

Sentinel Stroke National  
Audit Programme (SSNAP)



# **SSNAP April - June 2022**

## **Routinely admitting teams**

[www.strokeaudit.org/results](http://www.strokeaudit.org/results)

# Introduction

- This slideshow is a graphical presentation of the **April – June 2022** results for **routinely admitting teams** (stroke services which directly admit stroke patients for acute stroke care) in your region
- Results are presented in **10 Domains** covering **44 Key Indicators** of stroke care
- Each team's **SSNAP score** is based on its domain scores adjusted **for case ascertainment** and **audit compliance levels**
- These results are available on the results portal [www.strokeaudit.org/results](http://www.strokeaudit.org/results) in a variety of outputs; including easy access version reports, public reports, summary reports, in CCG/LHB results, and performance tables
- We hope you find this slideshow a useful resource when discussing SSNAP performance with teams within your region and using SSNAP results to drive change

[https://www.strokeaudit.org/results/Clinical-audit/Regional-Results-\(ISDN\).aspx](https://www.strokeaudit.org/results/Clinical-audit/Regional-Results-(ISDN).aspx)

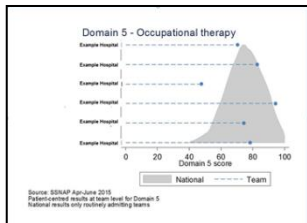
# Overview of this presentation

## Overview

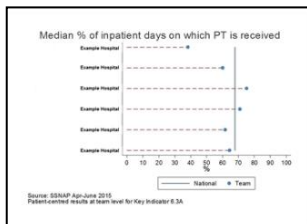
- Number of patients per team for 72h and post-72h results
- Number of teams in your region achieving each scoring level
- Combined total key indicator score with case ascertainment and audit compliance adjustments
- Audit compliance
  - NIHSS scores on arrival and 24 hours after thrombolysis
  - timeliness of data entry and of electronic transfers on SSNAP

## Results in more detail

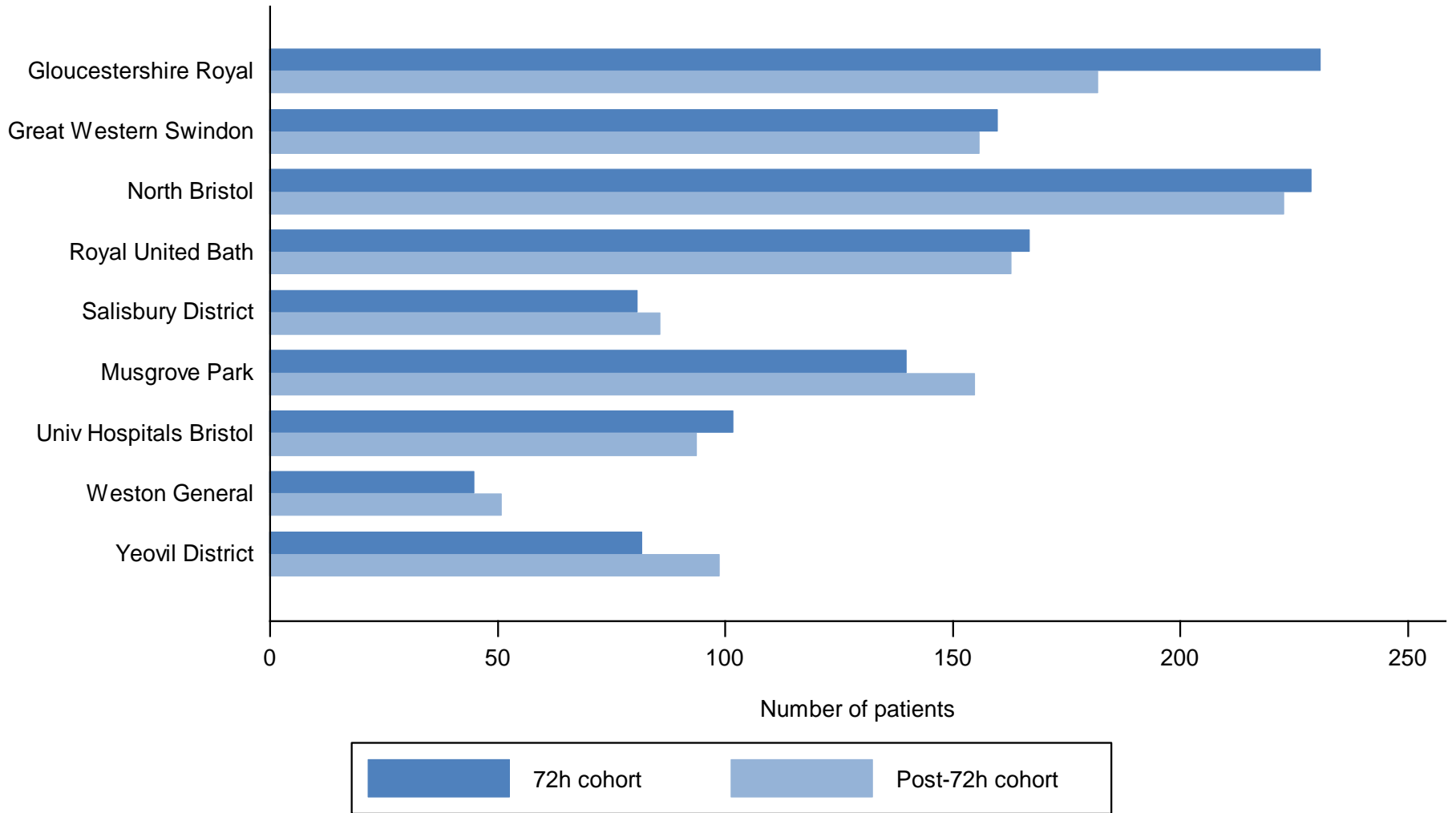
- Results by domain (this now also includes domains 8, 9 and 10)



- Results for key indicators within each domain



# Number of patients per team



Source: SSNAP Apr-Jun 2022

Number of patients in both patient-centred cohorts - D2.2 and D5.2

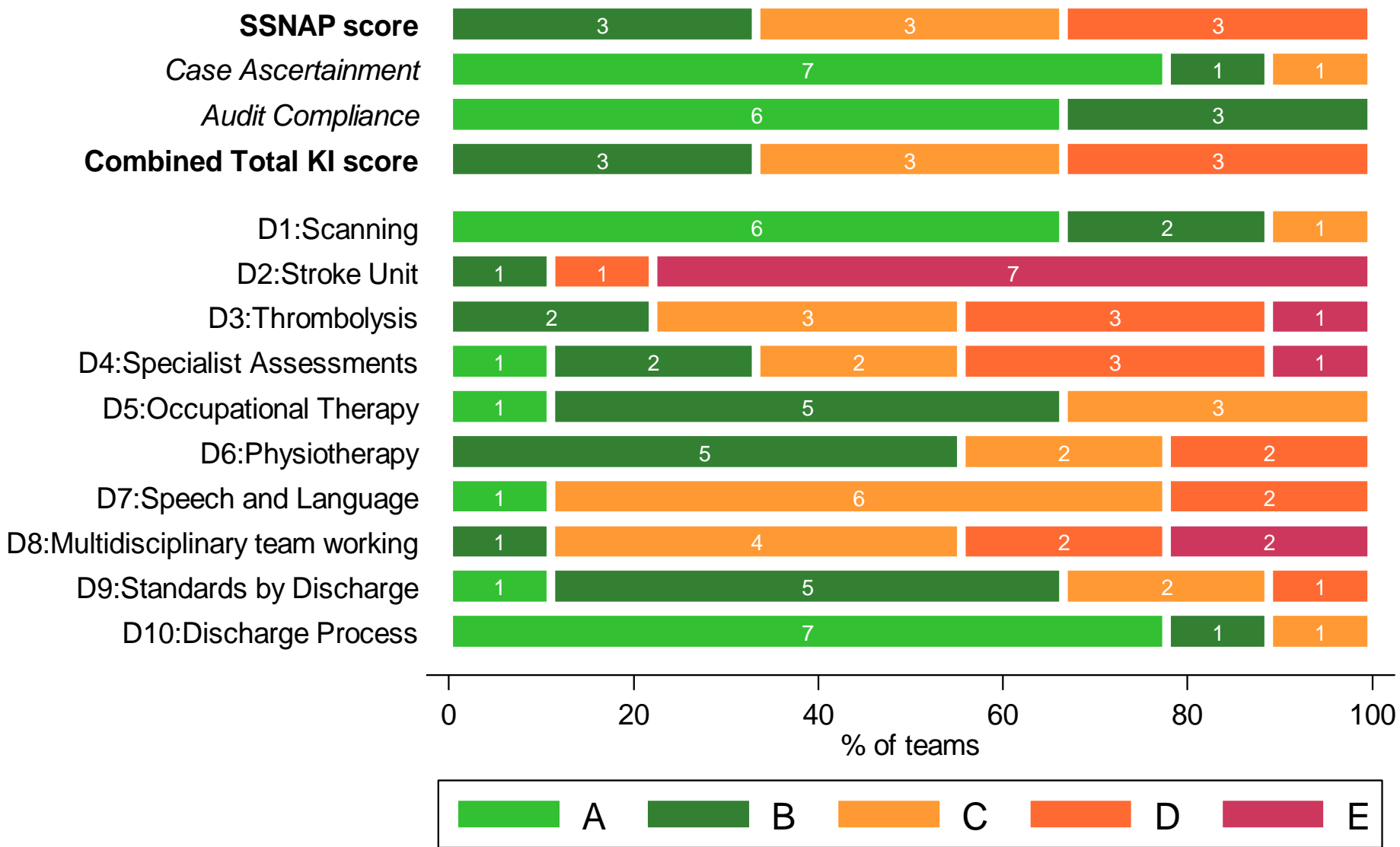
# Patient-Centred Performance Table

Routinely Admitting Teams		Number of patients		Overall Performance				Patient Centred Data											Six Month Assessment*			
Trust	Team Name	Admit	Disch	SSNAP Level	CA	AC	Combined KI Level	D1 Scan	D2 SU	D3 Throm	D4 Spec Asst	D5 OT	D6 PT	D7 SALT	D8 MDT	D9 Std Disch	D10 Disch Proc	PC KI Level	Number Applicable	% Applicable	Number Assessed	% Assessed
<b>South England - West of England</b>																						
Gloucestershire Hospitals NHS Foundation Trust	Gloucestershire Royal Hospital	231	182	B↑↑	A↑↑	A↑	B↑	A	B↑↑	B↑	B	A	B	D	C↑	C↑	C↓	B↑	261	79%	119	46%
Great Western Hospitals NHS Foundation Trust	Great Western Hospital Swindon	160	156	B	A	A	B	A	E↓	C	D	B↓	B	C	C↑	A	A↑	B	258	91%	40	16%
North Bristol NHS Trust	North Bristol Hospitals	229	223	B	A	B↓	B	A	E	C	A↑	B↑	B	C↓	C	B	A	B	395	98%	25	6%
Royal United Hospitals Bath NHS Foundation Trust	Royal United Hospital Bath	167	163	D↓↓	A	A	D↓↓	C↓↓	E	D↓	C↓	C↓	D↓↓	C↓	D	B	B↓	D↓↓	265	96%	59	22%
Salisbury NHS Foundation Trust	Salisbury District Hospital	81	86	C↑	B↓	A↑	C↑	A↑	E	C↑↑	D↑	B↑	C	A↑	B↑	D↓↓	A↑	C↑	152	96%	18	12%
Somerset NHS Foundation Trust	Musgrove Park Hospital	140	155	C↓	A	A	C↓	A	D↑	D	C	C↓↓	C↓	C	C↓	B	A	C↓	179	81%	151	84%
University Hospitals Bristol and Weston NHS Foundation Trust	University Hospitals Bristol Inpatient Team	102	94	D	C↓	B↓	D	B	E	E↓	E	B↑	B↑	C↓	E	B↑	A	D	191	100%	3	2%
University Hospitals Bristol and Weston NHS Foundation Trust	Weston General Hospital	45	51	C↑	A	B↓	C↑	A↑	E	B↑↑↑	B	C↓	D↓	C↑↑	D	B↓	A↑	C↑	84	97%	8	10%
Yeovil District Hospital NHS Foundation Trust	Yeovil District Hospital	82	99	D	A	A↑	D	B↓	E	D	D	B↑	B↑	D↓	E↓	C	A	D	87	73%	71	82%

\*Six month assessment data contains information about six month follow-up assessments in the time period that this report covers and three months prior

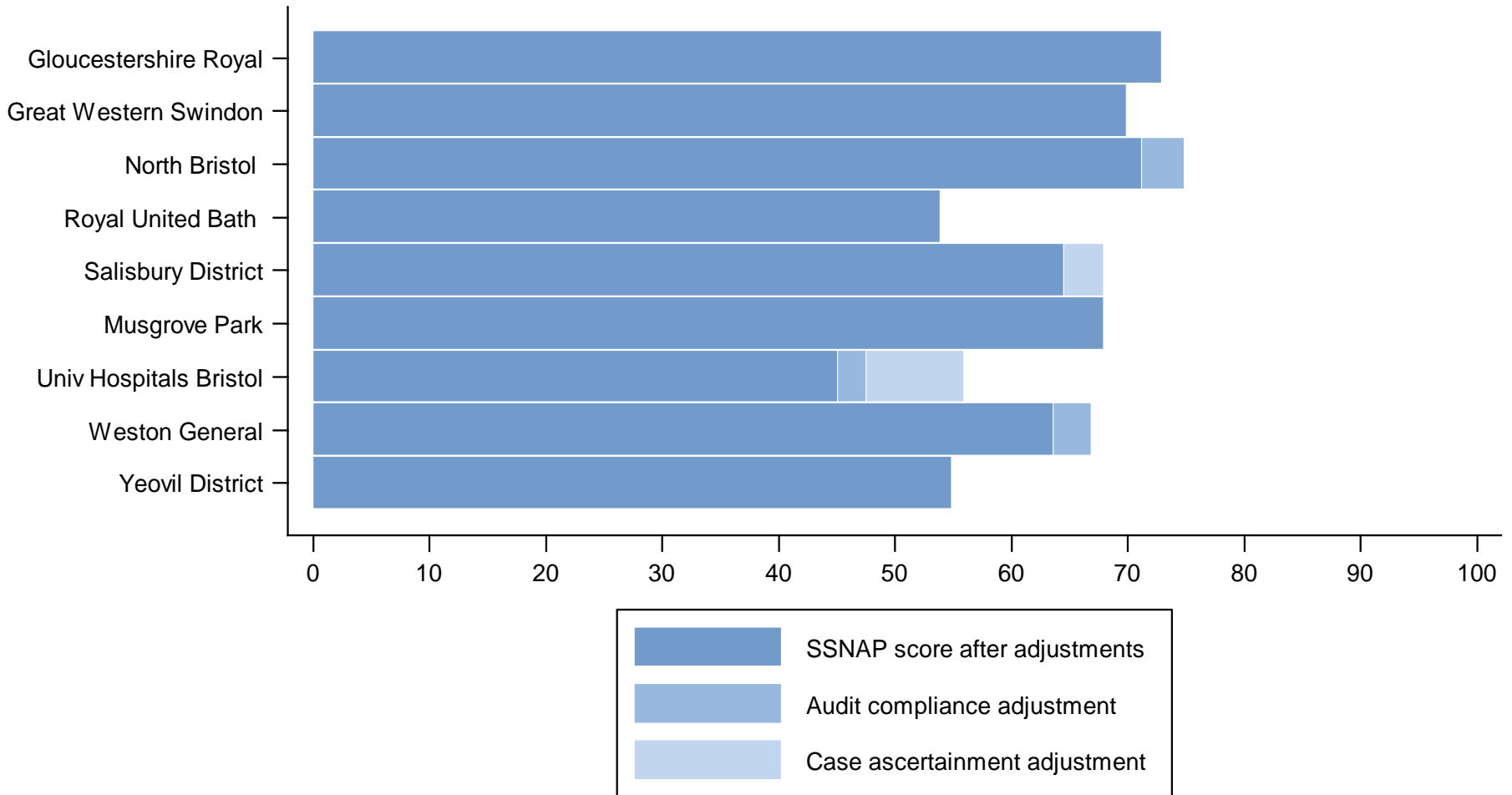
# Team-Centred Performance Table

Routinely Admitting Teams		Number of patients		Overall Performance				Team Centred Data											
Trust	Team Name	Admit	Disch	SSNAP Level	CA	AC	Combined KI Level	D1 Scan	D2 SU	D3 Throm	D4 Spec Asst	D5 OT	D6 PT	D7 SALT	D8 MDT	D9 Std Disch	D10 Disch Proc	TC KI Level	
<b>South England - West of England</b>																			
Gloucestershire Hospitals NHS Foundation Trust	Gloucestershire Royal Hospital	223	173	B↑↑	A↑↑	A↑	B↑	A	B↑↑	B↑	B	A↑	A↑	E↓	C	C↑	D↓↓	B↑	
Great Western Hospitals NHS Foundation Trust	Great Western Hospital Swindon	157	157	B	A	A	B	A	E↓	D↓	D	A	B	C	C	A	A↑	B	
North Bristol NHS Trust	North Bristol Hospitals	186	235	B	A	B↓	B	A	E	C	B	B	B	B	B↑	B	A↑	B	
Royal United Hospitals Bath NHS Foundation Trust	Royal United Hospital Bath	163	162	D↓↓	A	A	D↓↓	C↓↓	E	D↓	C	D↓	D↓	C↓↓	D	B	A	D↓	
Salisbury NHS Foundation Trust	Salisbury District Hospital	78	87	C↑	B↓	A↑	C↑	A↑	E	D↑	D↑	B↑	C	A	B↑	C↓	A↑	C↑	
Somerset NHS Foundation Trust	Musgrove Park Hospital	134	149	C↓	A	A	C↓	A	D↑	D	C	B	C↓	C↓	B	B	A	B	
University Hospitals Bristol and Weston NHS Foundation Trust	University Hospitals Bristol Inpatient Team	98	95	D	C↓	B↓	D	B	E	E↓	E	C	B↑	C↓	D↑	B↑	A	D	
University Hospitals Bristol and Weston NHS Foundation Trust	Weston General Hospital	39	54	C↑	A	B↓	C↑	A↑	E	B↑↑ ↑	B	C↓	D↓	D↑	C	A	A↑	C	
Yeovil District Hospital NHS Foundation Trust	Yeovil District Hospital	81	89	D	A	A↑	D	B↓	E	D	D	B↑	C	D↓	E↓	C	A	D	



