## Stroke Recovery Association of BC - VISION 2020 News Update for SRABC members from the SRABC Provincial Board of Directors February 2013

## 1. Planning for the Future

On November 17, 2012, The Board of Directors held a training session for our new Board of Directors. At this meeting we decided that we need to create a new strategic plan to guide SRABC in the coming years. With this in mind, we are using *VISION 2020* as the working title for our plans.

By the year 2020, an additional 45,500 people in BC will have had a stroke. We need to think beyond the idea of Stroke Clubs or Branches and explore other ideas about how we can offer support to these individuals.

## 2. Sustainable Funding

SRABC has several funders. Two of the main funders are (1) Provincial Health Services Authority, and (2) Heart and Stroke Foundation.

In recent months, they have told us that we have to change what we do in order to continue to receive similar levels of funding from them in the future. It is clear that the goals of SRABC must include improving and increasing support for stroke survivors across BC. They also "acknowledge the need for SRABC to evolve into an organization capable of delivering more uniform and effective stroke recovery programs in line with other provincial stakeholders." In other words, we must reach a greater percentage of the thousands of new stroke survivors each year in BC in more effective ways.

It is apparent that we will not be able to secure sustainable, long-term funding from these organizations for our current Branch operating structure with our current program plans. We must evolve.

To continue to receive funding from these organizations, what will this mean for SRABC in the future?

- Our funders expect SRABC to upgrade our program delivery.
- Our funders expect SRABC to do more than offer social and recreational activities to a small portion of the stroke survivors in BC.
- Our funders expect SRABC to do more than serve the current membership of 605 stroke survivors through our Stroke Clubs/Branches.

# 3. Branch Development Project - Final Report

In order to better understand the current SRABC capabilities, the five Regional Coordinators

were tasked to create a detailed profile of our Branches. Their final report was presented to the Board of Directors in September 2012. This report was approved by the Board along with its recommendations.

### **Report Conclusions:**

- There is an absence of a consistent organizational infrastructure, human resource practices, governance and programming in the Branches. This has resulted in an inconsistent service delivery model for stroke recovery activities at the Branches. Branches continue to operate as autonomous and independent units, and SRABC as a whole does not have a standardised and regulated way of delivering services to stroke survivors and caregivers.
- In other words every branch is doing their own thing and we have no clear standards they must meet.
- Many Branches are satisfied with their current operating plan, and appear reluctant to change or accepting of the Association's role in setting program standards.
- This situation is no longer sustainable or effective due to the expanding need for stroke recovery services and a growth in expectations of SRABC from PHSA, Heart and Stroke Foundation, regional Health Authorities, hospitals, clinics, rehabilitation centres, community partners, and most importantly from the stroke survivors and caregivers that we are not currently helping.

### 4. Coordinator Funding

The decision to withdraw funding for four Branch Coordinators was based on an assessment of the current situation at the four Branches, including the following:

- Small numbers attending
- No branch governing committee operating effectively
- No branch bank account
- No formal programming in place
- No branch growth

As outlined above, SRABC needs to transfer the limited funding we have to new opportunities that reach a greater number of stroke survivors. We need to develop a better approach.

All of the Branches concerned have chosen to continue operating without the financial support of Coordinator funding from SRABC. Our thanks go to the Branch Coordinators and members in these communities affected by this decision – for their commitment and involvement over the years, and for their interest in continuing to provide support. We hope to find a way to offer formal programs again in the future.

# 5. Is running Stroke Clubs or Branches working?

SRABC currently spends approximately \$180,000 per year in Coordinator payments for program delivery. In 2012 our total membership was 1047 members, made up of:

• 605 stroke survivors

- 183 caregivers
- 259 volunteers

The amount paid to Coordinators at a Branch is the same, irrespective of the numbers attending the group. The question becomes – Is this model the best way of addressing the needs of stroke survivors and caregivers throughout BC? One way to answer this is to look at the research.

### 6. What does current research tell us?

We have to base what we do on research – on what the literature is telling us is the best way to plan stroke services in our communities. This is known as 'Best Practices'. SRABC has looked into what is considered to be the best practices in Canada, the USA, the UK and other countries. We have discussed this with the health authorities, so we can better understand what makes up a stroke recovery program. We are also in touch with Stroke Recovery organisations across Canada to learn about how they offer programs and services.

Best Practices in Stroke Recovery can be roughly summarised in the following 7 Point Program Outline.

- Maintain and improve mobility
- Maintain and improve communication and memory
- Provide an accepting environment for social interaction and recreation
- Create opportunities for peer support
- Support caregivers
- Increase awareness of stroke risk and impairment after stroke
- Provide system navigation services to stroke survivors and caregivers

### 6. A New Model for Stroke Recovery Programs

As our new strategic plan emerges we have to develop a new method of providing the services outlined in the 7 Point Program Outline to as many people as possible. Instead of providing service only to people who want to attend a weekly 'Stroke Club' we need to find ways of providing knowledge, tools and skills for self-management of stroke which can be made accessible via the internet, educational materials, community education sessions and joint initiatives with Provincial and Regional Health Authorities.

With that in mind we have been working on research and development to find out how we can do things better. This includes:

Completed projects:

- Financial audit of the Branches
- Regional Coordinators Project
- Stroke Strategy Prototype Project-North Shore Stroke Recovery Centre Evaluation
- Stroke Strategy Prototype Project-Fraser Health STart Project
- Fraser Health 'Bridging the Gap' Stroke Care Pathway Project
- Fund Development Planning Survey

- Communications Planning
- SRABC/March of Dimes Stroke Recovery Literature Review and Survey of Stroke Recovery Organisations in Canada

### Projects in progress:

- SRABC/March of Dimes National Stroke Recovery Symposium Planning
- Fraser Health Community Rehabilitation and Reintegration Project
- SRABC Strategic Planning
- North Vancouver Island Stroke Recovery Navigator Program
- Regional Stroke Recovery Days

### 7. What of the future?

In the next two years, we will need to work out how operating the SRABC Branches will fit in with our new strategic plan in addition to considering the requirements of our funders.

There are many options to be considered and investigated. No plan has yet been decided and we are planning to actively and thoroughly investigate many ideas.

One possibility for the future operating and program delivery structure would be the development of three levels of Branch programs.

- Stroke Clubs which focus on their own members and provide a range of social and recreational activities such as seasonal celebrations, outings, guest speakers and games.
- Stroke Support groups which obtain referrals from outside sources such as health and social services and other non-profits, and offer programs such as peer support, caregiver support, physical exercises, communication and language groups.
- Stroke Recovery Centres which are partnered with the Health Authority and offer courses in stroke recovery such as 'Living with a Stroke', as well as professionally-facilitated peer support, caregiver support, physical fitness and mobility and healthy living for secondary stroke prevention.