

Improved performance against SSNAP parameters for thrombolysed stroke patients following changes in practice

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Background

The CQC inspection of the Royal Lancaster Infirmary (RLI) in May 2021 rated the performance of the stroke department unsatisfactory, leading to a number of changes. A retrospective audit was performed to determine the impact of these changes for thrombolysed stroke patients.

Aim

This retrospective audit assessed the performance of the stroke department at the RLI against the parameters set by the 'Sentinel Stroke National Audit Program' (SSNAP), comparing 6-month periods before and after the CQC inspection in May 2021

Method/Data collection

Retrospective audit ,data collection using electronic medical records and SSNAP data, we reviewed every thrombolysed stroke patient at the RLI between November 2020 until April 2021 and from May 2021 until November 2021, assessing 10 parameters and comparing the results with SSNAP targets

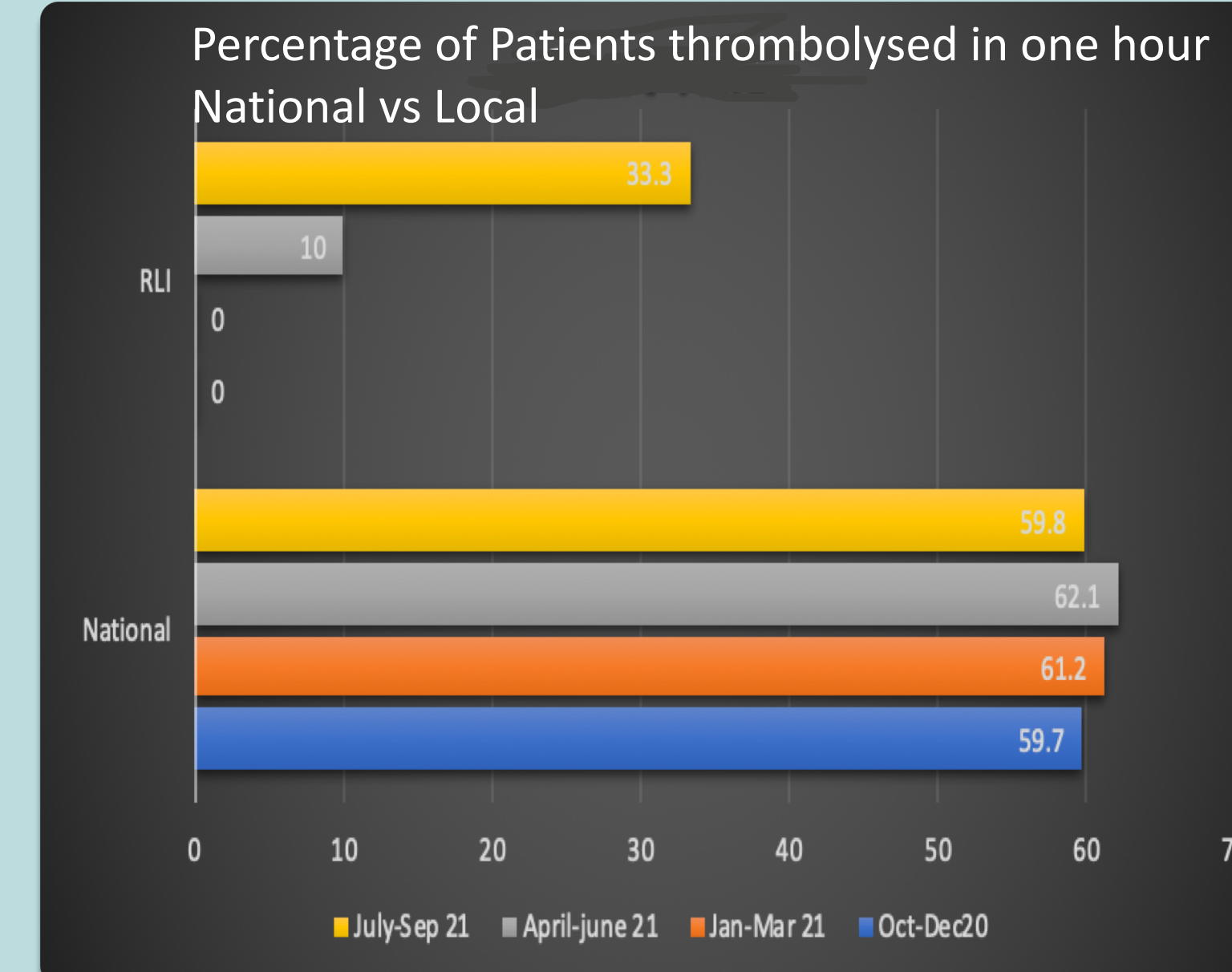
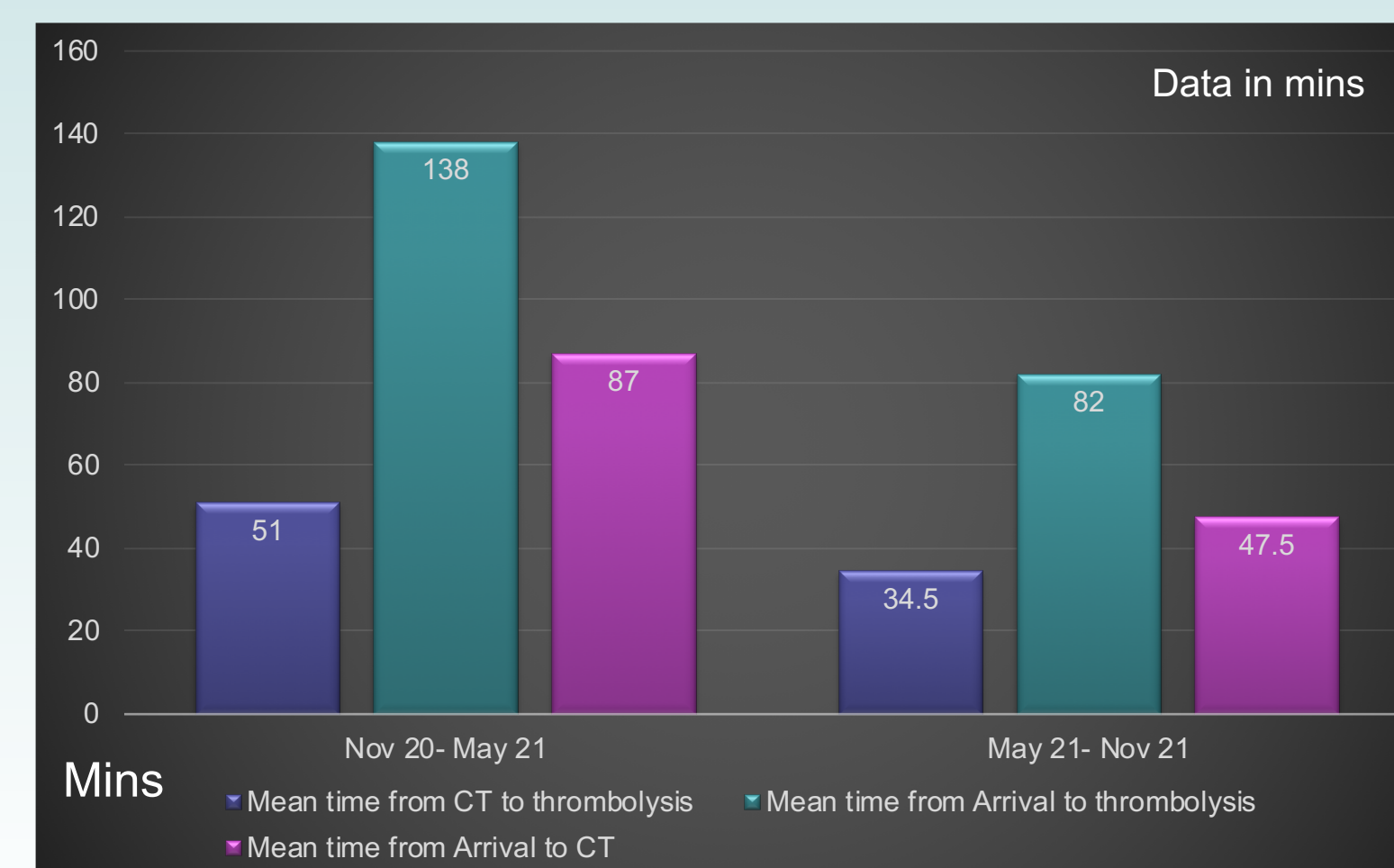
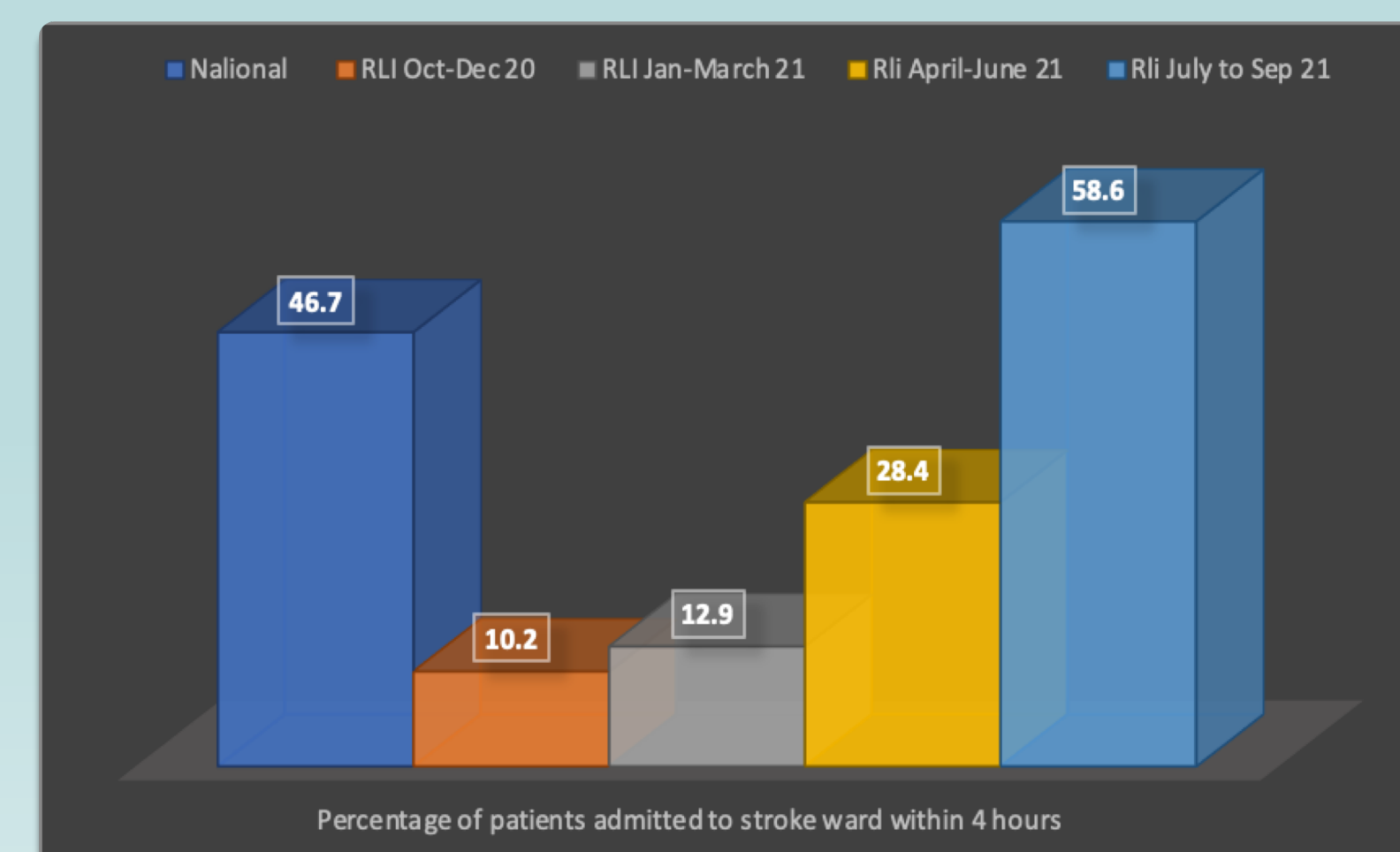
Changes Implemented

