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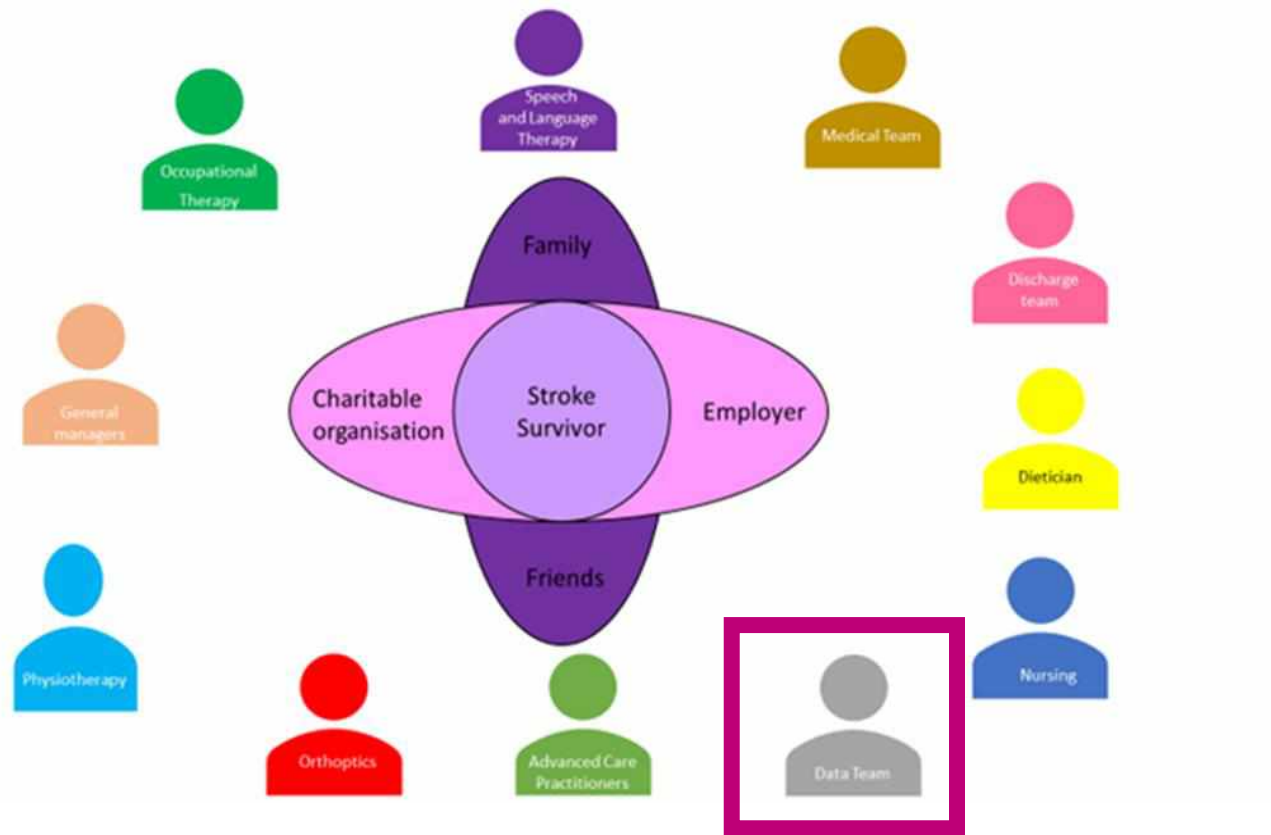
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Background of the MGH Stroke Unit

16 HASU beds
35 ASU beds
8 Rehab Beds
ESD team

- Rapid Expansion in 2020 (Medway and TWH SU shut)
- Significant increase in admissions (from 2 np a day to 8+)
- Trust drive to move to online notes
- Our systems needed to change!!

