

Moving the Dial of Stroke Care

The Sixth SSNAP
Annual Report

Stroke care received for patients admitted to hospital between
April 2018 to March 2019



SECTION A: Getting to Hospital for Urgent Treatment

Median time between onset of symptoms and arrival at hospital



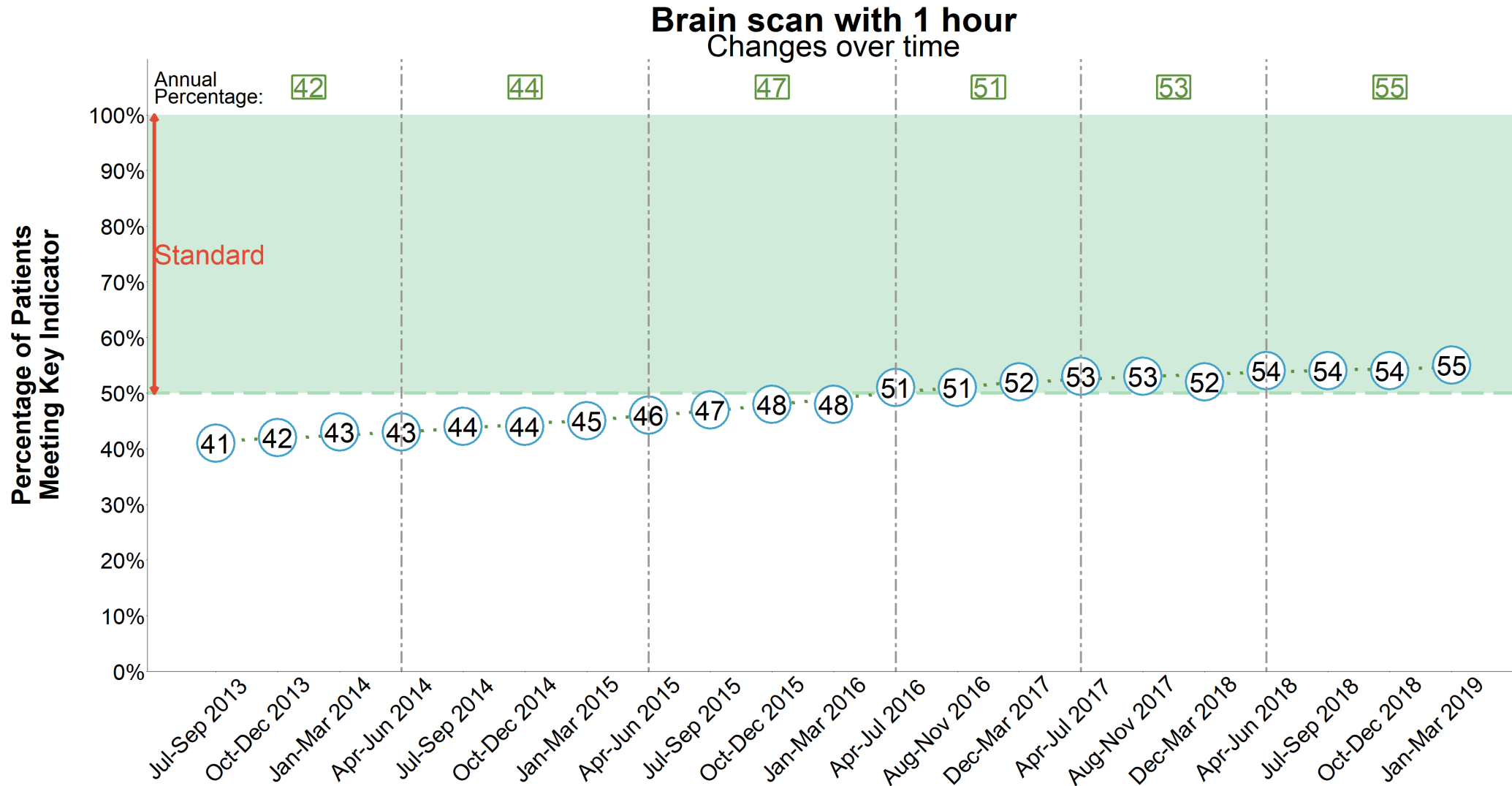
2013/14: 2 hours 25 min



2018/19: 3 hours 06 min

For seven out of ten patients for whom the onset time is known, the onset to arrival times to hospital have increased over the 6-year period.

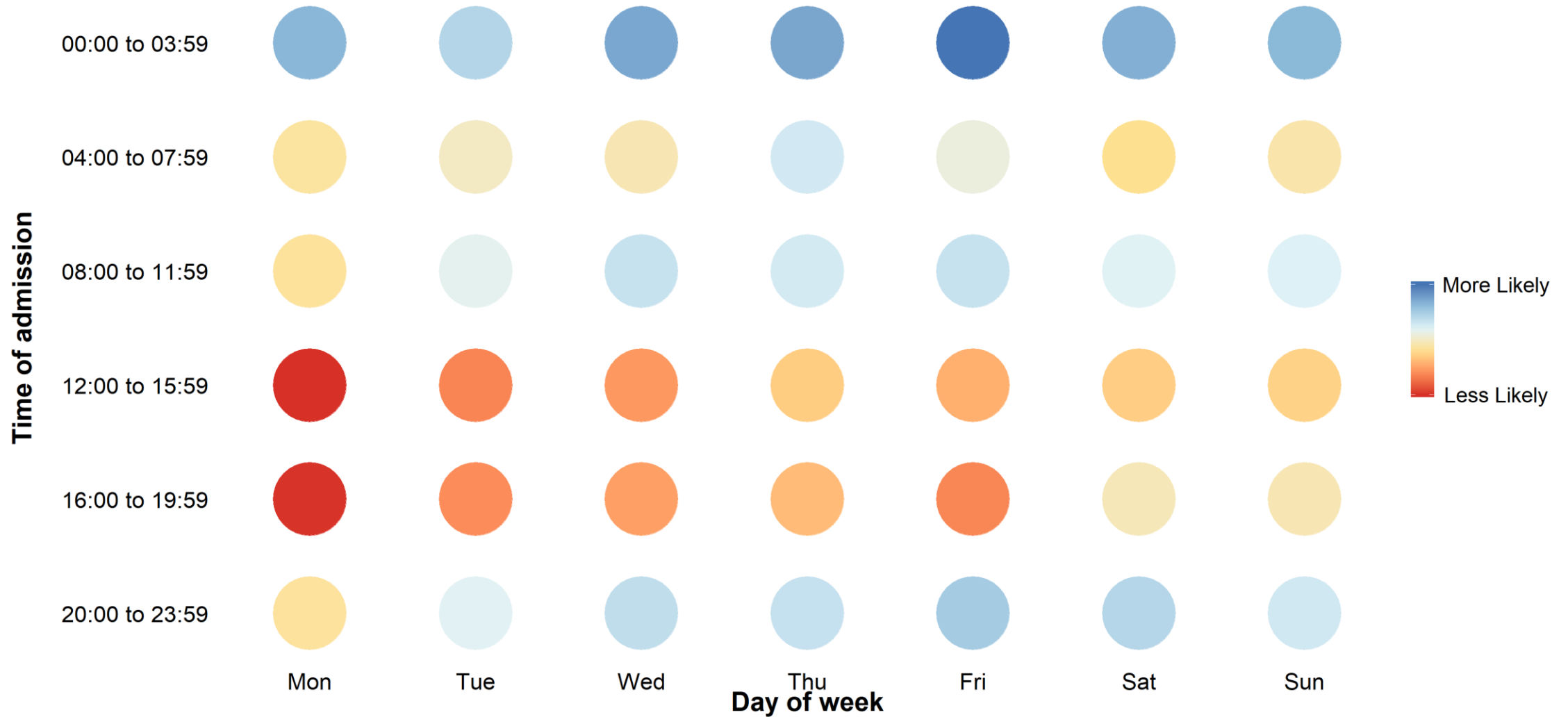
SECTION B: Urgent Scanning



Source: Sentinel Stroke National Audit Programme (SSNAP) July 2013 to March 2019 National Results
Item reference: G6.9

