

Terms of Reference

Telestroke Working Group

Definitions for the purpose of this document:

1. The term “Telestroke” was proposed by Levine and Gorman to define the use of telemedicine in acute stroke intervention. Levine and Gorman, Telestroke: the Application of Telemedicine for Stroke, *Stroke*, 1999;20:464-4.

Purpose

The Telestroke Working Group (TWG) provides guidance and assistance in the development of Telestroke services in British Columbia.

The Responsibilities of the Telestroke Working Group

- To direct the formation of required sub-committees and identify committee leadership as required.
- To monitor work of the sub-committees, ensuring that issues are resolved and tasks completed.
- To work with and offer advice to the BC Stroke Strategy Steering Committee in resolving issues that may impede Telestroke project progress.
- To participate in on-going efforts to keep all stakeholders informed of the project objectives, requirements and dependencies.
- To formulate recommendations based on sound analysis of current conditions and data collected as a part of the service development process of the project to ensure the continuous growth of Telestroke and its integration into everyday healthcare services in the province of British Columbia.

Terms of Reference

- The TWG will consist of representatives from various stakeholder groups and will include regional representation.
- The TWG will fulfill its responsibilities for the duration of the project, up to Spring 2010
- The Project Manager of the BC Stroke Strategy will have a reporting relationship to the TWG, who are acting as an oversight body during the Telestroke Project.
- The Chair of the TWG has a reporting relationship to the BC Stroke Strategy Steering Committee and will accept responsibility of liaising with the Project Manager as needed
- Agendas for regularly scheduled meetings will be drafted by the Provincial Telestroke Coordinator and approved by the Chair before being circulated to the members.
- Agendas will be distributed within 5 working days of the meeting.
- Notes of decisions and actions will be recorded and circulated to the members and the Chair of the BC Stroke Strategy Steering Committee. They will be reviewed at the start of the next meeting for amendments or additions.
- Recommendations put forth from the Working Group, must be agreed upon by a simple majority, documented and forwarded to the BC Stroke Strategy Steering Committee , prior to implementation.

Membership

- The membership structure of the Telestroke Working Group will be as follows:
 - 1 Clinical and Telehealth representative from Fraser, Interior, Northern, Provincial Health Services, Vancouver Coastal and Vancouver Island Health Authorities
 - HealthlinesBC (1)
 - Ministry of Health, a representative from the Health Authorities Division and the Director of Telehealth
 - Advocacy and Stakeholder Relations, HSFBCY (ex-officio)
 - Telestroke Clinical Coordinator, HSFBCY (ex-officio)
 - Provincial Telestroke Coordinator, HSFBCY (ex-officio)
 - Project Manager, Stroke Strategy Project, HSFBCY (ex-officio)
- Membership will be for the duration of the project and if required, replacements for members, will be approved by the Chair and the Project Manager of the BC Stroke Strategy.
- This is a voluntary committee.

Schedule of Meetings

Quarterly or as determined by the Chair