Resource	Description	Where Found	Type of Resource	Cost (yes/no)
bestPATH: Health Quality Ontario (transitions section)	bestPath is a broad, multi-year initiative aimed at improving health outcomes, the experience of care, and system effectiveness for Ontarians with complex chronic illness by delivering person-centred, appropriate and timely health care. They focus on three areas of improvement, including transitions of care. This document is an evidence informed improvement package.	http://www.hqontario.ca/searchresults/searc h-results?sb-search=transitions&sb- inst=0_dnn_mainSearch&sb-logid=7223706- jthzhx1qmsp3zt6q	Provincial	No
Canadian Stroke Best Practice Recommendations	Evidence-based best practice recommendations for stroke care across the continuum including transitions.	http://www.strokebestpractices.ca/	National	No
Community Health Navigator Job Description (Providence Healthcare Toronto, ON)	A sample Community Health Navigator Job Description from Providence Healthcare	Community Health Navigator - July 2013	Regional	No
Community Health Navigator Referrals Policy (Providence Health Care - Toronto, ON)	This policy outlines the purpose of the Community Health Navigator and the policy and procedure for accessing the service. As well, a form for intake and follow up phone calls to the person with stroke is included.	Referrals Intake and call Policy_community heat tool.pdf	Regional	No
Community Stroke Navigation Role Description	A sample Community Stroke Navigator role posting and description from Northeastern Ontario.	Stroke Community Navigator Job Posting Navigator Job Descrip	Regional	No

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Guidelines for Community Based Exercise Programs for People with Stroke	Guidelines for individuals and organizations wishing to create a new program or to adapt a current community-based exercise program to the needs of people with stroke.	http://ontariostrokenetwork.ca/health- programs- resources/resources/prevention/community- reintegration-ltc/	Provincial	No
Healthline	The website includes accurate and up-to-date information about health services at the fingertips of consumers and health care providers across Ontario.	www.thehealthline.ca	Provincial	No
Know Your Client and Know Your Team: A Complexity Inspired Approach to Understanding Safe Transitions in Care	Article outlining research on transfer of accountability. Focuses on relational strength, complexity, appreciative inquiry, and accountability in the health care system.	Nursing Research and Practice, 2013, Vol. 2013 http://www.hindawi.com/journals/nrp/2013 /305705/	Provincial	No
Models of Care Coordination Report	This report contains a review of the literature to define care coordination, case management, system navigation and chronic disease management interventions with a focus on their impact on health system outcomes; a description of exemplary care coordination programs; examples of tools, services and models for care coordination.	http://ontariostrokenetwork.ca/health- programs- resources/resources/prevention/community- reintegration-ltc/	Provincial	No
Ontario Stroke Network	Website for professionals working in stroke care across the continuum.	http://ontariostrokenetwork.ca/	Provincial	No

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Proposed Principles of Outpatient Stroke Referrals	While this document has not yet been integrated into a protocol or policy, acute and rehabilitation organizations within the Toronto Stroke Networks respect the inherent principles.	Community Health Navigator-Principles.r	Regional	No
Regional Stroke Networks	As part of the Ontario Stroke Networks, there are 11 regional networks across Ontario working to coordinate and improve stroke prevention and care across the entire continuum.	http://ontariostrokenetwork.ca/about-the- osn/ontario-stroke-system-oss/	Provincial	No
RNAO Best Practice Guidelines - Stroke Assessment Across the Continuum of Care and Care Transitions	Registered Nurses Association of Ontario best practice guidelines for nursing and the interprofessional team.	http://rnao.ca/bpg/guidelines	Provincial	No
StrokEngine	A website for professionals, persons who have experienced a stroke and their caregivers.	http://strokengine.ca/	National	No
Taking Action in Stroke Prevention	A best practice tool that assists with triaging TIA or non-disabling stroke patients based on time since onset of stroke symptoms and clinical presentation.	http://www.strokebestpractices.ca/wp- content/uploads/2012/10/CSN-Taking-Action- Poster_WEBFFF.pdf	National	No
Telehomecare	Telehomecare uses technology to bring chronic disease patients the care they need, right in their home. Telehomecare nurses monitor each patient's health status remotely, offering education and health coaching. The	http://telehomecare.otn.ca/	Provincial	No

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	patient's primary care provider is kept informed with updates.			
Timing it Right Framework	"Timing it Right" is a conceptual framework for addressing the support needs of family caregivers and stroke survivors from the hospital to the home (2008).	http://www.strokestrategyab.ca/Cameron_PE C_2008.pdf	Provincial	No