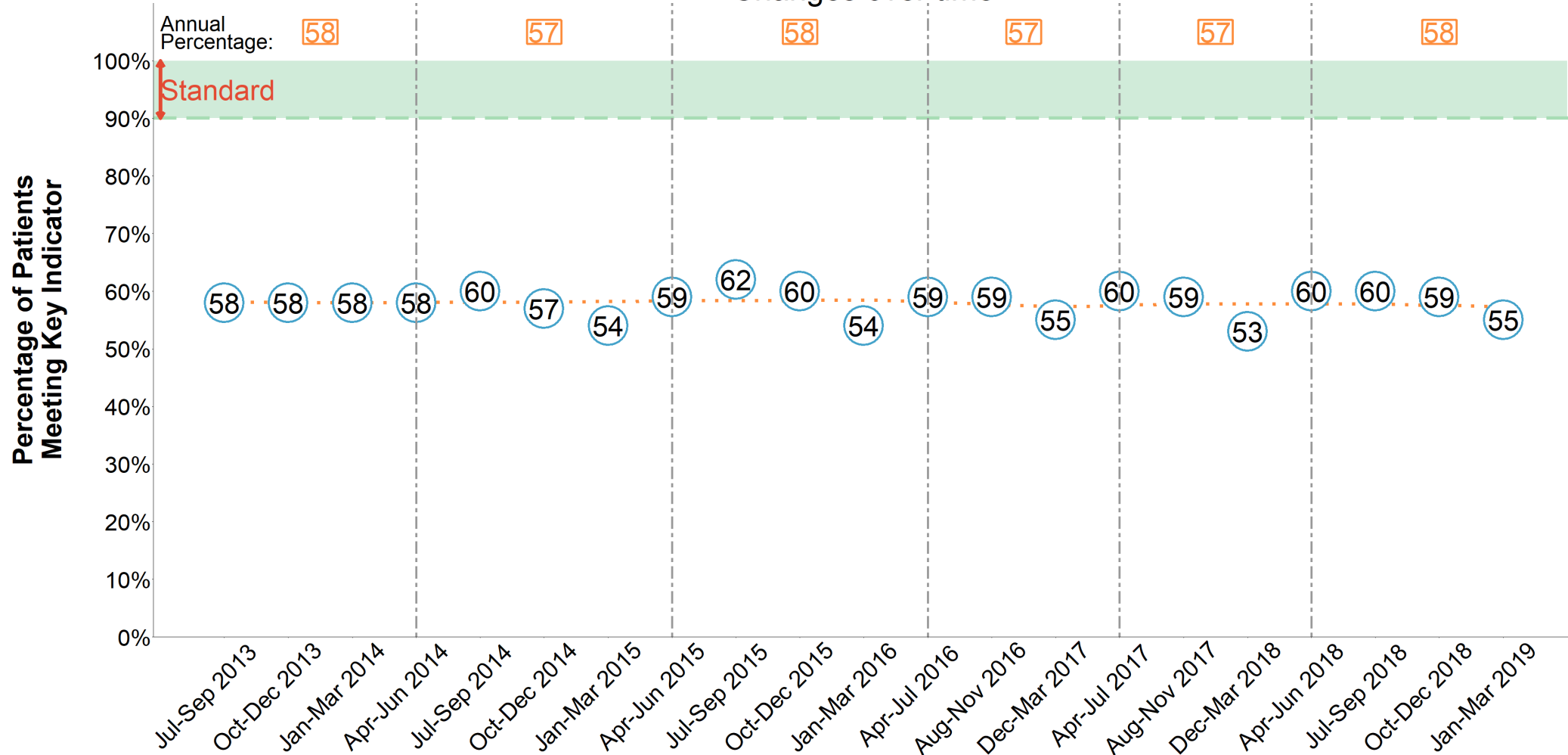
Brain scan

Likelihood of getting a brain scan within one hour of arrival at hospital



SECTION C: Stroke Unit Care

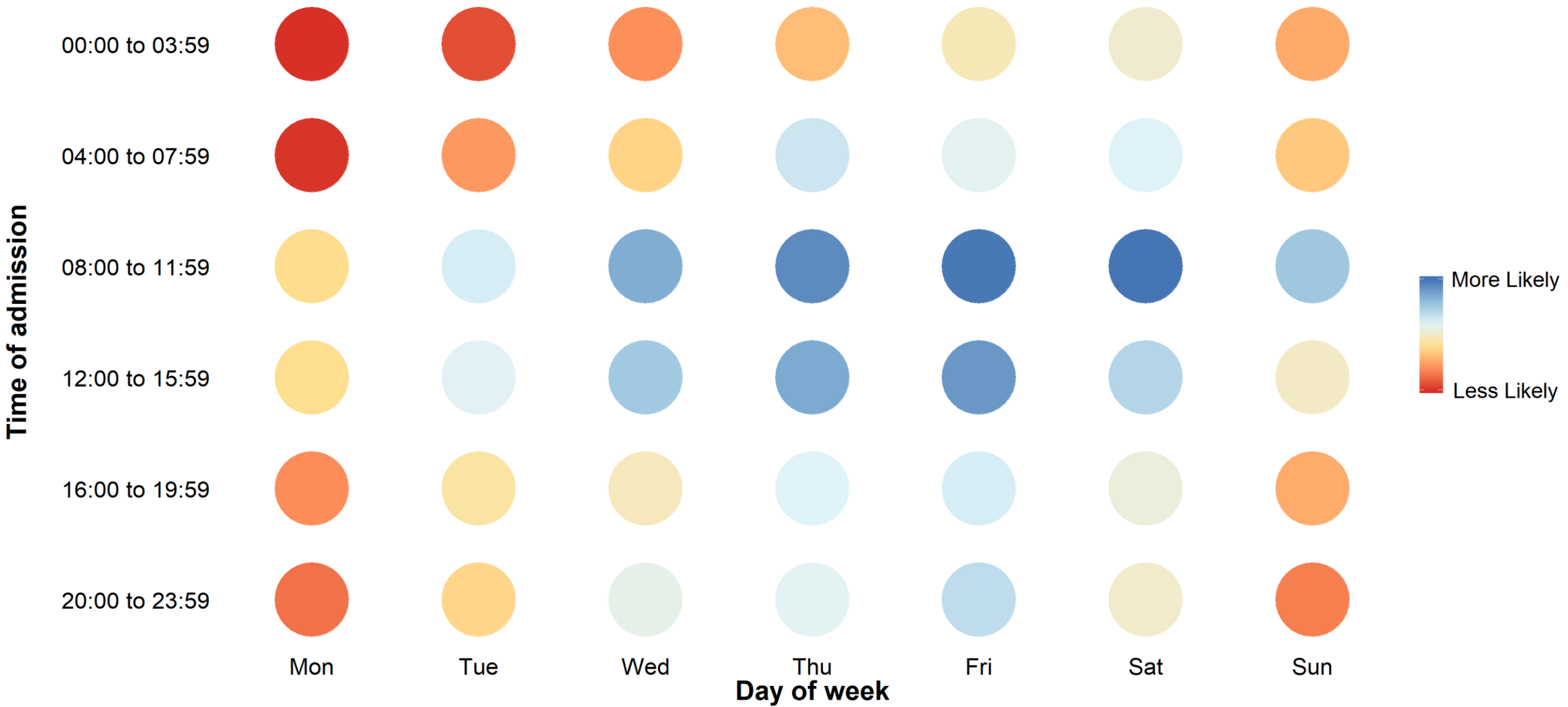
Stroke unit admission within 4 hours Changes over time



Source: Sentinel Stroke National Audit Programme (SSNAP) July 2013 to March 2019 National Results
Item reference: G7.18

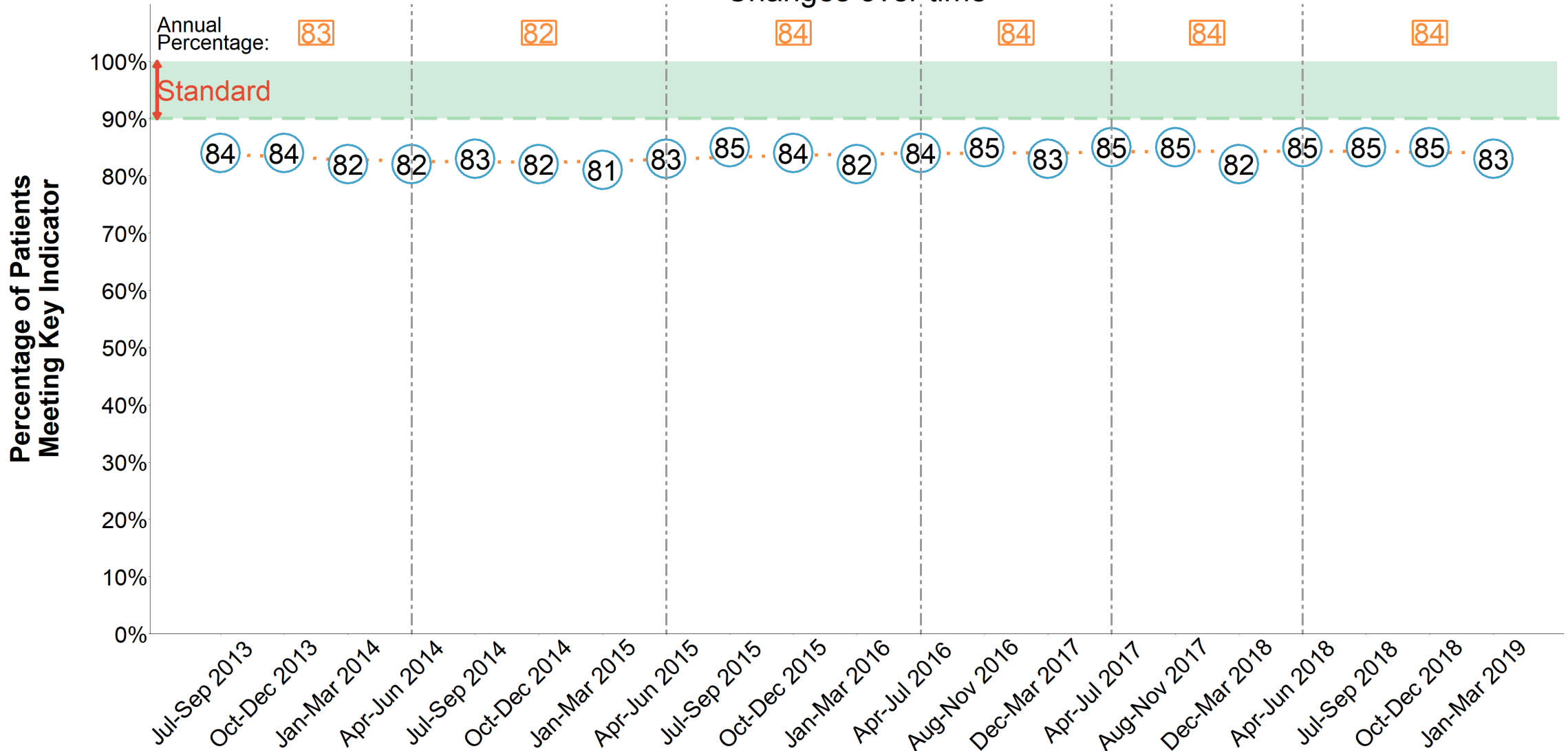
Stroke Unit Admission Within 4 Hours

Likelihood of direct admission to a stroke unit within four hours of arrival at hospital



