March 2018

Stroke Network NSW

In this issue...

Stroke Network Executive
What’s happening across the Network
Northern Sector Telestroke Proof of Concept
NSW Australian Stroke Clinical Registry Foundation Project
Education Opportunities
Funding Opportunities
Publications
Recruitment Opportunities
Online Available Resources

Stroke Network Executive

by Kate Jackson

We are gradually transitioning to the new Stroke Network Structure, establishing the Stroke Executive and forming targeted working groups.

I am pleased to introduce the members that have currently been appointed to the Executive.

We held our first very successful meeting on the 28th February, reviewing the terms of reference and the activities of the current working groups.

There are still some specific vacancies that we will be aiming to recruit to over the next few weeks.

- Allied Health Representative
- District Stroke Management role

If you are interested in applying for one of the vacant roles in the structure please contact Kate Jackson

kate.jackson2@health.nsw.gov.au

<table>
<thead>
<tr>
<th>Name</th>
<th>Role</th>
<th>Organisation</th>
<th>LHD</th>
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<tbody>
<tr>
<td>Kate Lloyd</td>
<td>A/ Acute Care Director</td>
<td>ACI</td>
<td>ACI</td>
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<tr>
<td>Kate Jackson</td>
<td>Stroke Network Manager</td>
<td>ACI</td>
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<tr>
<td>Michelle Sharkey</td>
<td>Rehabilitation and Recovery Ass Rep</td>
<td>NSW Consumer Org</td>
<td>RRANSW</td>
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<td>Graeme Malone</td>
<td>NSW Representative</td>
<td>ANSW</td>
<td>ANSW</td>
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<tr>
<td>Chris Levi</td>
<td>Research and innovation Leader</td>
<td>SPHERE/ Liverpool Hospital</td>
<td>NSWLD</td>
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<td>TBC</td>
<td>Rehabilitation Network Executive</td>
<td>ACI</td>
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<td>Richard Lindley</td>
<td>Medical Co-Chair</td>
<td>Blacktown Hospital</td>
<td>WSLSHD</td>
</tr>
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<td>Clare Quinn</td>
<td>Allied Health Co-Chair</td>
<td>Prince of Wales</td>
<td>SESLHD</td>
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<td>Kylie Tastula</td>
<td>Nursing Co-Chair</td>
<td>RPAH</td>
<td>SLHD</td>
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<td>Bill Obrien</td>
<td>Chair Reperfusion and Telestroke</td>
<td>Gosford</td>
<td>CCLHD</td>
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<td>TBC</td>
<td>Chair AUSOR Implementation group</td>
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<tr>
<td>Fiona Ryan</td>
<td>Chair Nursing and Allied Health Education and Professional Development</td>
<td>Orange</td>
<td>WNSWLHD</td>
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<td>Neil Spratt</td>
<td>Stroke Physician</td>
<td>John Hunter</td>
<td>HNELHD</td>
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<tr>
<td>Andy Evans</td>
<td>Stroke Physician</td>
<td>Westmead/ Manly</td>
<td>WSLHD/NSLHD</td>
</tr>
<tr>
<td>Katherine Mohr</td>
<td>Stroke Clinical Nurse Consultant</td>
<td>Wagga Wagga</td>
<td>MLHD</td>
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<td>TBC</td>
<td>District Stroke Role/ Manager</td>
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<td>Donna Jay</td>
<td>Rural Stroke Coordinator</td>
<td>Shoalhaven</td>
<td>ISHLHD</td>
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<td>Stroke Allied Health</td>
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<td>Brenda Booth</td>
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Whats happening across the Network

'ENDOVASCULAR CLOT RETRIVAL AT LIVERPOOL HOSPITAL MAKES CHANNEL 9'
More Stroke patients could be treated with life-saving stents, new evidence shows


'SBS REPORTS ON STROKE RISK FACTOR'
Click here to watch
New report provides insight into the cause of stroke

'TEN YEARS LATER, STROKE CARE EVOLVING AT DUBBO HOSPITAL'
On Wednesday 8th Feb a team from Royal Prince Alfred Hospital including Professor John Worthington visited Dubbo Base hospital to provide advice on optimising the referral pathways for complex stroke.

