

Rehabilitative Services for Stroke Survivors in the Long-Term Care (LTC) Settings in Ontario: A comparison of Quality Indicators from the Continuing Care Reporting System (CCRS) database and Facility-Level Indicators of Stroke-Guideline Use and Awareness

Zahra Azizi

Supervisor: Chris Ardern

Background: Given the increasing rate of stroke and its consequent disabilities, the proportion of stroke survivors requiring long term care (LTC) is growing. With the goal of improving patient function, decreased dependence, and mortality, the current model of care is heavily focussed on rehabilitation interventions. Building upon recommendations from the *Ontario Stroke Evaluation Report (2018)*, the proposed work will evaluate the relationship between model of care implementation within complex continuing care (CCC) and LTC facilities in Ontario - including the awareness and use of Stroke Best Practice Guidelines and the provision of stroke care – and its impact on physical, functional, and quality of life measures of stroke survivors. **Approach:** The overarching objective of this work is to investigate the provision of rehabilitative services in the LTC setting in Ontario and compare it to quality indicators from Continuing Care Reporting System (CCRS) and Ontario Ministry of Health and Long-Term Care (MOHLTC) databases. Phase-one will consist of a province-wide survey of LTC homes to examine the provision of services/resources and availability of rehabilitation for stroke survivors in the LTC setting. The target population includes 627 LTC homes in 14 regions that have implemented the Resident Assessment Instrument Minimum Data Set (RAI-MDS) v2 assessment tool. Phase-two of the project will assess the characteristics of stroke survivors in LTC homes and the relationship between provision of stroke care with changes in functional status of the residents. To achieve this, secondary data analysis of key quality indicators from the CCRS, and patterns of LTC-reported time spent in rehabilitation care (i.e. PT, OT, and ST staff) from facility-level quarterly reports from the MOHLTC will be undertaken. **Impact:** Results of this work will be shared with regional stakeholders as a profile of stroke guideline awareness, use, and challenges that may ultimately be used to help the LTC community understand opportunities for improvement, enhanced education, and disconnects in stroke-care rehabilitation policy.