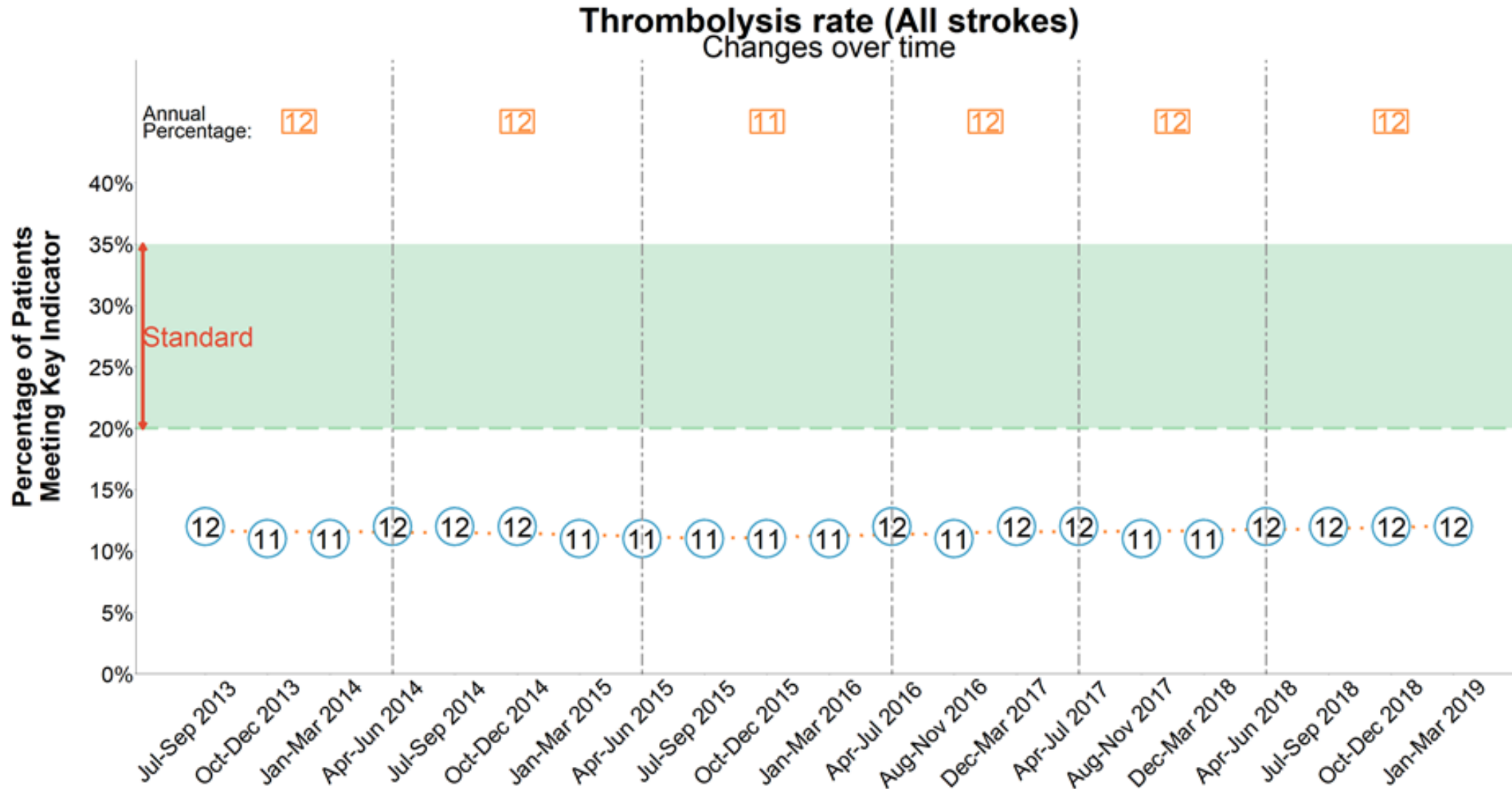
Percentage of patients who spent at least 90% of their stay on stroke unit

Changes over time



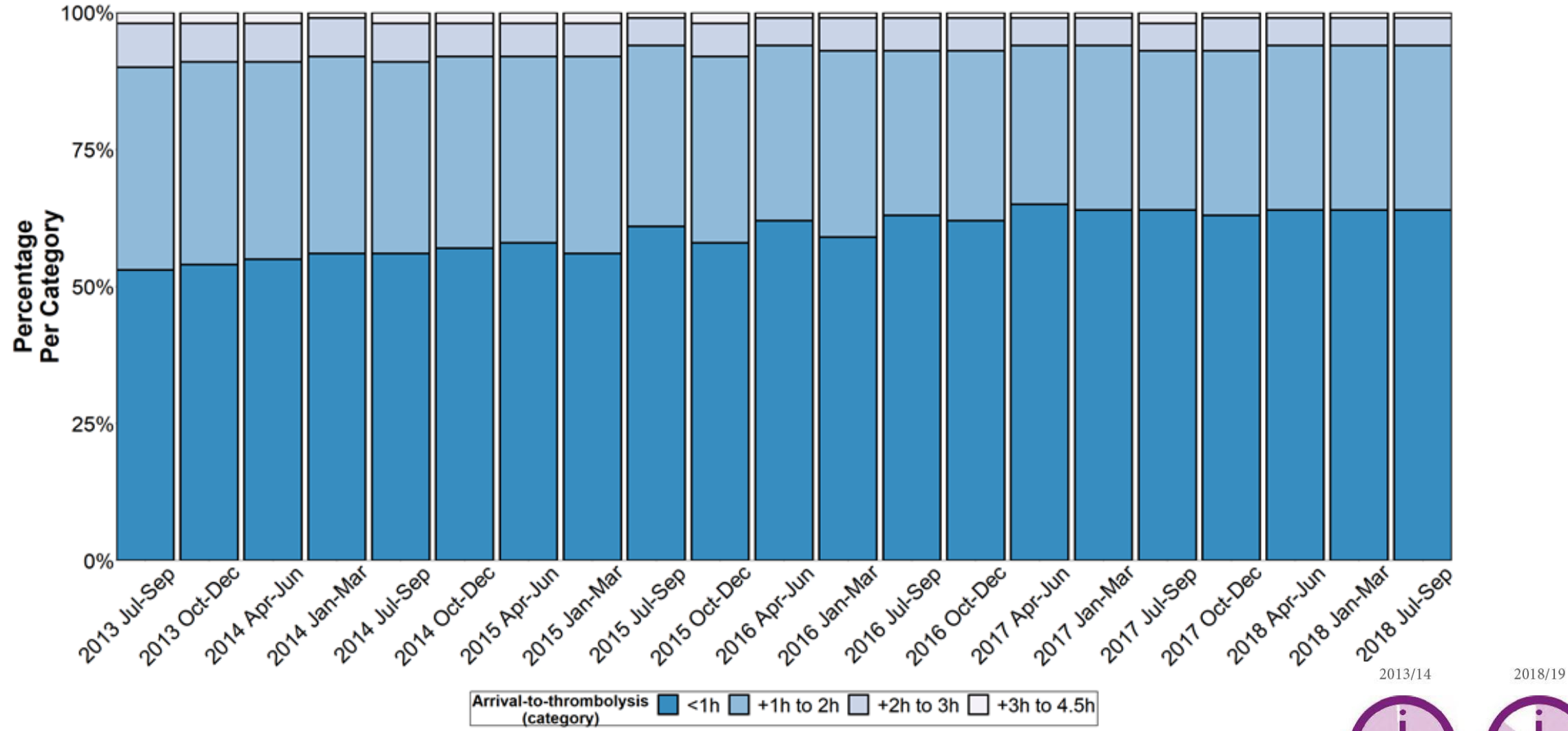
Source: Sentinel Stroke National Audit Programme (SSNAP) July 2013 to March 2019 National Results
Item reference: J8.11

SECTION D: Thrombolysis



Source: Sentinel Stroke National Audit Programme (SSNAP) July 2013 to March 2019 National Results
Item reference: G16.3

Door to needle times



Source: Sentinel Stroke National Audit Programme (SSNAP) July 2013 to March 2019 National Results