Source: SSNAP Apr-Jun 2022  
 Patient-centred results for routinely admitting teams

# SSNAP score: Combined Total KI score adjusted for AC and CA

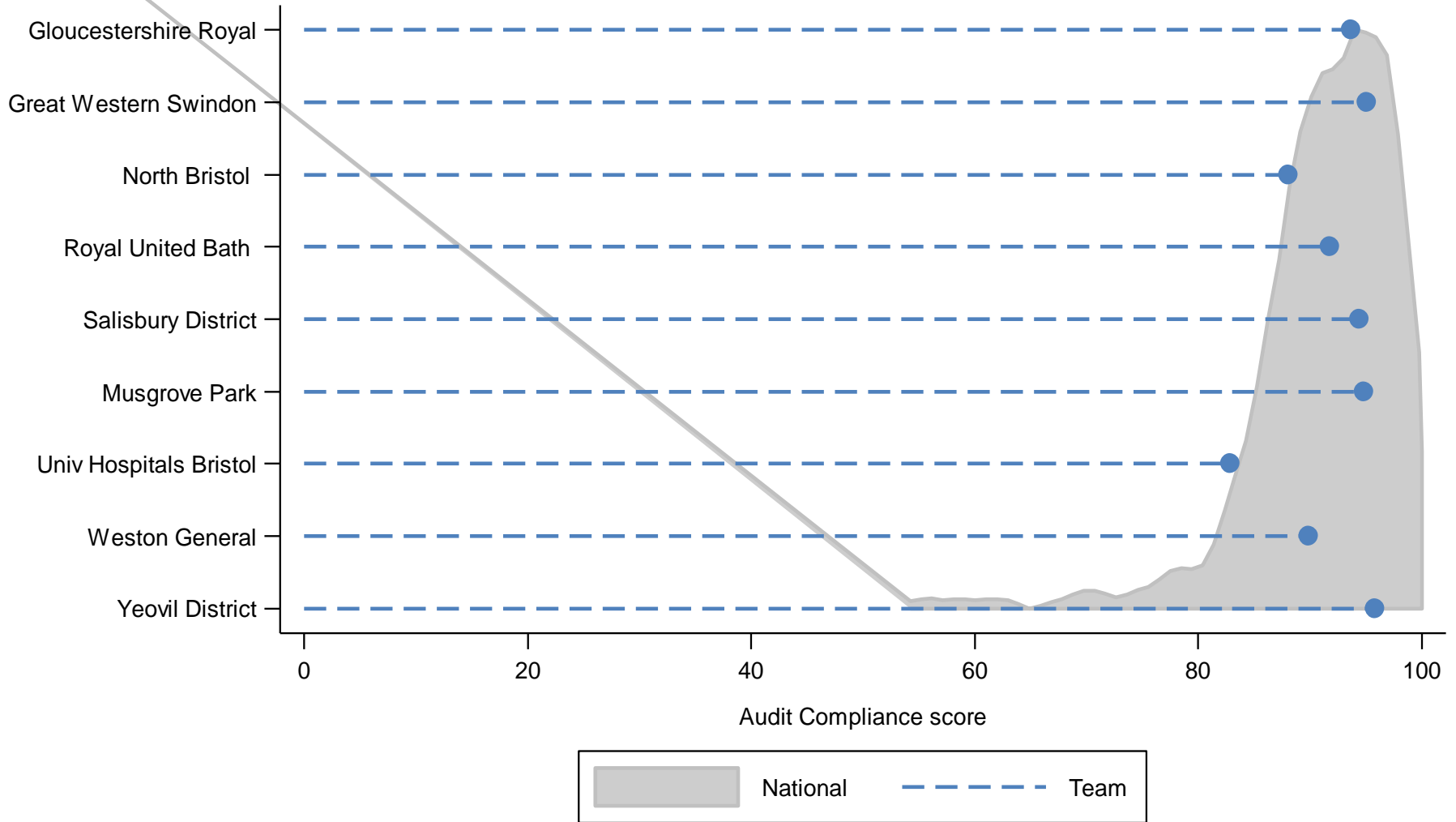


Source: SSNAP Apr-Jun 2022

Team level results demonstrating the proportion of the Combined Total Key Indicator score which is removed due to AC and CA adjustments to derive the overall SSNAP score

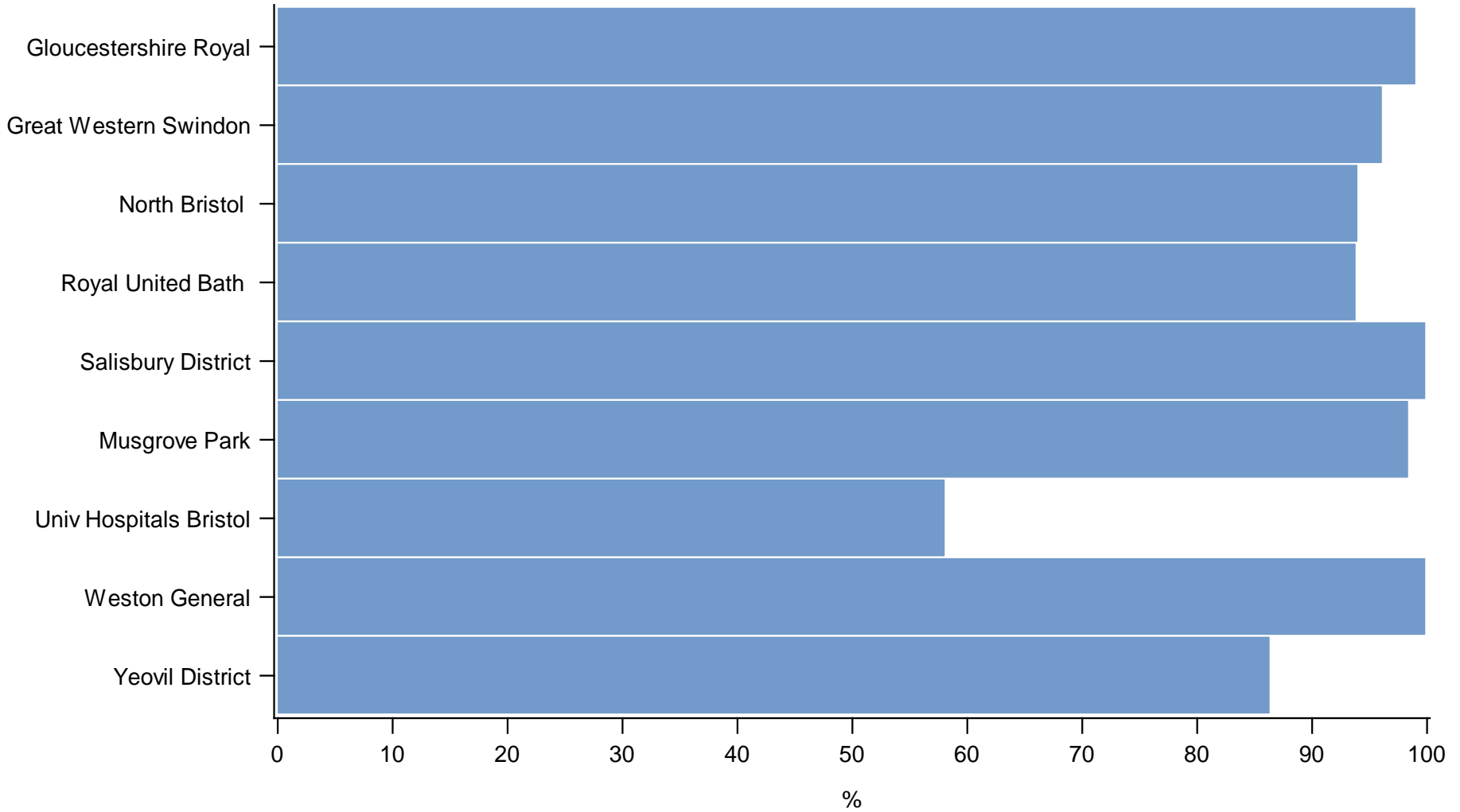


# Audit Compliance



Source: SSNAP Apr-Jun 2022  
Team-centred results at team level for Audit Compliance C1.2

# NIHSS at arrival is fully complete

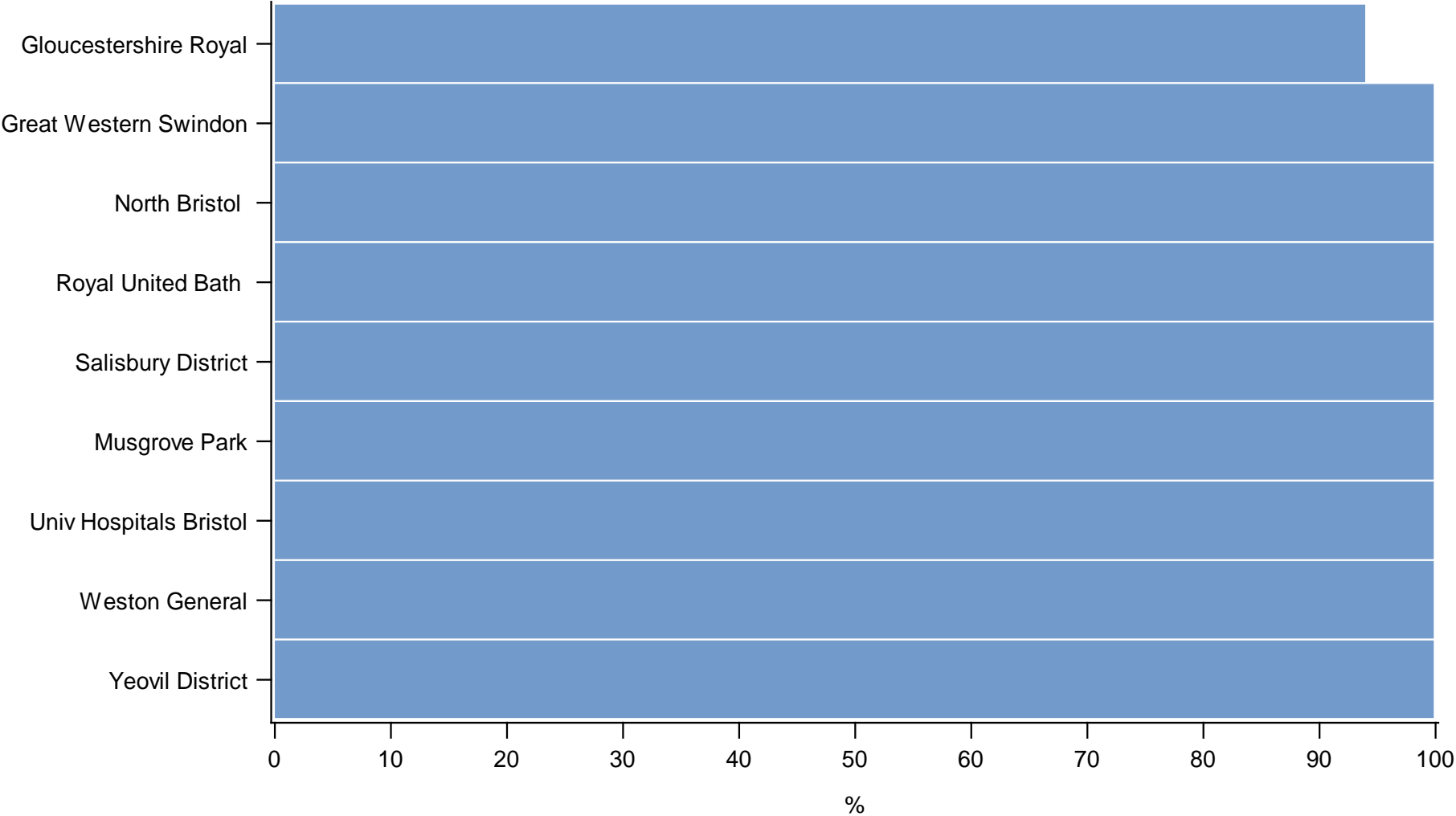


Source: SSNAP Apr-Jun 2022

Team-centred results at team level for Audit Compliance measure C2.3

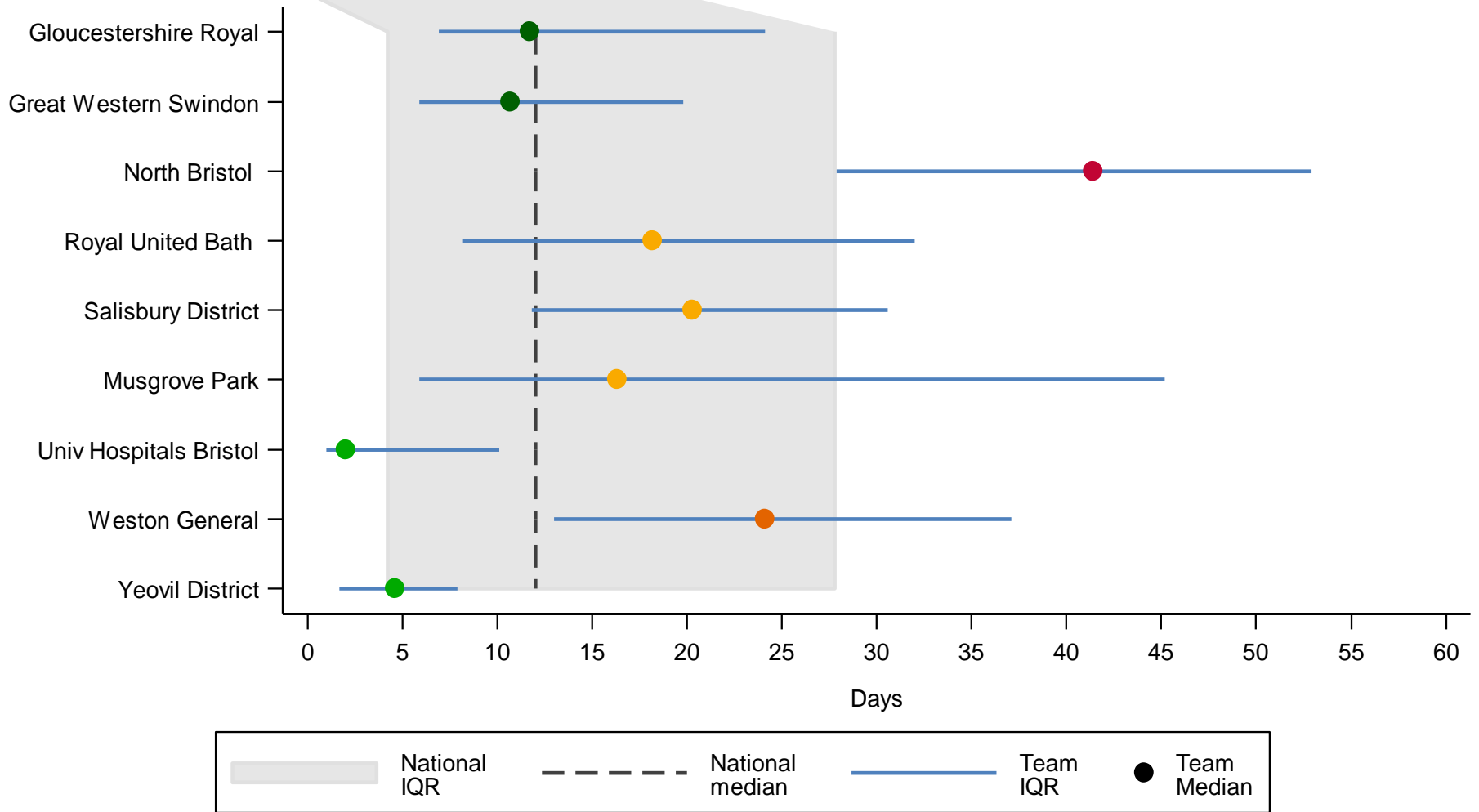
West of England

# NIHSS 24h after thrombolysis is complete



Source: SSNAP Apr-Jun 2022  
Team-centred results at team level for Audit Compliance measure C3.3

