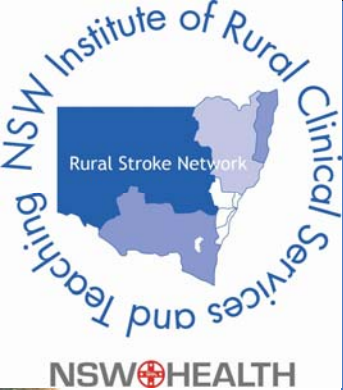


# NSW Rural Stroke Project

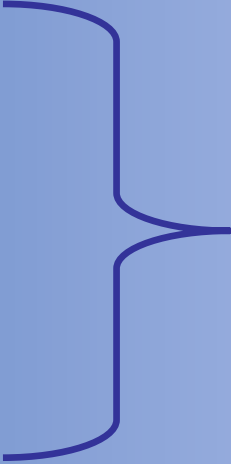
NSW Rural & Remote  
Health Conference  
November 2008

Presented by Melissa Gill



# NSW Rural Stroke Project Officer

2 year position





# Project Overview

Rural Stroke Services

Rural Stroke Networks

Rural Stroke Education

Research





# Rural Stroke Services

*To review, develop, pilot & evaluate potential models of organised stroke services in rural NSW*



# Timeline

## Phase 1

Review and Develop

March 06 – Feb 07

## Phase 2

Implementation

April 07 - Ongoing

## Phase 3

Evaluation

2009

Evaluate  
current rural  
stroke  
services

Develop potential rural  
stroke services models

**Trial Rural  
Stroke Service  
Models**

Sustainability

External evaluation  
of rural  
stroke models



# Rural Stroke Funded Models

Hub and Spoke



Stroke Units

Stroke Care  
Coordinators