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Stroke Performance Analyst and The MDT

- At Maidstone Hospital the Stroke Performance Analyst is part of a larger Stroke Data Team which sits within the greater Stroke MDT.

- Our Data Team is made up of a Stroke Performance Analyst and a Stroke Data Co-Ordinator, both of whom work exclusively with stroke data.

- The Data Co-Ordinator is primarily responsible for entering and maintaining SSNAP data, while also supporting the MDT in understanding SSNAP and recording their data correctly.

- The Performance Analyst is mainly concerned manipulating and reporting on all stroke data, be that from SSNAP or other local sources.

- Communication between the data team and the MDT is vital for success, especially when it comes to informing and change in operation.

Team Methodology

- While graphs and data might be pretty on a page, even the most powerful data tools and analysis cannot generate real change without the entire MDT embracing it.

- The potency of embracing data at this level cannot be overstated. It allows each discipline and team in contact with strokes patients to iron out problem areas and actively look for ways to improve.

- Actively embracing this approach, maximising work with data rather than fearing it, has allowed are team to constantly improve our SSNAP Scores.

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# The Difference Between Stroke Performance Analyst and BI

Stroke Performance Analyst:

- Looks at data concerned with the overall stroke unit down to patient specifics.

- Covers only stroke data needs.

- Is embedded within medical teams with easy access to medical opinions and fact checking.

- Familiar with stroke operations and patient care due to daily exposure to the ward and data.

- Examples of Stroke Performance Analyst Data Work;
  - Current SSNAP performance
  - Number of Patients Discharged with a MRS <3
  - Thrombolysis rates at different times of day

Business Intelligence:

- Looks at information at a macro level, normally powered by a hospitals local systems.

- Covers the entire hospital needs.

- Operates distinctly from medical professionals.

- Examples of BI Data Work;
  - Number of patients admitted over a specific time period
  - Number of patients with a specific diagnosis
  - Length of stay on a ward
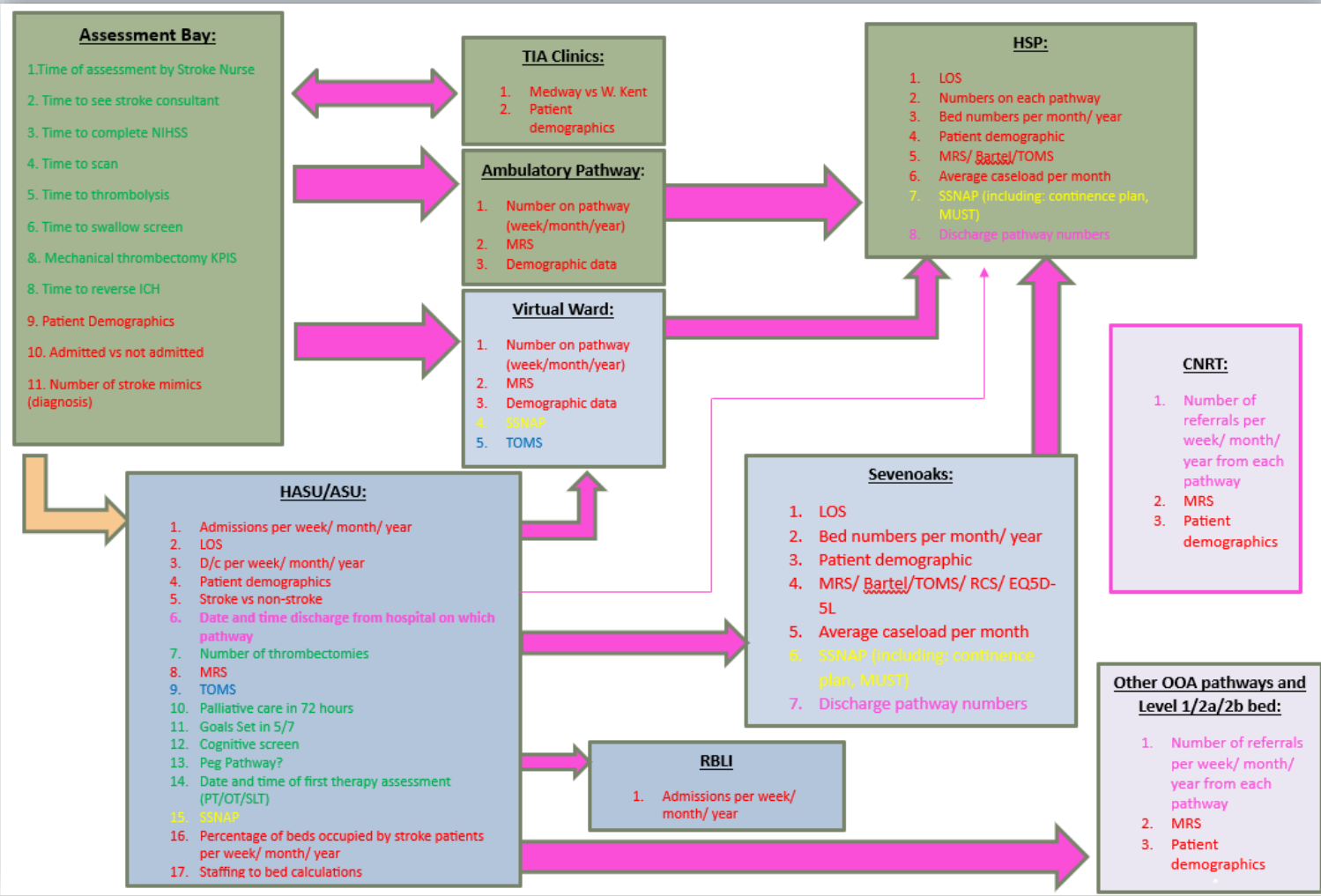
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Mapping Out Your Stroke Data