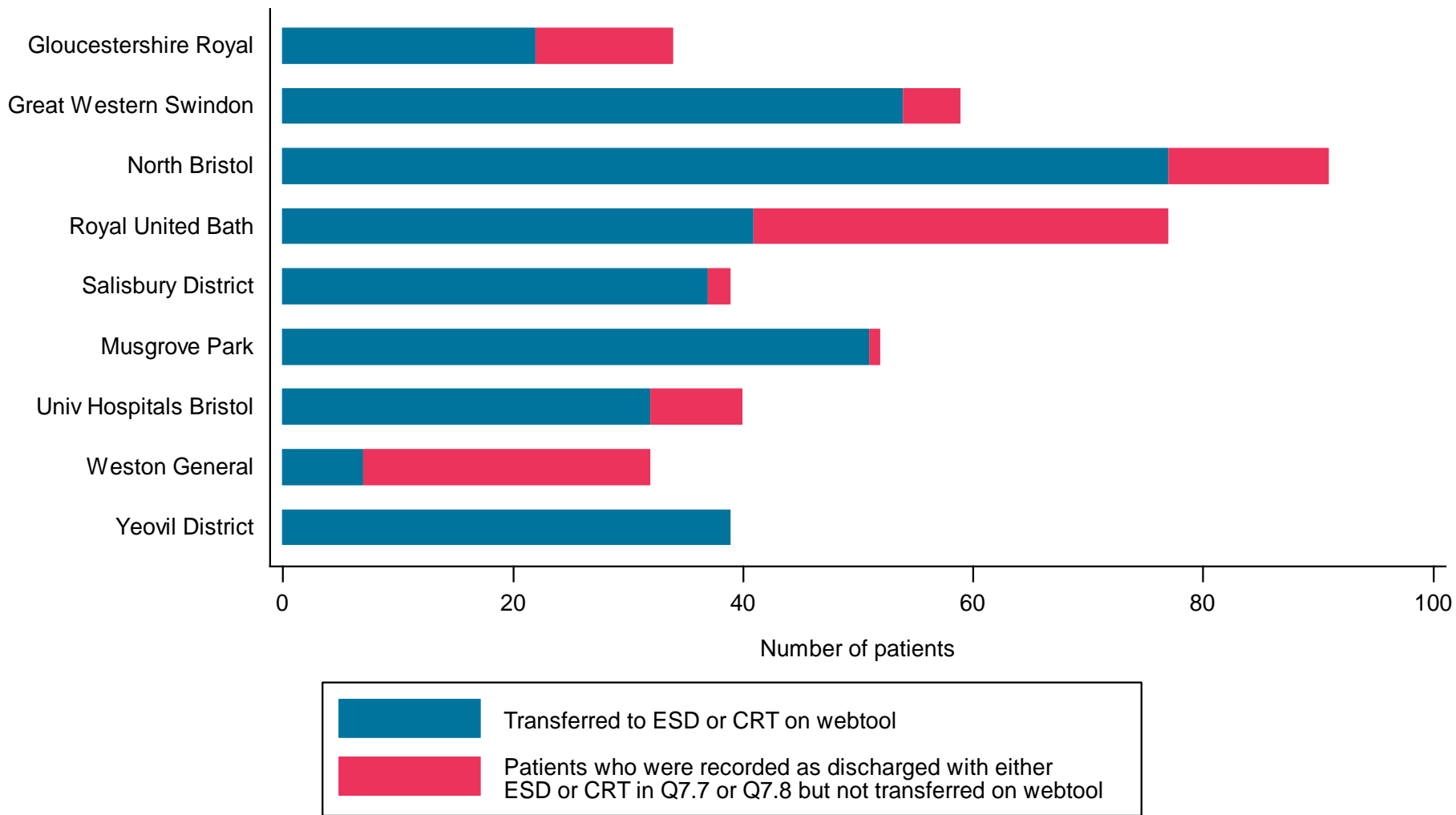
# Delay (days) between patient transfer and electronic transfer on SSNAP



Source: SSNAP Apr-Jun 2022

Team-centred results at team level for Audit Compliance measure C4.4

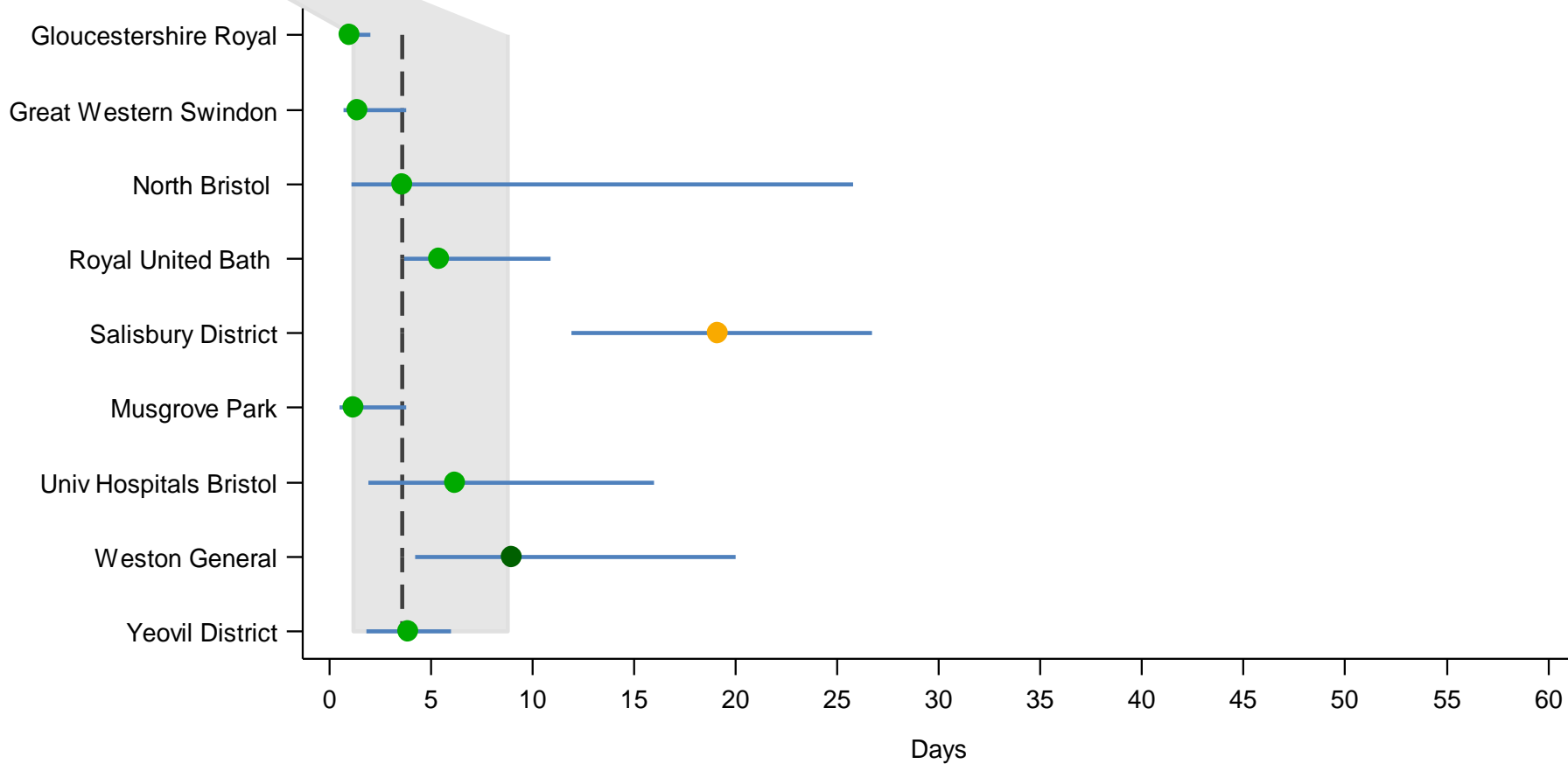
# Patients discharged with ESD or CRT



Source: SSNAP Apr-Jun 2022

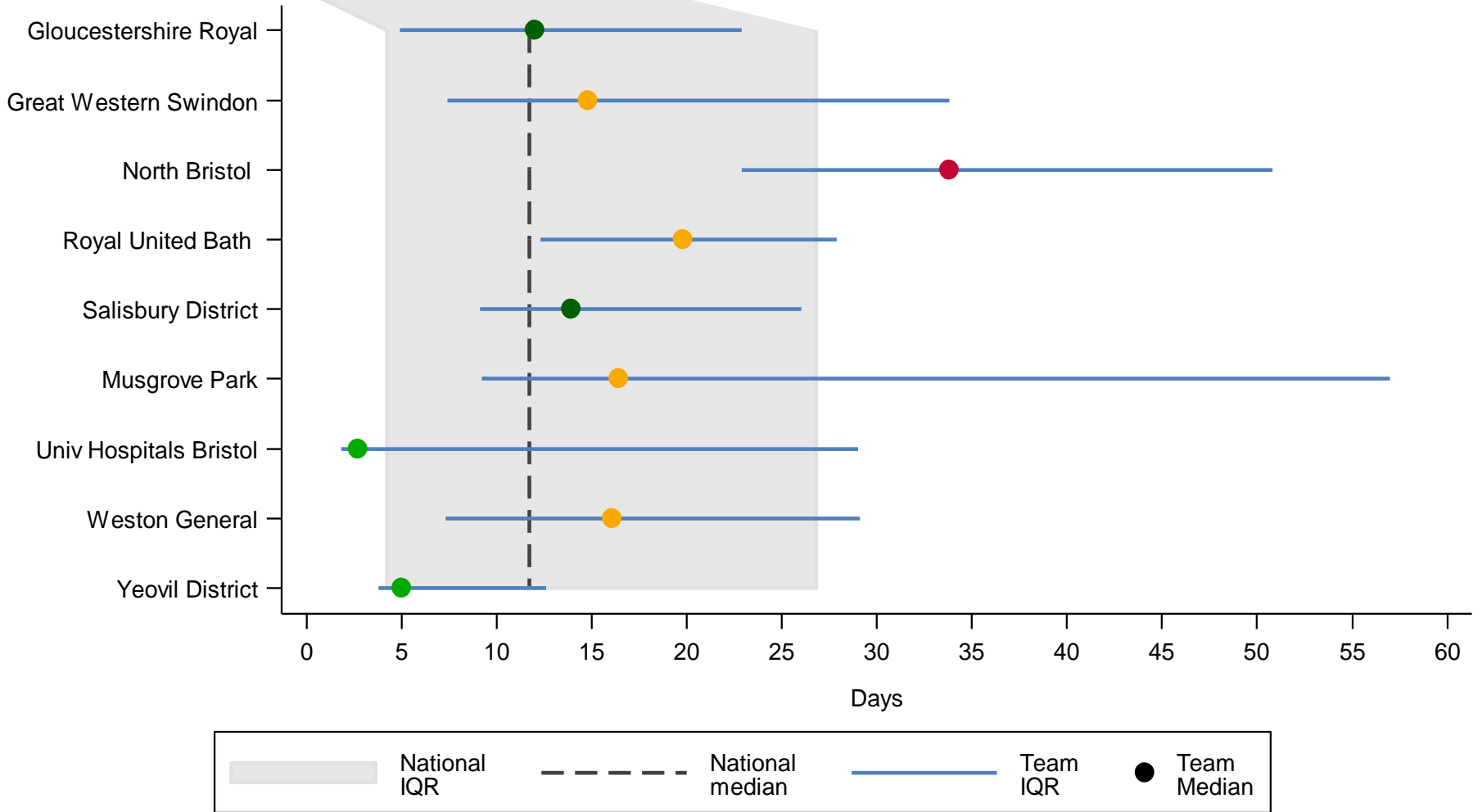
Team-centred results at team level for Audit Compliance measure C4.6

# Delay (days) between clockstart and date of starting the electronic record



Source: SSNAP Apr-Jun 2022  
 Team-centred results at team level for Audit Compliance measure C5.1

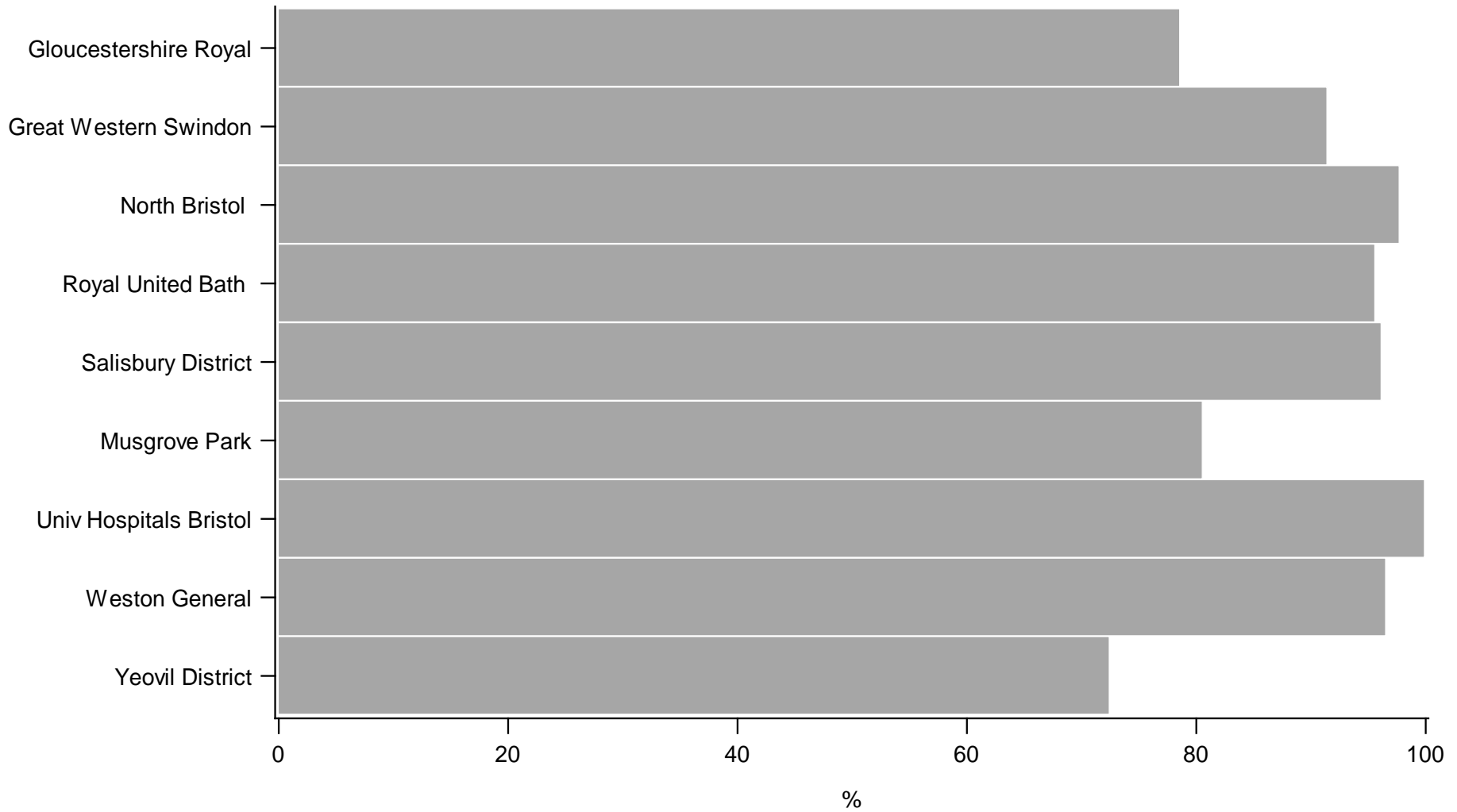
# Delay (days) between when patient is discharged from a team to when the electronic record is locked to discharge



Source: SSNAP Apr-Jun 2022

Team-centred results at team level for Audit Compliance measure C5.3

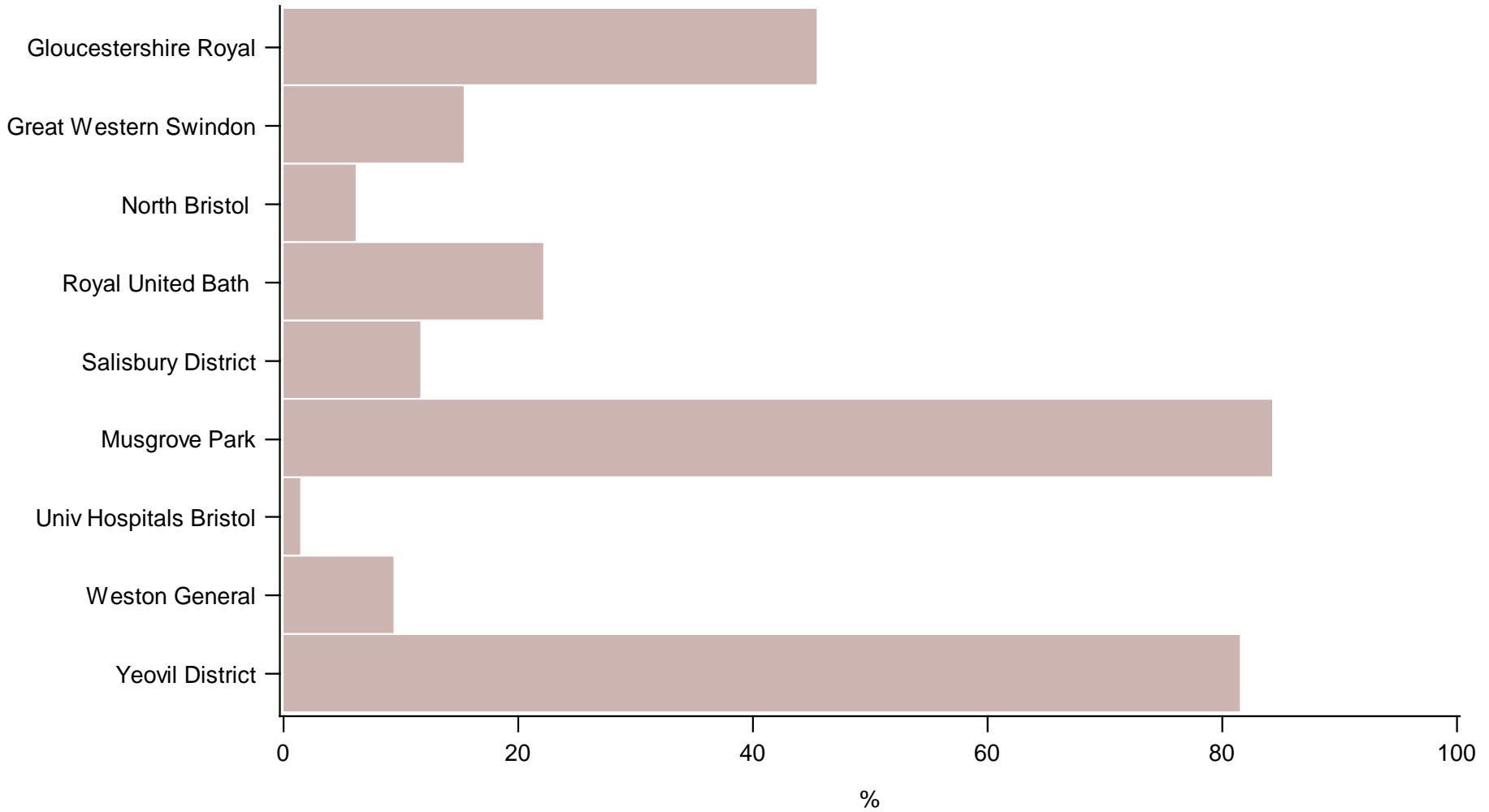
# % of patients applicable for a 6 month assessment



