



Royal College
of Physicians

Sentinel Stroke National
Audit Programme (SSNAP)

Sentinel Stroke National Audit Programme (SSNAP)

Audit of longer term (post-acute) stroke services

Phase 2: Organisational audit of
post-acute stroke service providers

This report is for stroke survivors
and their families

December 2015

Easy access version

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Introduction to SSNAP Easy Access report

This is a report about a project called the **Sentinel Stroke National Audit Programme (SSNAP)**.

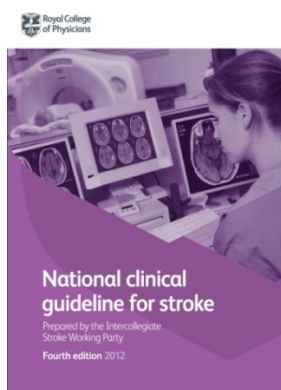
This is the first report telling stroke survivors and their families about **longer term stroke services** in England, Wales and Northern Ireland. **These services treat and help stroke survivors when they leave acute care.**

The information is written in a way that is **easy to understand** but you may want someone to **help** you when you **read** this report.

What is SSNAP?

SSNAP **measures** stroke services in **hospitals** and of services which provide **longer term care**. It does this to improve the quality of stroke services.

SSNAP produces a **guideline book** which **tells hospitals and longer term services** how to organise a **good quality** stroke service.



The guideline book '**National clinical guideline for stroke**', is available to all stroke services in England, Wales, Northern Ireland, the Isle of Man and the Channel Islands.

SSNAP also collects information from hospitals about the care given to stroke patients from the time they **arrive at hospital** to **6 months after stroke**. These results are available in an Easy Access Version **every 3 months**.

SSNAP aims to **improve stroke services and care** for stroke patients.

The **Royal College of Physicians (RCP)** runs SSNAP.

NHS England and NHS Wales (Welsh Government) pay for SSNAP.

The **Stroke Working Party** guides SSNAP.

This includes

- people who work in stroke
- charities such as the Stroke Association
- people who have had a stroke.

Thank you to the following, who made this report easy to read

- **Speakeasy**, a charity based in Bury, which supports people with aphasia
- The **stroke survivors** on the working party
- The **South London** Patient and Family Research Group for stroke

Audit of longer term stroke services

In 2015 SSNAP carried out the **first** audit of **756 services that provide** longer term stroke care. **A list of what types** of services we asked can be found on **page 6**.

The audit looked at how these services are organised and this report will tell you:

1. **where** the services are
2. how long a stroke patient **waits to be treated by services**
3. what members of **staff** services have
4. **how long services can treat** stroke patients for
5. **how many days a week** services work
6. if they **carry out 6 month reviews**
7. if services can give stroke patients **self-management advice** and other useful information

We **compared** the results in **England, Wales and Northern Ireland**.

How to read the results

This report gives information about **key types of longer term services**.

There is a list of **useful words** and their meanings on **page 37**.

This report will show information in different ways:



This symbol means:

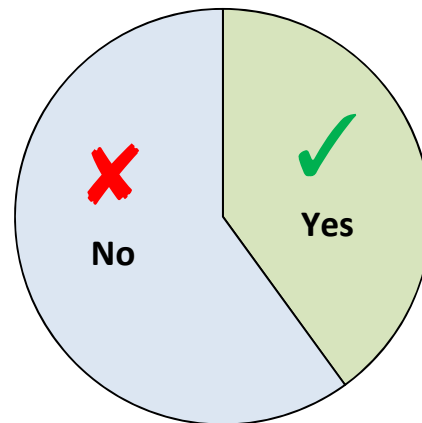
- **Yes**



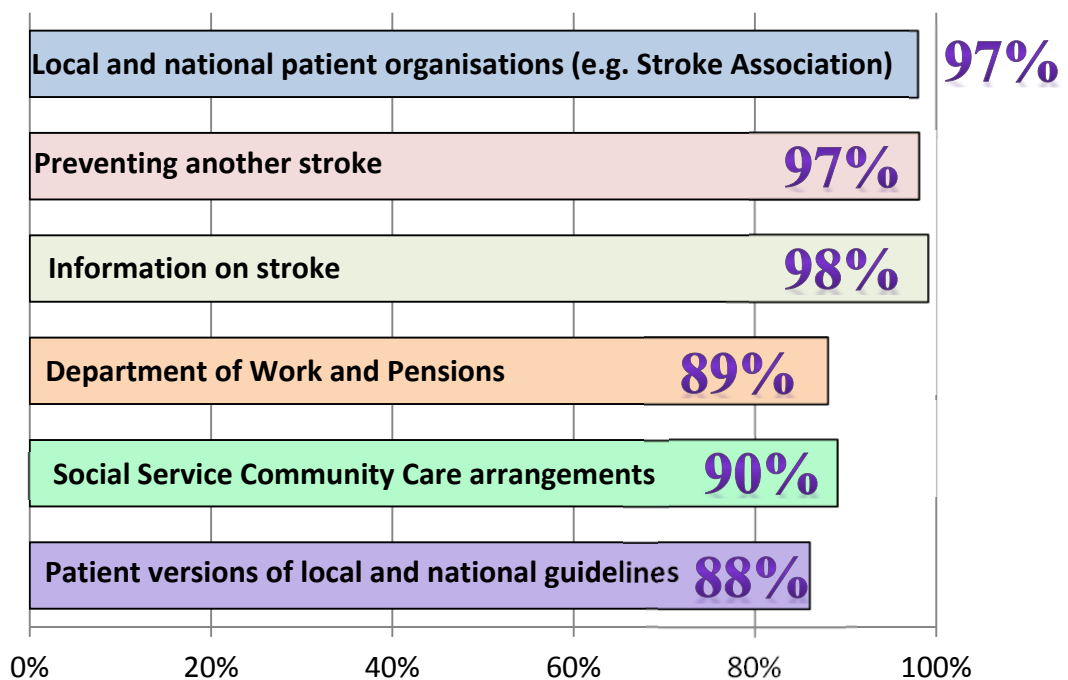
This symbol means:

- **No**

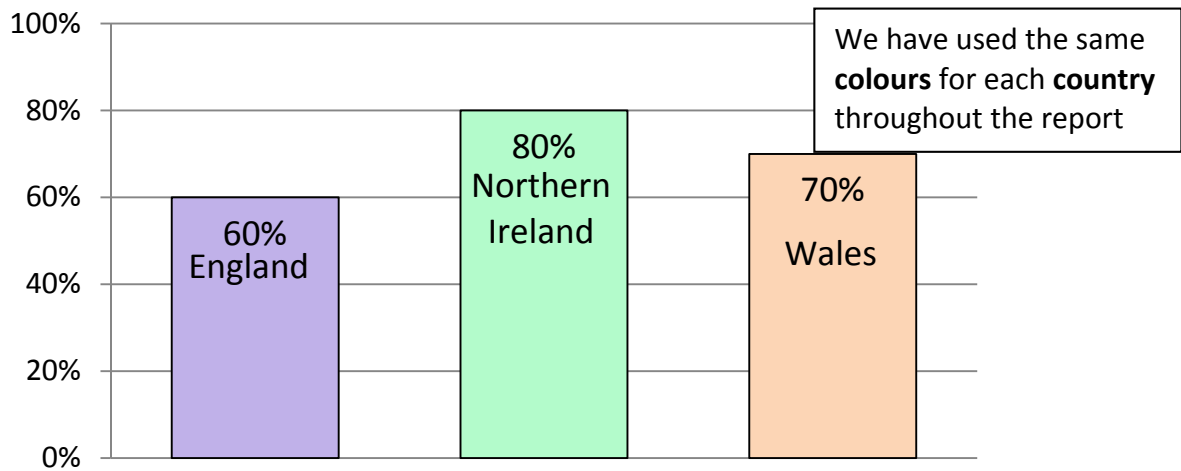
These symbols will be used like this:



We will also use pictures like this to show how many different things are available within a service.



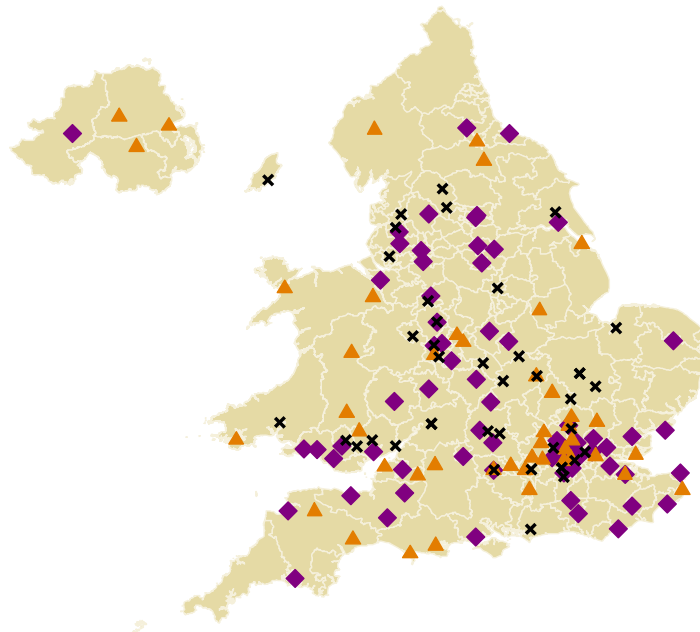
When we compare the differences between countries the chart will look like this:



Maps

We will use lots of maps in this report.

Inpatient rehabilitation teams



- ◆ Stroke/neurology only
- ▲ All patient types
- * No information

Each map has a **small box next to it** which will show what each colour or symbol means:

- ◆ Stroke
- ▲ All
- X No information

Types of longer term stroke services

There are **12 types** of longer term stroke service. These can be put into the **6 groups** below.

This report will concentrate on telling you about the services **highlighted in red**. These are the **biggest services** which **care for the most** stroke survivors.

Hospital based

In-patient rehabilitation

Outpatient clinics

Services that treat stroke survivors at home

Early Supported Discharge (ESD)

Community rehabilitation team (CRT)

Home visits (Domiciliary) only

Single service teams (they provide one type of therapy only)

Psychological support

Physiotherapy

Occupational therapy

Speech and language therapy

Services that review stroke survivors' recovery

6 month review teams

Services that support stroke survivors and their family

Family and carer support

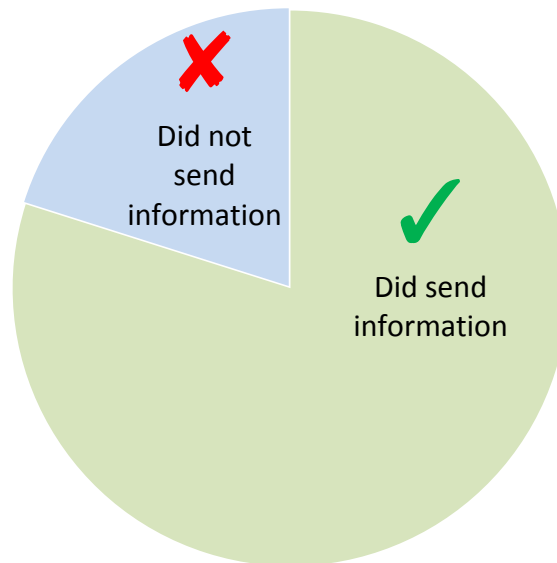
Services that help stroke survivors go back to work or to volunteer

Vocational rehabilitation teams

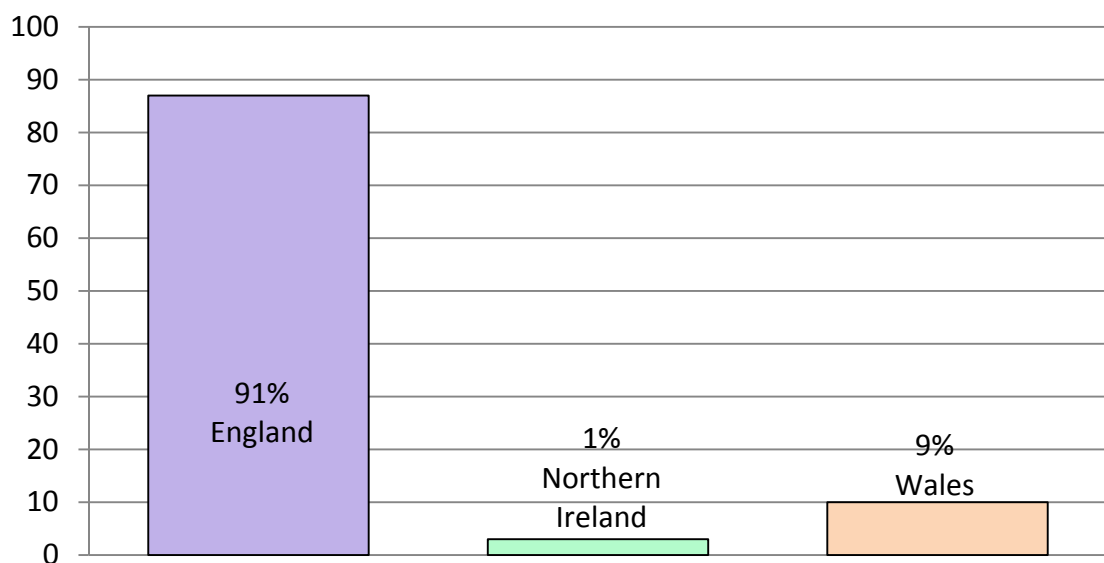
At the end of this report there will be maps showing you **where the other types of services are** (those not in red) so you can see if any are available in your area.

National information

We knew about **756** longer term stroke services. **604 (80%)** of these sent us information.



Out of the 604 services that sent us information, **91% (549)** were from **England**, **1% (9)** were from **Northern Ireland** and **8% (46)** were from **Wales**.



Inpatient rehabilitation

What is this?

