016	Nov 2016	Dec 2016	Jan 2017	Feb 2017	Mar 2017	Apr 2017	May 2017	Jun 2017	July - Sept 2017	Oct - Dec 2017				
				D. QHC Workplan Continued															
D5. Revise Stroke tPA Process Documents, Care Pathway & order sets	Update QHC Thrombolysis protocols to embed/include EVT transfer process	M. Roblin C. Murphy Prof. Practice	X																
	Revise QHC Stroke Care Pathway		X																
	Revise QHC Stroke Order Sets		X																
	Revise KGH patient and family education materials		O																
	Consider any changes needed to walk-in protocols with primary sites (Trenton, Picton, NH)		X																
D6. Establish Drip and Ship Escort Process	Establish protocol for Drip and Ship Nurse Escort	M. Roblin C. Murphy Prof. Practice	O																
	Develop order set for Drip and Ship Nurse Escort		O																
	Develop clear repatriation processes with KGH (include in algorithm)		✓																
	Educate RNs in Drip and Ship Protocol		X																
D7. Repatriation to QHC ED or Acute Stroke Unit	Establish ED to ED Repatriation process for person who does not need EVT & not had thrombolysis, stable	C. Martin B.Molinski M. Roblin	✓																
	Establish ASU to ASU Repatriation process for person who has had EVT or who has had thrombolysis		✓																
	Finalize transfer algorithm	C. Martin	✓																
D8. Follow up in Stroke Prevention Clinic	Establish a joint process between KGH and QHC Stroke Prevention Clinics for EVT follow-up and secondary prevention.	M. Slapkauskas Dr. Grieve P. Christie Dr. Jin	X																
D9. Launch	Launch and communicate transfer process (algorithm)	C. Wilkinson C. Martin	✓																

DRAFT 2 Jan 19 2017

Project Plan																	
Green ✓ = completed																	
Yellow O = in progress																	
Pink X = not started																	
Key Activities/Deliverables		MRP	Status	July – Sept 2016	Oct 2016	Nov 2016	Dec 2016	Jan 2017	Feb 2017	Mar 2017	Apr 2017	May 2017	Jun 2017	July – Sept 2017	Oct – Dec 2017		
E. EMS WORKPLAN																	
E1. DTN MOCKS	Participate in QHC MOCKS to improve door to needle times	Doug Socha	X														
E2. Drip and Ship Protocols	Participate in the development of the Drip and Ship Protocols noted above	Doug Socha M. Schjerner	O														
	Educate EMS staff in Drip and Ship Protocols	Doug Socha M. Schjerner	X														
	Consider implications of Door-In-Door-Out Protocols	Doug Socha M. Schjerner	✓	Decision: will not be used													
E3. Boundaries for Medical Redirect	Advise on changes in boundaries for medical redirect to include bypass to Kingston for those living 15 mins west of the midway point	M. Schjerner	O														
E4. EMS Screening	Consider use of Los Angeles Motor Scale for identification of Large Vessel Occlusion warranting medical redirect as noted above	Doug Socha M. Schjerner	O														
	Seek municipal and RPPEO approval to introduce LAMS screen and changes in boundaries in EMS deployment plans for L&A EMS	M. Schjerner	O														
	If approved, educate EMS in use of new LAMS screen using LMS and implement	Doug Socha M. Schjerner	X														
E5. Transport process for Repatriation	Consider adopting Frontenac ED to ED repatriation process for those that return directly to QHC	Doug Socha M. Schjerner P. Charbonneau	X														
E6. Update Deployment plans	Update deployment plans with municipality as required to align with implementation of changes	Doug Socha M. Schjerner	X														

DRAFT 2 Jan 19 2017

Project Plan																	
Green √ = completed																	
Yellow O = in progress																	
Pink X = not started																	
Key Activities/Deliverables		MRP	Status	July - Sept 2016	Oct 2016	Nov 2016	Dec 2016	Jan 2017	Feb 2017	Mar 2017	Apr 2017	May 2017	Jun 2017	July - Sept 2017	Oct - Dec 2017		
F. KGH EVT WORKPLAN for Sustaining and Spreading EVT Access																	
F1. Ongoing EVT Pilot Project Eval and CQI Plan	Continue to follow KGH EVT Pilot Project Plan to monitor and improve on processes	C. Martin Dr. Jin	√ Ongoing														
F2. Neurologists sign up for Telestroke and ENITS access	Stroke Neurologists to sign up for telestroke and receive telestroke process education	Dr Jin and Dr Appireddy	√														
	All neurologists who take stroke call to sign up for ENITS access	Dr Jin	O														
F3. Form Joint Workgroup	Invite participation in Joint Workgroup with QHC and EMS	C. Martin Dr. Jin	√														
	Hold first Joint Workgroup meeting when partners ready- then follow up through RASP committee	C. Martin Dr. Jin	√														
F4. Draft initial joint implementation materials	Prepare Draft Implementation plan, Draft Algorithm and Draft Drip and Ship Protocol Based on Hamilton	C. Martin C. Murphy	√														
	Trial standard SE LHIN Repatriation Sheet for EVT Repatriation - consider if the standard form is adequate	C. Murphy	O														
F5. Prepared EVT Pilot report	Prepare EVT Pilot Report for Senior Leadership Team – make recommendations for expansion if indicated	C. Martin Dr. Jin	O														
F6. Plan for expansion of service hours and time window	Engage SLT & staff for input re 24/7- Get HR advice, Staff brainstorming sessions, expand business case	Martin/Bodie Jin/McCallum	O				SLT Dec 14th	IVR									
	Develop a stepwise project plan for expansion to 24/7 Present plan and business case to Senior Leadership	Martin/Bodie Jin/McCallum	O														
	Plan for changes in EMS time window July 2017	C. Martin Dr. Jin	X														

DRAFT 2 Jan 19 2017

Project Plan														Green ✓ = completed		Yellow O = in progress		Pink X = not started	
Key Activities/Deliverables		MRP	Status	July – Sept 2016	Oct 2016	Nov 2016	Dec 2016	Jan 2017	Feb 2017	Mar 2017	Apr 2017	May 2017	Jun 2017	July – Sept 2017	Oct – Dec 2017				
G. Brockville GH WORKPLAN- Telestroke Readiness																			
G1. Telestroke Readiness	Engage Senior Leadership and Clinical Leads in considering telestroke readiness	C. Martin Dr. Jin C. Murphy	O																
	Prepare telestroke readiness assessment engaging all stakeholders- develop separate project plan	C. Murphy	X																
G2. Business Case	Develop a business case for telestroke at BrGH	C. Murphy	X																
H. Other Regional Planning																			
H1.EMS Prompt Card Time Window & Transfer protocols	Consider implications of change in EMS prompt card time window July 2017 for all stakeholders and add to this plan	Regional Team	O																
	Update to Transfer Protocols for walk-ins	C. Murphy M. Roblin	O																
H2. EVT Education	EVT Education in the Region – regional symposium etc	S. Saulnier Dr Jin	O			Nov 23													
H3. Communication	EVT Regional Communication Plan	C. Martin Dr. Jin	X																