Source: SSNAP Apr-Jun 2022  
Team-centred results at team level for B12.3

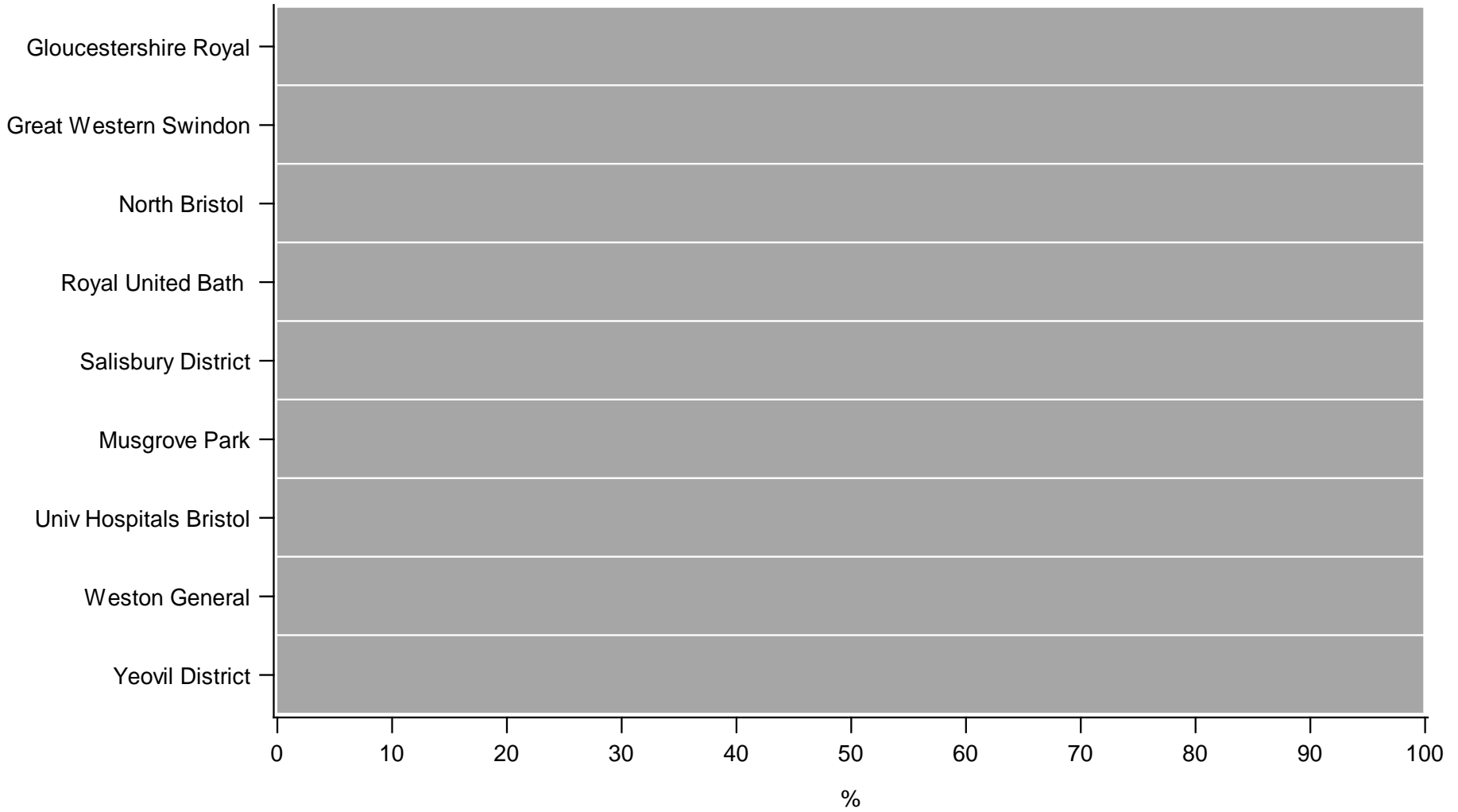


# % of applicable patients receiving 6 month assessments between Oct-Mar 2022



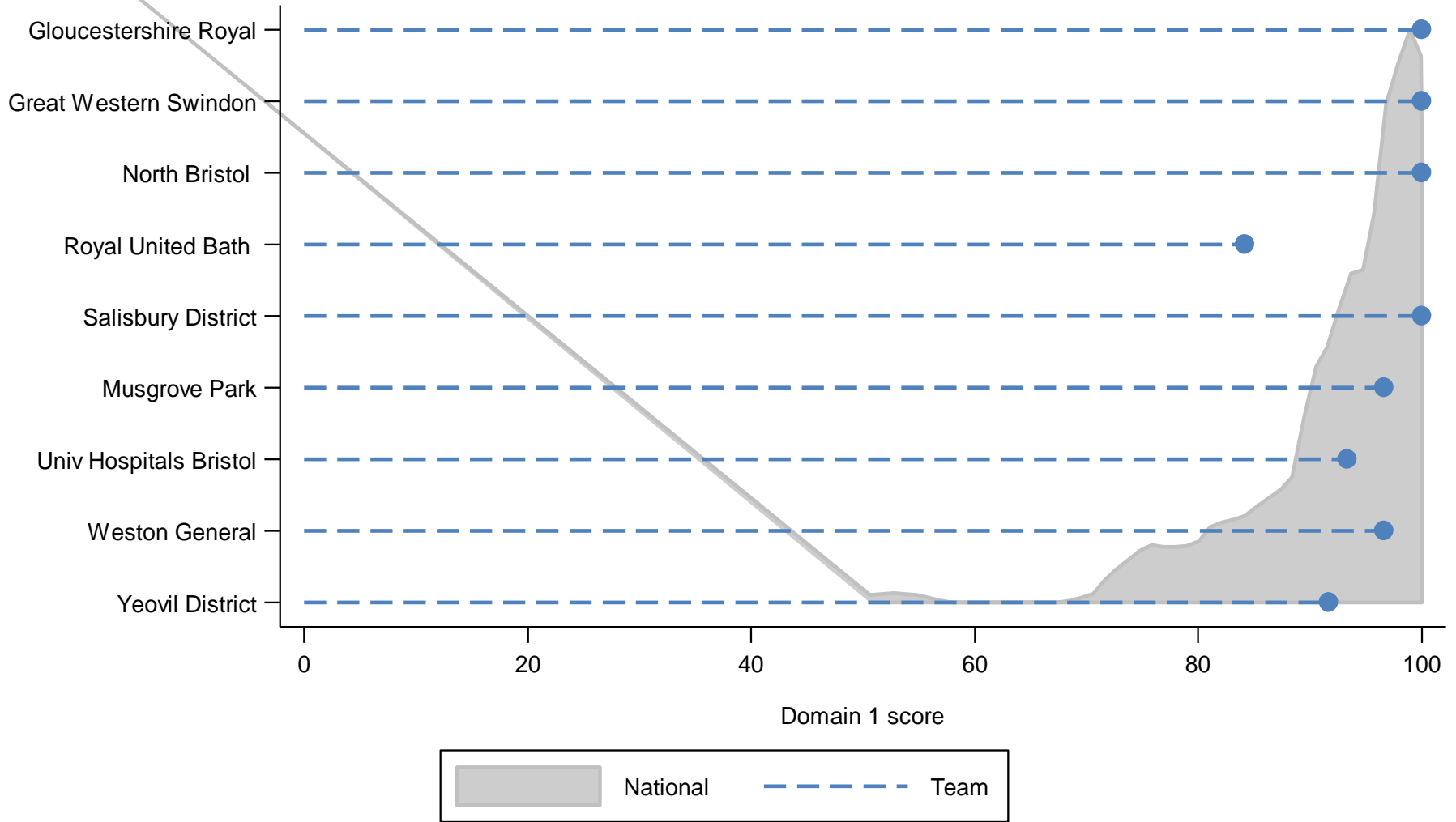
Source: SSNAP Apr-Jun 2022  
Team-centred results at team level for B13.3

# CAD number completion rate



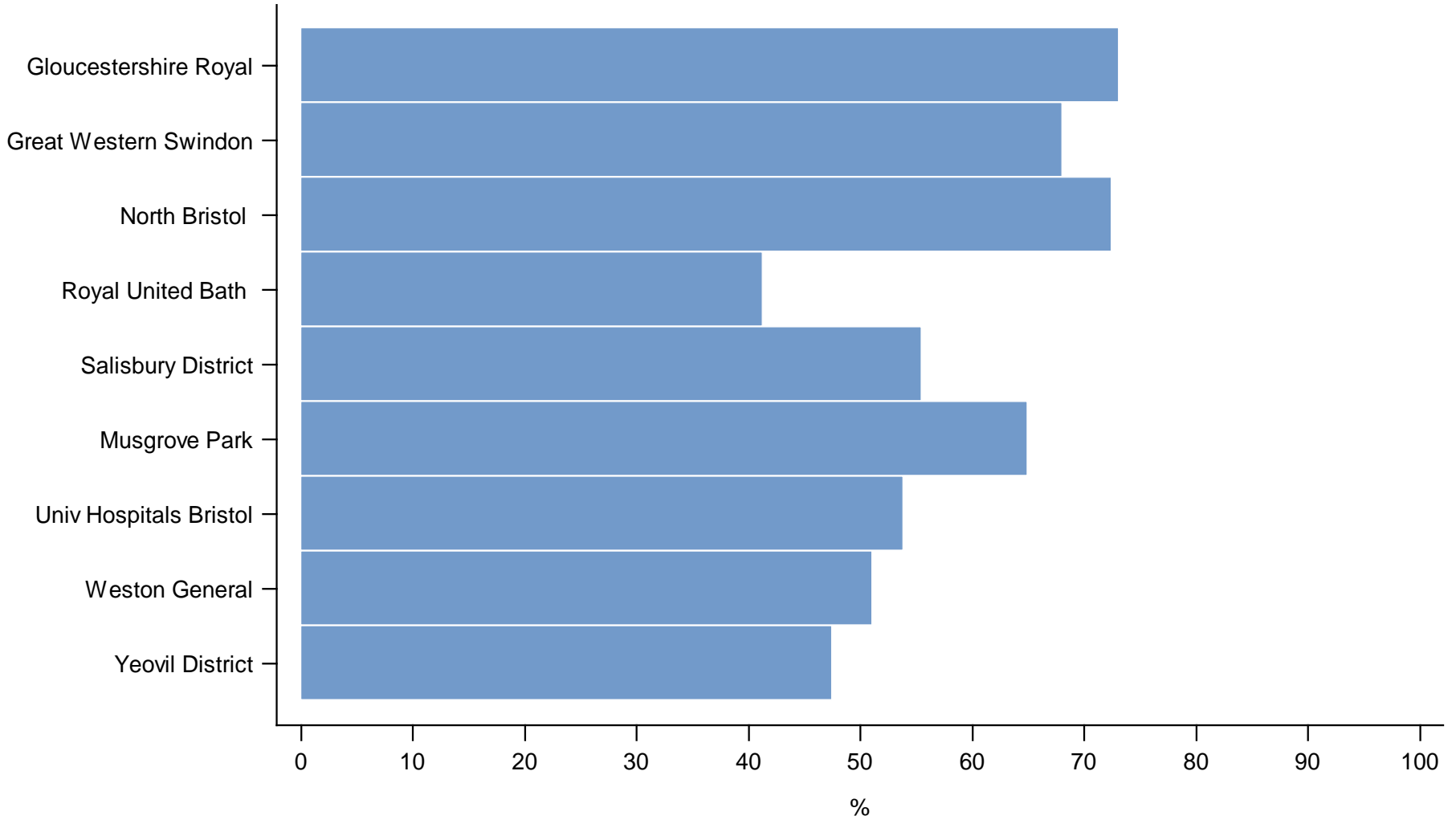
Source: SSNAP Apr-Jun 2022  
Team-centred results at team level for H28.3

# Domain 1 - Scanning



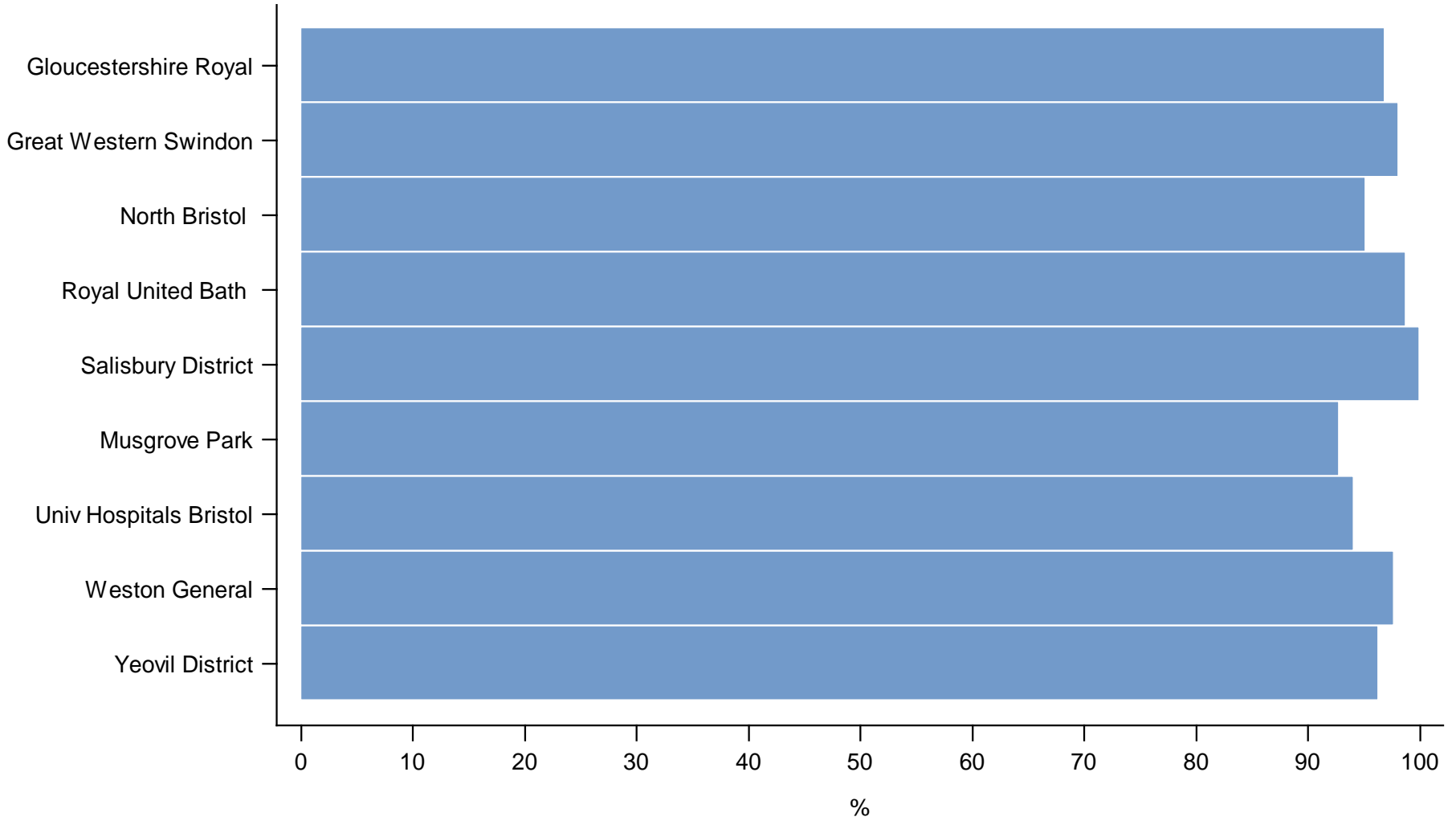
Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Domain 1

# Scanned within 1 hour



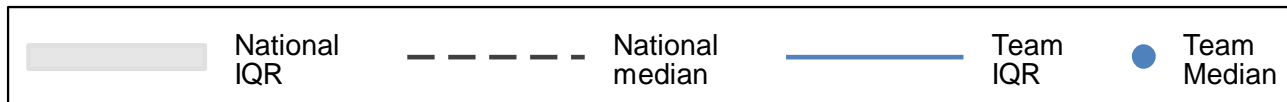
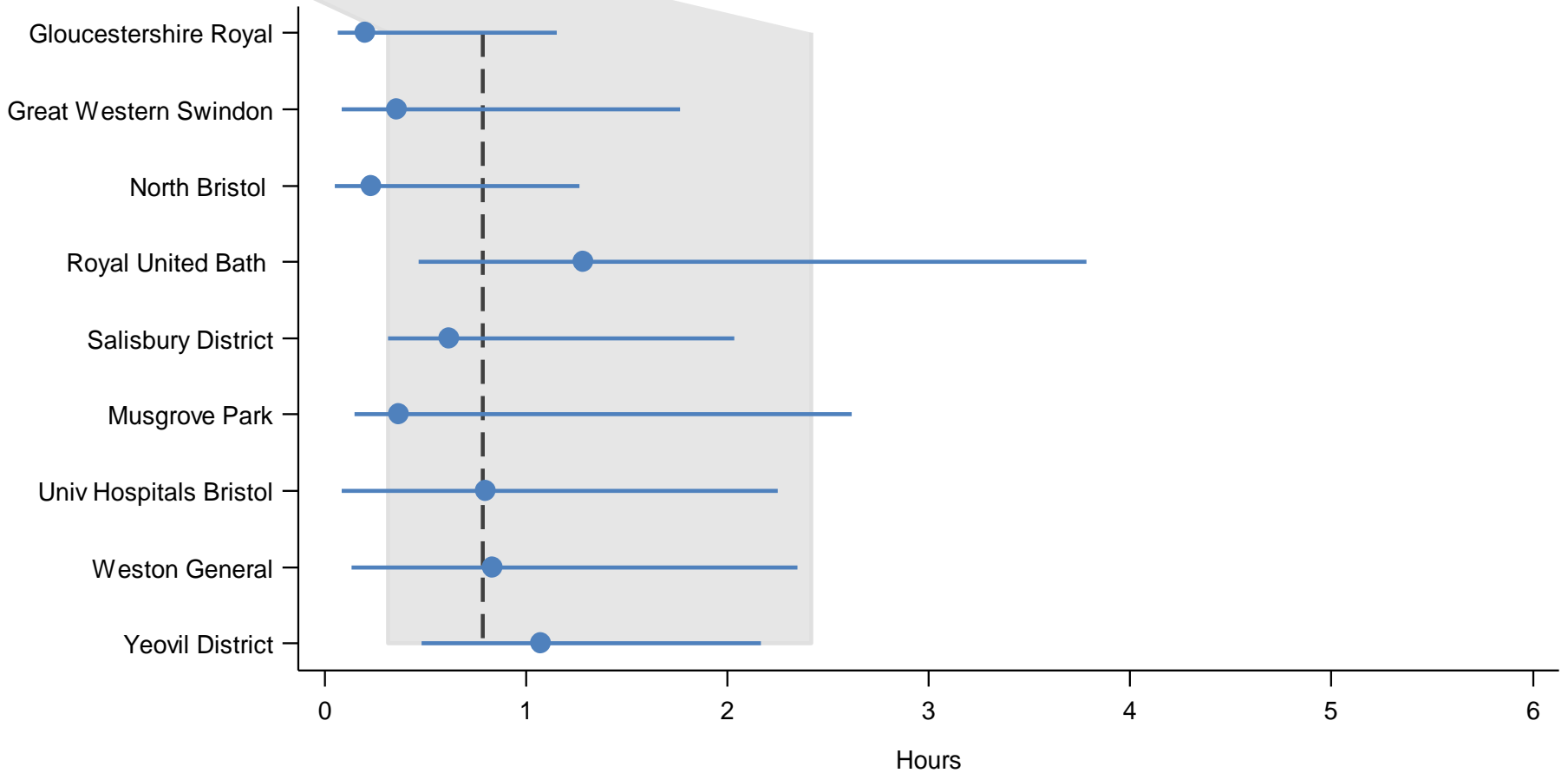
Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Key Indicator 1.1A