A service

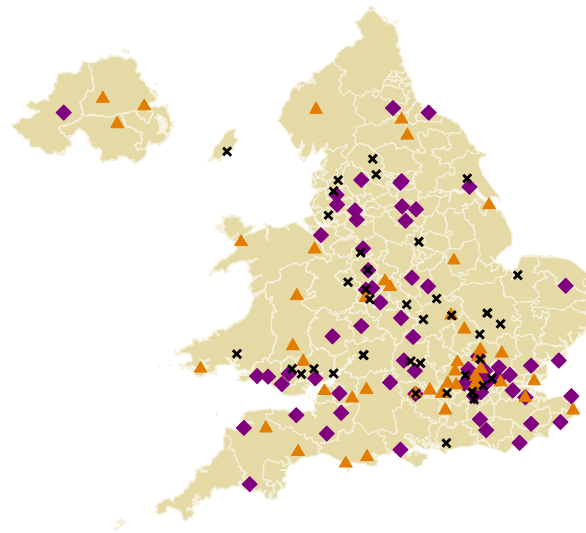
- where **stroke survivors can stay if they still need extra help before they go home** but they do not need to be in an acute hospital



Location

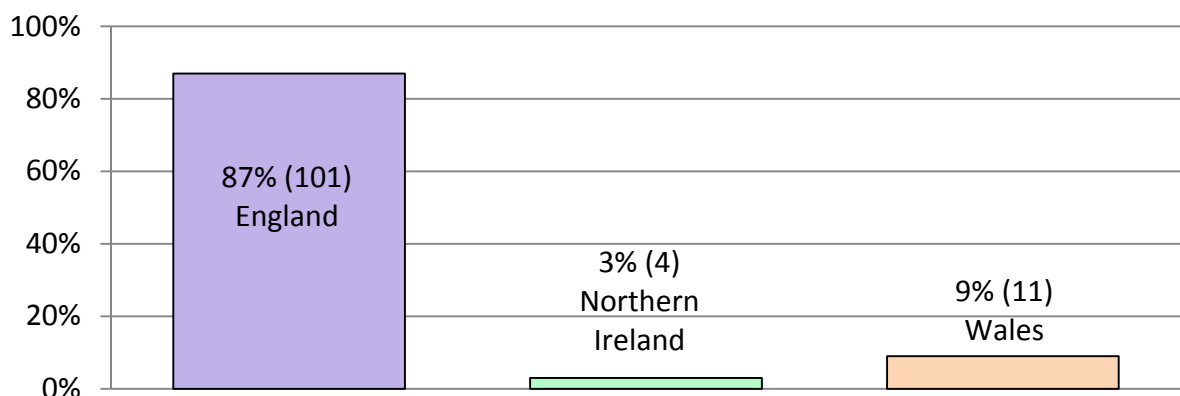
We were told about **116** inpatient rehabilitation services. This map shows **where they are** and if they are a specialist stroke team (**they treat stroke only**).

Inpatient rehabilitation teams



◆ Stroke/neurology only ▲ All patient types
* No information

This picture shows **how many** of the 116 inpatient rehabilitation services are in England, Northern Ireland and Wales.





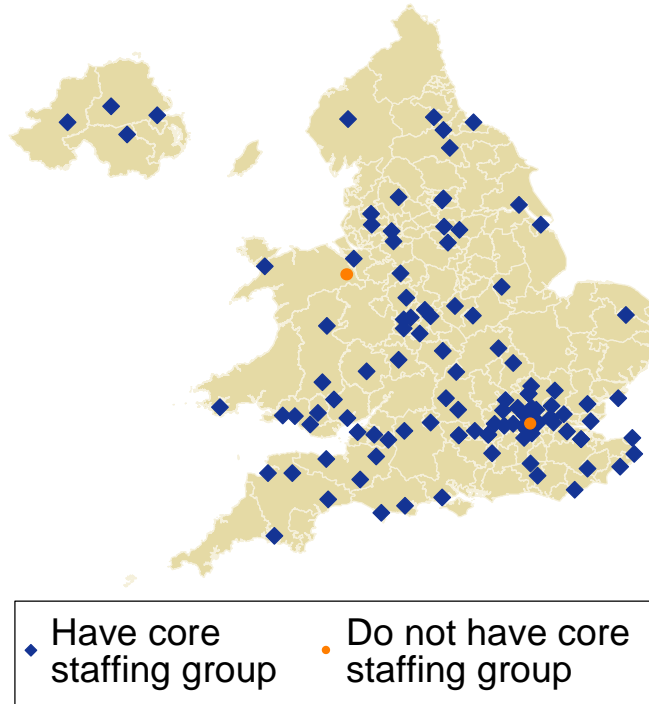
Staffing

Stroke survivors should have access to a 'core' group of staff to make sure they can have different types of therapy and support if they need it.

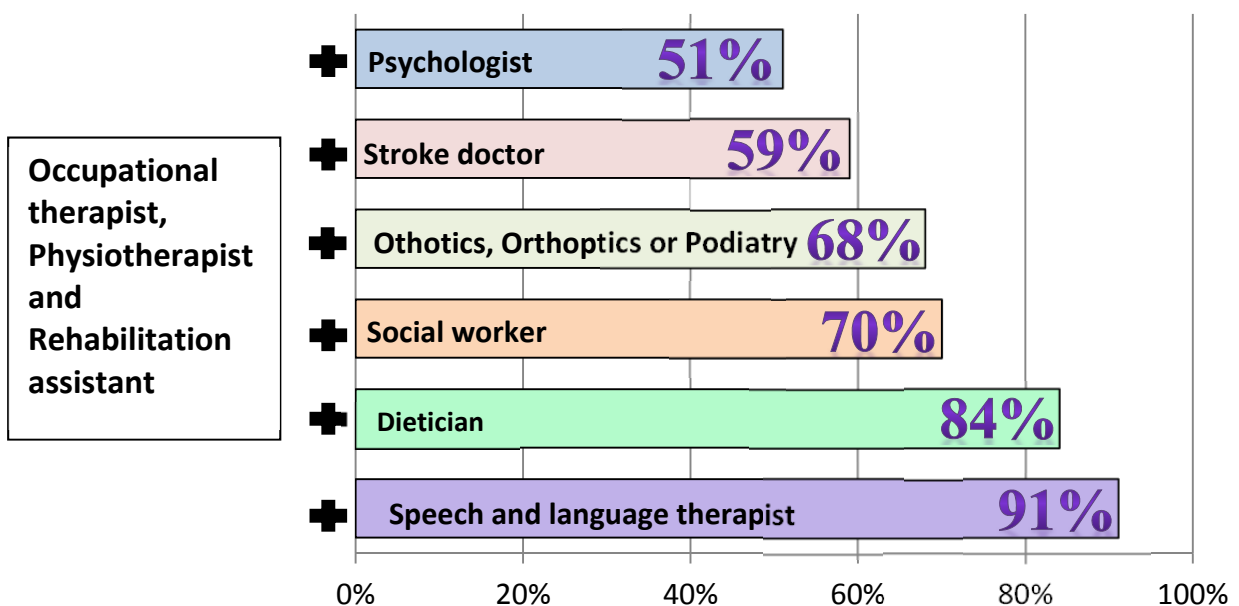
This 'core' group includes an **Occupational therapist, Physiotherapist** and a **Rehabilitation assistant**. **98%** of inpatient rehabilitation services have this group.

This map shows which inpatient rehabilitation services had the 'core' group.

Inpatient rehabilitation teams staffing



This picture shows you **how many** inpatient rehabilitation services can offer stroke survivors access to the 'core' staff group **PLUS (+)** other types of staff.



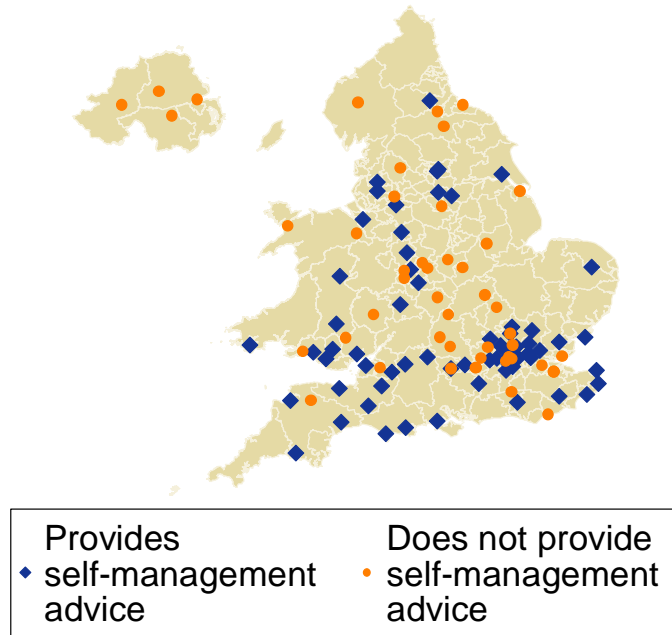


Access to self-management advice and useful information

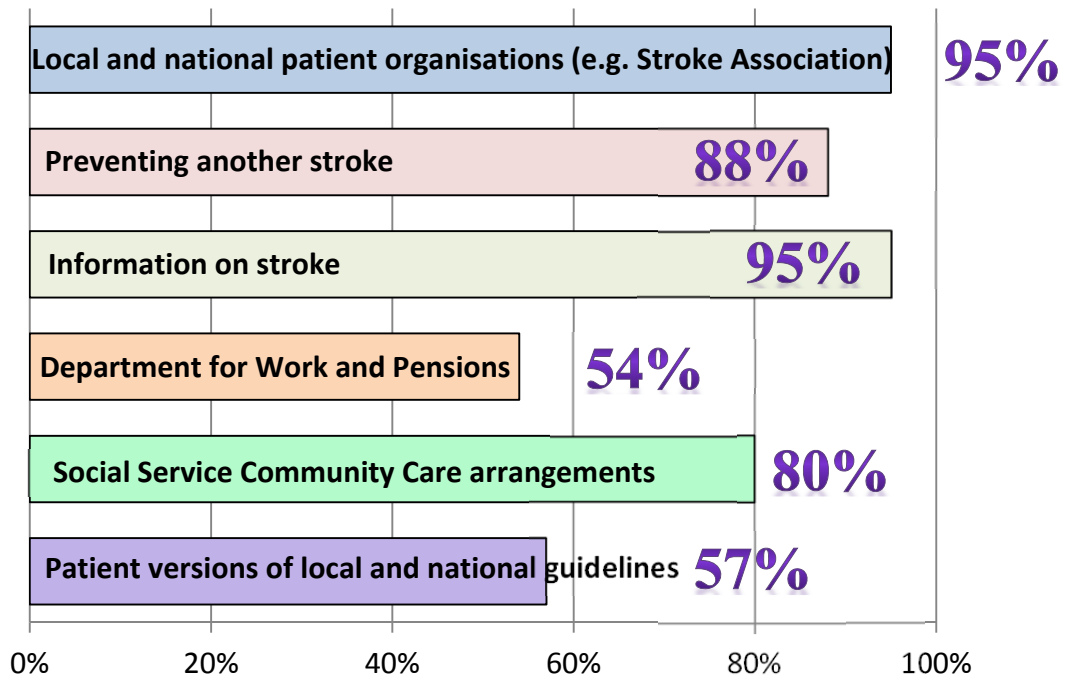
Being given advice on self-management can help stroke survivors **manage their own health** and make them feel **more independent**.

59% of inpatient rehabilitation provided advice on self-management to stroke survivors. This map shows **where** they are.

Inpatient rehabilitation teams self-management advice



This picture shows **how many** inpatient rehabilitation services can also offer stroke survivors **other types of information** that can help them.



Early Supported Discharge (ESD)

What is this?

A service which

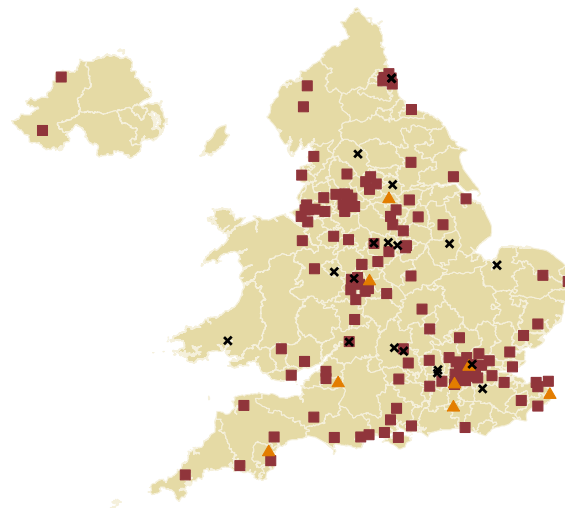
- treats stroke survivors **in their own home**
- provides the **same level of care** as **hospital** so patients can go home quicker



Location

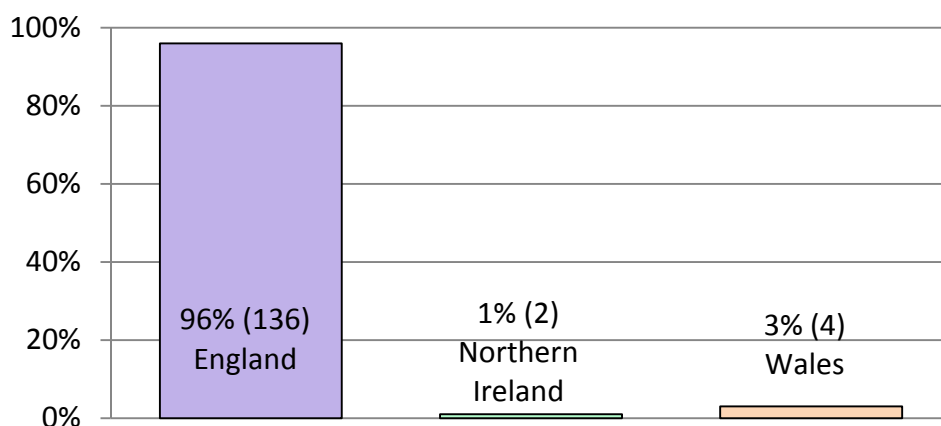
We were told about **142** Early Supported Discharge teams. This map shows **where they are** and if they are a specialist stroke team (**they treat stroke only**).