Tips and Hints – Making Information Digital

Stroke Sentinel National Audit - SSNAP Proforma Data: Therapy | **EXCEL CHECK COMPLETE - EXCEL LOCKED**

Name :												Goal Date :			MRS Premorbid :		Barthel Premorbid :	
DOB :			Codes									Mood Date :			MRS Discharge :		Barthel Discharge :	
Hospital Number :			Medically Unwell - MU Patient Unavailable - PU Not Tolerated - NT Patient Declined - PD									Cog Screen Date :			DC Destination :			
			No Therapy Capacity - NTC Indirect Therapy - ID															

Clear Below Cell to Reset Date ↓	PT (Mins)	PTA	Code	Total Minutes	PTA mins	Total Days	Last Day Seen	OT (Mins)	OTA	Code	Total Minutes	OTA mins	Total Days	Last Day Seen	SLT (Mins)	SLTA	Code	Total Minutes	SLTA mins	Total Days	Last Day Seen
09/05/2024	60			220	70	3	11/05/2024	90			230	40	3	11/05/2024		70		110	40	2	10/05/2024
10/05/2024	90		PT Locked	Yes				100		OT Locked	Yes					40	SLT Locked	Yes			
11/05/2024		70							40												
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16/05/2024																					
17/05/2024																					

- Digitising data that was once on paper can greatly improve efficiency in general and especially when SSNAP data entry is concerned.

- Perhaps most importantly this allows niche data (such as therapy minutes) to be reviewed in detail on mass quickly and easily.

- This sort of data collection also be optimised to allow collection of information beyond the original score, eg you have a spreadsheet of all patients that need to be SSNAP, could this be purposed to measure specific length of stay for stroke patients?

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Tips and Hints – SSNAP Data

- If your team participates in SSNAP you will have access to rich data that can be utilised via the DIY and export tools at any time, even between official SSNAP results.

