



Transitional Care Stroke Intervention (TCSI) Study

Optimizing hospital-to-home transitions for older adults with stroke and multimorbidity.

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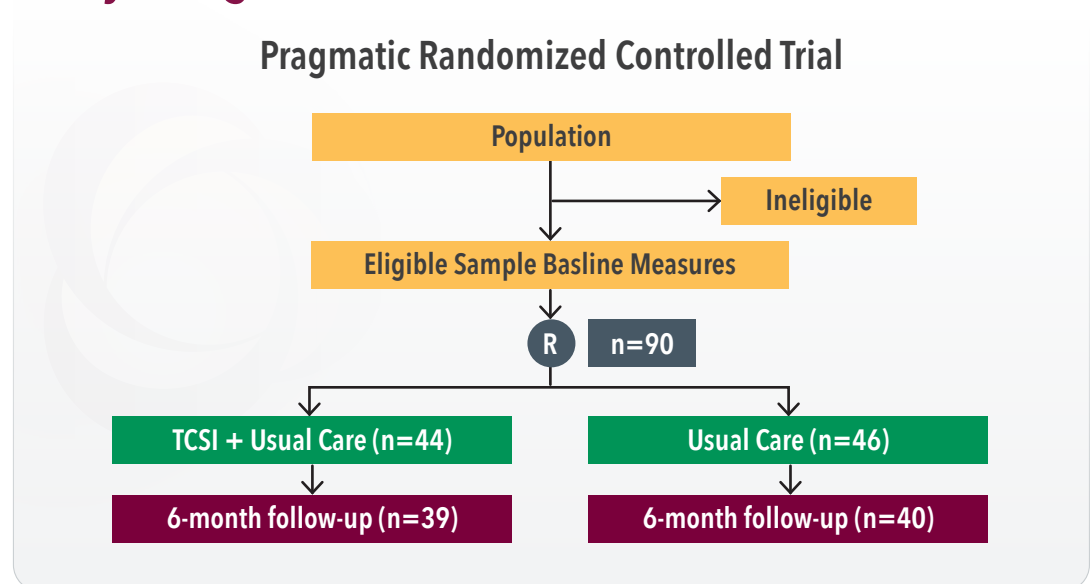
Research Objective:

To test in real-world clinical practice the effectiveness of the Transitional Care Stroke Intervention versus usual care on health outcomes, patient experience, and health and social service use costs in older adults with stroke and multimorbidity.

Why?

Transitions from hospital-to-home for stroke survivors are often fragmented, resulting in hospital readmissions, reduced quality of life, patient satisfaction and safety, and increased caregiver burden.

Study Design:



Baseline characteristics of participants (n=90)

60%
were male

Average of
70 years
of age

78%
had experienced
their first-ever
stroke

Average of
7
chronic conditions
in addition
to stroke

40%
had three or more
risk factors
for stroke

25%
had depressive
symptoms

Eligibility criteria:

- ≥ 55 years
- Hospitalized for a stroke within the last 12 months
- Two or more chronic conditions in addition to stroke
- Referred to outpatient stroke rehabilitation services
- Discharged to the community (not hospital or Long-term care)
- Access to telephone, tablet or device with video capabilities and internet connection
- Understand English or have a translator
- Mentally competent to give informed consent or have a substitute decision-maker

Study Sites:

Hotel Dieu Shaver Rehabilitation Center and Regional Rehabilitation Centre, Hamilton Health Sciences

Outcomes:

Primary outcome:

- Risk of hospital readmission (all-cause) after six months

Secondary outcomes:

- Number of hospital days and readmissions
- Survival rate to first hospital and Emergency Department (ED) visits readmission
- Number of ED visits
- Health and social service use costs
- Physical and mental functioning
- Stroke self-management
- Patient experience
- Depressive symptoms

Results

Participation in the TCSI improved physical functioning, stroke self-management and patient experience in older adults with stroke and multimorbidity without increasing total healthcare costs.

Discussion

- The results provide evidence for the effectiveness of an integrated intervention to optimize transitional care outcomes for older adults with stroke and multimorbidity.
- This study built upon the results of our study which showed that the TCSI was feasible to implement in real-world clinical practice and resulted in reduced hospital readmissions and emergency department visits.

Implications for future research

Future research should involve a larger pragmatic trial to determine intervention effectiveness in diverse geographic and ethnic setting and include a full economic evaluation.