# Scanned within 12 hours



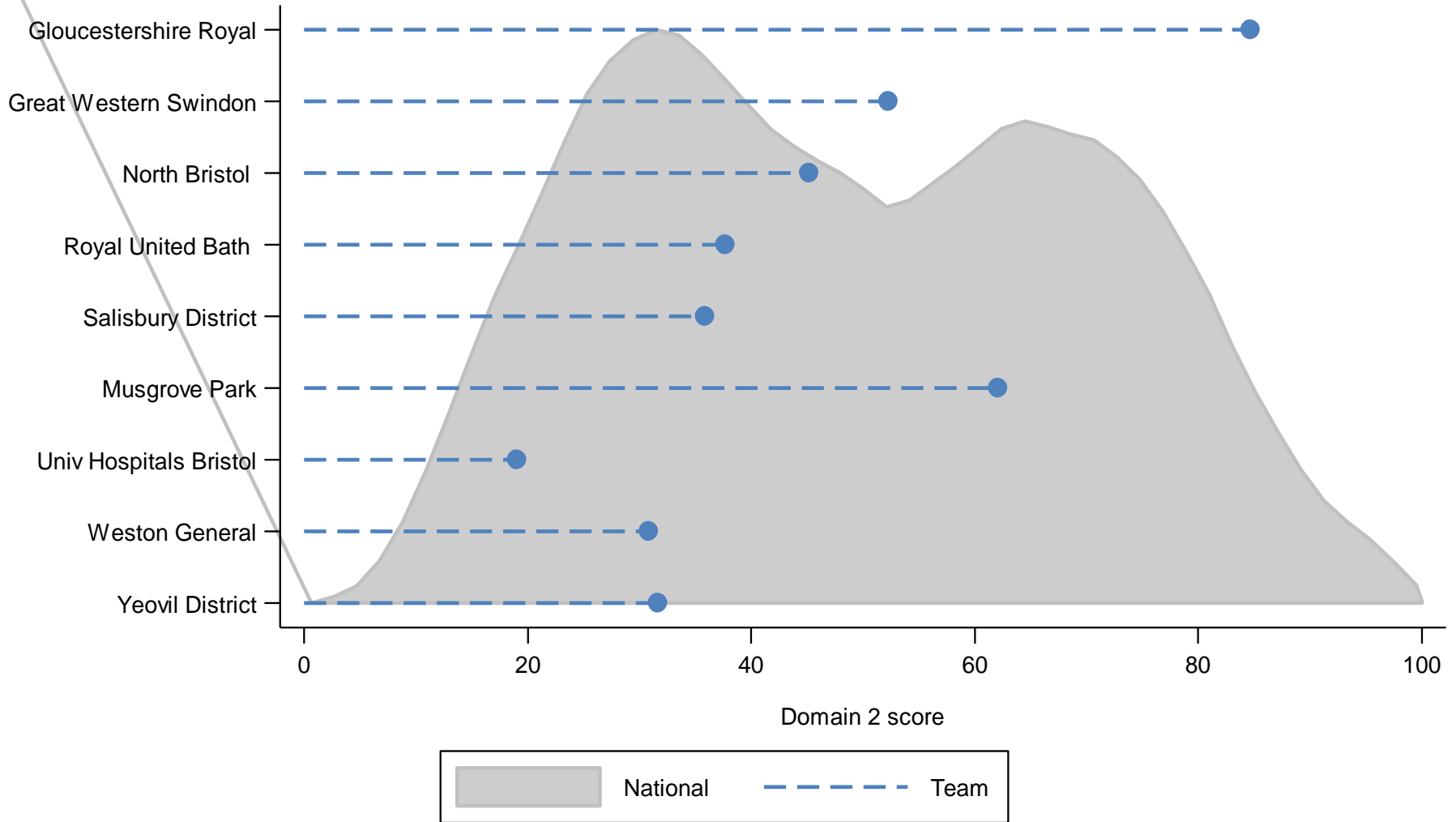
Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Key Indicator 1.2A

# Clock start to scan time



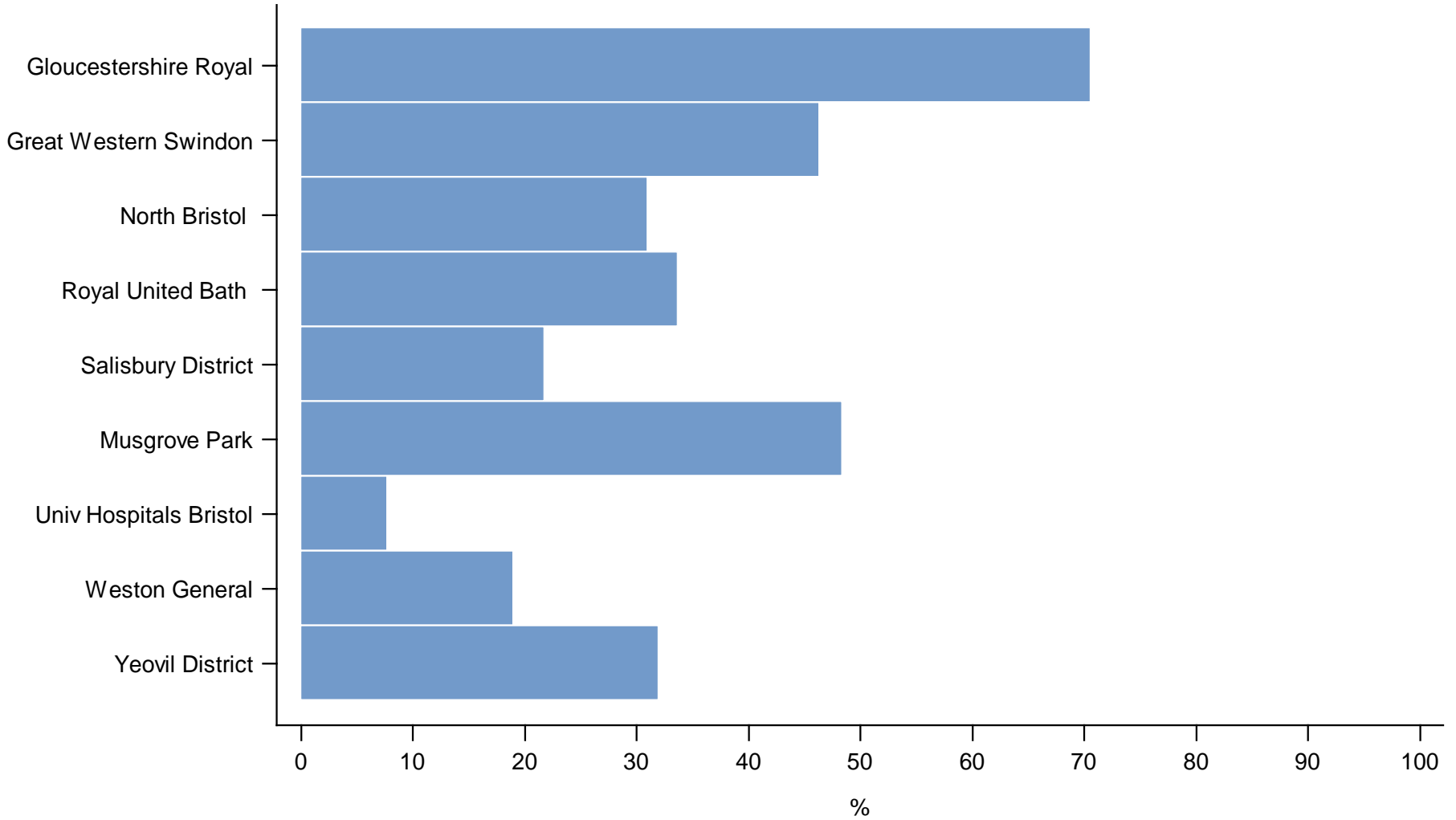
Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Key Indicator 1.3A