Full article available

WAGGA BASE ACUTE STROKE UNIT MARKS 10TH ANNIVERSARY
Wagga Base Hospital’s Acute Stroke Unit, which was named one of the best in the state last year, has celebrated its 10th birthday.

Full Article available

'DECADE OF SUCCESS: HOSPITAL’S STROKE UNIT HAS HELPED THOUSANDS'
Orange Hospital have celebrated their 10 year anniversary and are still collaborating on how they can collaborate to offer world class care

Full article available

Northern Sector Telestroke Proof of Concept
The ACI are working in partnership with Ehealth and 3 LHDs to deliver the Northern Sector Telestroke proof of concept.

The Northern Sector Telestroke project aims to ensure timely access to neurological assessment, treatment and management for hyper-acute stroke patients across regional
sites within 3 LHDs (Mid North Coast, Central Coast and Hunter New England). It enables clinicians to collaborate across organisational boundaries to deliver the best care possible to stroke patients, irrespective of their location. It connects regional hospitals to a virtual team of neurologists who can provide rapid treatment advice for patients who present to the emergency department with stroke symptoms.

The pilot is anticipated to increase access for regional areas to specialist advice and time dependent treatment. The initial phase is underway linking Coffs Harbour and Port Macquarie.

Watch a Telestroke Demo via the link below
https://vimeo.com/257646502

**NSW Australian Stroke Clinical Registry Foundation Project**

The Registry collects information about what happens to people who have had a stroke or mini-stroke, called a transient ischaemic attack (TIA). It collects information from hospitals and patients to find out about the care you received in hospital and how well patients recovered after a stroke.


**NSW SITE PROGRESS**

NSW are participating in a foundation program for 18 months with 19 Acute Thrombolytic Centres agreeing to partcipate.

We are pleased to announce that we have over 11 of the 19 participating sites open, trained and starting to collect AuSCR data, with 3 more site commencing in the next few weeks.

The Data and Benchmarking group are initially focusing on ensuring all sites are trained, active and progressing with data collection. The group are reviewing options for electronic data upload that are being used in Victoria, Queensland as well and NSW.

A Data, Benchmarking and Planning Forum is being convened in September 2018, date to be confirmed.

**Education Opportunities**

Why do so many technology projects in healthcare fail?
A new framework for studying the non-adoption, abandonment and failure of scale-up, spread and sustainability (NASSS) of health and care technologies.

Wednesday, 28 March at 11am AEST, 1pm NZST

There is no cost to attend the Webinar but registration is essential. Please register at:
https://zoom.us/webinar/register/WEBINAR_08mC2YrSe6wnV4eXQuB8

After registering, you will receive a confirmation email containing information about joining the webinar.

Trish Greenhalgh Professor of Primary Care Health Sciences and Fellow of Green Templeton College at the University of Oxford is presenting the session.

An apocryphal (but probably not wildly out) statistic suggests that 80% of technology-supported change projects in health and social care fail. We all know that’s because they’re complex. It’s time to unpack what that complexity is all about – because failed technology projects are costly, wasteful and potentially harmful at both a human and a system level.

This lecture will introduce the NASSS framework, give examples of its application and invite discussion on how it might be used and refined in the future.

**STROKE QUALITY IMPROVEMENT FORUM**

Thurs 5th April 2018

Kirribilli Club, 11 Harbourview Crescent, Lavender Bay

This free forum will provide an opportunity for services
involved in the provision of stroke care from across the patient journey to present their improvement initiatives and learn how other sites are addressing different challenges. The day will include feedback from sites involved in the Stroke Quality Improvement Process on their quality improvement projects; and is aimed at doctors, nurses, allied health professionals and managers that work in NSW health services in the provision of stroke care.

If you would like to register to attend remotely please click here
For more information, please contact Carmel Thorn (ACI Project Officer) Carmel.Thorn@health.nsw.gov.au or (02) 9464 4610

'Stroke Education Day'
11 May 2018, 08:00am to 4:00pm
Kolling Institute, Royal North Shore Hospital, Pacific Hwy, St Leonards NSW 2065

The Agency for Clinical Innovation, is convening an education day for stroke. This education day is aimed at Nursing and Allied Health clinicians working with stroke patients across the continuum of care. It is expected that each participant attending will return to their stroke service to continue the education process and implement change based on the new knowledge they gain.