2013/14



59min

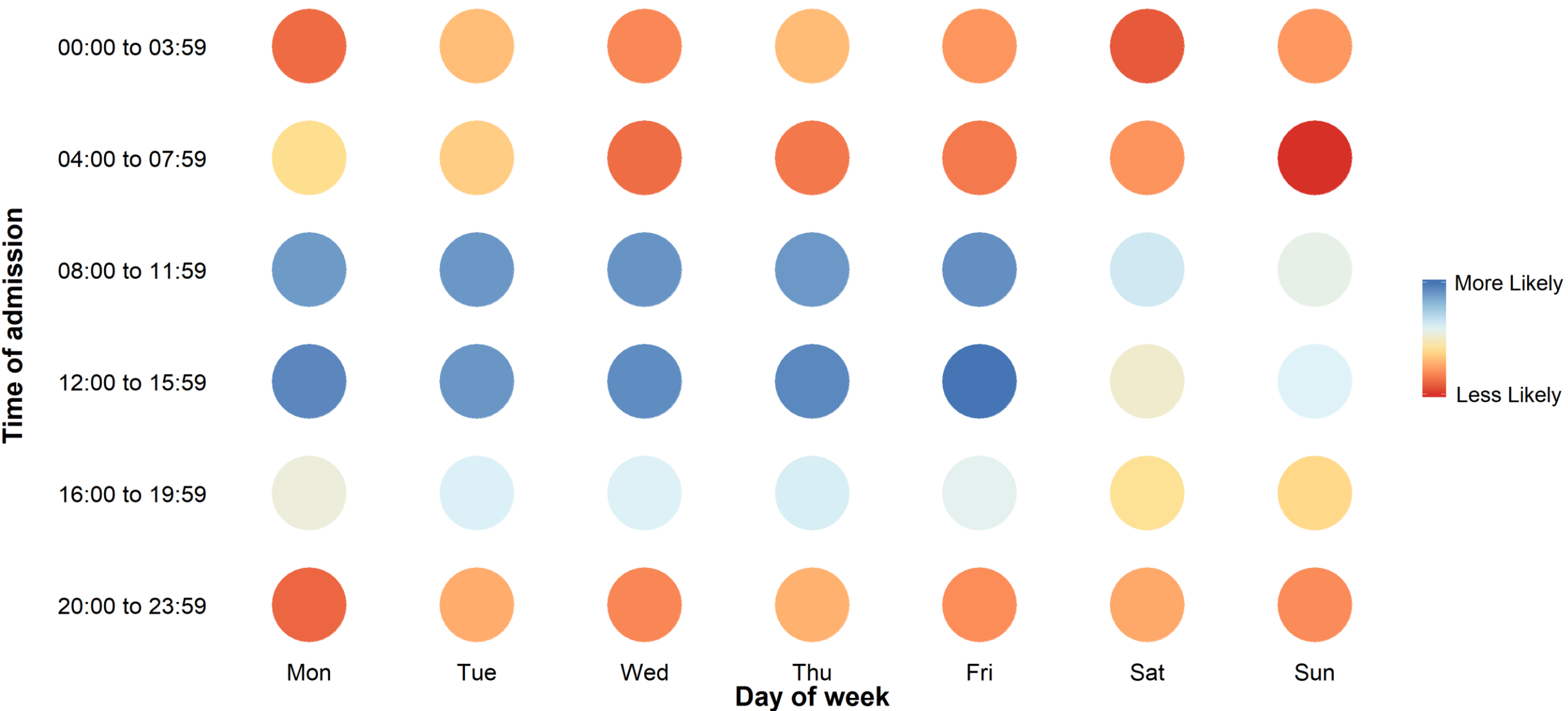
2018/19



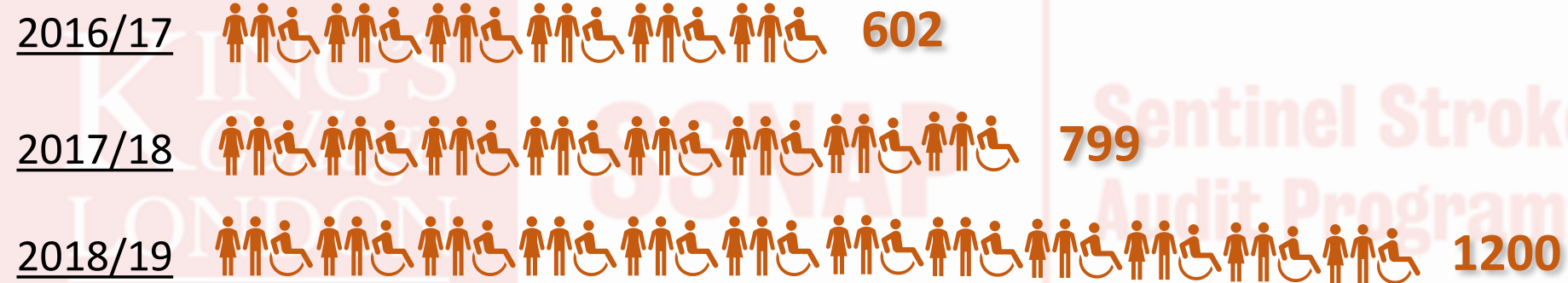
52min

Thrombolysis Within 1 Hour

Likelihood of receiving intravenous thrombolysis within one hour of arrival at hospital

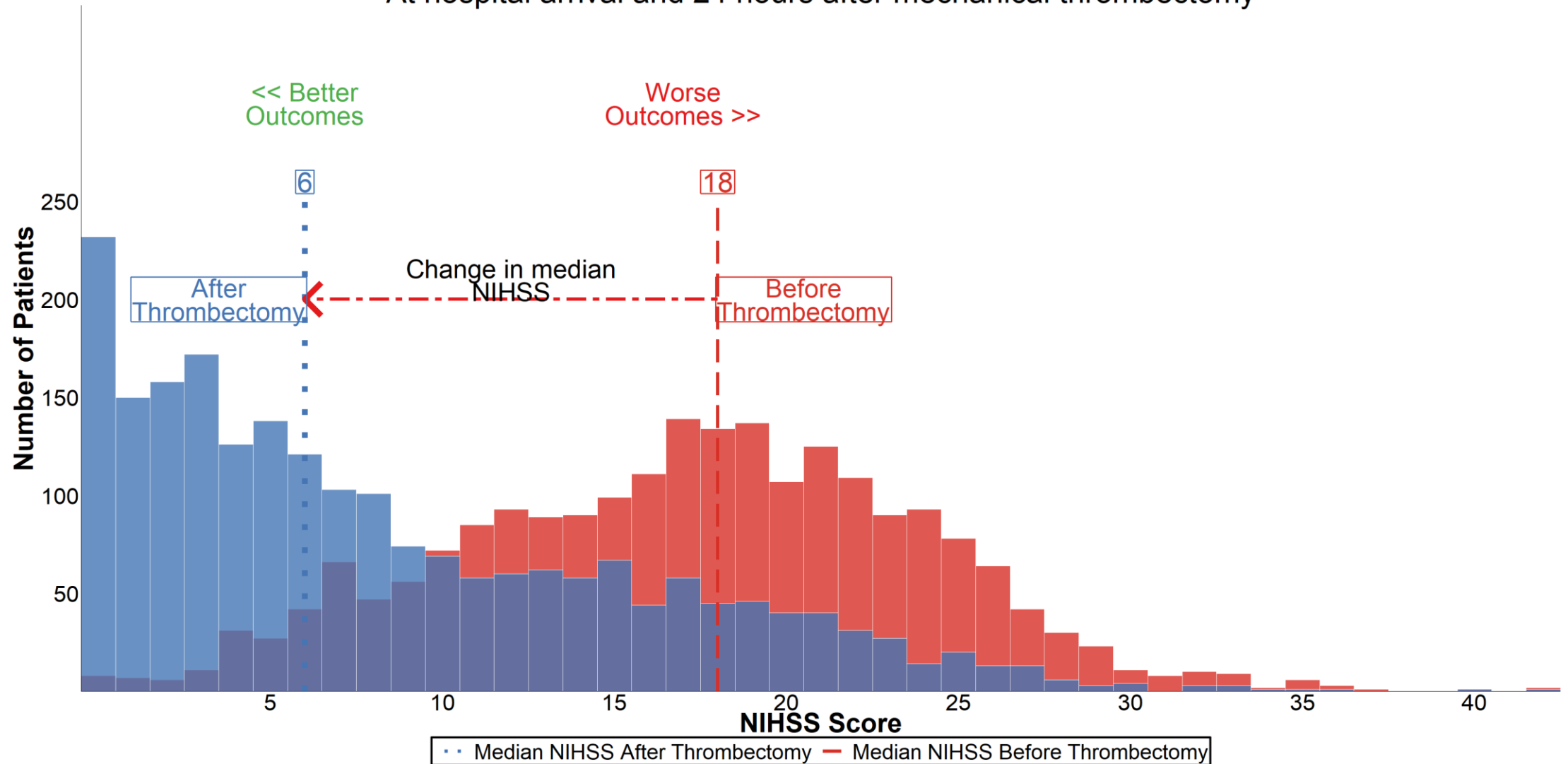


SECTION E: Thrombectomy



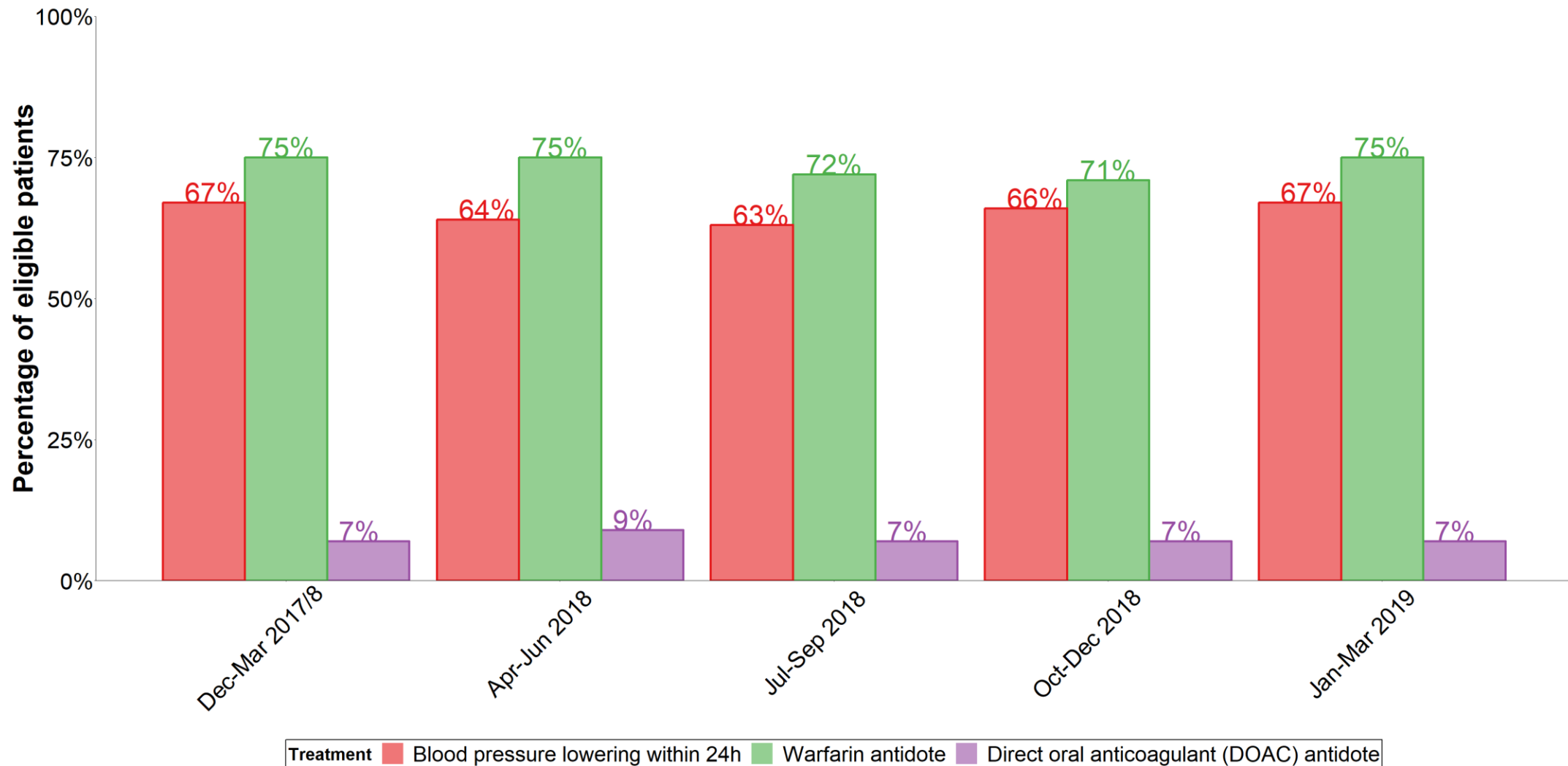
Number of patients who received intra-arterial interventions

Change in National Institutes of Health Stroke Scale (NIHSS) At hospital arrival and 24 hours after mechanical thrombectomy