Early Supported Discharge teams



- Stroke only
- ▲ All patient types
- * No information

This picture shows **how many** of the 142 Early Supported Discharge teams are in England, Northern Ireland and Wales.



Waiting times until stroke patients get treatment



Early Supported Discharge (ESD) teams **should:**

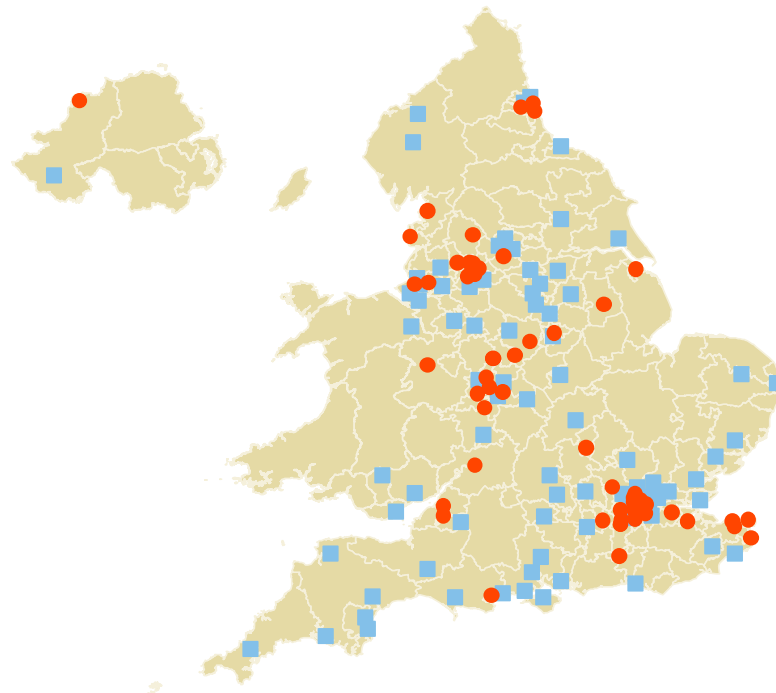
review and treat stroke patients the **next day or within 24 hours** of discharge from hospital.

Early Supported Discharge teams provide the **same level of care to stroke patients as hospital**, by giving stroke survivors **45 minutes of therapy on 5 days a week**.

This means they must see patients **as quickly as possible** when they leave hospital.

This map shows **which** Early Supported Discharge (ESD) teams **are meeting** the waiting time standard for treating stroke survivors.

Early Supported Discharge waiting times to treatment



- Meeting standard
- Not meeting standard



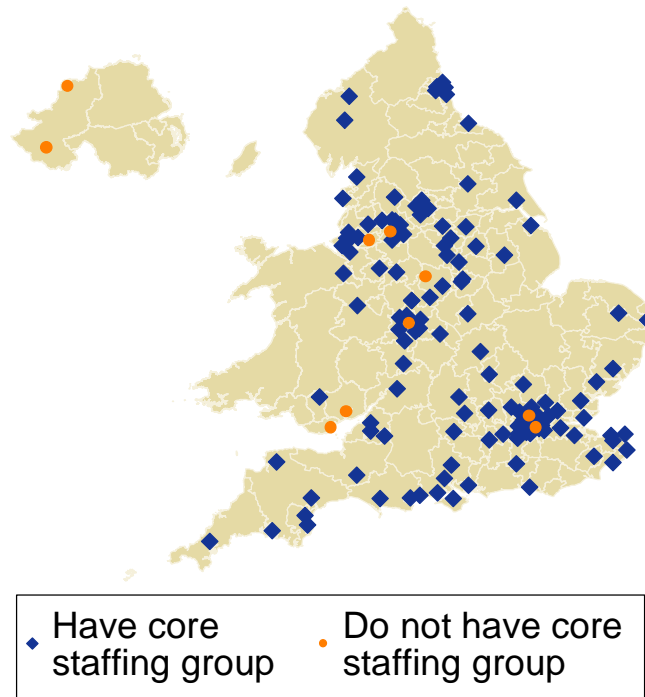
Staffing

Stroke survivors should have access to a 'core' group of staff to make sure they can have different types of therapy and support if they need it.

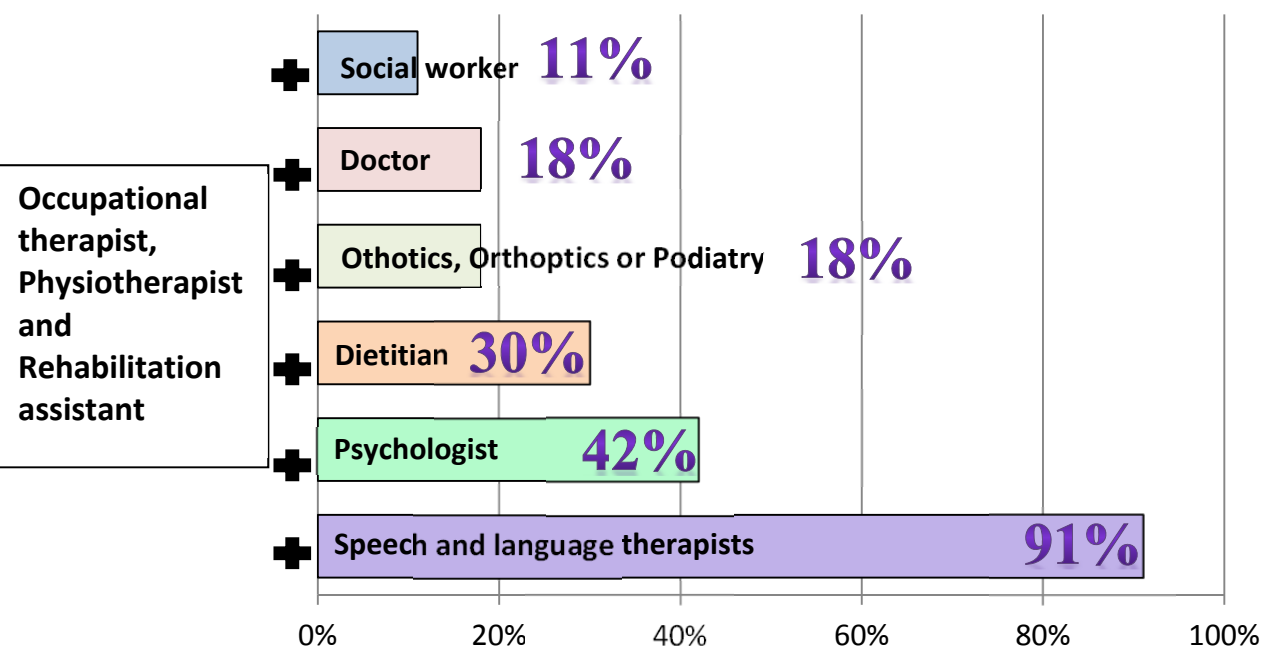
This 'core' group includes an **Occupational therapist, Physiotherapist** and a **Rehabilitation assistant**. **93%** of Early Supported Discharge teams have this group.

This map shows **which** Early Supported Discharge teams had the 'core' group.

Early Supported Discharge teams staffing



This picture shows you **how many** Early Supported Discharge teams can offer stroke survivors access to this 'core' group **PLUS (+)** other types of staff.





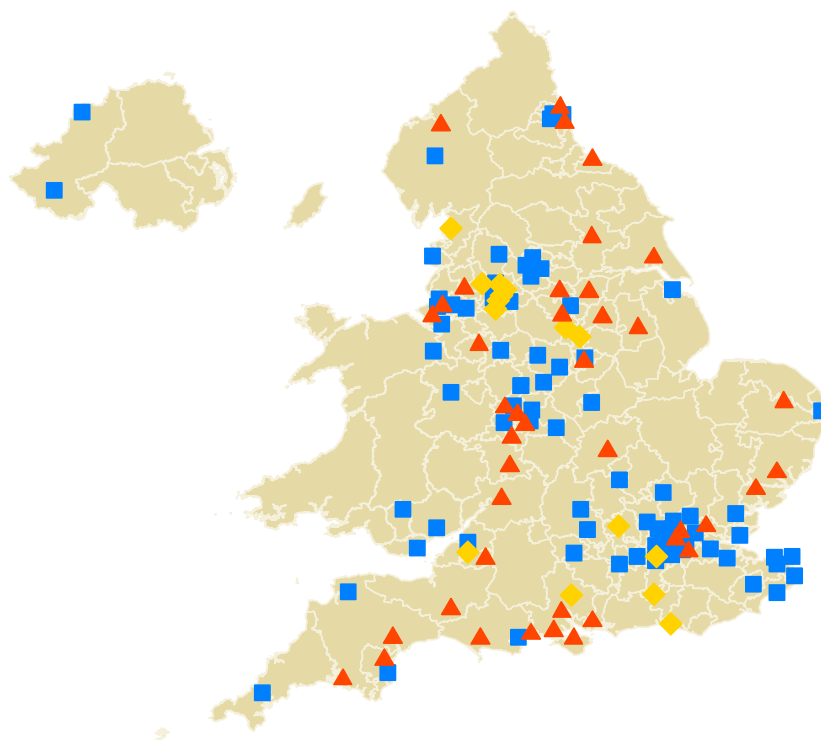
7-day working

Because Early Supported Discharge teams provide the same level of care as hospital, **they should be open 7 days a week** like hospitals.

This makes sure that stroke survivors **can see someone everyday** if they need to.

This map shows **which** Early Supported Discharge teams are available to stroke survivors **5 days a week or less, 6 days a week or 7 days a week.**

How many days a week Early Supported Discharge teams are available



■ 5 days or less ◆ 6 days ▲ 7 days

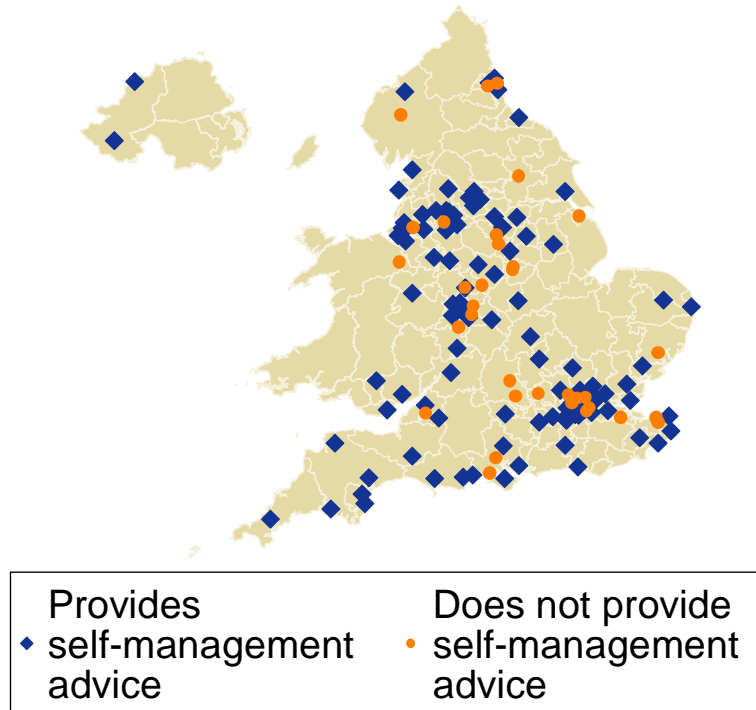


Access to self-management advice and useful information

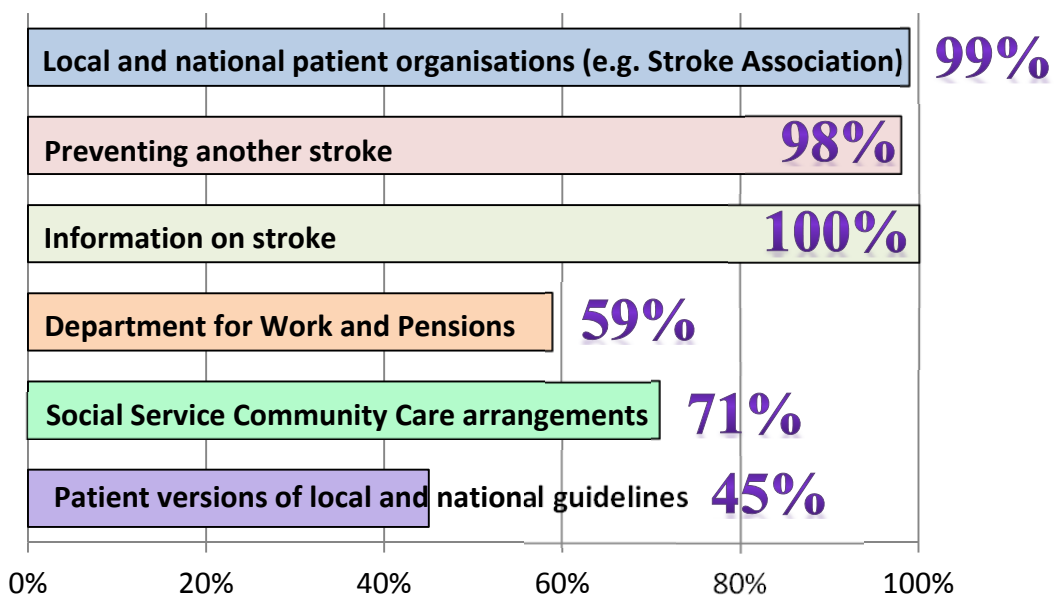
Being given advice on self-management can help stroke survivors **manage their own health** and make them feel **more independent**.

77% of Early Supported Discharge teams **provide advice** on self-management to stroke survivors. This map shows **where** they are.