# Domain 2 - Stroke Unit



Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Domain 2

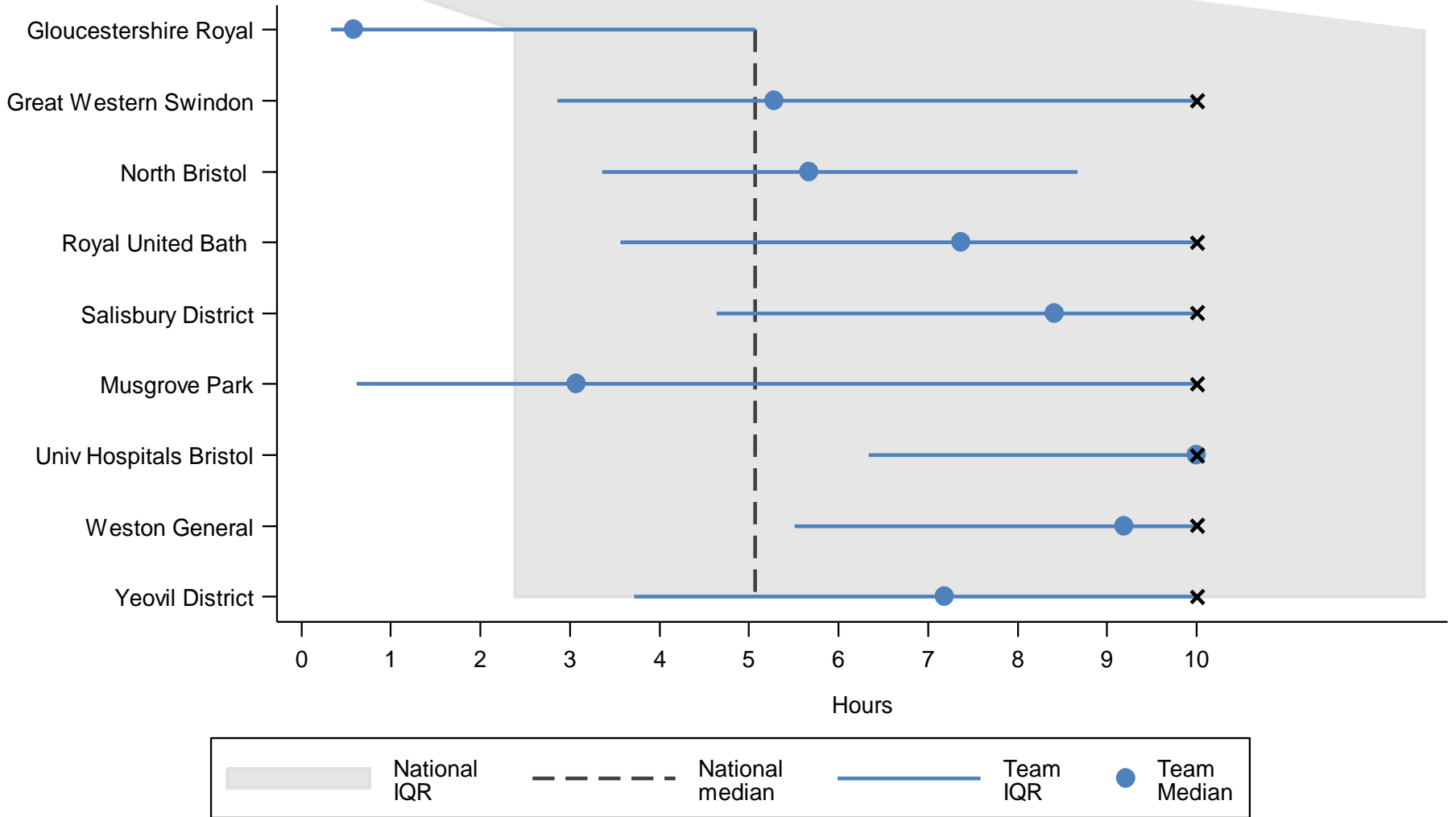
# Direct to SU within 4 hours



Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Key Indicator 2.1A

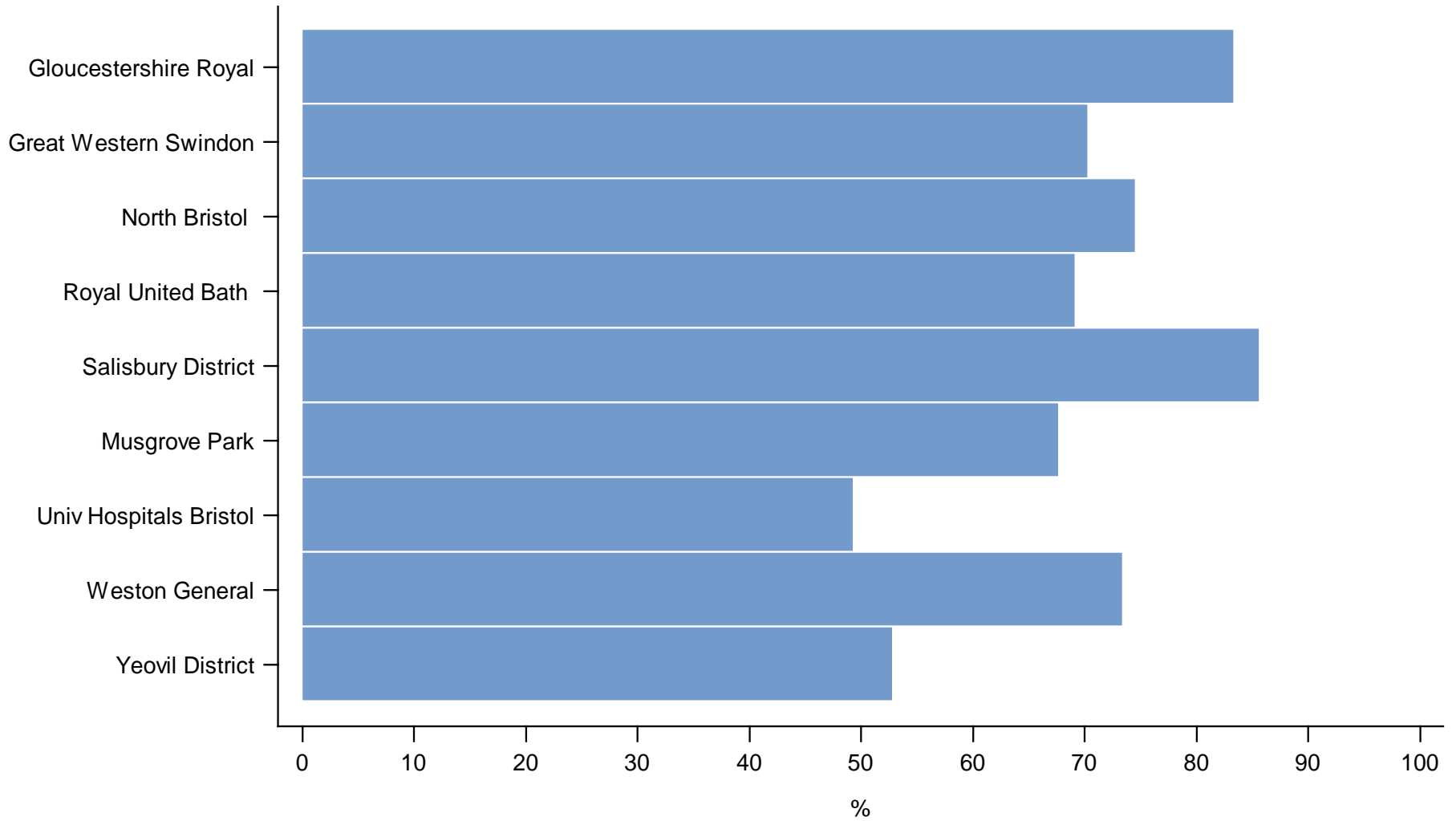


# Clock start to stroke unit time



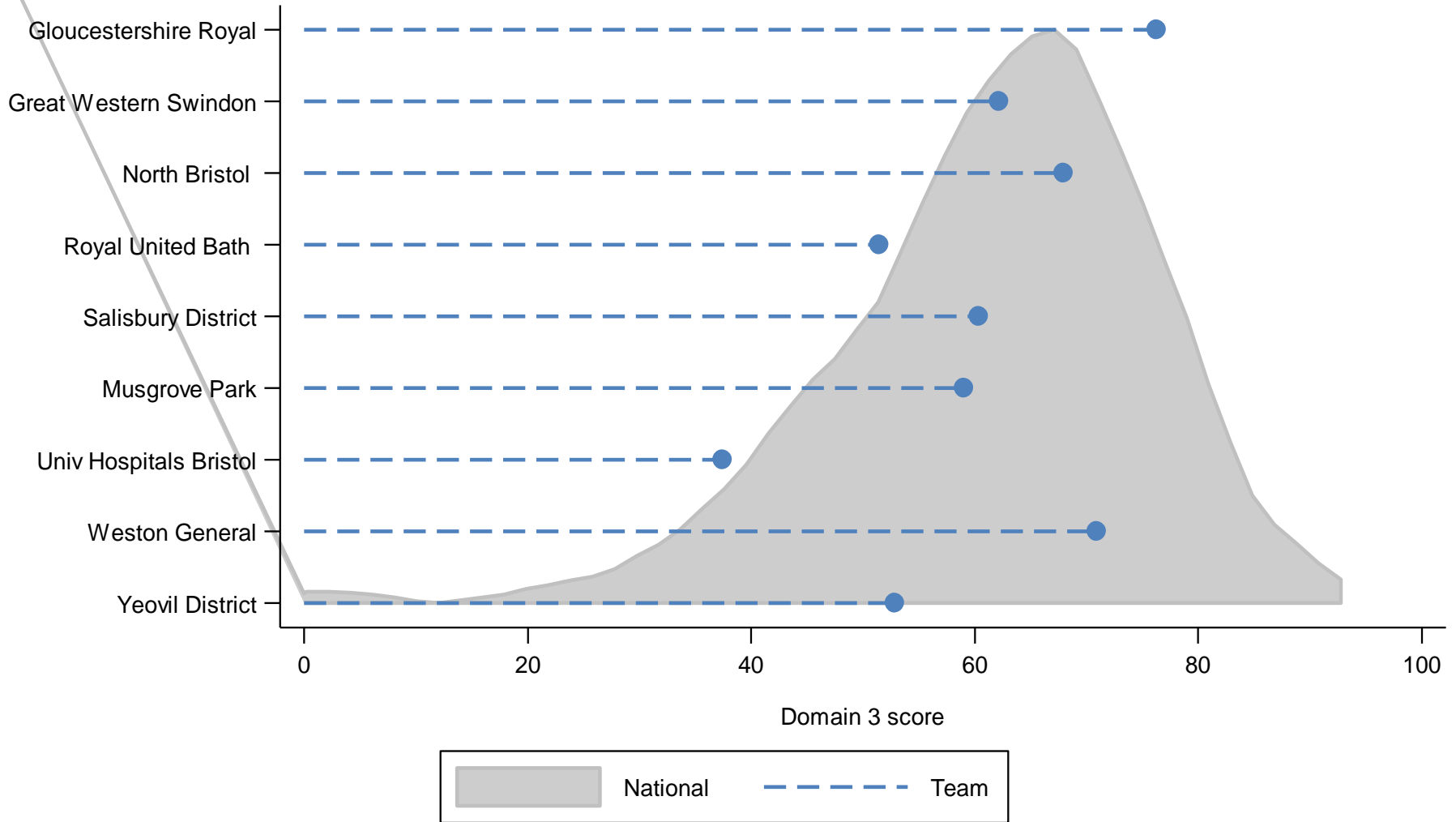
Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Key Indicator 2.2A

# At least 90% of stay on SU



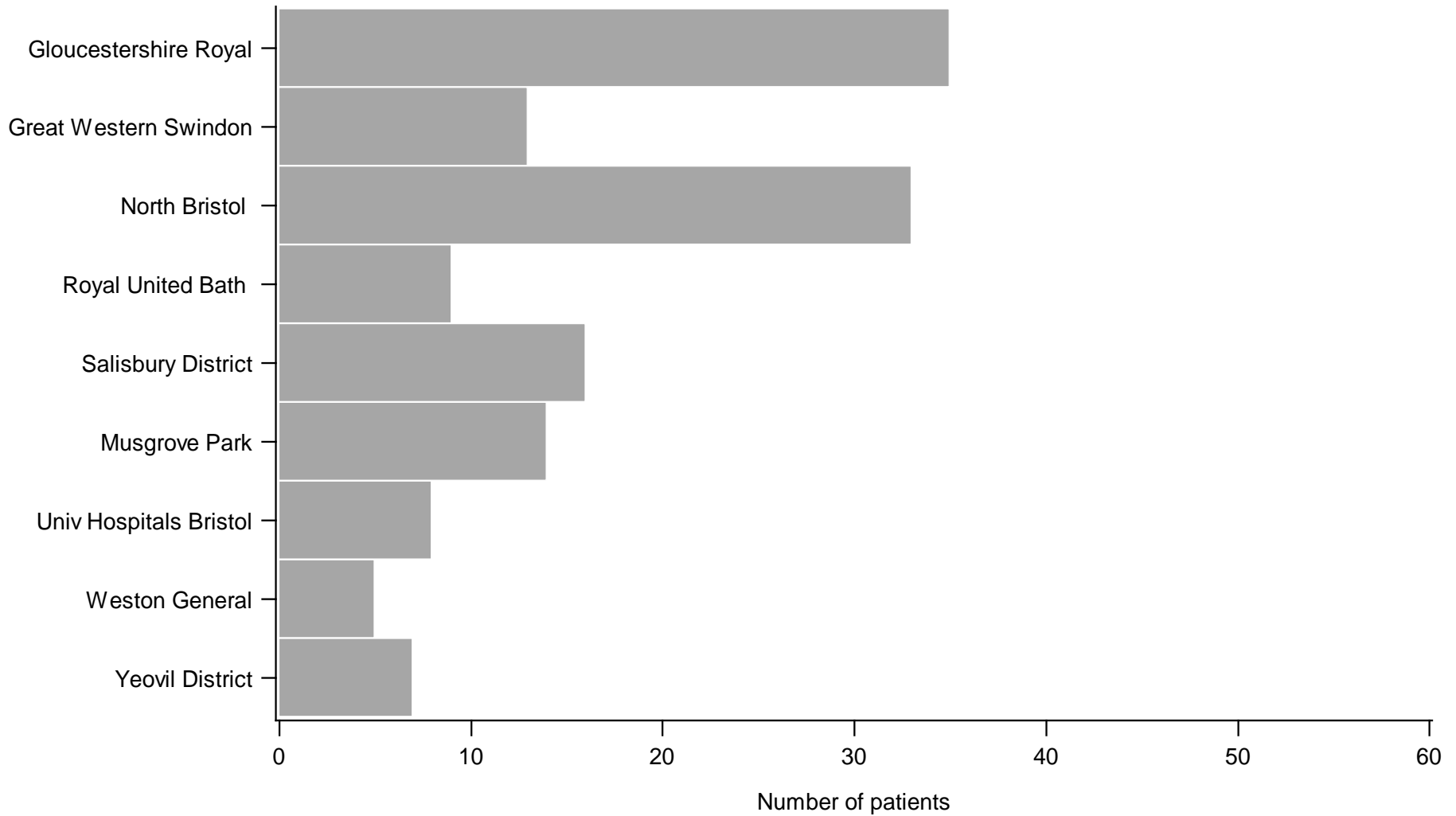
Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Key Indicator 2.3A

# Domain 3 - Thrombolysis



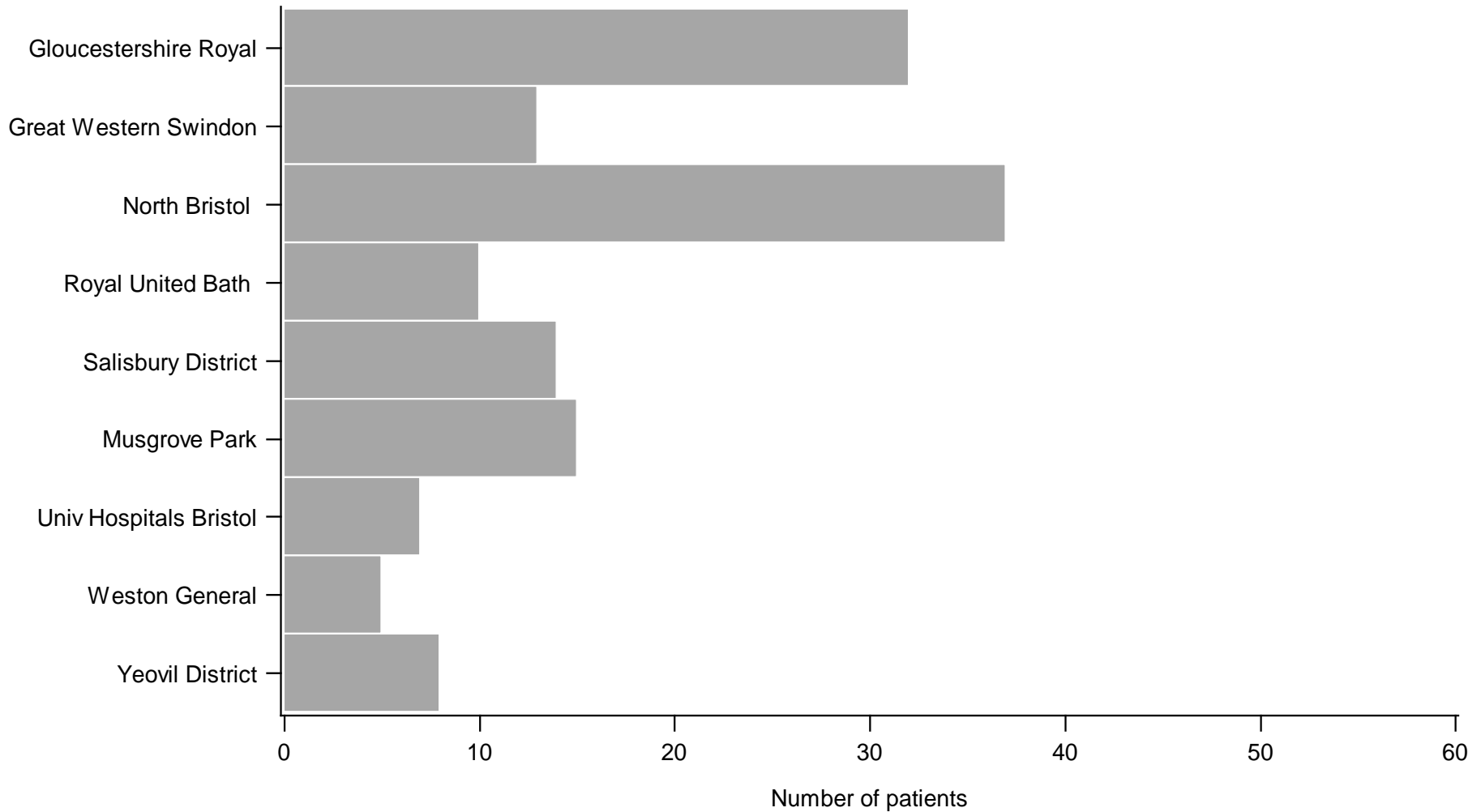
Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Domain 3

# Number of patients thrombolysed



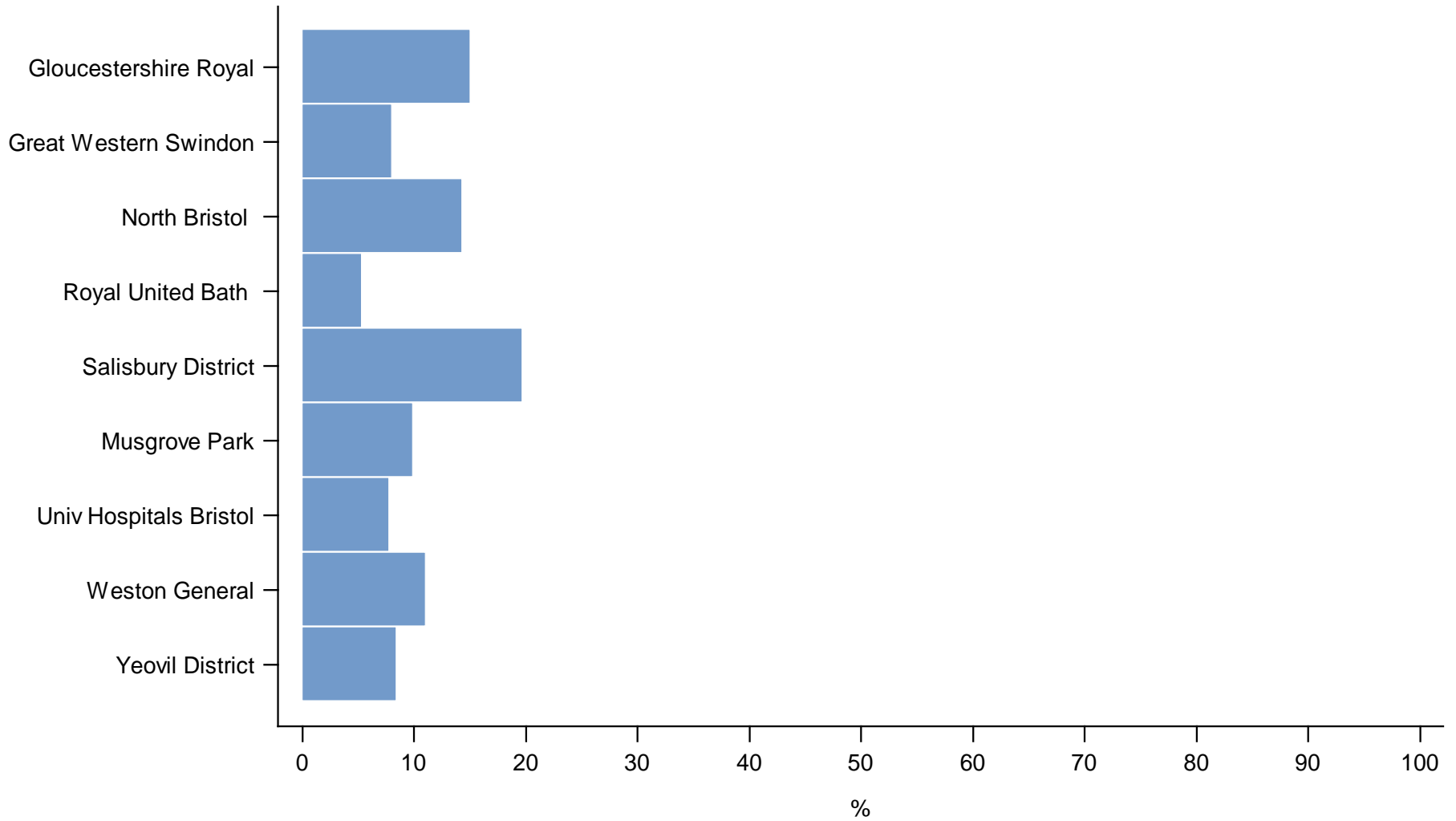
Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for G16.2

# Number of patients eligible for thrombolysis according to RCP SSNAP minimum threshold criteria



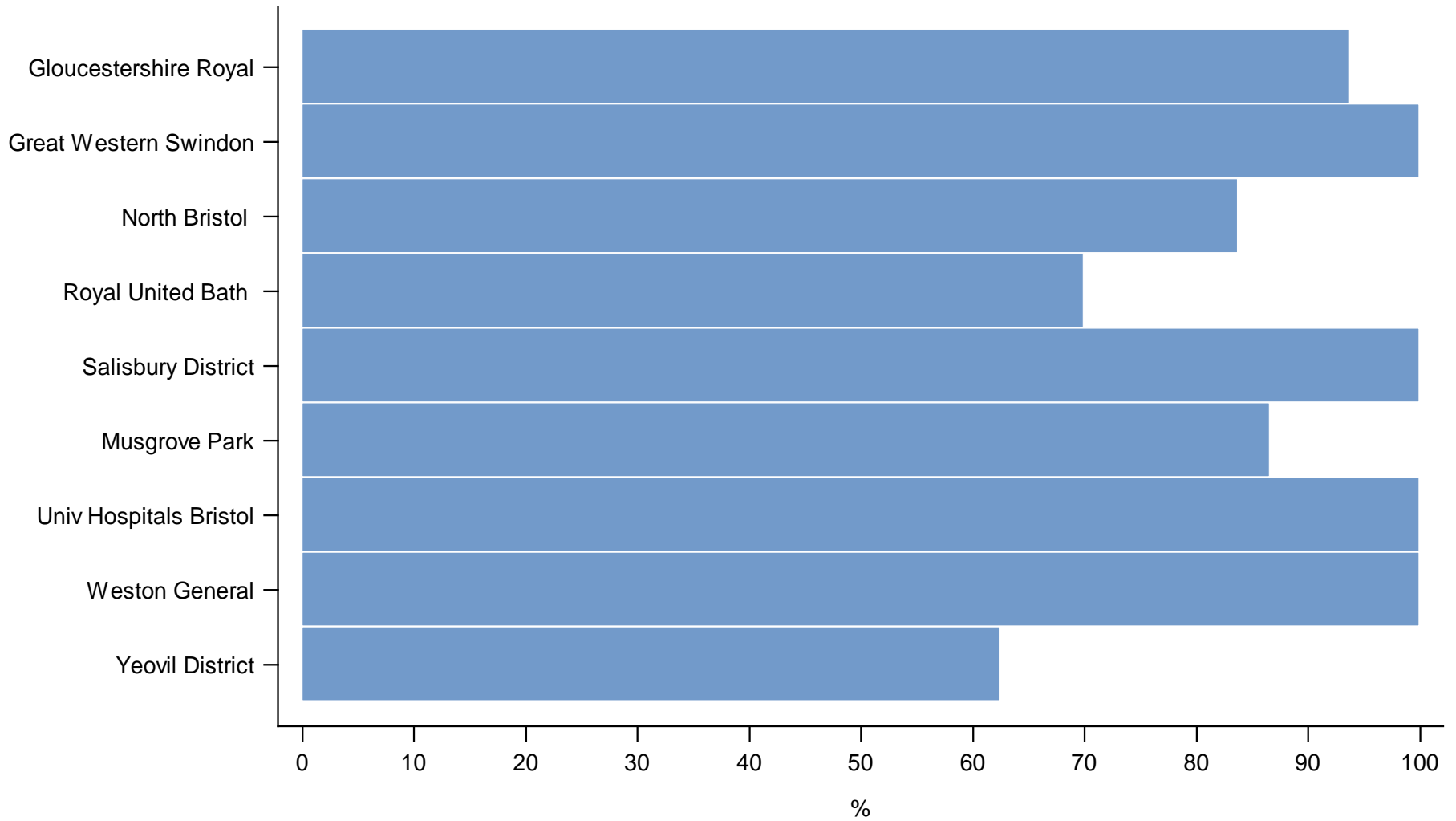
Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for G16.49