Coffs Harbour

Tamworth

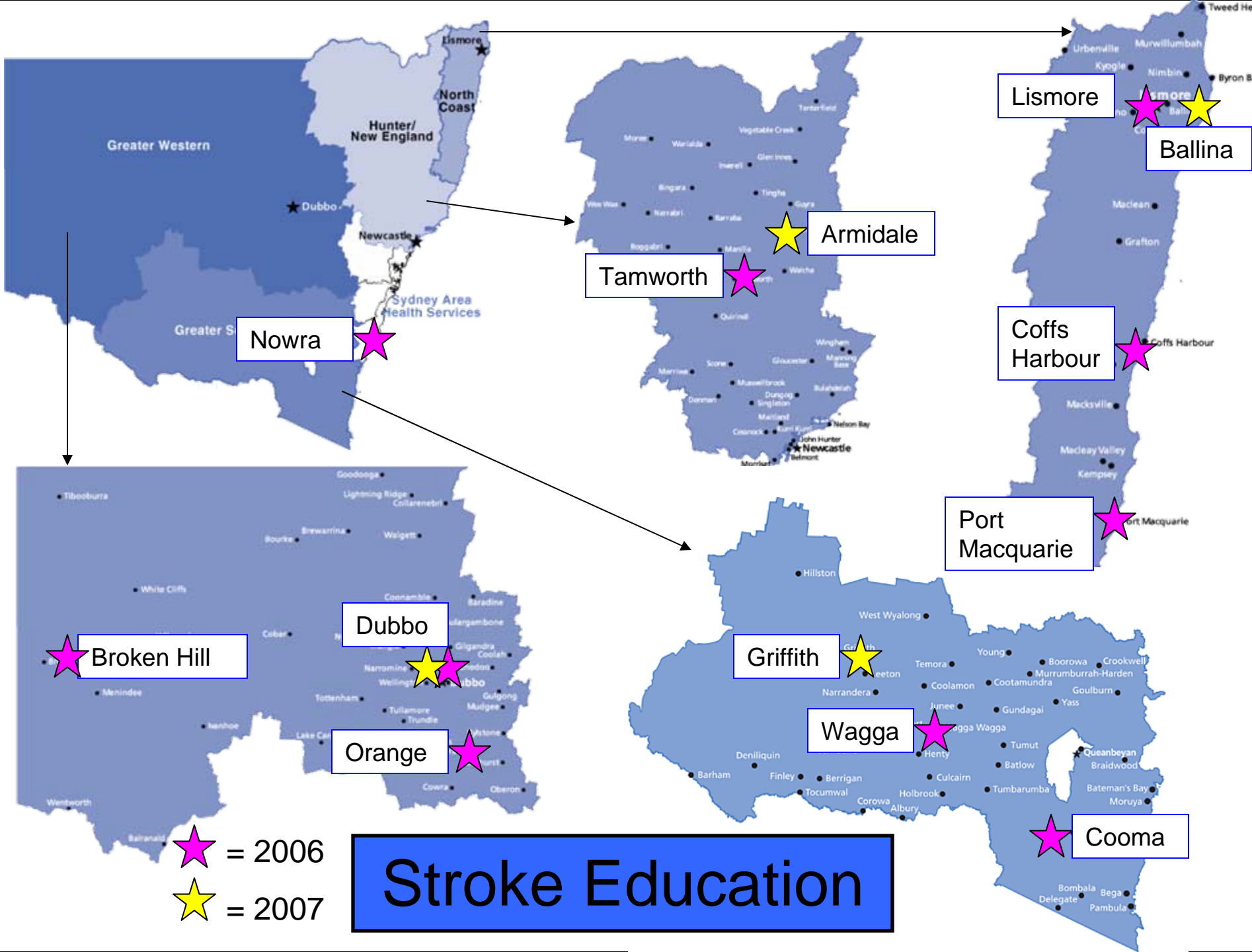




# Rural Stroke Education

*To provide evidence-based stroke education to clinicians in their local area*

Ballina Stroke  
Forum –2007  
PANEL





 = 2006  
 = 2007

# Stroke Education

# Rural Stroke Education

- Stroke clinical champions
- Raised profile, commitment & interest in stroke
- Local stroke networks
- Capacity building
- Media exposure
- Impetus to enhanced rural stroke services

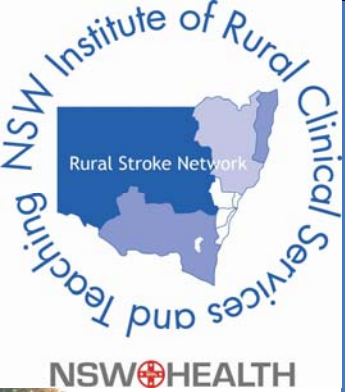
Lismore Stroke Forum -2006



# Rural Stroke Distribution List

*To provide support, share information and foster links amongst rural clinicians interested in stroke.*





# Rural Stroke Distribution List

- Statewide rural list established
- Links between local and metropolitan clinicians
- Vehicle for information dissemination
- Resource sharing
- Q & A regarding stroke management
- Links to Stroke Services NSW