Early Supported Discharge teams self-management advice



This picture shows **how many** Early Supported Discharge teams can also offer stroke survivors **other types of information** that can help them.





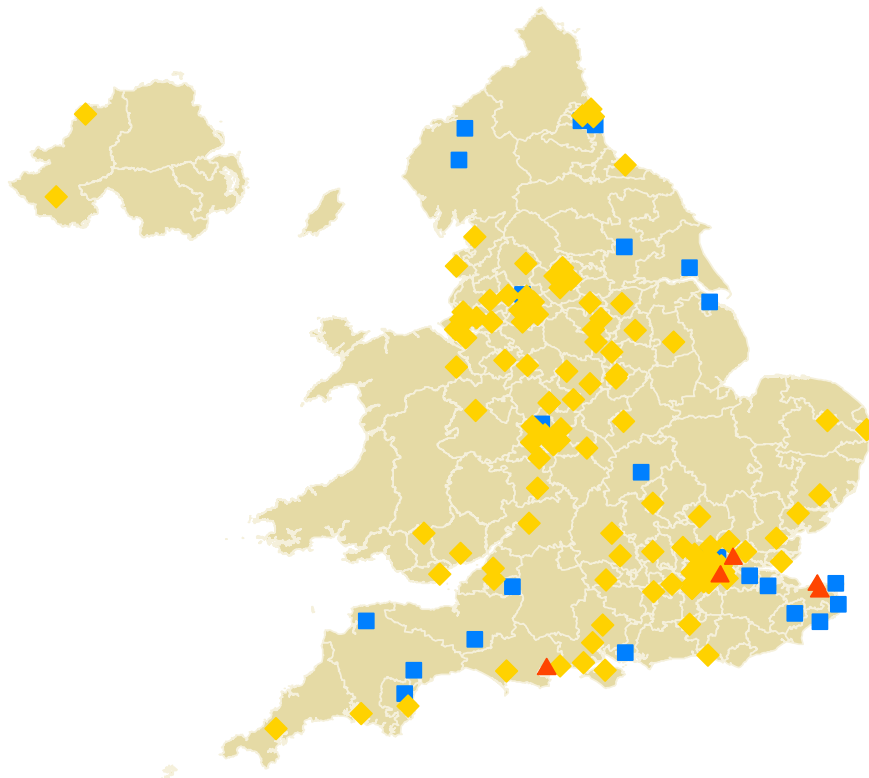
Will services only see stroke survivors for a certain amount of time?

Sometimes services can only see patients for a **certain amount of time** – we call this a **time limit**.

Services **should always tell** stroke survivors **how long** they can see them for and **if you can be re-referred** to them if you need more help.

This map shows which Early Supported Discharge teams have a **time limit** and how this is measured. It can be in **months** or by **number of appointments**.

Early Supported Discharge teams time limits



- | | | |
|-----------------|--------------------------|---------------------------------|
| ■ No time limit | ◆ Limit by time (months) | ▲ Limit by number of treatments |
|-----------------|--------------------------|---------------------------------|

Community Rehabilitation Team (CRT)

What is this?

A service which

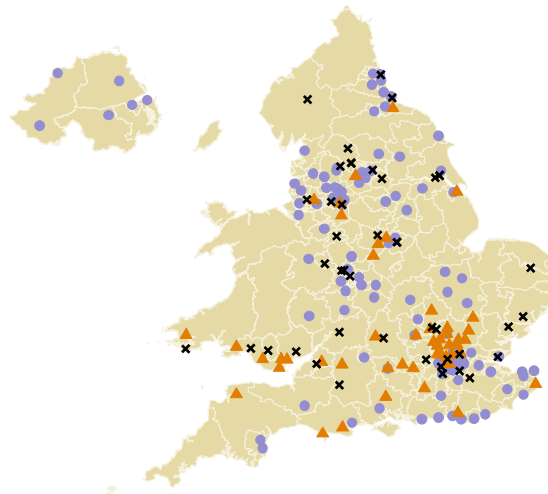
- gives **long term rehabilitation** and treats stroke survivors **in their own homes**
- helps stroke patients **after hospital discharge or after Early Supported Discharge**



Location

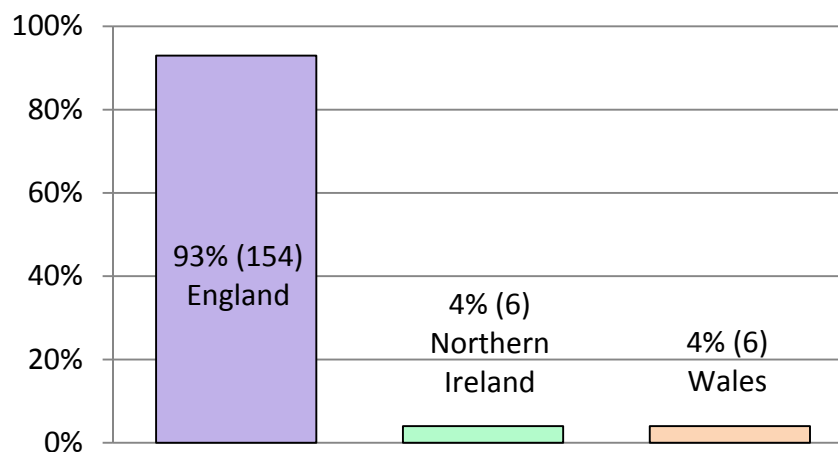
We were told about **166** Community Rehabilitation Teams. This map shows **where they are** and if they are a specialist stroke team (**they treat stroke only**).

Community Rehabilitation Teams



• Stroke/neurology only ▲ All patient types
* No information

This picture shows **how many** of the 166 Community Rehabilitation Teams are in England, Northern Ireland and Wales.



Waiting times until stroke patients get treatment



Community Rehabilitation Teams (CRT) **should:**

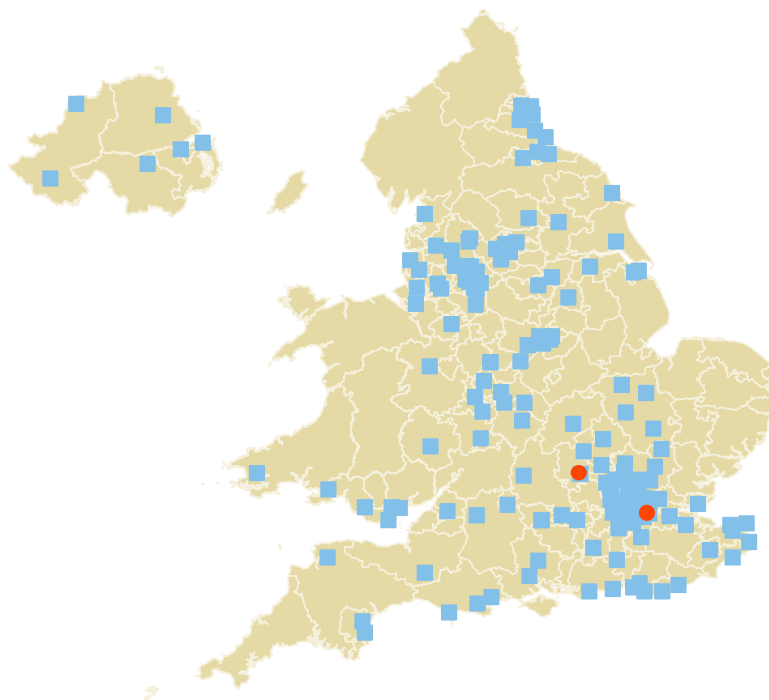
1. review stroke patients within 14 days
2. start **treatment within 90 days of referral** depending on the individual patient need.

Community Rehabilitation Teams can either work to help stroke patients **straight from hospital** or **following** Early Supported Discharge.

Because the stroke survivors will **still need regular therapy**, they must start treating them within **90 days (3 months) of referral**.

This map shows **which** Community Rehabilitation Teams **are meeting** the waiting time standard.

Community Rehabilitation Teams waiting times to treatment



■ Meeting standard ● Not meeting standard



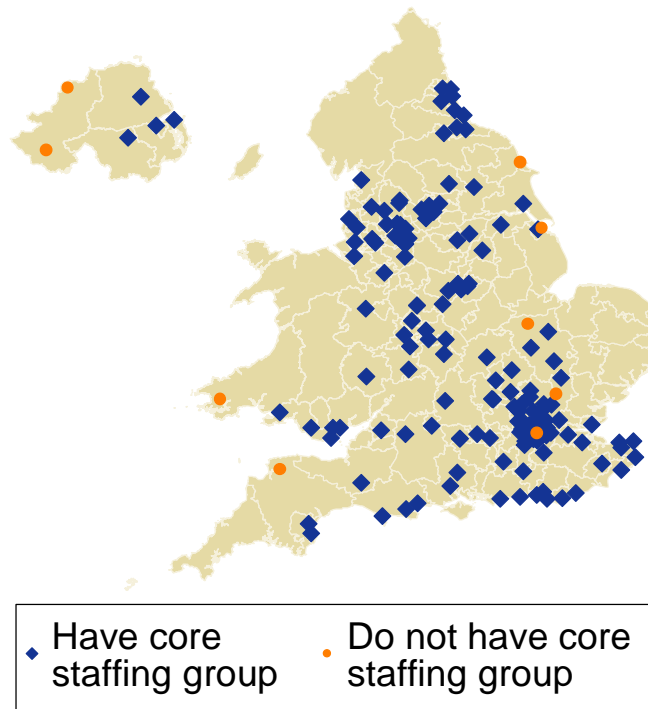
Staffing

Stroke survivors should have access to a 'core' group of staff to make sure they have access to different types of therapy and support if they need it.

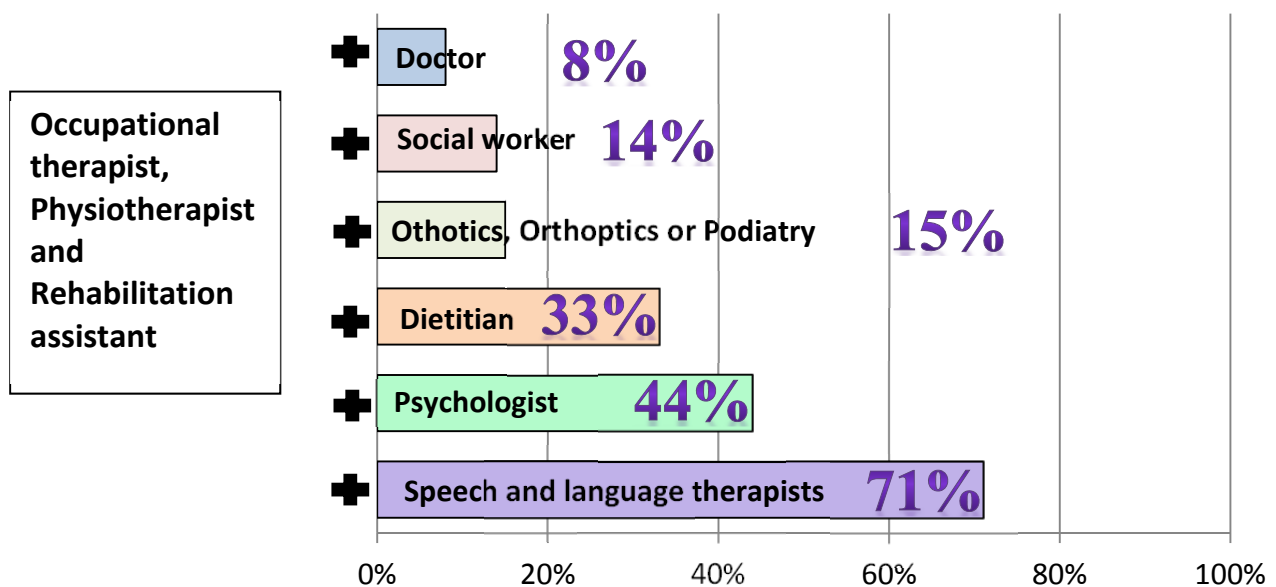
This 'core' group includes an **Occupational therapist, Physiotherapist** and a **Rehabilitation assistant**. **95%** of Community Rehabilitation Teams (CRT) has these.

This map shows which Community Rehabilitation Teams had the 'core' group.

Community Rehabilitation Teams staffing



This picture shows you **how many** Community Rehabilitation Teams can offer stroke survivors access to this 'core' group **PLUS (+)** other types of staff.





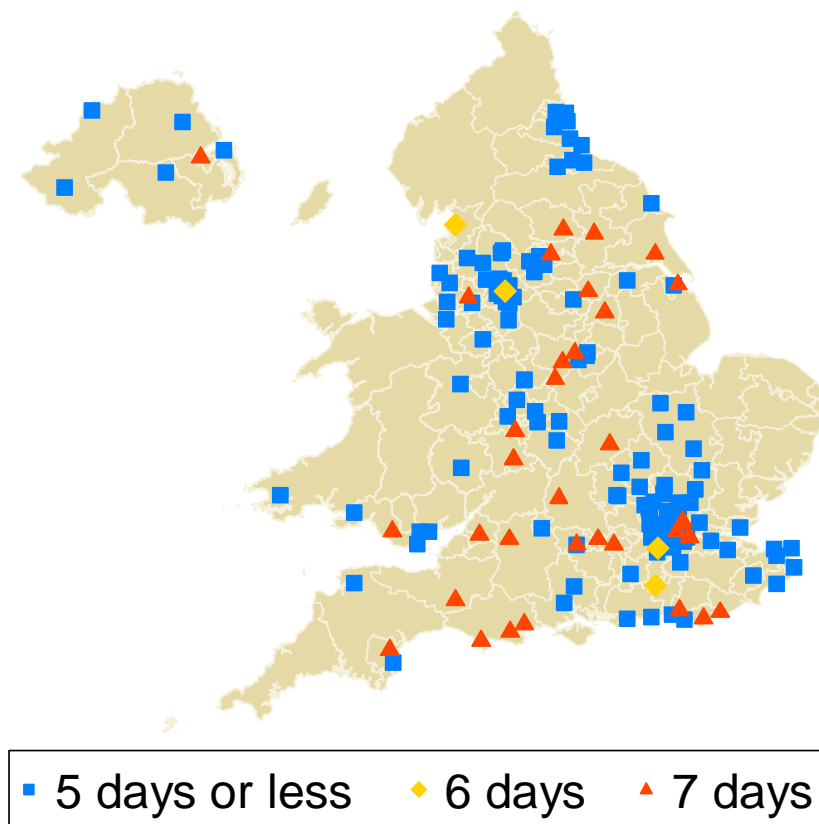
7-day working

More healthcare services now **need to be open 7 days a week** to make sure patients can get help and support whenever they need it.