Please Register using the link here

BEST BEHAVIOURS SEMINAR
Monday 14th May 9.30-4.30pm
Treasury Theatre, 1 Macarthur Street, East Melbourne

Brain Injury Australia - in association with the Transport Accident Commission and Slater and Gordon Lawyers - presents a seminar on traumatic brain injury (TBI) and “behaviours of concern”, delivered by one of the world’s leading practitioners of Positive Behaviour Support (PBS).

Dr. Tim Feeney from the United States with Professor Jennie Ponsford and researchers from Monash University. Dr. Feeney leads the world’s first controlled trial of PBS with 60 community-based adults with TBI, being conducted in Victoria.

For further information follow link below

'REHAB IN FOCUS'
Rankin Park Centre, John Hunter Hospital
Program Day One
Monday 9th April 2018

Location: Club Macquarie 458 Lake Road Argenton. NSW

Please see attached information on the upcoming Rehab in Focus 2 day workshop.

Cost: $200per person: (Includes Morning Tea, Lunch & Afternoon Tea both days).

Closing Date for registrations and payment: Monday 2nd April 2018

For further information please contact:
Judith Dunne 0249855738
http://Judith.dunne@hnehealth.nsw.gov.au
Helen Baines 02 49855738
http://helen.baines@hnehealth.nsw.gov.au

'SMART STROKES 2018'
7th-10th August 2018
Smart Strokes and SSA are delighted to present the 2018 STROKE Conference to be held from 7-10 August 2018 in the vibrant and iconic city of Sydney on the South-East coast of Australia.

Following on from the huge 2015 success, Smart Strokes and SSA join forces again to enable this important cross-over of knowledge achieved by holding their two annual events together. STROKE 2018 with its theme “Bridging the Continuum” will bring together all professionals involved in stroke care. The conference will cover all aspects of the continuum of stroke care from: stroke prevention, acute stroke interventions, rehabilitation products and services, nursing essentials, scientific research, equipments plus much more.

In addition to invaluable networking opportunities, STROKE 2018 showcases and encourages the work of established clinicians and researchers, and brings people from stroke-related professions together to share and learn.

Research can make an important contribution to effective policy, program and service delivery decisions. This conference takes a broad approach to research including analysis and evaluation and recognising that research is undertaken by universities, by policy and program agencies using co-production approaches.

This conference will examine what we have learned about knowledge mobilisation. It will provide a forum to hear about and debate the latest findings about what works and to better understand the challenges.

The conference will consider:

- Approaches to building the capacity of agencies to use the best available evidence
- Methods for co-production
- Better methods for more rigorous and useful evaluations of policy

**Funding Opportunities**

**Allied Health Workplace Learning Grants**

The Allied Health Team, Professional Practice and Interprofessional Collaboration Portfolio of Health Education and Training Institute (HETI) is pleased to announce that the Allied Health Workplace Learning Grants program will open on 3 April 2018.

The Program provides financial support to teams of allied health professionals and/or allied health assistants seeking to further develop their knowledge and skills through workplace learning opportunities. Aboriginal Health Workers and Practitioners working in an allied health support role will also be included for this grant.

- Eligible teams are able to apply for one-off grants of up to $4000 to support access to workplace learning opportunities which will enhance their ability to perform in their current role

- Additional funding will be available to rural and remote teams, if requested, to assist in
meeting any further costs associated with location such as travel to the workplace for an educator

- In addition to a grant of $4000, rural based teams may request up to $500 extra and remote based teams may request up to $1000 extra

Application guidance and Terms and Conditions [here](#)

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**RESEARCH GRANTS SCHEME 2018**

Undertaking and sourcing relevant, high quality research which informs its mandate, functions, strategic plan and priorities is an important objective of the NSW Agency for Clinical Innovation (ACI).

A total of $100,000 is available in round 1 of the ACI Research Grants Scheme (ACIRGS), to be allocated in the remainder of the 2018 financial year. Project grants of up to $20,000 will be provided to successful applicants.