# Thrombolysis rate (All stroke)



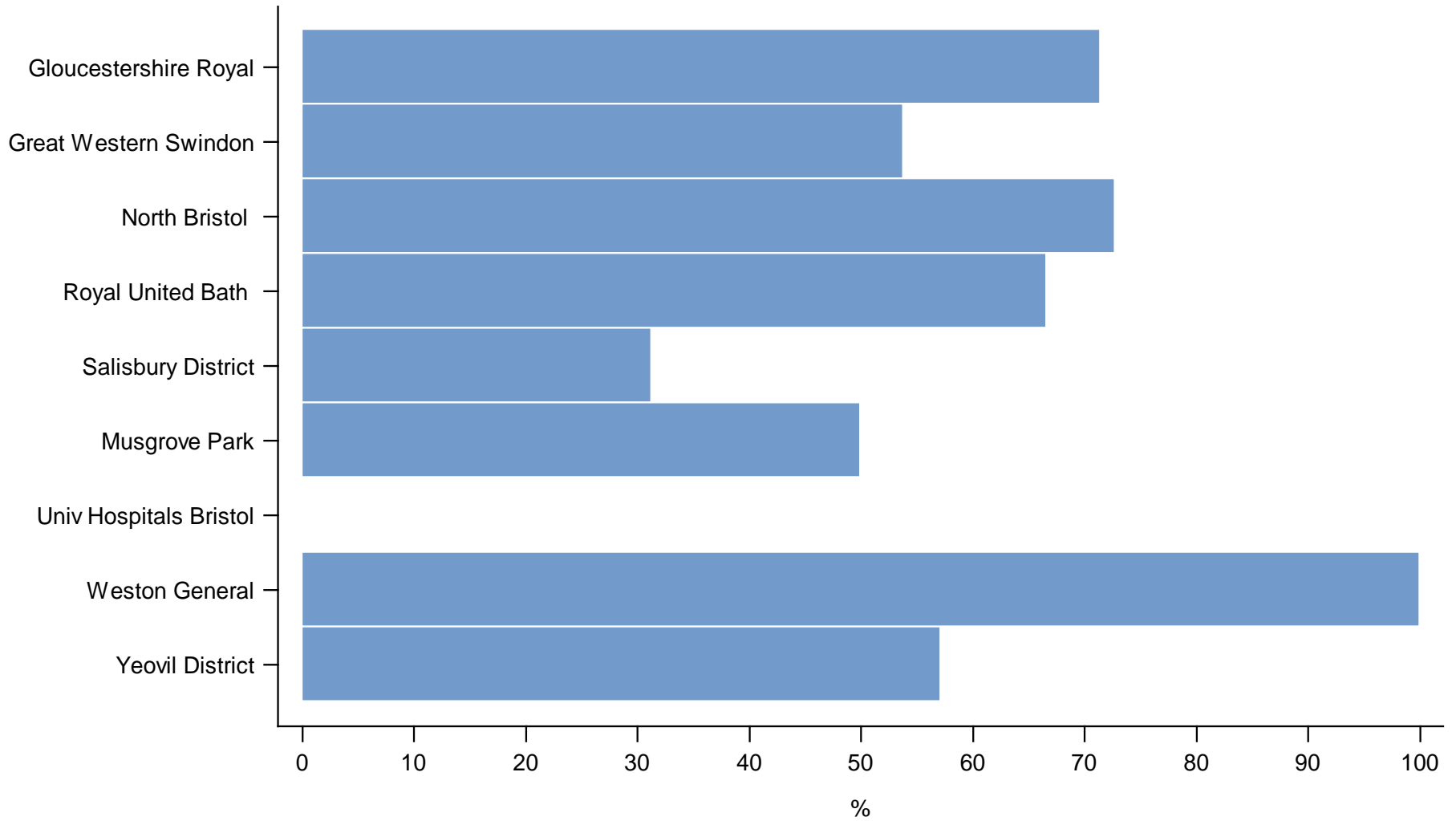
Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Key Indicator 3.1A

# Thrombolysis rate (RCP criteria)



Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Key Indicator 3.2A

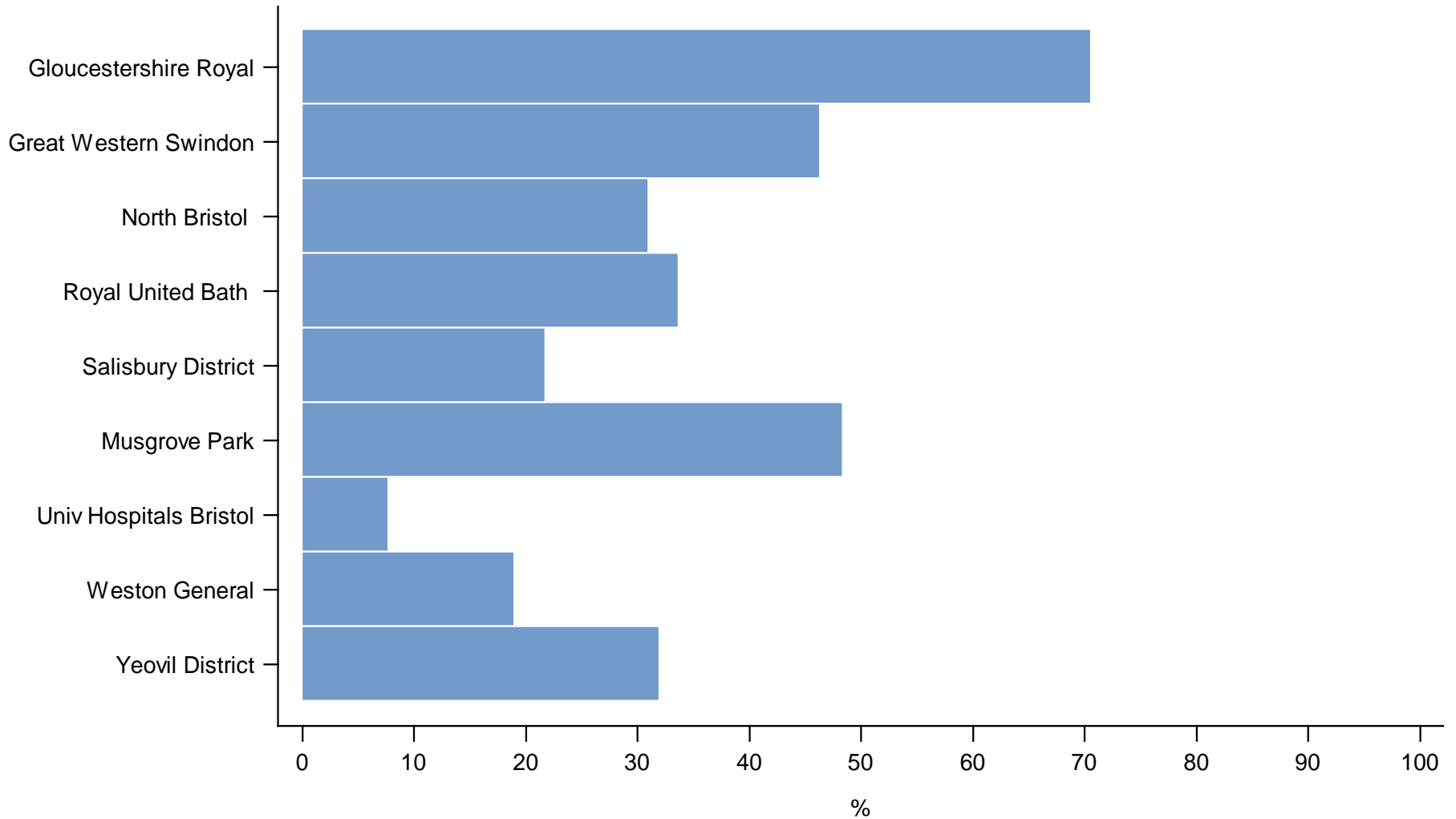
# Thrombolysis within 1 hour



Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Key Indicator 3.3A

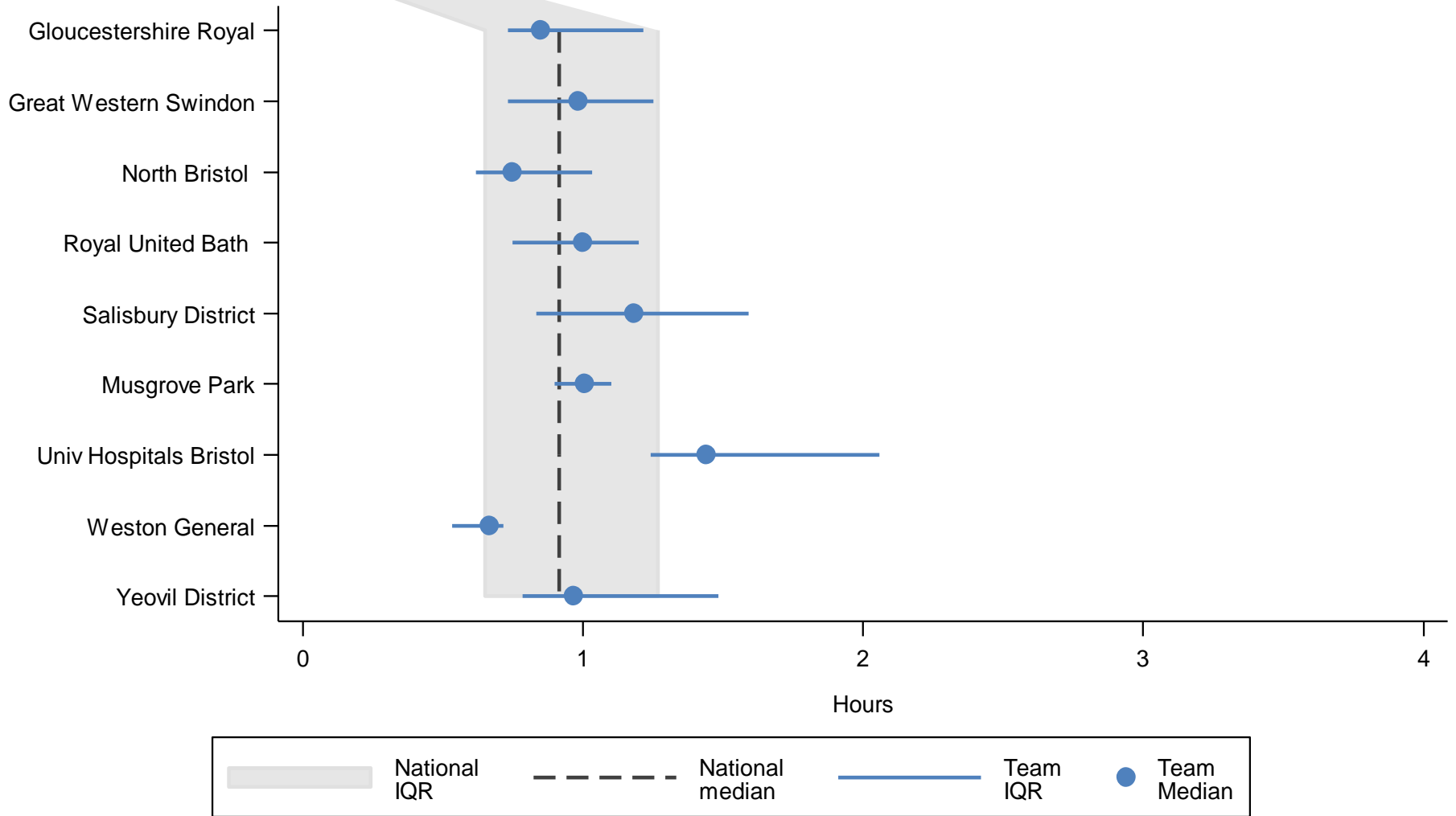


# SU within 4 hours and thrombolysis if required



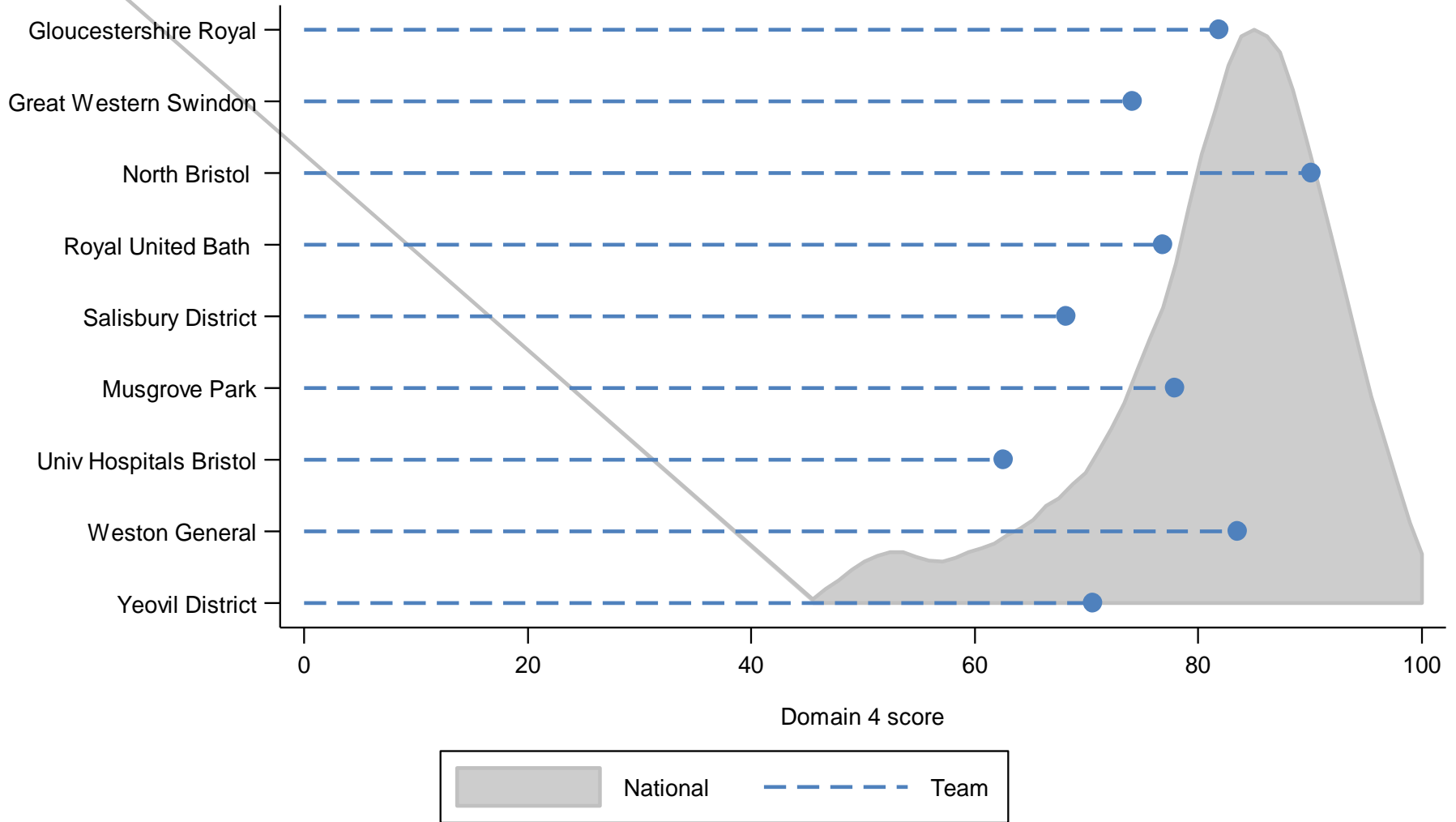
Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Key Indicator 3.4A

# Clock start to thrombolysis time



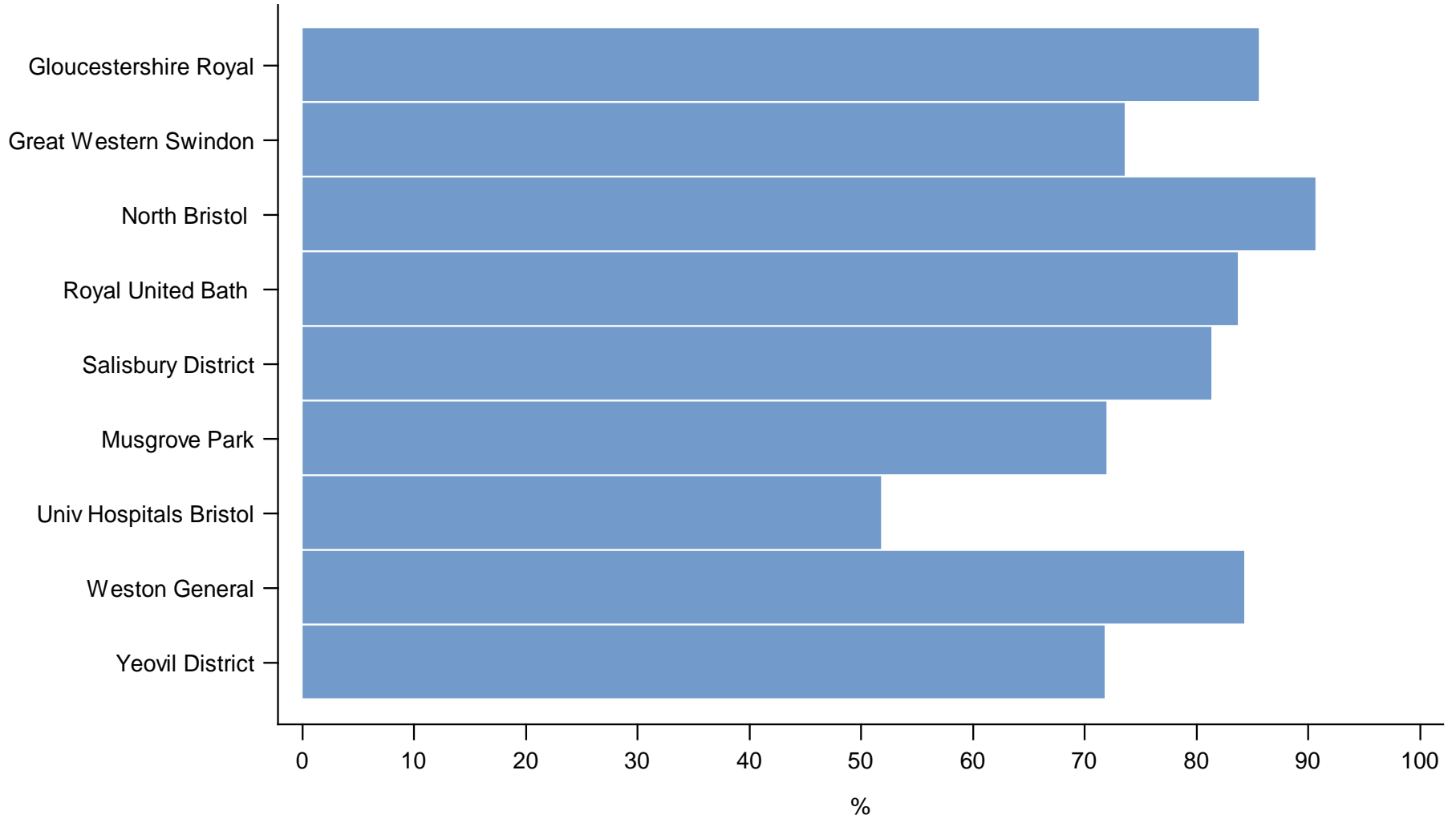
Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Key Indicator 3.5A