This **includes** Community Rehabilitation Teams.

This map shows which Community Rehabilitation Teams (CRT) are available to stroke survivors **5 days a week or less**, **6 days a week** or **7 days a week**.

How many days a week Community Rehabilitation Teams are available



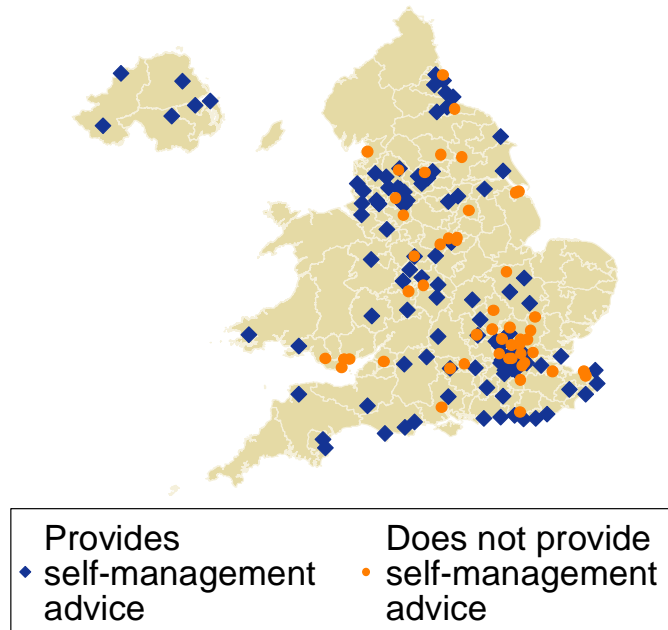


Access to self-management advice and useful information

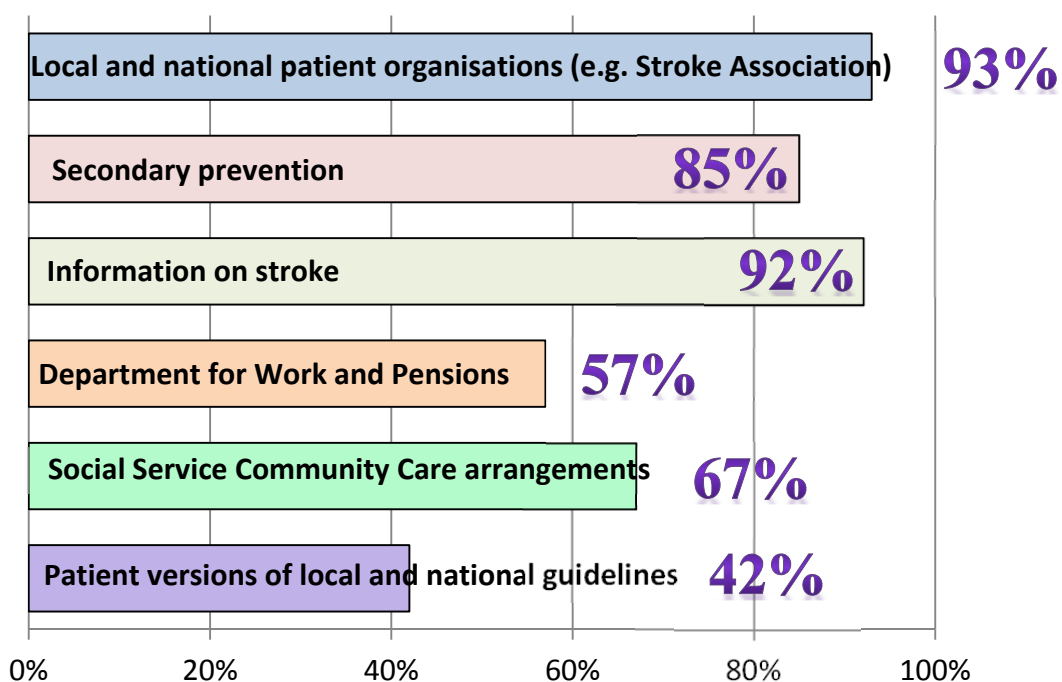
Being given advice on self-management can help stroke survivors **manage their own health** and make them feel **more independent**.

69% of Community Rehabilitation Teams **provide advice** on self-management to stroke survivors. This map shows **where** they are.

Community Rehabilitation Teams
self-management advice



This picture shows **how many** Community Rehabilitation Teams services can also offer stroke survivors **other types of information** that can help them.





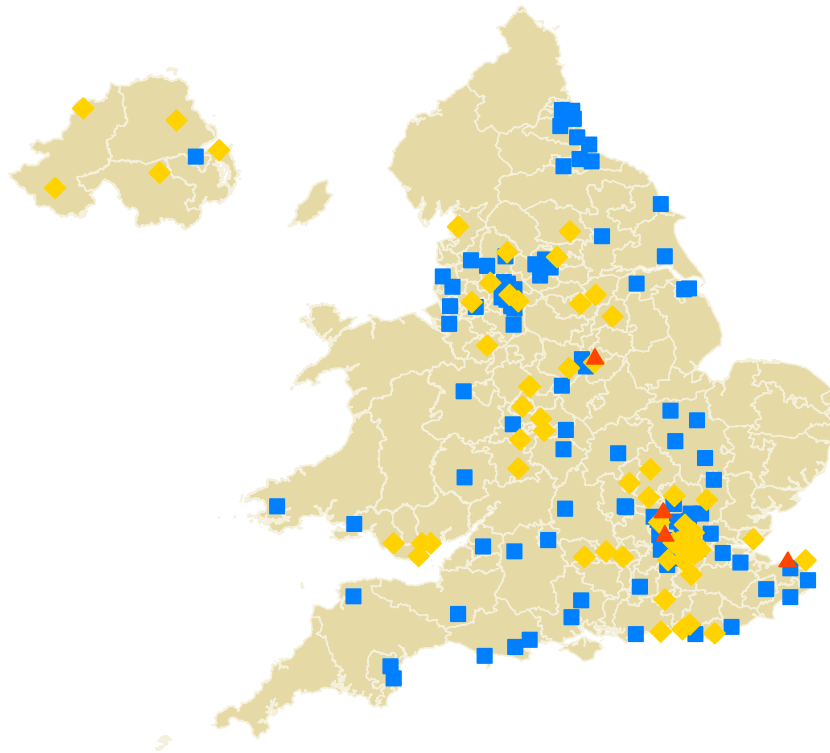
Will services only see stroke survivors for a certain amount of time?

Sometimes services can only see patients for a **certain amount of time** – we call this a **time limit**.

Services **should always tell** stroke survivors **how long** they can see them for and **if you can be re-referred** to them if you need more help.

This map shows **which** Community Rehabilitation Teams have a **time limit** and how this is measured. It can be in **months** or by **number of appointments**.

Community Rehabilitation Teams time limits



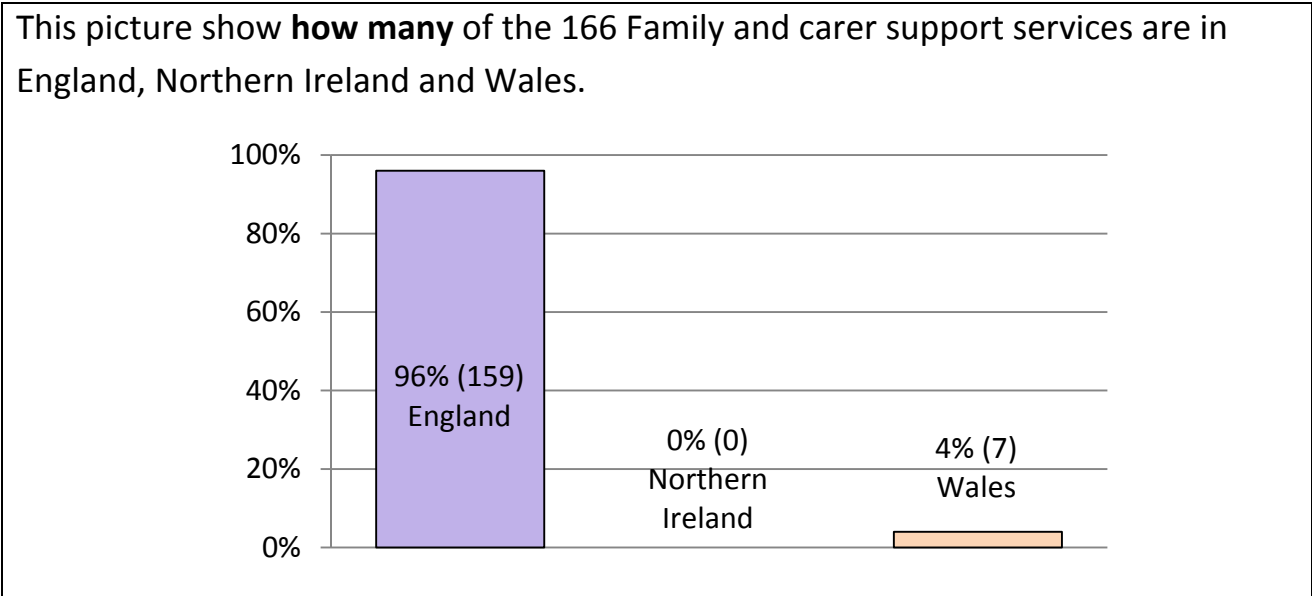
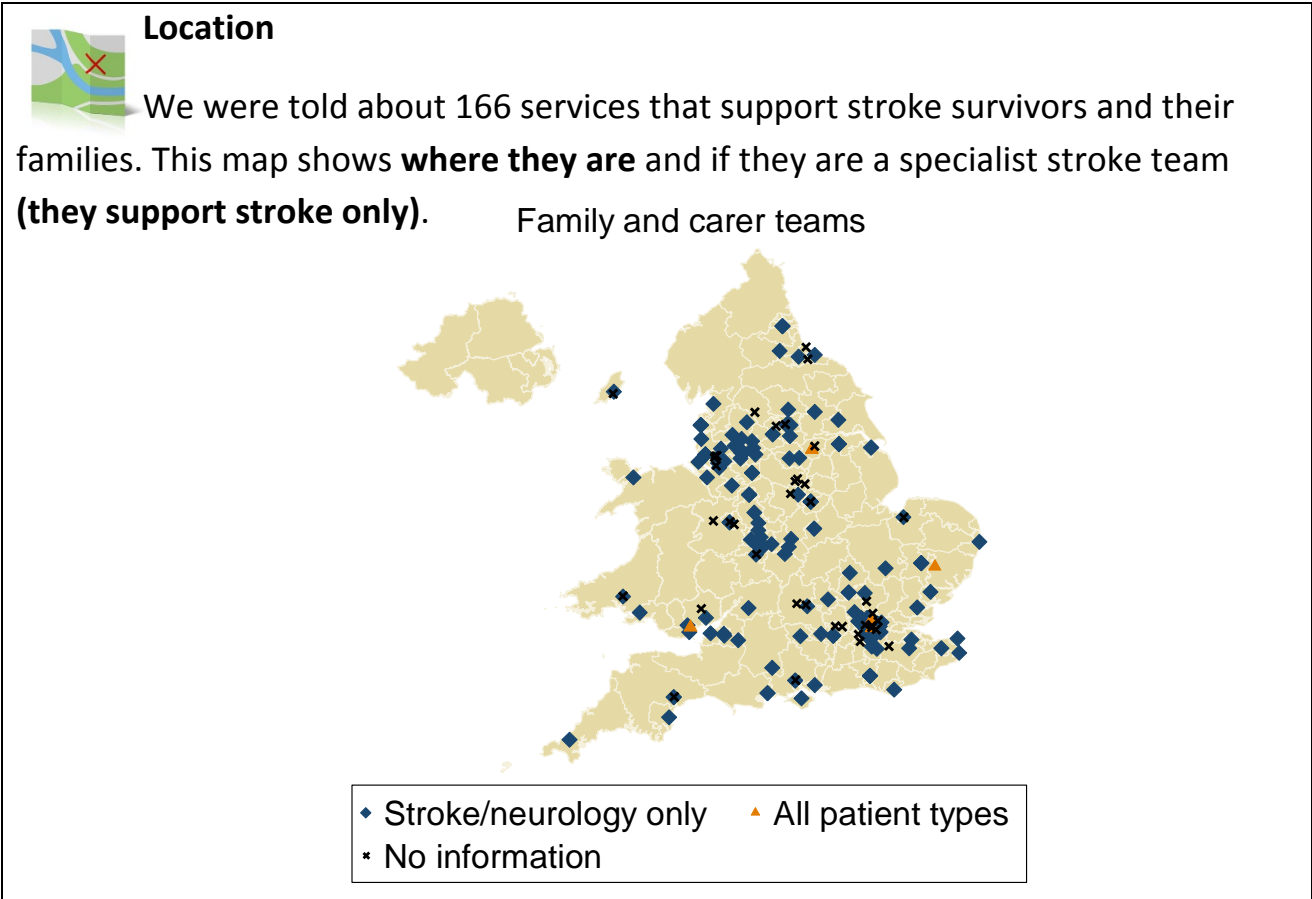
- No time limit
- ◆ Limit by time (months)
- ▲ Limit by number of treatments

Teams that support stroke survivors and their families

What is this?