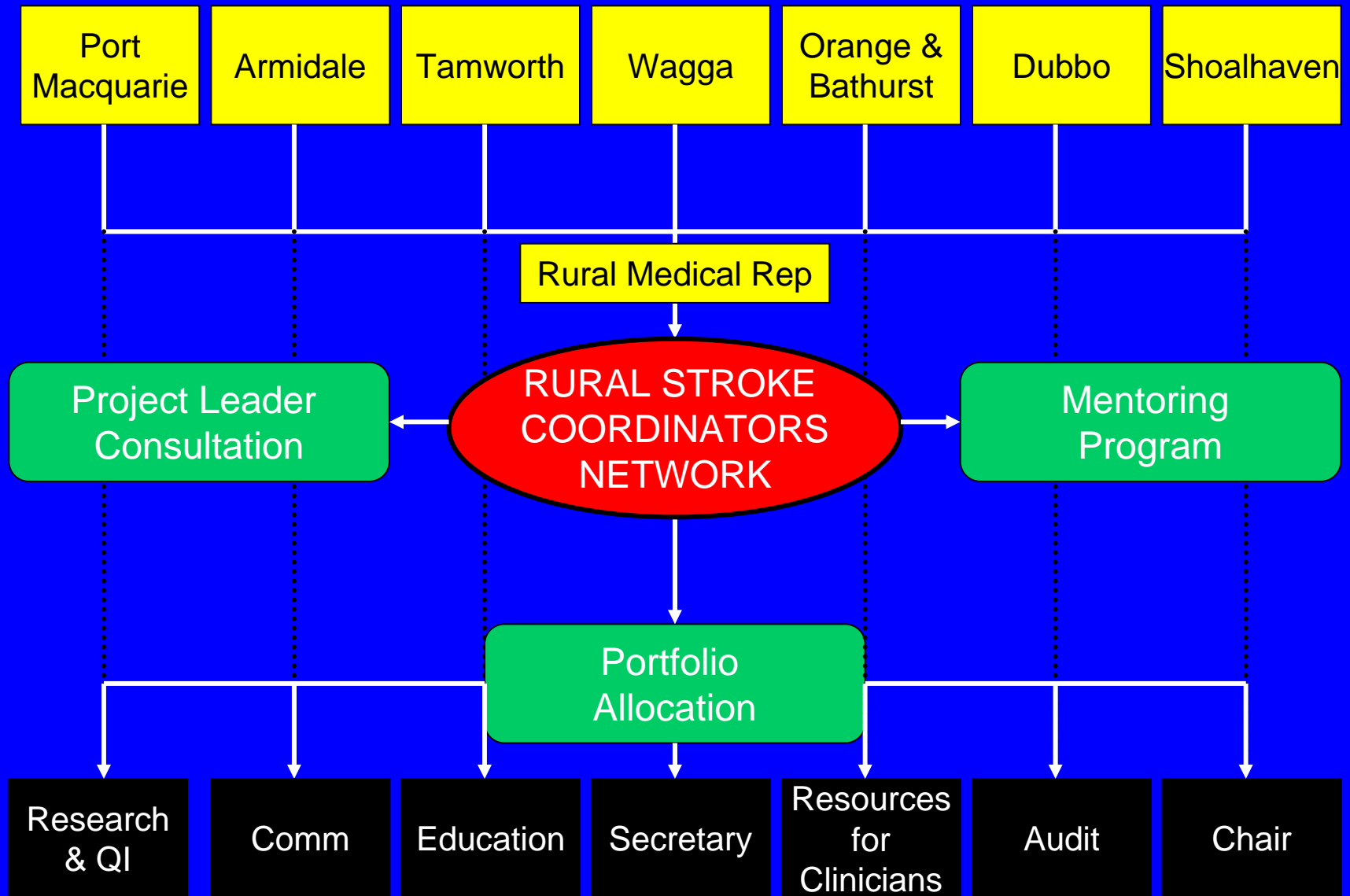


# Sustainability

*Development of a sustainable approach for rural stroke services beyond the life of the Rural Stroke Project*



# Sustainability





# Mentoring Program

- Metropolitan SCC mentors for rural SCC
- Proforma for structure
- Determined prior to commencement
- Face to face important to establish links
- Extension of program
  - Exchange program
  - Site visits
- Two way process



# Evaluation

*Lessons & experiences that we have learnt so far from the process of establishing state-wide rural stroke services through a capacity building approach*



# Key Learning Points

**Network Structure**  
 Sharing of skills beneficial  
 State-wide approach  
 Portfolio roles  
 Leadership – roles  
 Varying Models



**Partnerships**  
 Leadership  
 Mentoring Program

**RSP**  
 Integral  
 Project End

**Education**  
 Forums  
 All levels AHS  
 SCC

**AHS**  
**Accountability**  
 Funding - quarantine  
 Engagement  
 Management

**Changing Clinical Practice**  
 Challenges  
 Education  
 Feedback

**Clear Direction**  
 Management – AHS versus SSNSW  
 For rural stroke services



# Barriers

AHS Processes

Workforce Issues

Delivery of Stroke Services

Local Leadership



Submission Process

Resistance to change

Time

Lack of relationships

Management Support



# Key Achievements

Planned & coordinated approach

Designated Drivers SCC's

Personal Achievements

Raised profile of stroke

Clinical Practice



# Summary

*The approach used in the establishment phase of the RSP provides a comprehensive, ongoing statewide approach to clinical service design and implementation that could be transferred to other clinical areas.*



# Acknowledgements

- Di Marsden, HNE Health
- Linda Cutler, Jenny Preece - IRCST
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- Rural Stroke Coordinators Network
- Stroke Service NSW Clinicians
- Rural Stroke Clinicians