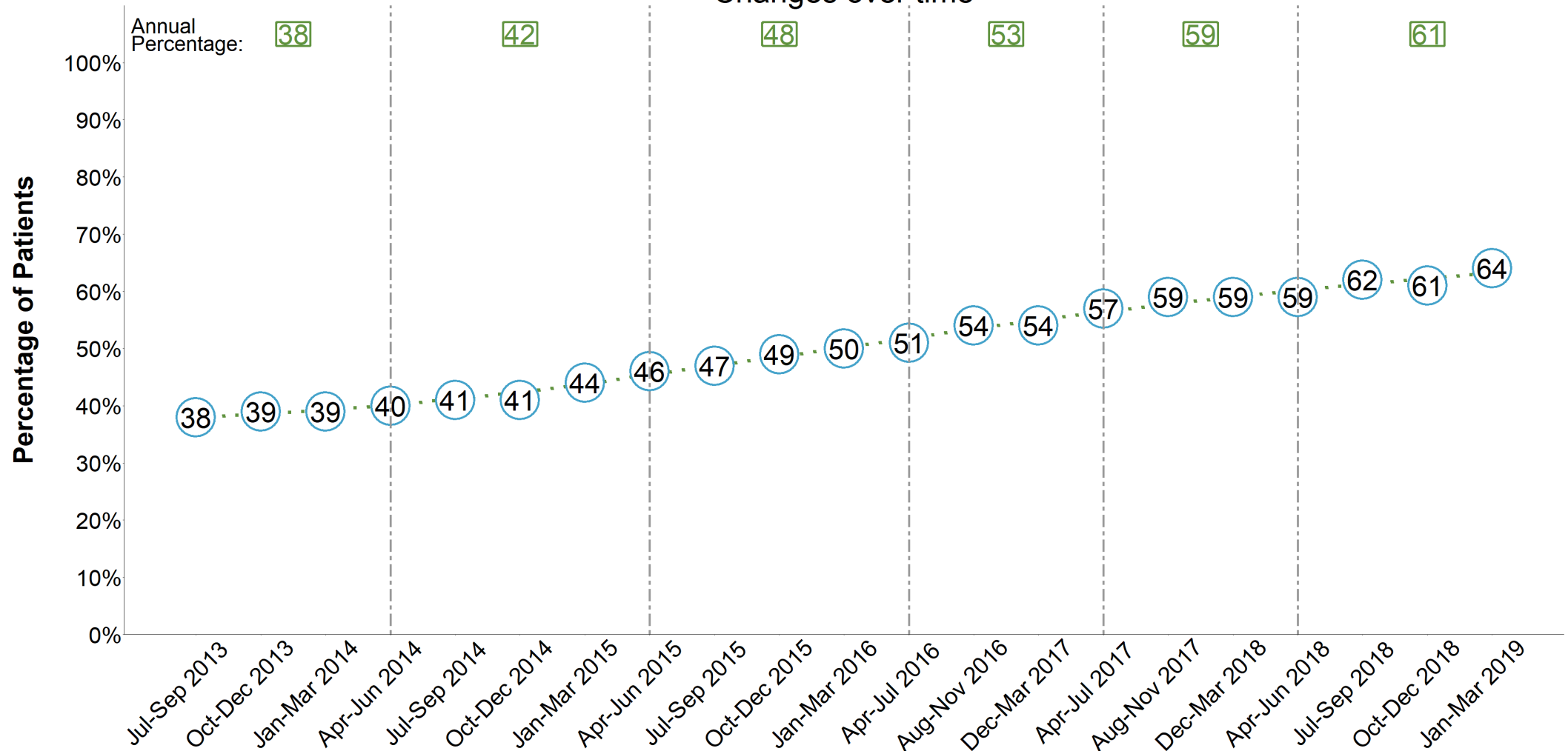
SECTION F: Improving Care for Haemorrhagic Stroke Patients

Intracerebral haemorrhage management



SECTION G: Treatment for Irregular Heartbeats

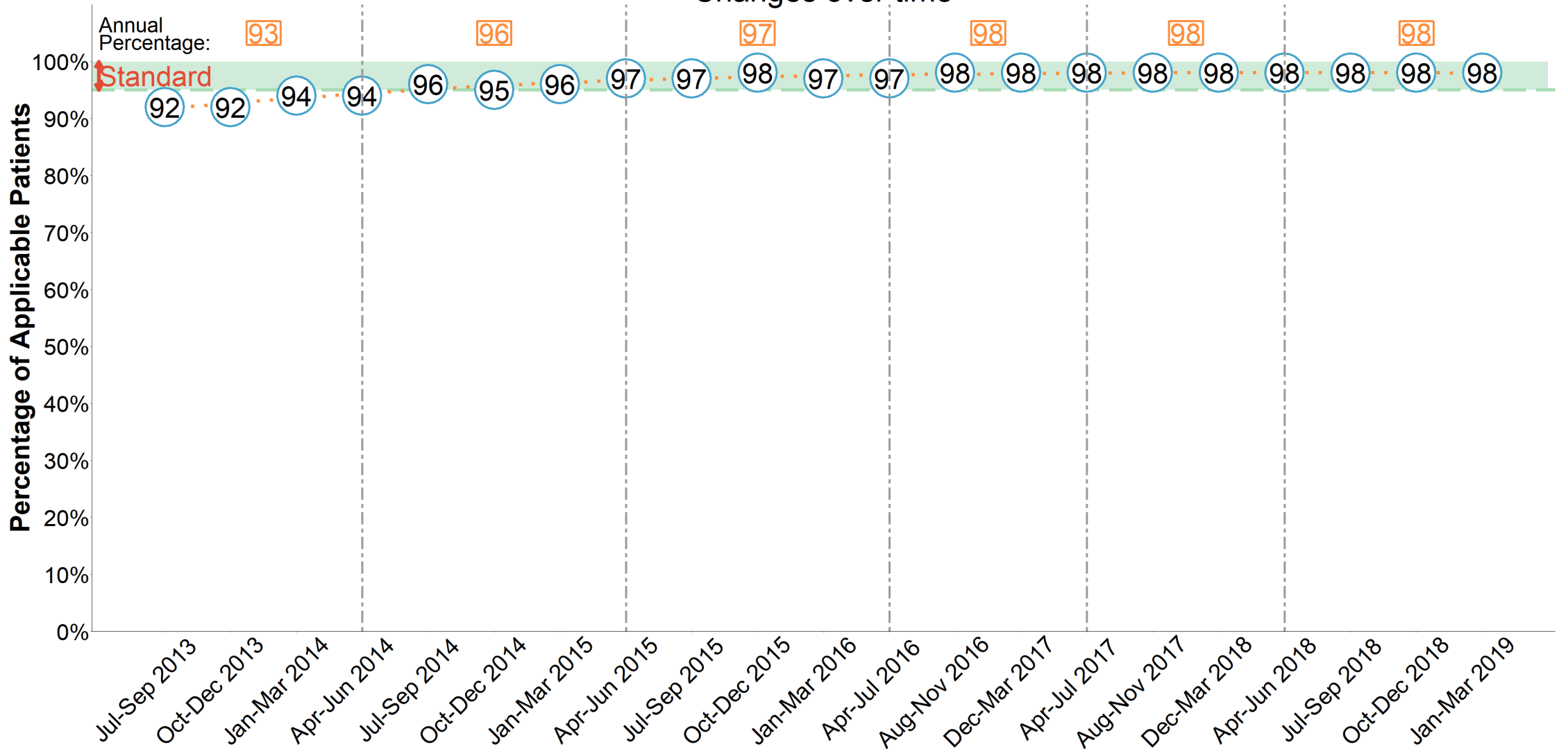
Patients with pre-stroke atrial fibrillation on anticoagulants
Changes over time



Source: Sentinel Stroke National Audit Programme (SSNAP) July 2013 to March 2019 National Results
Item reference: F6.13

Patients in atrial fibrillation discharged on anticoagulants

Changes over time

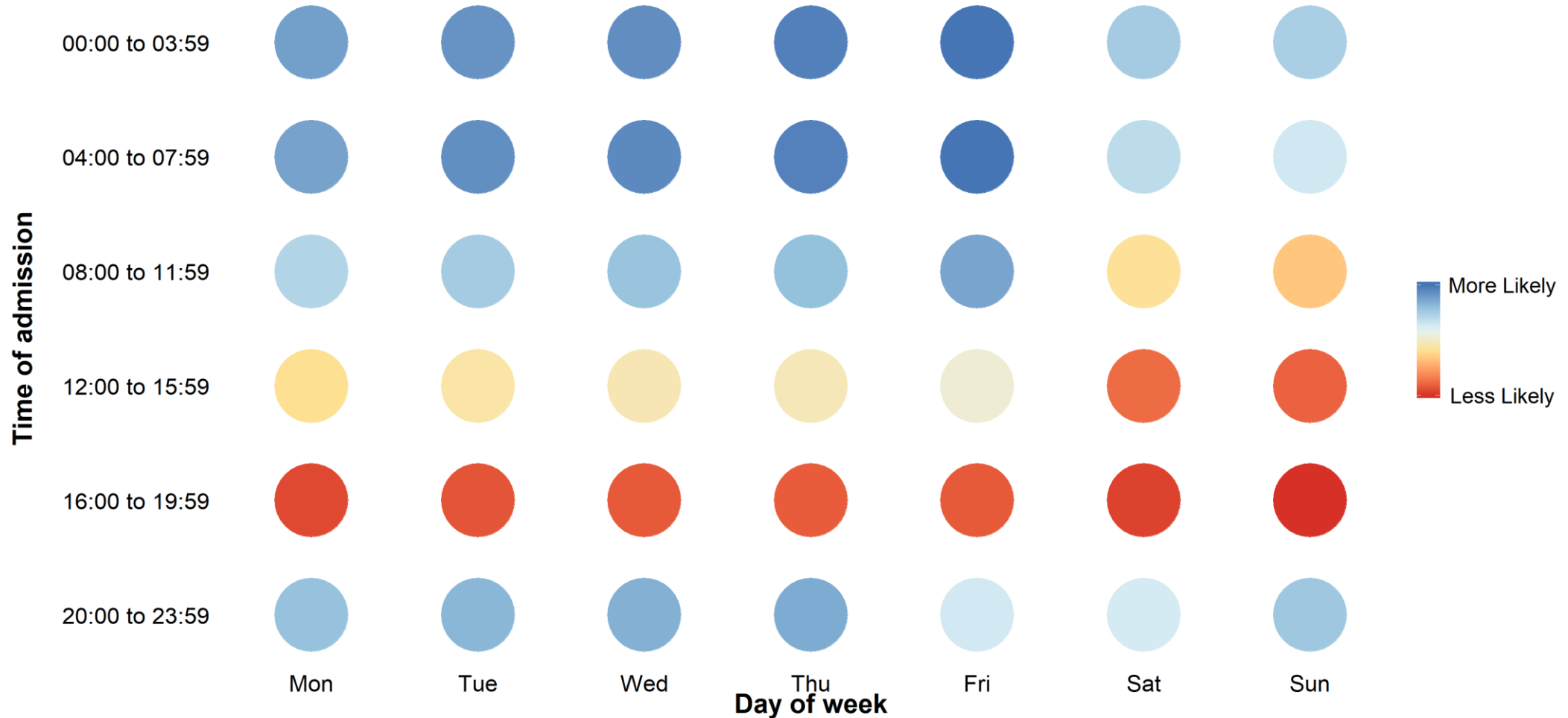


Source: Sentinel Stroke National Audit Programme (SSNAP) July 2013 to March 2019 National Results
Item Reference: J32.16