A service which:

- **supports and advises** stroke survivors and their family and carers
- this includes **charities** and **locally funded groups**.



Waiting times until stroke patients get treatment



All other types of post-acute stroke service **should**:

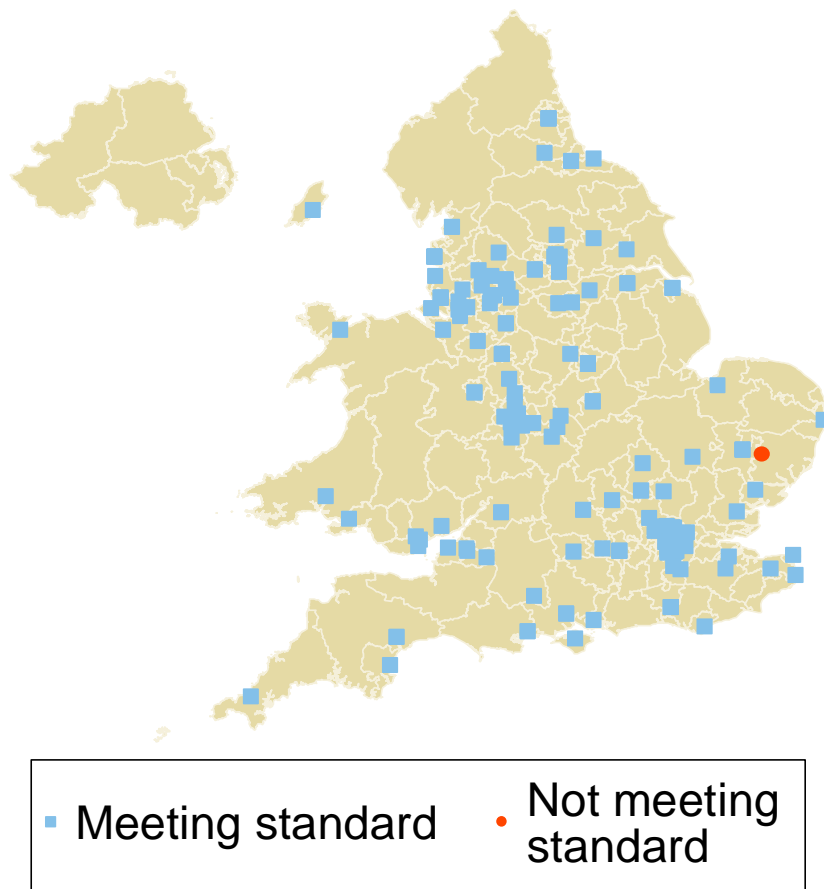
1. review stroke patients within 14 days
2. start **support within 90 days of referral** depending on the individual patient need.

Family and carer support services **offer a source of support and advice** for stroke survivors and their carers when they return home from hospital.

This can help stroke survivors get back to **as normal a life as possible**, as soon possible.

This map shows **which** Family and carer support services **are meeting** the waiting time standard.

Family and carer waiting times to treatment





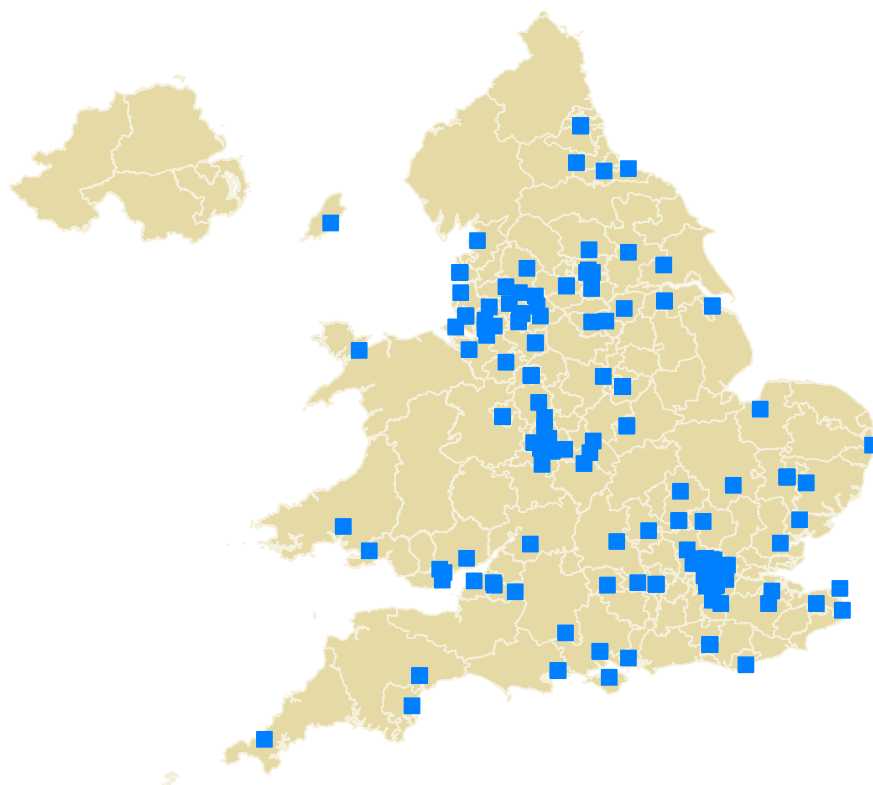
7-day working

More healthcare and support services are now being encouraged to **be open 7 days a week** to make sure patients can get help and support whenever they need it.

This may be **harder for Family and carer support services** because they often rely on **volunteers**.

This map shows **which** Family and carer support services are available to stroke survivors **5 days a week or less, 6 days a week or 7 days a week**.

How many days a week
Family and carer teams are available



■ 5 days or less

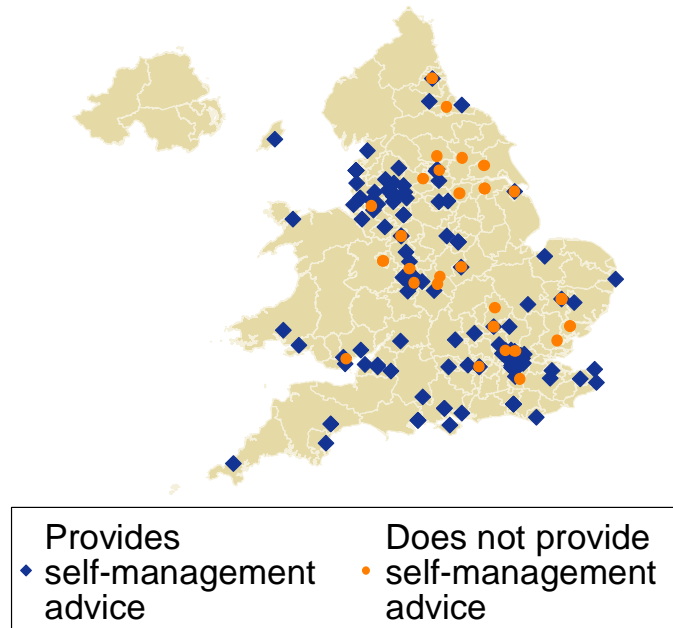


Access to self-management advice and useful information

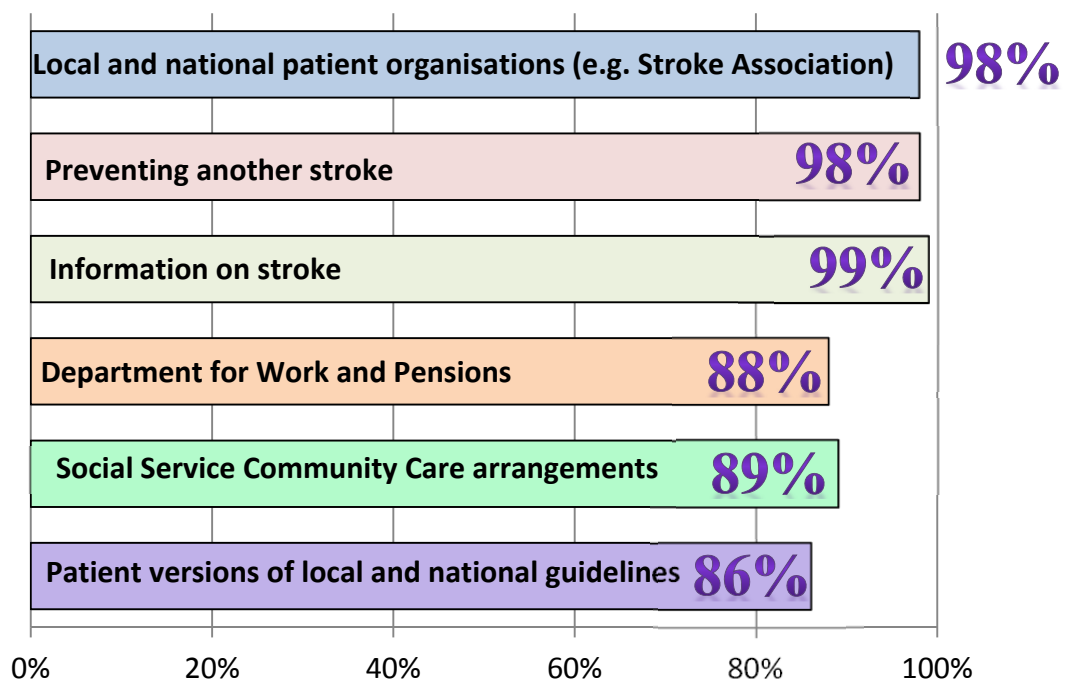
Being given advice on self-management can help stroke survivors **manage their own health** and make them feel **more independent**.

80% of Family and carer support services **provide advice** on self-management to stroke survivors. This map shows **where** they are.

Family and carer teams
self-management advice



This picture shows **how many** Family and carer support services can also offer stroke survivors **other types of information** that can help them.





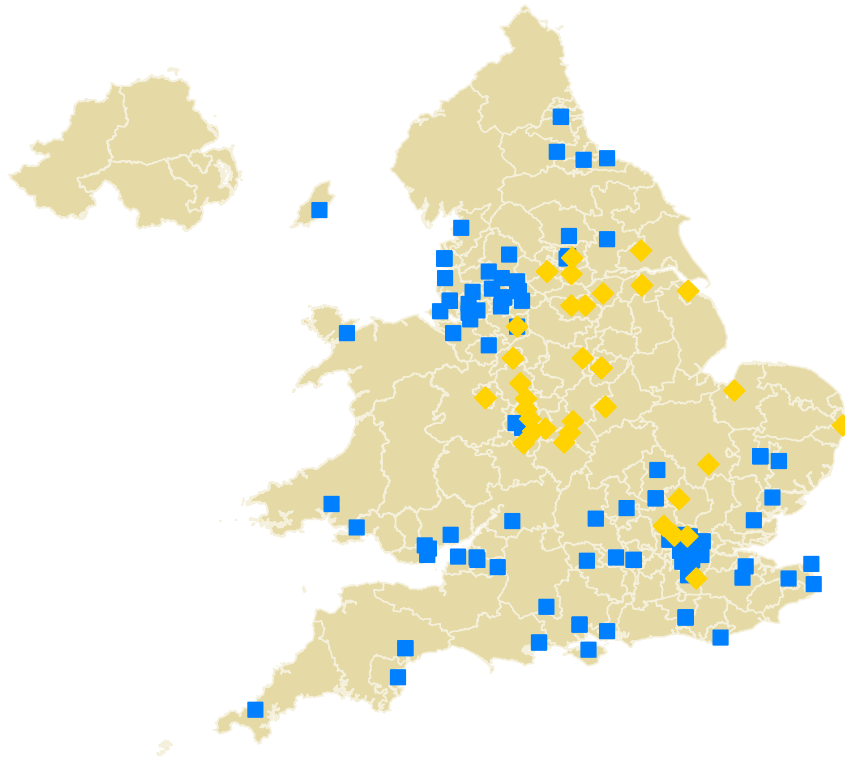
Will services only see stroke survivors for a certain amount of time?

Sometimes services can only see patients for a **certain amount of time** – we call this a **time limit**.

Services **should always tell** stroke survivors **how long** they can see them for and **if you can be re-referred** to them if you need more help.

This map shows **which** Family and carer support services have a **time limit** and how this is measured. It can be in **months** or by **number of appointments**.

Family and carer teams time limits



- No time limit
- ◆ Limit by time (months)

6 month reviews



6 month reviews

6 month reviews are **meetings** to look at a stroke patients' **recovery 6 months after their stroke**.

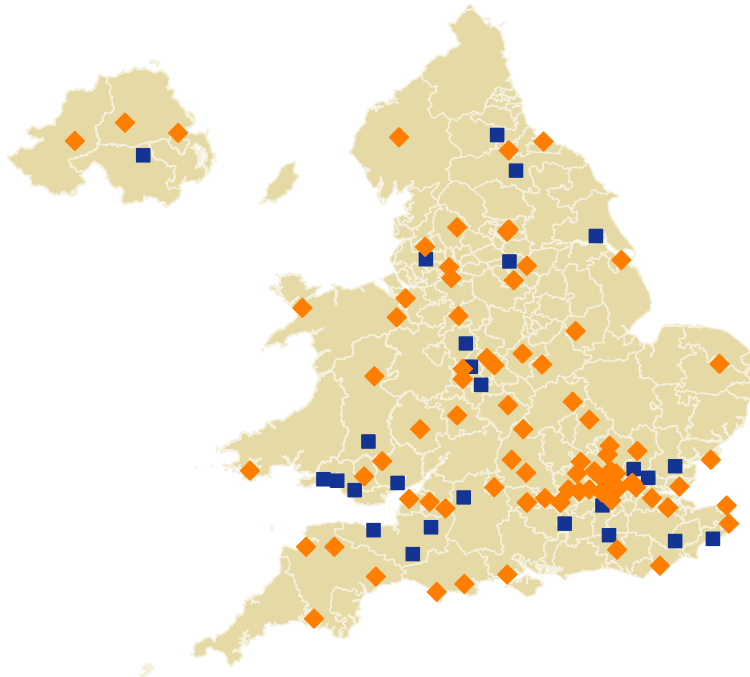
If **more care and support is appropriate** the person holding this meeting will make sure the stroke patient gets this.

