

Stroke Engagement with HOSC

SOMERSET - SCRUTINY FOR POLICIES, ADULTS AND HEALTH COMMITTEE

5 June 2019

Acute setting of care

Configuration of Stroke Services in Somerset: The scope of this review has been extended to consider the entire pathway from prevention through to treatment, rehabilitation and stroke survivorship. Consideration of the optimum configuration and location of acute and hyperacute stroke services is a part of this workstream.

FFMF Programme

Options Appraisal Criteria

Presented the process of engagement and consultation to produce a set of options assessment criteria that would be applied to all FFMF programmes of work when considering options.

26 January 2022

Somerset Stroke Services

The stroke strategy, which was drafted in 2019, has been reviewed and remains as relevant post Covid-19 as it was when produced in the autumn of 2019. It provides a direction of travel for the next five years, setting out how stroke services should operate across the pathway from prevention to living with stroke.

We have progressed a number of recommendations in the stroke strategy and are currently reviewing the provision of acute hospital-based services providing stroke treatment, in particular Hyper Acute Stroke Units (HASU). HASUs provide expert specialist clinical assessment, rapid imaging and ability to deliver intravenous thrombolysis (clot busting drugs), typically for up to 72 hours after admission

Taken from notes of meeting - The centralisation of the Hyper-acute Stroke Care was discussed in relation to the current service offered in Taunton. It was confirmed that Stroke Services had different elements defined by need and there would be some high needs that would be centralised and aftercare and rehabilitation available locally. The decision on how much was centralised was still under discussion and the final decision would take account of travel times and next nearest facility. It was confirmed that no final decisions had yet been made.

2 March 2022

Stroke Update – Consisting of background, progress and next steps for programme of work.

Local Elections and restructure of Committee prevented further engagement between March and October 2022

12 October 2022

Stroke Update to new Committee – Report presented to the new Committee picking up on the following headings:-

- Introduction
- National and Local Context
- What are the concerns with stroke services in Somerset?
- Developing hyper acute stroke services in Somerset

- Potential Impact of changes – including options
- Comms and engagement
- Next Steps

Members were asked to note the update and support the direction of travel

DORSET - PEOPLE AND HEALTH SCRUTINY COMMITTEE

5 April 2022

Briefing Document sent to Dorset People and Health Scrutiny Committee

19 July 2022

The committee received a report from the Programme Manager, Stroke, Neurorehabilitation and Community Hospitals, with regard to a stroke strategy and recommendations for how the national ambitions across the stroke pathway could be delivered by the systems in place in Somerset. The report covered the recommendation around the way Hyper Acute Stroke Unit and Transient Ischaemic Attack services were provided in Somerset. The report provided an update on progress, the options appraisal process and engagement with Dorset representatives.

The Scrutiny Committee was asked to note the programme of work and provide comments on the direction of travel

The People and Health Scrutiny Committee support the need for Thrombolysis as close to patients as possible with the opportunity to transfer for further treatment as required.

A further report would be brought to the relevant overview or scrutiny committee for response at an appropriate time, in line with the consultation to be undertaken.

Ongoing discussions with Dorset People and Health Scrutiny Committee – content to take next report in New Year (2023)

BATH AND NORTH EAST SOMERSET

18 November 2022

Email with Briefing document sent - The Somerset Integrated Care System has, for some time, been reviewing the model of hospital-based stroke services delivered within the county. Progress on this slowed as a result of the pandemic but have now taken this work forward again and are keen to ensure engagement with you in relation to changes we may make to hospital based stroke services in Somerset.

Enclosed a briefing document which provides an update on the development of hospital-based stroke services in Somerset and the potential options we have identified for improving services.

Changing the way we deliver hospital based stroke services has potential implications for neighbouring Health and Care Systems and the impact of Somerset's proposals for hospital-based stroke affects the Dorset system the greatest, with a small impact on Royal United Hospital Bath NHS Foundation Trust (RUH).

Depending on the solution which is developed, early modelling indicates a possible increase of approximately 1 suspected stroke patients per week to RUH. We have kept colleagues from both RUH and NHS Bath and North East Somerset informed of potential changes.

We ask that as Chair of the Children, Adults, Health and Wellbeing Policy Development and Scrutiny Panel that you:

- note the potential changes within hospital-based stroke care in Somerset
- advise how the panel would like to be informed and engaged as we move to formal consultation

BRISTOL, NORTH SOMERSET AND SOUTH GLOUCESTERSHIRE (BNSSG)

25 November 2022

Email with Briefing document sent to each of the three HOSC's for BNSSG system -

Ask to Bristol Health Scrutiny Committee, North Somerset Health Overview and Scrutiny Panel and South Gloucestershire Health Scrutiny Committee

- to note the potential changes within hospital-based stroke care in Somerset
- advise whether and how the committee/panel would like to be informed and engaged as we move to formal consultation