SECTION H: Multidisciplinary Team Working

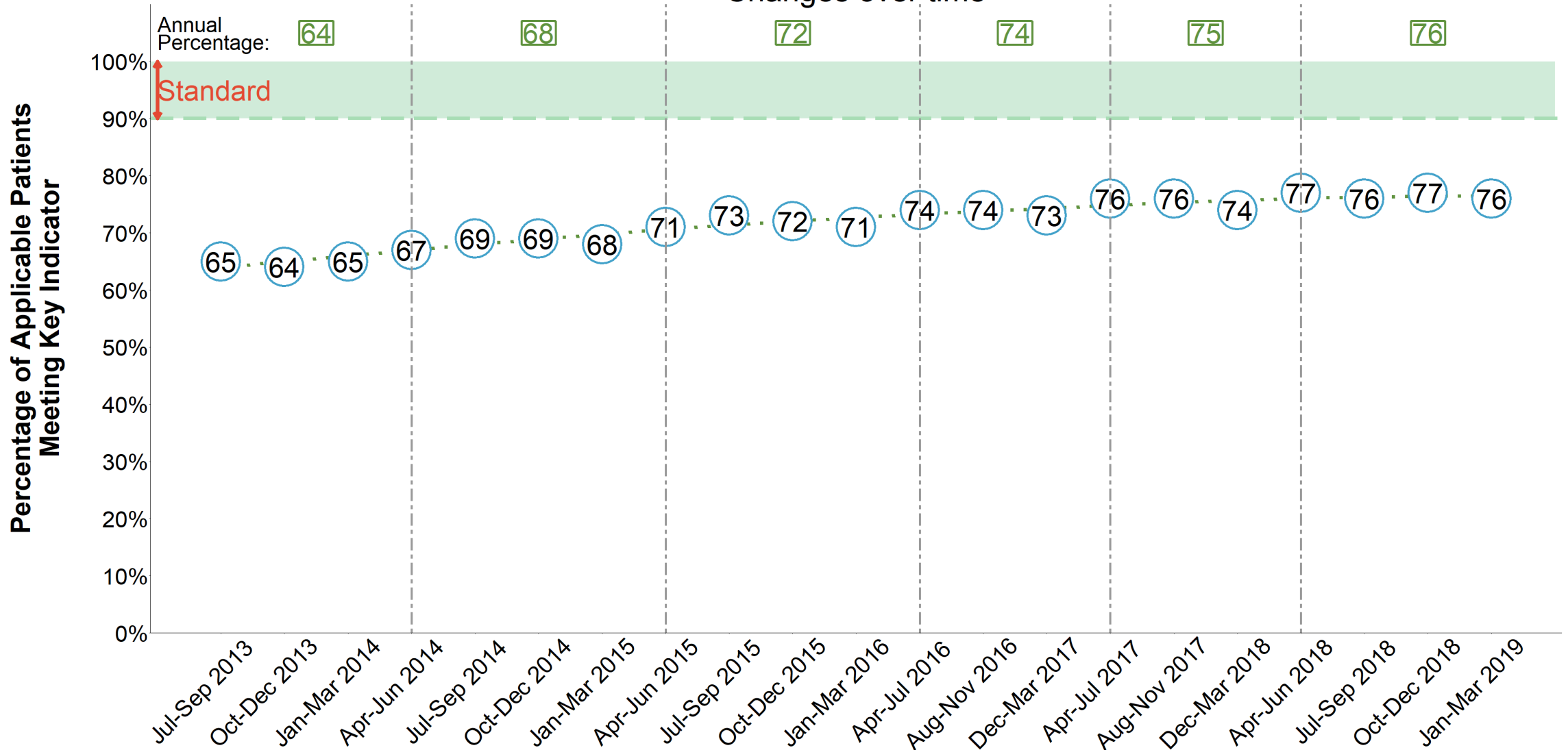
Stroke specialist

Likelihood of being assessed by a stroke specialist within 14 hours of arrival at hospital



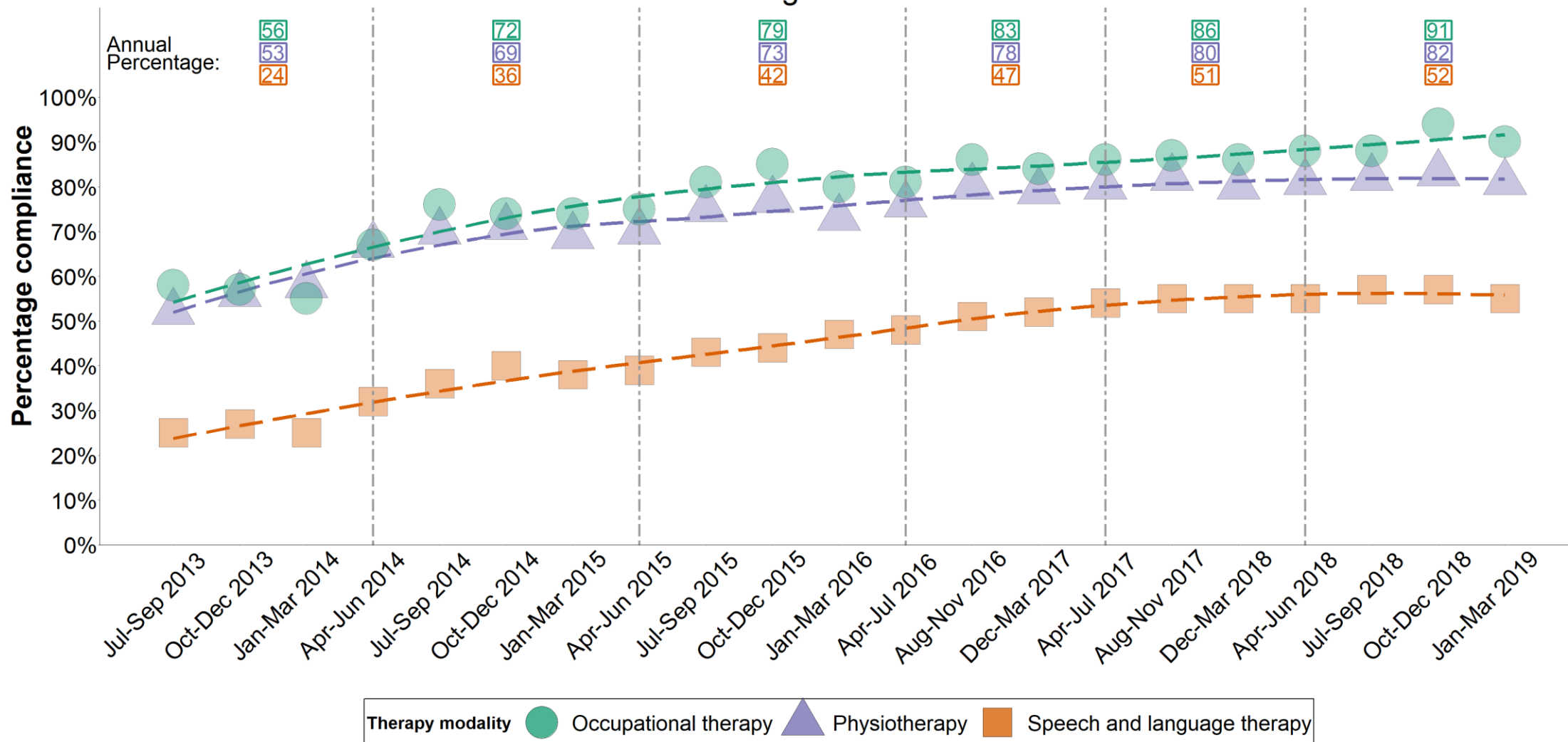
Swallow screen within 4 hours of clock start