A document called the 'National Stroke Strategy' says that **all stroke survivors** should have a 6 month review.

The next four maps show **which** Inpatient rehabilitation, Early Supported Discharge (ESD), Community Rehabilitation Teams (CRT) and Family and carer support services are carrying out 6 month reviews.

Inpatient rehabilitation – 23% of these services carry out 6 month reviews.

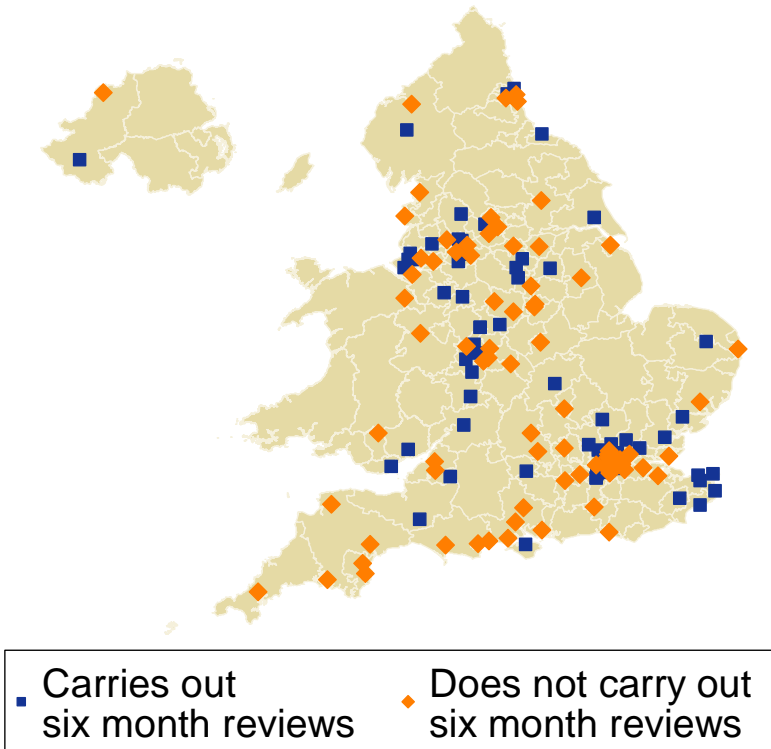
Inpatient rehabilitation teams 6 month reviews



- | | |
|---------------------------------|----------------------------------------|
| ■ Carries out six month reviews | ◆ Does not carry out six month reviews |
|---------------------------------|----------------------------------------|

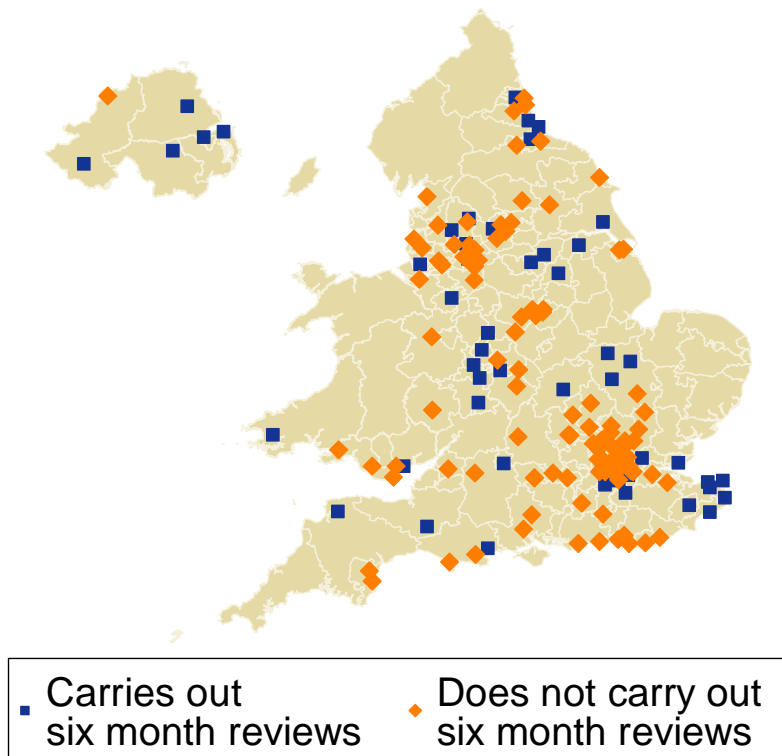
Early Supported Discharge teams – 46% of these teams carry out 6 month reviews.

Early Supported Discharge 6 month reviews



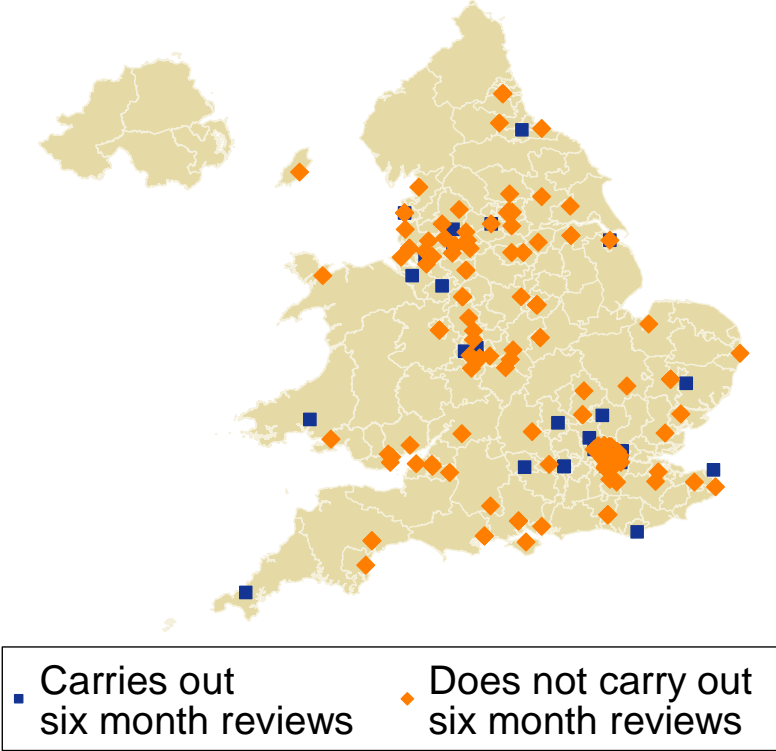
Community Rehabilitation Teams – 39% of these teams carry out 6 month reviews.

Community Rehabilitation Teams 6 month reviews



Family and carer support services – 17% of these services carry out 6 month reviews.

Family and carer teams 6 month reviews

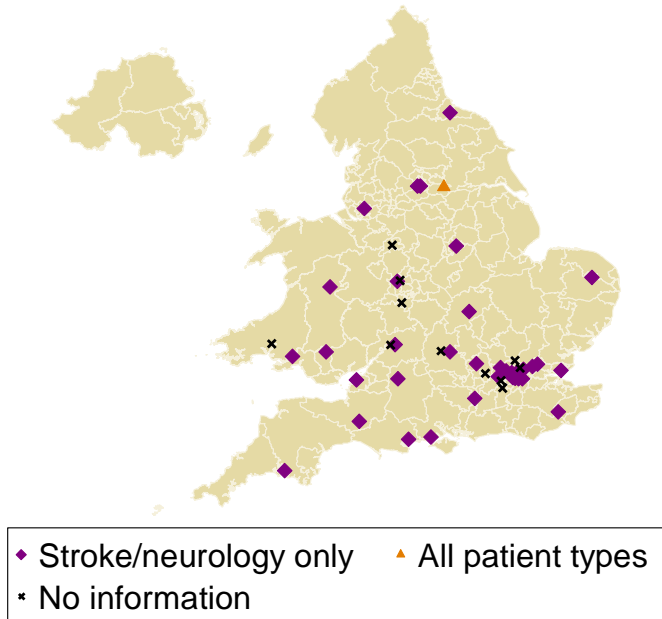


Location of other types of longer term stroke services

There are **other types of longer term stroke services** which we told you about on **page 6** (the ones not highlighted in red). The next 5 maps show where these services are.

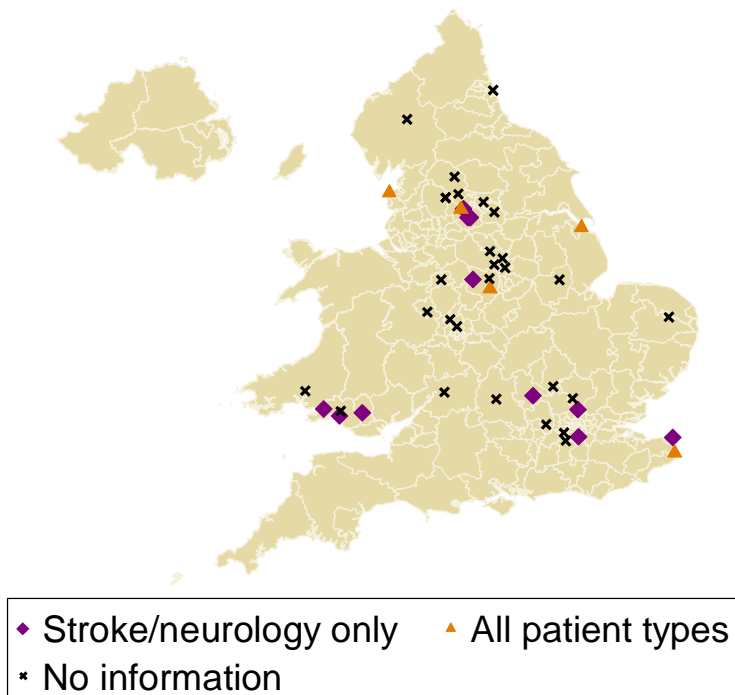
This map shows the **location** of services which provide **6 month reviews only**.

Six month providers



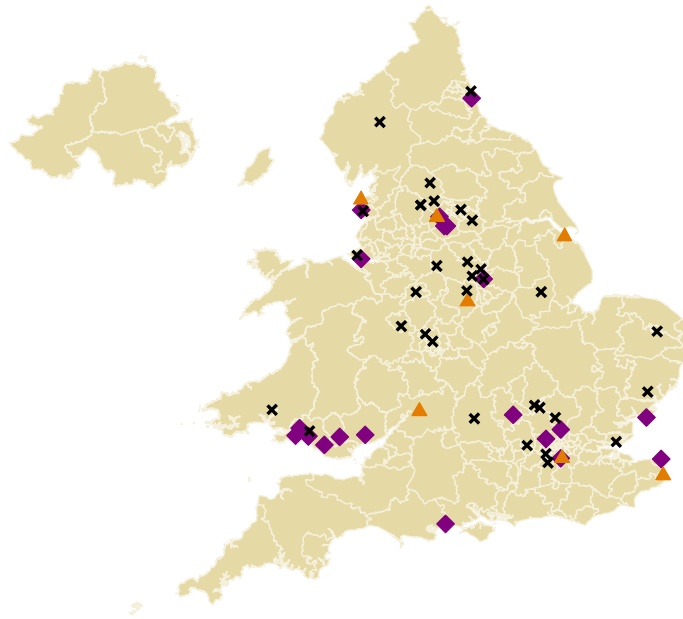
This map shows the **location** of services which provide **Occupational Therapy only**.

Occupational Therapy



This map shows the **location** of services which provide **Physiotherapy only**.

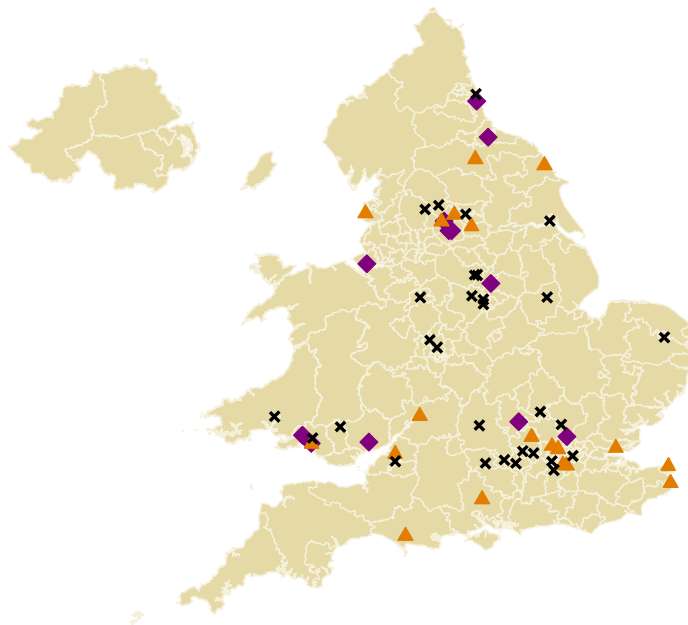
Physiotherapy



- ◆ Stroke/neurology only
- ▲ All patient types
- * No information

This map shows the **location** of services which provide **Speech and Language Therapy only**.