Changes to practice introduced included opening a new, larger stroke unit located directly opposite the Emergency Department. Ring-fencing stroke beds, doubling the number of stroke specialist nurses and stroke consultants reviewing all suspected stroke patients face-to-face within working hours and telestroke after hours. Number of stroke beds increased from 20 to 31. Stroke pathway highlighted to ED staff and coordinators. Arranging CT angiogram promptly for eligible patients in window period.

Results

46 patients were thrombolysed with 42 confirmed as having had ischaemic strokes on subsequent MRI imaging. All patients were discussed with a stroke consultant before thrombolysis. Mean time from arrival to CT improved from 51 to 34.5 minutes, admission to stroke unit from 7hr53 to 4hr36 and to thrombolysis from 2hr18 to 1hr22. The number of thrombolysis complications decreased from 5 to 2. Since the changes, the SSNAP grade for stroke unit admission improved.

Parameters	Nov 2020- May2021	May2021- Nov2021
Mean team from arrival to CT	51 mins	34.5 mins
Mean Time from arrival to stroke ward	7hr 53 mins	4 hrs 36mins
Mean Time from arrival to thrombolysis	2hrs 18 mins	1hr 22 min
Mean Time from CT to Thrombolysis	1hr 27 mins	47.5 mins
Complications post thrombolysis	5	2



Conclusion

The changes implemented following the May 2021 CQC inspection have had a positive impact on the care of thrombolysed stroke patients and overall SSNAP grades at RLI.

The SSNAP grade for Stroke Unit admission improved from C to A and for specialist assessments improved from E to B. Improvements are still required and the next steps include improving the efficiency of thrombolysis times and further improving SSNAP grades.

References

- <http://www.strokeaudit.org/results/Clinical-audit/National-Results.aspx>
- <https://www.rcplondon.ac.uk/guidelines-policy/stroke-guidelines>
- Regional policy for Thrombolysis/Thrombectomy Pathway for the Acute Ischemic Stroke Patients within Lancashire and South Cumbria Unique Identifier: CORP/PROC/413 Version Number: 3.3