Note that it is required that the funds must be fully transferred to the recipient before 30 June 2018. If project funds are not fully expended by this date, it is suggested that a partner organisation (e.g. a university, research organisation or primary health network) hold the funds across financial years.

This round of funding is focused on supporting translational projects and cross-network projects that span across more than one ACI Clinical Network, Taskforce or Institute. These projects should reflect the ACI research priorities.

FOR GUIDE AND APPLICATION PLEASE CLICK [HERE](#)

The application must be submitted to [Ivana.goluza@health.nsw.gov.au](mailto:Ivana.goluza@health.nsw.gov.au) by 5pm AEST on 6 April 2018.

**Publications**

**“GUIDELINES FOR ADULT STROKE REHABILITATION AND RECOVERY”**

JAMA Clinical Guidelines Synopsis
February 27, 2018
Michelle Gittler, MD1; Andrew M. Davis, MD, MPH2

[http://Guidelines for Adult Stroke Rehabilitation and Recovery](http://Guidelines for Adult Stroke Rehabilitation and Recovery)

Stroke affects more than 800,000 people each year in the United States. Between 2000 and 2010, stroke-related deaths declined by 35% in the United States, and 80% survive the acute event.

There is wide diversity in stroke patients and stroke severity, but of those admitted to a hospital, about 65% of survivors receive rehabilitation services, and more than 30% have persistent deficits in autonomy, engagement, and fulfilling societal roles.

Clinicians should be familiar with the levels of care of poststroke rehabilitation and services, which include the acute hospital stay and postacute continuum of care, with care delivery sites differentiated by intensity of care, location of care, and needs for skilled nursing.

The AHA/ASA guideline weaves evidence and consensus to guide stroke rehabilitation management throughout the spectrum of care and promote return of patients to their communities.

**How to Improve Stroke Care in Your State and Region**

Changing systems of care to optimize timely treatment for stroke.
Recruitment Opportunities

LIVERPOOL STROKE CNC

The Stroke CNC 3 position has been advertised (2 days a week) The successful applicant will job share with Angela Firtko

Applications Close: 21 Mar 2018
Interview Date Range: 2 - 6 Apr 2018
Apply via link here

Online Available Resources

Please see below online educational resources that are available.

BANSKSTOWN HOSPITAL QUALITY IMPROVEMENT

DEVELOPMENT OF THE ACUTE STROKE SERVICE 'BEAST' AND ECR TRANSFER PROTOCOLS

Dr Finton O'Rourke
Angela Firtko CNC

To view click HERE

SCREENING FOR POST STROKE DEPRESSION

Jeff Rogers , PhD MPsyc(Clin Neuro) BSc
Psychology Department
Prince of Wales

To view click HERE

QUALITY IN ACUTE STROKE CARE (QASC) TRIAL

This website seeks to provide clinicians with information on the QASC trial, access to the QASC Fever Sugar, Swallow (FeSS) protocols, advice on implementation strategies and other useful links and resources.

To view: please click here

The QASC trial was conducted throughout 19 NSW stroke units from 2005 – 2011 (ACTRN12608000563369). This project developed, implemented and rigorously evaluated, using a clustered randomised controlled trial design, an intervention to improve evidence-based management of fever, hyperglycaemia and swallowing management in the first 72 hours following acute stroke. Our results showed that patients who were cared for in stroke units that were randomised to the intervention arm of the study were more likely to be alive and independent at 90 days when compared with patients who were cared for in stroke units who had been allocated to the control arm. They were also more likely to have their temperature and blood glucose monitored and to receive a swallow screen within 24 hours.

July 2017

'Integrated Nurse-led Atrial Fibrillation Clinics'
by Dr. Jeroen Hendrik, Centre for Heart Rhythm Disorders, South Australian Health and Medical Research Institute (SAHMRI), University of Adelaide and the Royal Adelaide Hospital
https://vimeo.com/226380454

August 2017

"How evidence-based stroke care can improve patient outcomes"
by A/Professor Dominique Cadilhac, The Florey Institute, Monash
https://vimeo.com/254593457

For more information or to join the Network contact:
Kate Jackson
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02 9464 4614
kate.jackson2@health.nsw.gov.au

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