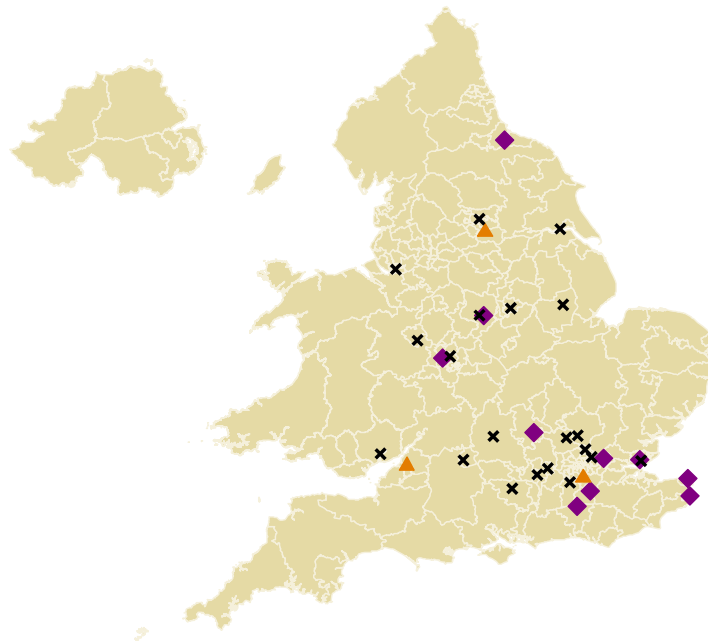
Speech and Language Therapy



- ◆ Stroke/neurology only
- ▲ All patient types
- * No information

This map shows the **location** of services which provide a **Psychological Support service**.

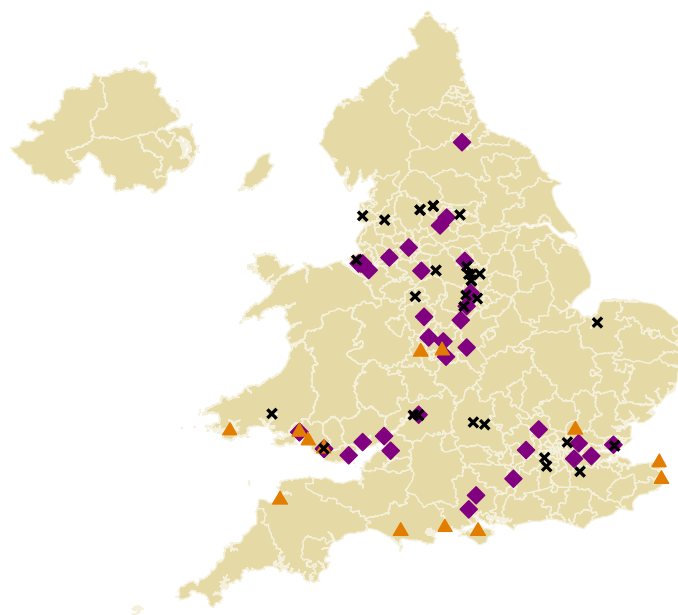
Psychology



- ◆ Stroke/neurology only
- ▲ All patient types
- * No information

This map shows the **location** of services which provide an **Outpatient (clinical based) service**.

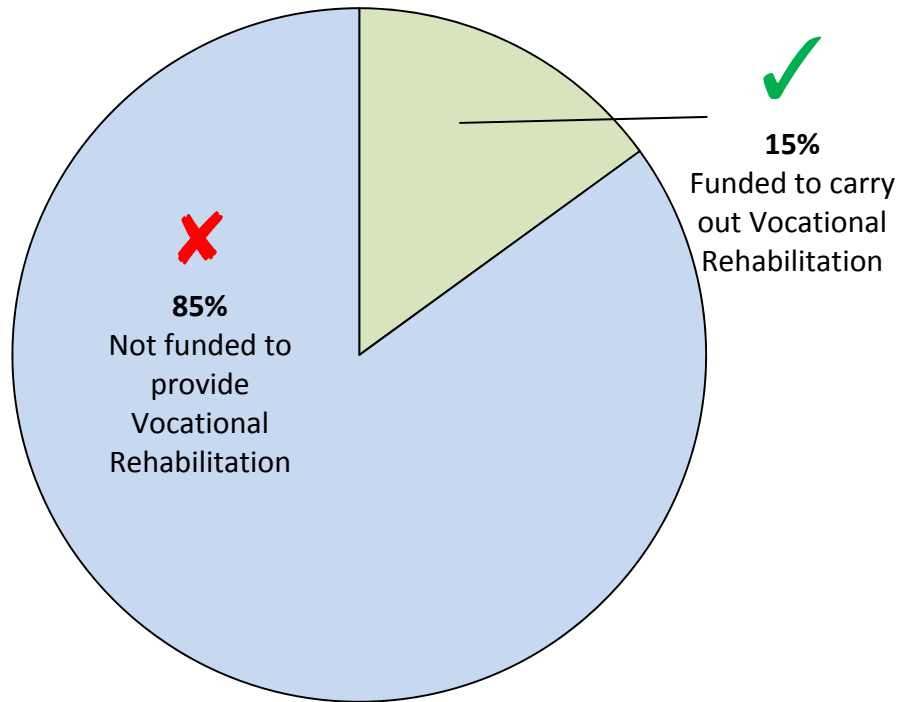
Outpatient



- ◆ Stroke/neurology only
- ▲ All patient types
- * No information

Vocational rehabilitation

Of the 604 services which sent SSNAP information on the types of services they carry out for stroke patients, **only 15%** were funded to **provide Vocational Rehabilitation** as well.



Recommendations

This section tells you what post-acute services should do to improve stroke services.

Key words	What happens now	Recommendation
6 month reviews	Some areas of England, Wales and Northern Ireland do not appear to have 6 month reviews taking place.	All organisations that fund longer term stroke services should make sure a 6 month review service is funded and 6 month review data is sent to SSNAP.
Early Supported Discharge (ESD) team 7-day working	Some ESD services are not working 7 days week even though they should replace the care given in hospital.	ESD services should make themselves available to stroke patients 7 days a week in the same way that hospitals do.
Early Supported Discharged (ESD) team waiting times	Many ESD teams are reviewing and treating patients within 1 day (or 24 hours) of discharge from hospital.	All ESD teams should be reviewing and treating stroke patients within 1 day (or 24 hours) of hospital discharge.
Information for stroke survivors and their carers	Some services have lots of information available for stroke survivors and their carers while some have no or not much information.	Information that will help stroke survivors deal with the effects of stroke should be freely available at all longer term stroke services.
Psychological Support Services	Waiting times to see a Psychological Support Service is on average over 10 weeks.	Waiting times to treatment by Psychological Support services should be the same as other longer term stroke services and be within 90 days of referral.

SSNAP	Many longer term stroke services are already sending SSNAP information on their patient care.	Any services which are currently not sending their patient care data to SSNAP should do so.
Staffing levels	There are some services which can offer stroke patients access to doctors, nurses and social workers, but there are also some that cannot.	All longer term stroke services should provide access to doctors, nurses and a named social worker.
Stroke training	Some non-stroke specialist longer term services are treating large numbers of stroke patients.	Non-stroke specialist services which are treating stroke patients should make sure that their staff, including rehabilitation assistants, receive regular training on how to care for stroke survivors.
Swallow screening	Some inpatient rehabilitation services do not have nurses trained in swallow screening. Swallow screening ensures stroke survivors can swallow food and drink properly.	Inpatient rehabilitation services should make sure that nurses who treat stroke patients are trained in swallow screening.
Time limits and re-referral to services	Many longer term services have time limits on how long they can see stroke patients.	All longer term services should have clear policies on time limits and re-referral.
Vocational rehabilitation	Only a small number of services are funded to carry out vocational rehabilitation.	All stroke patients should have access to vocational rehabilitation if they need it.

Useful words

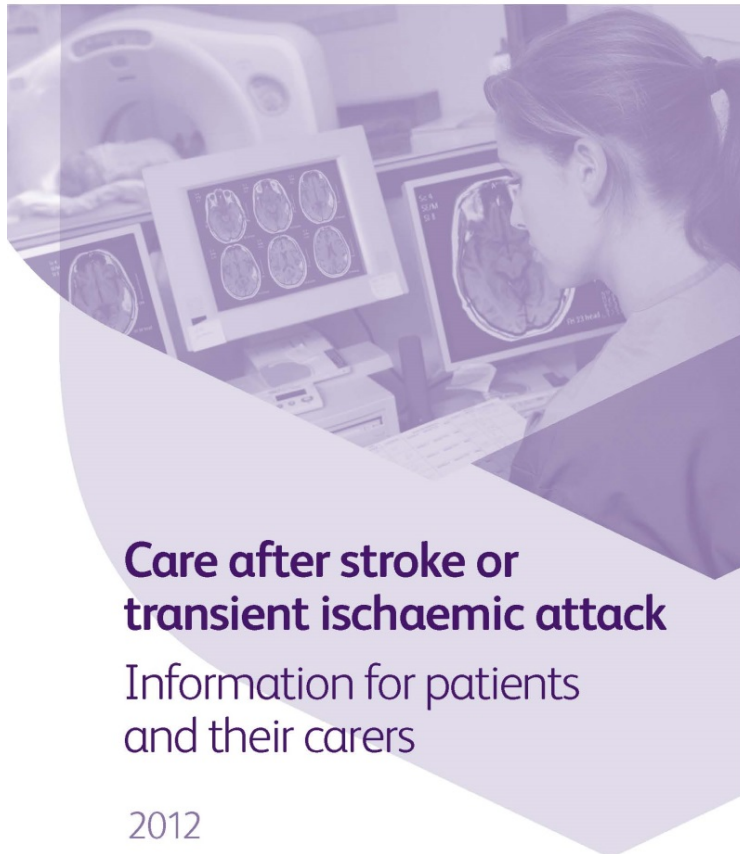
7-day working	Services that can work every day of the week.
Audit	A process to compare and improve services. This audit does this by comparing how stroke care is organised against national guidelines in England, Wales and Northern Ireland.
Carer	Someone who is not paid but provides support and personal care at home, includes relatives and friends.
Community Rehabilitation Team (CRT)	Services which offer longer term rehabilitation at a patient's home.
'Core' staffing group	Includes an Occupational therapist, Physiotherapy and Rehabilitation assistant. Having this core group of staff makes sure that many types of therapy and support can be offered by a service. Teams should try and have even more types of staff.
Early Supported Discharge (ESD)	Services which treat stroke patients at their home, giving the same level of therapy as a patient would have at hospital.
Family and Carer Support Services	Organisations, often charities, which help and support stroke survivors and their carers.
Inpatient rehabilitation	Bed-based services where stroke patients can stay if they need extra help before going home but they no longer need acute care.
National Clinical Guideline for Stroke (2012)	A national set of guidelines for stroke care published by the Stroke Working Party.
National Stroke Strategy (2007)	The Department of Health's plan for improving services for people who have had a stroke.

Occupational Therapy	Helps stroke survivors re-learn every day activities and skills.
Physiotherapy	Can help stroke survivors recover from weakness in the body, often experienced on one side of the body.
Rehabilitation assistant	A member of staff who have help with providing therapy to stroke survivors.
Psychological Support	Services which support stroke survivors with conditions such as depression and difficulty understanding things.
Self-management advice (tools)	Focuses on a person's belief in their own ability (self-efficacy) to help stroke survivors feel more empowered, in control and independent. It involves personally relevant goals and guidance on how to overcome physical, economic and psychological barriers.
Six month reviews	These are meetings stroke survivors have six months after their stroke. They are used to find out if a patient needs more treatment or help and make sure they see the right people if they do.
Speech and Language Therapy	Therapy to help with aphasia and other communication difficulties.
SSNAP (Sentinel Stroke National Audit Programme)	A clinical audit project to measure patient care and the organisation of care against guidelines on how to deliver the best care.
Vocational Rehabilitation	This is teaching patients the skills they need to return to work or to volunteering.

Useful Contacts and Websites

<p>Disability Living Allowance Helpline (to get information on financial help or if you are seeking to start a claim)</p> <p>Telephone: 08457 712 3456</p> <p>Textphone: 08457 722 4433</p>	<p>Relatives and Residents Association (provides information, advice and support for residents of care homes and their relatives)</p> <p>Advice Line: 020 7359 8136</p> <p>Website: www.relres.org</p>
<p>Carers UK (useful advice and information for carers)</p> <p>Carers Line: 0808 808 7777</p> <p>Website: www.carersuk.org</p>	<p>Shaw Trust (a charity which specialises in helping disabled people to return to work)</p> <p>Tel: 01225 716300</p> <p>Website: www.shaw-trust.org.uk</p>
<p>Connect – the communication disability network (works with people living with stroke and aphasia)</p> <p>Telephone: 020 7367 0840</p> <p>Website: www.ukconnect.org</p>	<p>Different Strokes (is run by and for younger people who have had strokes)</p> <p>Tel: 0845 130 7172 or 01908 317618</p> <p>Website: www.differentstrokes.co.uk</p>
<p>NHS 111/ NHS Choices</p> <p>Telephone (for non-emergency medical advice): 111</p> <p>Website: www.nhs.uk</p>	<p>Speakability</p> <p>Speakability supports people living with aphasia and their carers</p> <p>Helpline: 0808 808 9572</p> <p>Website: www.speakability.org.uk</p>
<p>The Stroke Association (provides practical support, including telephone helplines, publications and welfare grants, to people who have had strokes, their families and carers)</p> <p>Helpline: 0303 303 3100</p> <p>Website: www.stroke.org.uk</p>	<p>Aphasia Alliance (A coalition of key organisations from all over the UK that work in the field of aphasia. They can help people identify which organisations might be most appropriate)</p> <p>Telephone: 01525 290 002</p> <p>Website: www.aphasiaalliance.org</p>

Further information on stroke for patients and carers



Care after stroke or transient ischaemic attack

Information for patients and their carers

2012

- This booklet is a **shorter version** of the 'National Clinical **Guideline** for Stroke'.
- It is written for **stroke survivors and their carers** but is also useful for anyone who has an interest in stroke care and management.
- It gives **information and advice** on the **care and treatment** of adults **after a stroke** or TIA (mini stroke).
- It also has listings of **organisations and support groups** who can help stroke patients and their families or carers.

Please go to <http://bookshop.rcplondon.ac.uk> if you would like to order this patient version of the 'Guideline'. You can also download the booklet from here:

<https://www.rcplondon.ac.uk/resources/stroke-guidelines>



We want to know.....

What do you think of this report? Have you found it useful?

Please email ssnap@rcplondon.ac.uk and let us know.