

## ACUTE STROKE SERVICES

### SSNAP Organisational Audit - May 2025



**92,414** Acute stroke admissions  
in the preceding year

**145** Participating sites



**4,545** Beds on stroke units

**851** Hyperacute beds  
on stroke unit

### Quality of acute services stroke care - % of sites

#### Staffing / Workforce



**17%**

Appropriate access to all relevant  
disciplines

**10%**

Have the presence of a clinical  
psychologist (qualified) per 30 beds

#### Access to specialist treatment & support



**45%**

Receive a pre-  
alert for suspected stroke patients

#### TIA Service



**48%**

Provide MRI\* as first line of brain  
imaging for TIA\*\* patients

#### 7-day working



**74%**

Have an out of hours stroke specialist  
nurse

**37%**

Have the minimum number of nurses  
on duty at 10am weekends

**40%**

Offer at least two types of therapy  
7 days a week†

#### Patient & carer engagement



**37%**

Undertake a formal survey seeking  
patient/carers views on stroke service

#### Quality improvement & leadership



**48%**

Have responsibility for audit results  
taken at management level

\*MRI Magnetic Resonance Imaging




\*\*TIA Transient Ischemic Attack

† Includes occupational therapy, physiotherapy and speech and language therapy

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Quality of acute services stroke care - % of sites

 GETTING BETTER	Key Indicators	2021	2025	Change
	<b>KI 4</b> Have the minimum number of nurses on duty at 10am weekends	23%	37%	+14%
	<b>KI 6</b> Receive a pre-alert for suspected stroke patients	26%	45%	+4%
 PLATEAUEING	Key Indicators	2021	2025	Change
	<b>KI 2</b> Have the presence of a clinical psychologist (qualified) per 30 beds	9%	10%	+1%
	<b>KI 5</b> Offer at least two types of therapy 7 days a week	42%	40%	-2%
	<b>KI 7</b> Undertake a formal survey seeking patient/carer views on stroke services	40%	37%	-3%
	<b>KI 8</b> Provide MRI as first line of brain imaging for TIA patients	49%	48%	-1%
 GETTING WORSE	Key Indicators	2021	2025	Change
	<b>KI 1</b> Meet the minimum establishment of band 6 and band 7 nurses per 10 beds	46%	17%	-29%
	<b>KI 3</b> Have an out of hours stroke specialist nurse	76%	74%	-2%
	<b>KI 9</b> Have responsibility for audit results taken at management level*	61%	48%	-13%

**Note:** The Key Indicators are calculated in the same way as in the 2021 Acute Organisational Audit. Please note that whilst comparisons can be made for these indicators, there have been significant changes in participating sites since the last organisational audit, so please exercise caution in making any comparisons between these data.

\*The criteria for KI 9 have changed since 2021, see [Combined Organisational Audit Key Indicators](#) for further details.

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**54%**

Sites have at least one unfilled stroke consultant post, which has been vacant for an average of 24 months

Acute Organisation Audit 2021:  
**52%** for 18 months

**38%**

Sites have at least one specialist registrar in a post registered for stroke speciality training

Acute Organisation Audit 2021: **26%**

**60**

Median number of mimics assessed by acute stroke teams over preceding month

Acute Organisation Audit 2021: **58**

**5**

Median patients medically fit for hospital discharge on acute stroke units

Acute Organisation Audit 2021: **5**

### Distribution of acute key indicators achieved