Changes over time



Target compliance (across all patients) by therapy modality

Changes over time

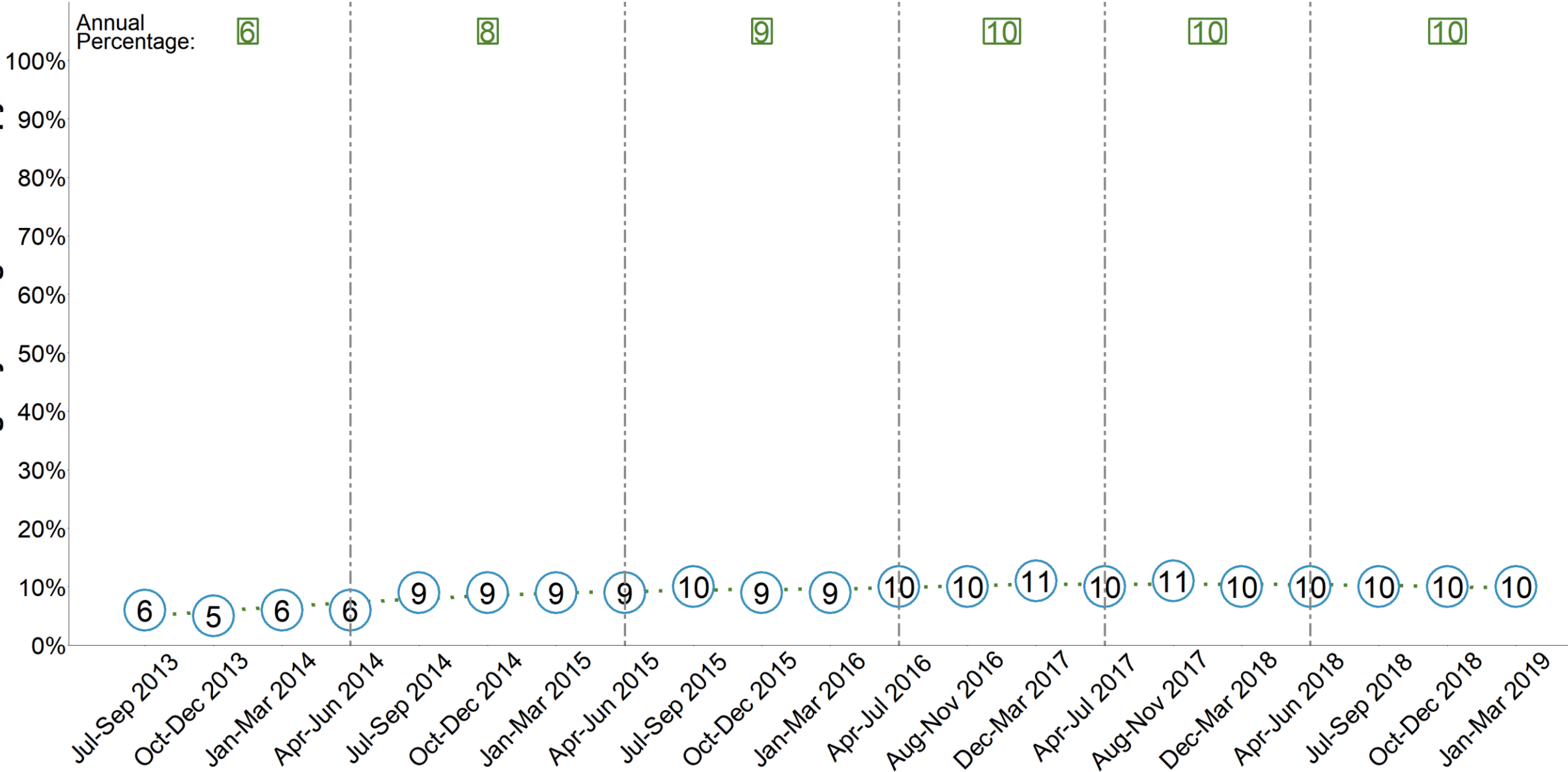


Source: Sentinel Stroke National Audit Programme (SSNAP) July 2013 to March 2019 National Results
Items reference: J3.10, J4.10 and J5.10

Psychological Therapy

Changes over time

Median Percentage of Applicable Days Receiving Psychological Therapy

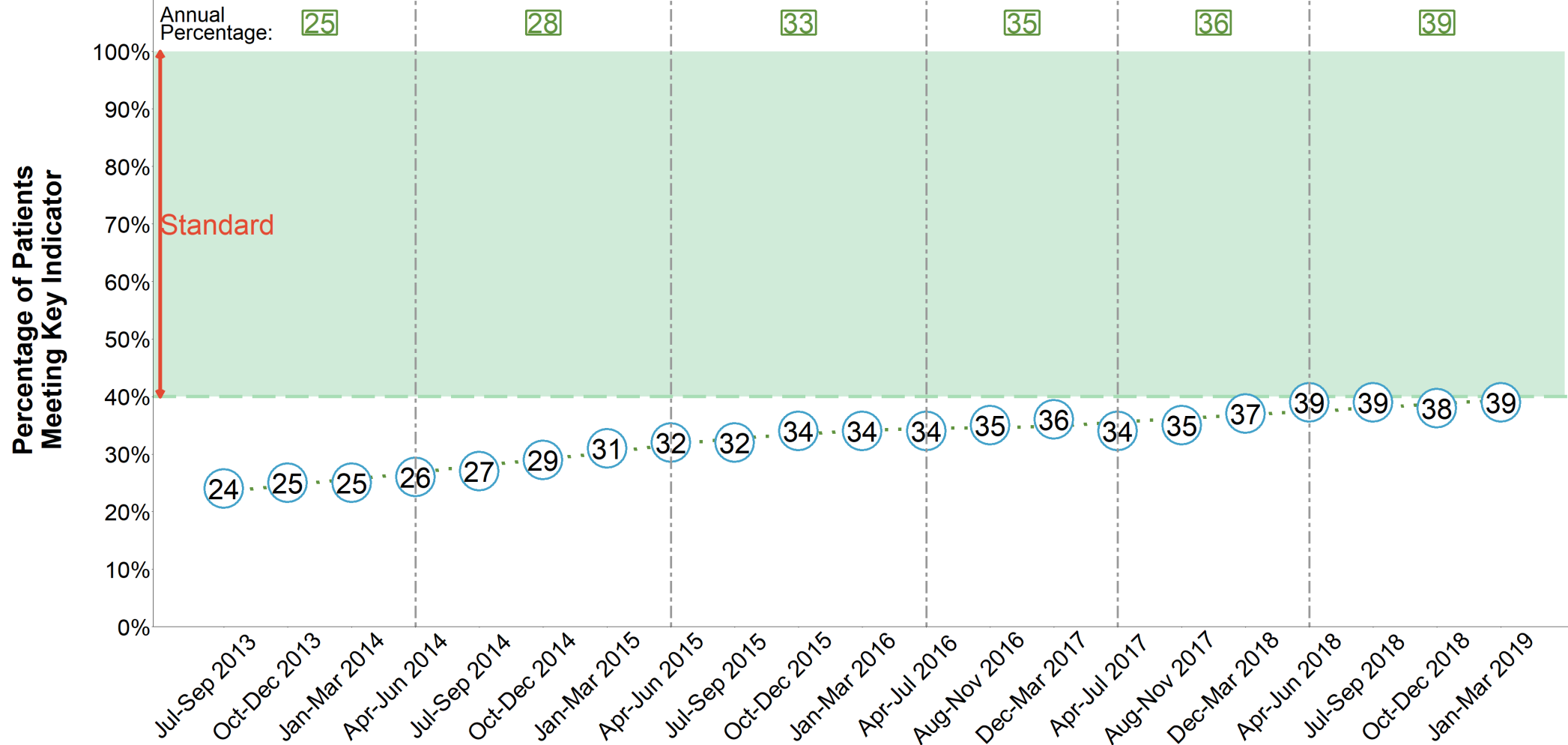


Source: Sentinel Stroke National Audit Programme (SSNAP) July 2013 to March 2019 National Results
Item reference: J7.4

SECTION J: Longer Term Care

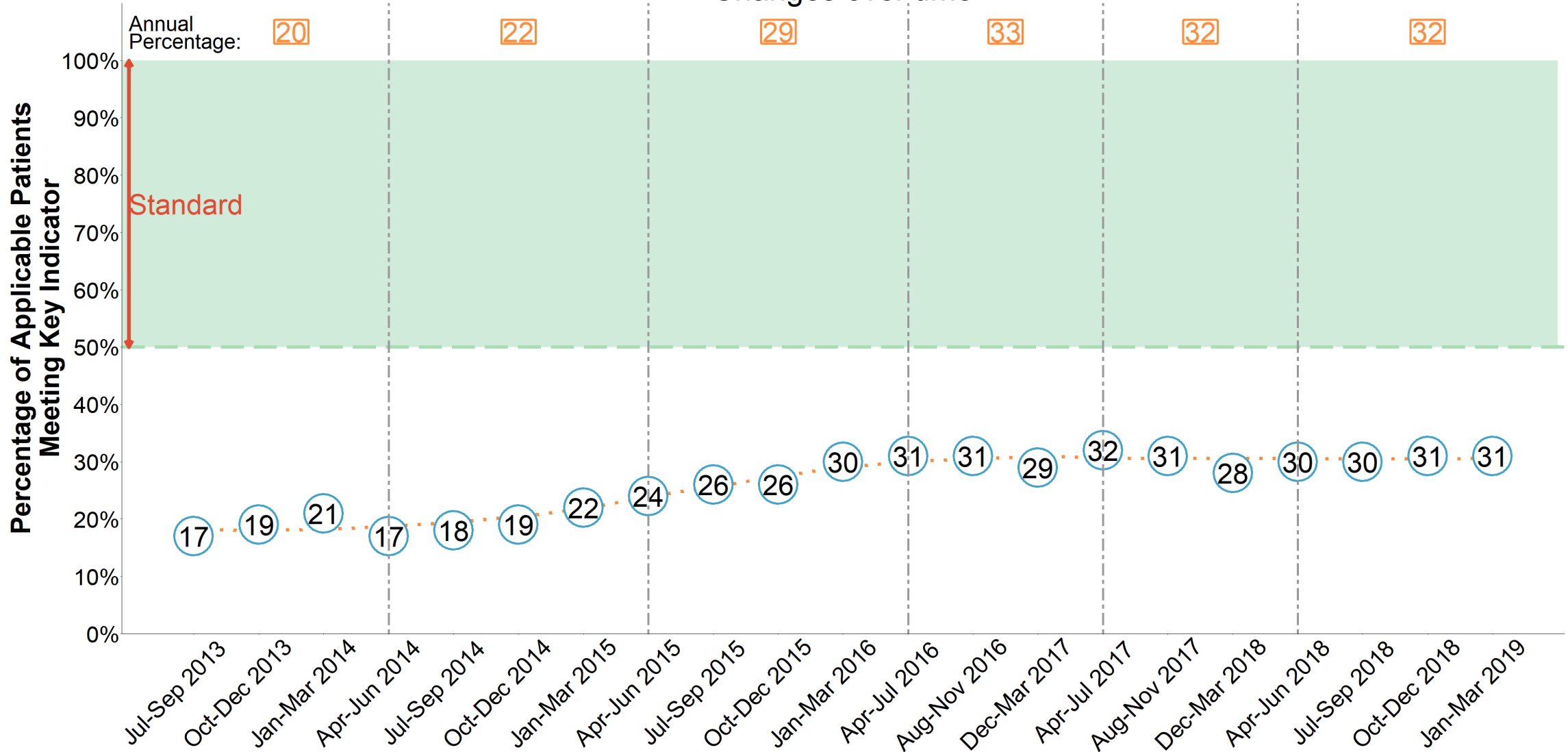
Patients treated by a stroke-skilled Early Supported Discharge (ESD) team