- Unlike much information that is recorded via hospital system SSNAP provides clean data that is very easy to work with (just don't be put off by how the export looks as it can look a bit scary).
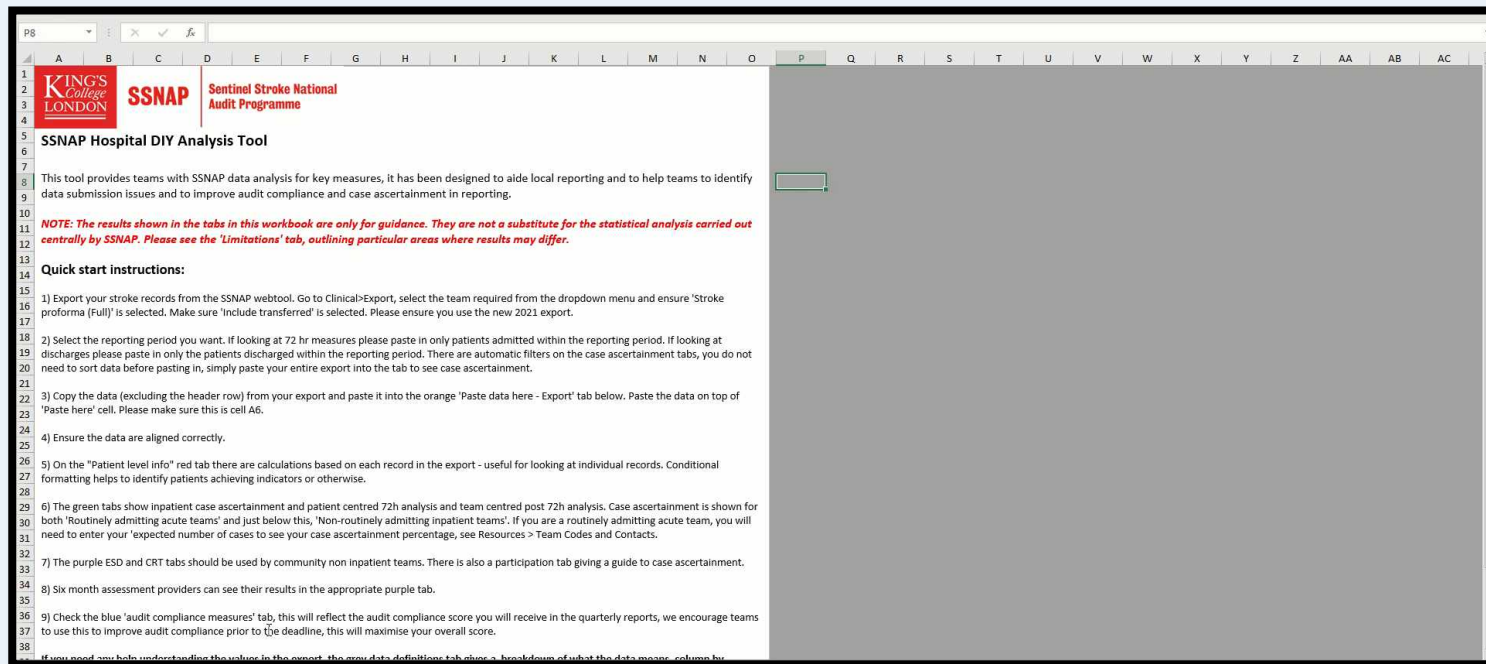
- Working, or having a specific performance analysis working, with the SSNAP DIY Tool (on the left) or with date exported from SSNAP can provide incredibly detail information quickly.
- All SSNAP teams have access to this data, though medical staff may struggle to find the time to properly optimise properly. That is were the Data Team comes.

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Conclusion

- Find out where your information for SSNAP is collected and map out the different sources

- Consider if any can be collected electronically

- Take a systems approach (making the process easier for staff will get them automatically on board)

- Embedded data centrally into the team

- Data is a universal language to support your pitch/ narrative

- Reduced your teams data phobia!!!!

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