

GUIDANCE, DOCUMENT

The quality statement for stroke

The quality statement describes what good quality stroke services should look like.

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Contents

Intoduction

Quality attributes of stroke services in Wales

Annex A: service specifications

Intoduction

Stroke is the fourth leading cause of death in Wales and has a significant long-term impact on the survivors of stroke. There are currently almost 70,000 stroke survivors living in Wales, and an estimated 7,400 people experience a stroke each year.

Stroke can change lives in an instant, but with the right specialist support people can make a good recovery and go on to rebuild their life. With the number of stroke survivors expected to increase by 50% during the next 20 years it is vital that a stroke is effectively prevented where possible, that high-risk conditions are detected as early as possible and optimally managed with people properly supported and able to co-produce and where appropriate self-manage their care.

Our aim remains for people of all ages to have the lowest possible risk of having a stroke, and, when it does occur, to have an excellent chance of surviving, and returning to independence as quickly as possible.

Building on the work of previous Stroke Delivery Plan and acting on the recommendations of the Cross Party Group for Stroke, the next phase of service improvement for stroke survivors and their carers must drive forward change to deliver better quality, higher value and more accessible stroke services. It must take advantage of the widespread consensus on priority areas such as reconfiguration and design of services, thrombectomy, thrombolysis, imaging and rehabilitation services; further develop optimised pathways to address unwarranted variations in care whilst continuing to develop national leadership, local engagement and continued collaboration with third sector, who highlight the national voice of lived experience. This will ensure that there is a long-term and consistent approach to improving outcomes as envisaged in the Wellbeing of Future Generations Act.

Health Boards and Trusts are responsible for planning and delivery of stroke services in line with professional standards, clinical guidance and the quality attributes set out below. Health Boards and Trusts will be supported to deliver improved stroke services by the NHS Executive function. This will be discharged through the Stroke Implementation Group, who will work collaboratively with Health Boards, service users, third sector and other stakeholders to set out a rolling, three-year implementation plan that identifies and prioritises stroke service developments based on the quality attributes described below. Detailed service specifications will also be developed to support the planning and accountability arrangements for the NHS in Wales; these will be set out in Annex A as they become available.

The National Clinical Framework places specific emphasis on the development of national clinical pathways and the Quality Safety Framework emphasises the importance of systemic local use of the quality assurance cycle. This quality statement focuses on development of nationally optimised pathways to support local improvement in the quality of services and address unwarranted variations in care.

There also needs to be a focus on cross-working with other groups to address areas such as public health, prevention, rehabilitation, care for those who are critically ill or at end of life as well as collaboration with other conditions such as cardiovascular, neurological and diabetes.

Quality attributes of stroke services in Wales

Safe

A continued system-level focus on transforming pathways in line with evidence base and clinical guidance to enable recovery and reset of services to prepandemic levels.

Support a new model of provision of stroke services through comprehensive stroke centres and a networked approach to cross boundary working that seeks to improve the whole patient pathway including access to diagnostics, interventions, rehabilitation, including early supported discharge and psychological support services.

Services will be reconfigured to produce the outcomes expected in high quality, patient focused services and to ensure national standards can be met consistently and sustainably.

Timely

Rapid access to confirm stroke and provide evidence based interventions, treatments and care in the most appropriate setting are routinely available.

Effective

Continued promotion of primary and secondary stroke prevention through the intervention of treatment and advice in line with current and evolving evidence base.

National, evidence-based pathways for stroke patients will be comprehensive and fully embedded in local service delivery.

Rehabilitation services and long term physical, communication, cognitive and psychological support for stroke survivors and carers are consistently accessible.

Person centred

Collaborative approach to person-centred care is culturally embedded and supported by a common approach to assessing and managing people's needs including the application of Making Every Contact Count.

Co-production of care and shared decision-making ensures people affected by, or at risk of having a stroke achieve the outcomes that matter to them.

Recognition of the importance of rehabilitation, early therapeutic intervention, self-management, peer support and group consultations to life after stroke services.

Equitable access to services for those with protected characteristics (as described in the Equality Act 2010) and provision of information when needed in a form that is accessible including consideration of both Welsh and other language needs.

Efficient

Detection, diagnosis and effective management of high-risk conditions such as atrial fibrillation and transient ischaemic attack in line with clinical guidance.

A national approach to informatics systems to provide rapid diagnostics and relevant, high quality, standardised data to drive service improvement.

A blended approach to clinical consultations with the use of digital enablers where appropriate.

Support and further develop the ability of our multi-disciplinary stroke workforce to be able to meet the requirements of the Welsh Language Act through the

implementation of the Workforce Strategy.

Further develop research, innovation and education to enable delivery of a high quality, evidenced based, clinical care by a well-trained, specialist workforce.

Equitable

The NHS Executive supports the national approach to service improvement through its Stroke Implementation Group.

Stroke services collaborate through the Stroke Implementation Group to ensure transparency, support equity of access and ensure consistency in standards of care whilst highlighting and addressing unwarranted variation.

Stroke services will be measured and held accountable using robust metrics; The Sentinel Stroke National Audit Programme (SSNAP), organisational audit and Patient Reported Experience Measures (PREMs), Patient Reported Outcome Measures (PROMs).

Ensure that innovations and targeted interventions are available across the stroke pathway to all stroke survivors in Wales.

Annex A: service specifications

The NHS Executive will support the local implementation of nationally agreed, optimised clinical pathways. These will be added as they become available.