Changes over time



Source: Sentinel Stroke National Audit Programme (SSNAP) July 2013 to March 2019 National Results
Item reference: J10.3

Six month assessment Changes over time

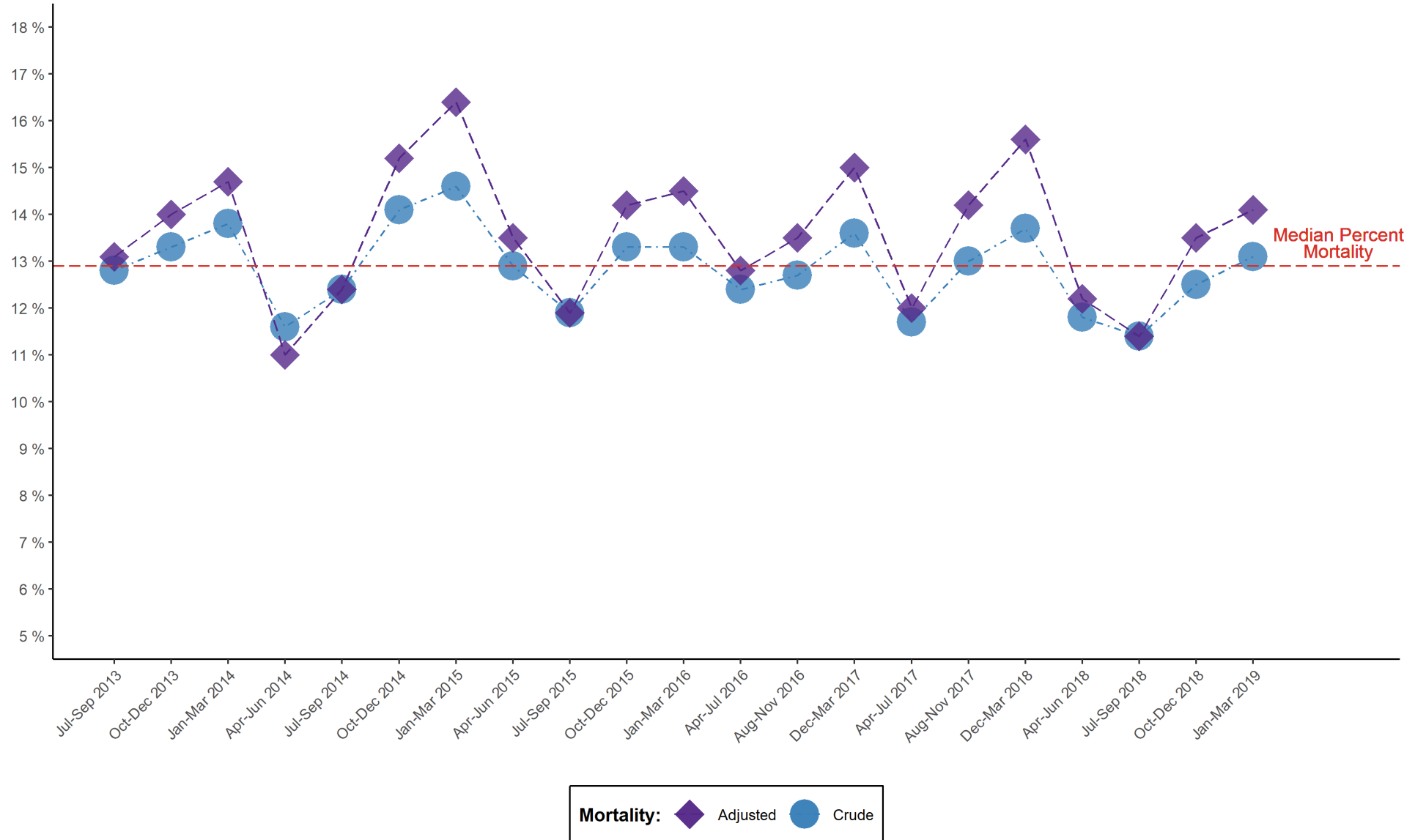


Source: Sentinel Stroke National Audit Programme (SSNAP) July 2013 to March 2019 National Results
Item reference: M4.6

Outcomes After Stroke

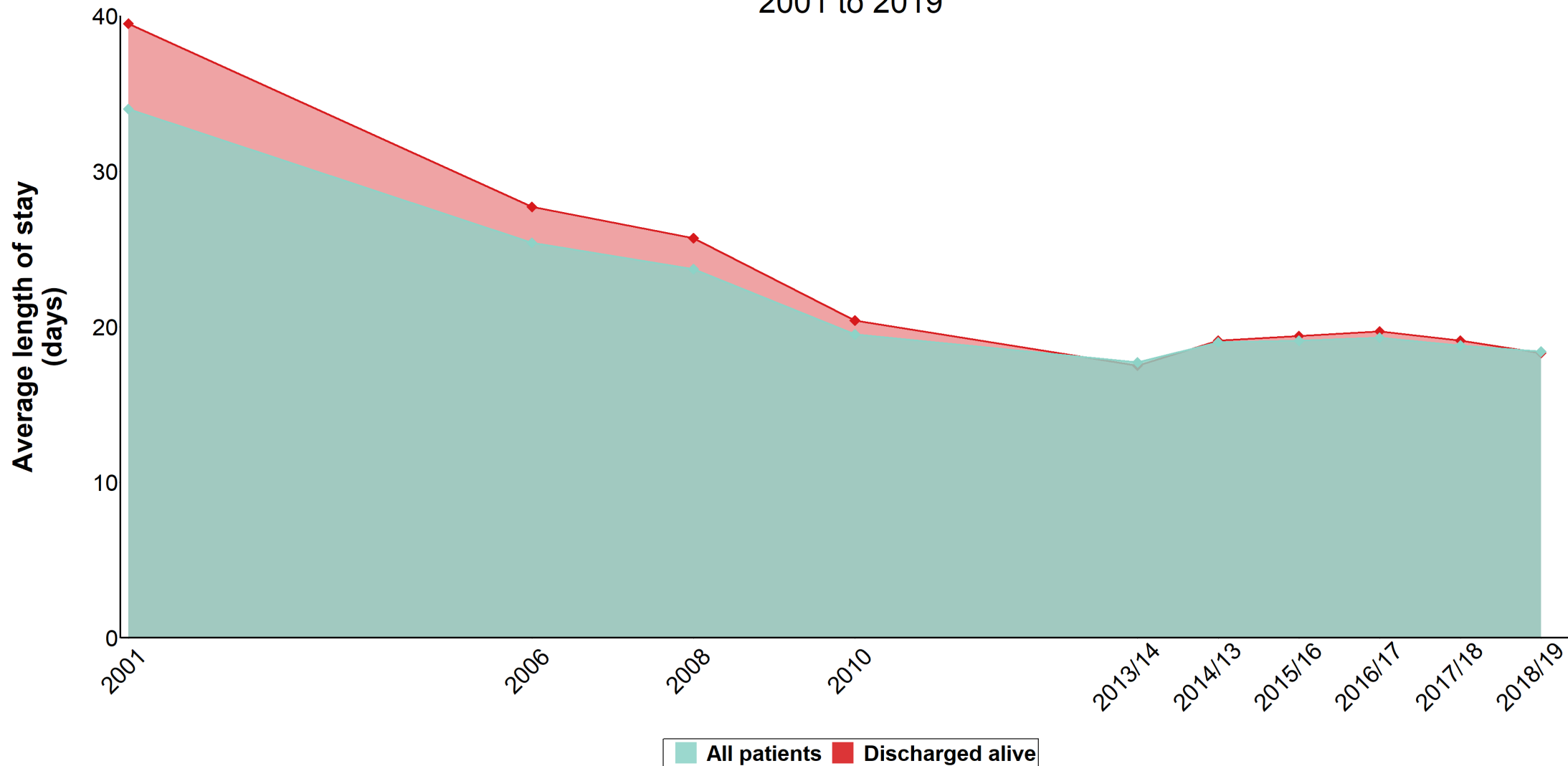
All Cause Mortality at 30-Days

England and Wales



Outcomes After Stroke

In-hospital stay for stroke patients 2001 to 2019



Three Types of Trends

IMPROVING

	2013	2019	
◊ Compliance with Physiotherapy Target	53%	82%	↑ +29%
◊ Brain Imaging within 1 hour of arrival at hospital	42%	55%	↑ +13%
◊ Access to Early Supported Discharge team	25%	39%	↑ +14%
◊ Number of patients undergoing Thrombectomy (2016-2019)	602	1200	↑ +598
◊ Door to Needle time for Thrombolysis (in minutes)	59m	52m	↓ 7m faster
◊ Proportion of applicable patients receiving Six Month Assessments	20%	32%	↑ +12%

PLATEAUING

◊ Proportion of patients spending at least 90% of their stay on a Stroke Unit	83%	84%	→ +1%
◊ Proportion of patients receiving Thrombolysis	12%	12%	→ 0%
◊ Percentage of patients who are directly admitted to a Stroke Unit within 4 hours of arrival at hospital	58%	58%	→ 0%

DETERIORATING

◊ Median time between onset of symptoms and arrival at hospital (in hours and minutes)	2h25m	3h06m	↑ +41m
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2013 2019



Stroke National
programme

Final Thoughts...

- Audit should be used as a tool to support quality improvement
- Not used to negatively shame or criticize
- There have been major improvements in the last 6 years
- Reducing arrival times to hospital and improving admission times to stroke units will be a priority for the next coming year
- Publication of NHS Long Term Plan will require more data collection particularly in the discharge phase after hospital

Thank you for attending the First SSNAP Webinar.

If you would like to send us any comment remember you can do it by email to ssnap@kcl.ac.uk

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