# Domain 4 - Specialist assessments



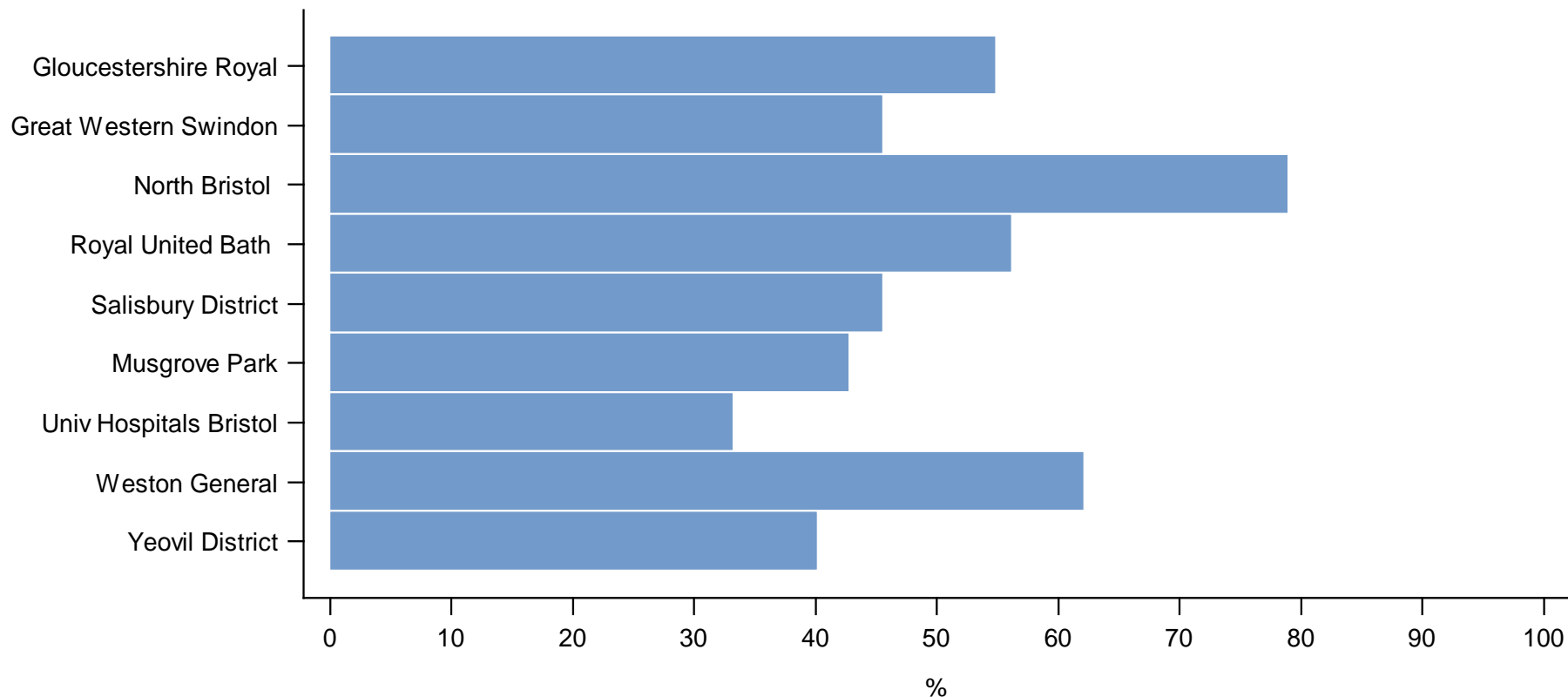
Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Domain 4

# Stroke consultant within 24 hours



Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Key Indicator 4.1A

# Assessed by a stroke specialist consultant physician (in person or via video telemedicine) within 14h of clock start\*

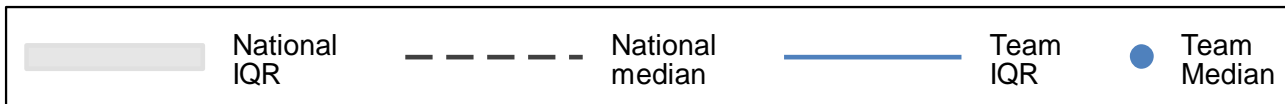
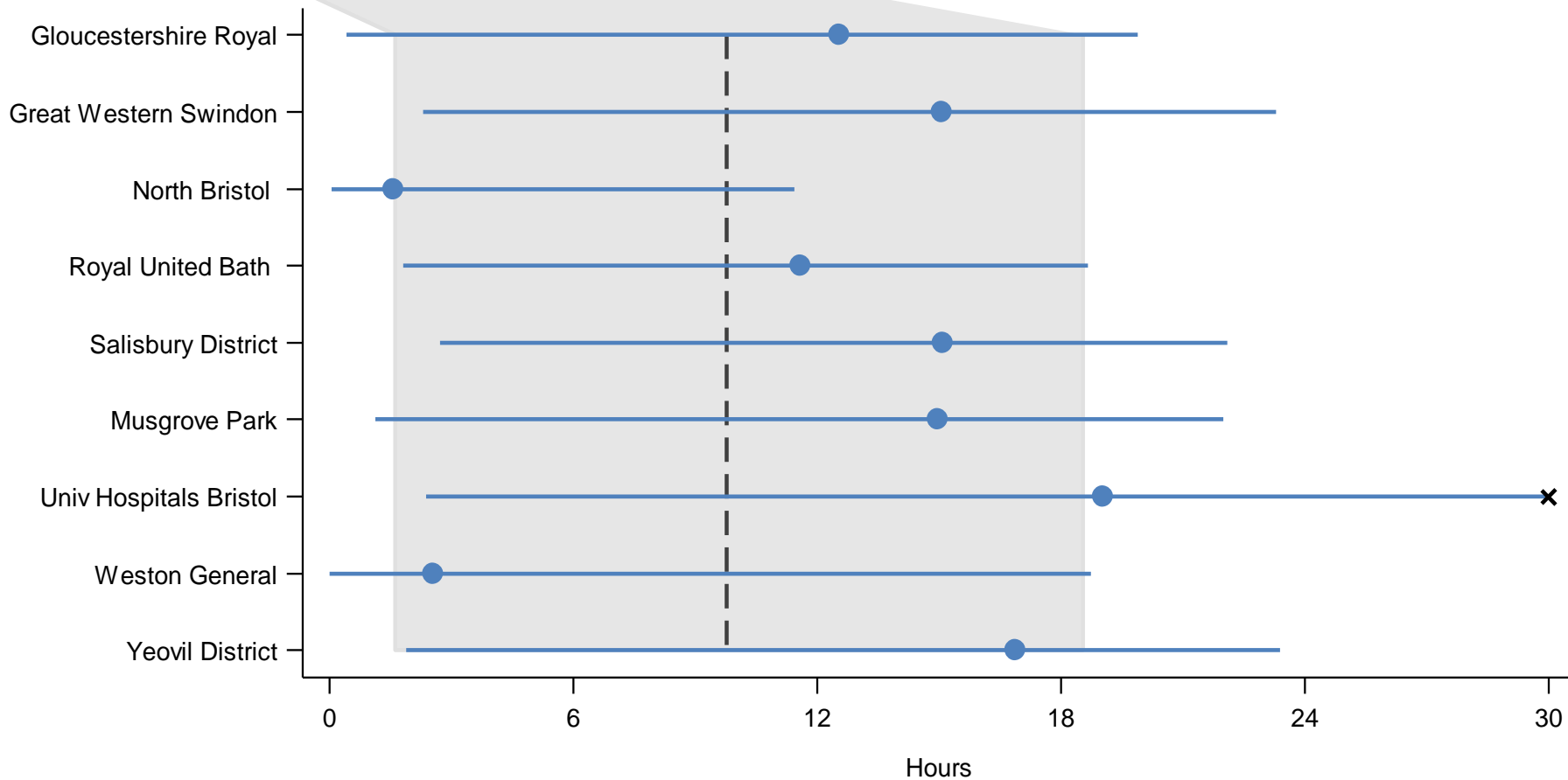


Source: SSNAP Apr-Jun 2022

Patient-centred results at team level for Item Reference G9.19

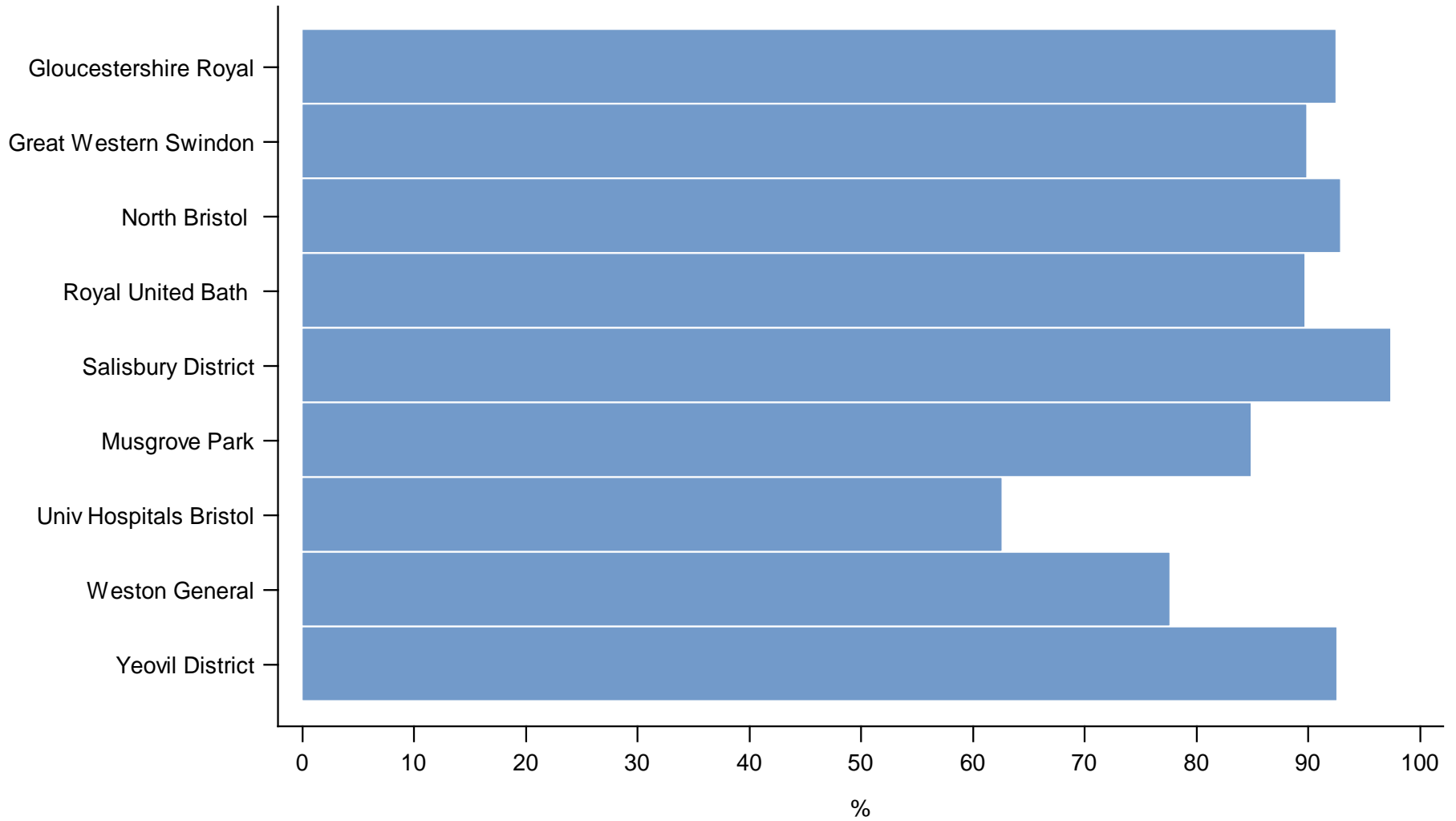
\*For patients whose first contact with stroke consultant (Q3.3b) is in person or telemedicine, the time contact first made with a stroke specialist consultant is used (Q3.3a), and for patients whose first contact with stroke consultant (Q3.3b) is by telephone, the time first assessed by stroke specialist consultant in person (Q3.3c) is used.

# Clock start to stroke consultant time



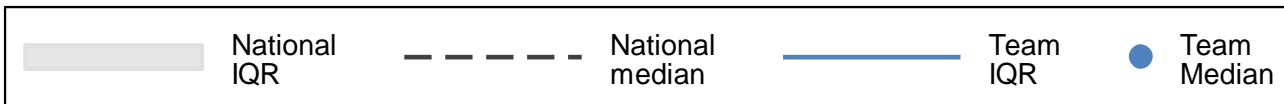
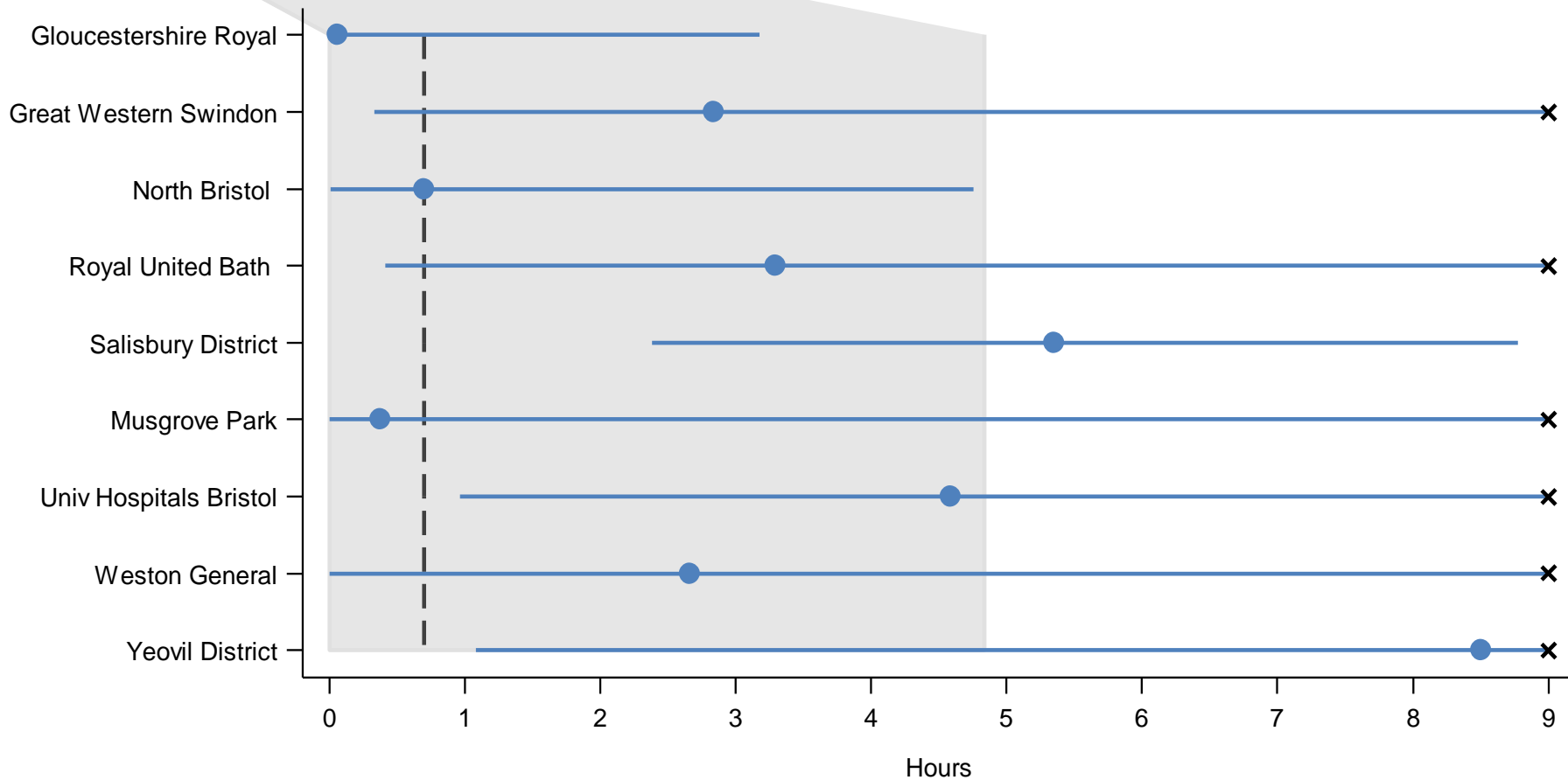
Source: SSNAP Apr-Jun 2022  
 Patient-centred results at team level for Key Indicator 4.2A

# Stroke nurse within 24 hours



Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Key Indicator 4.3A

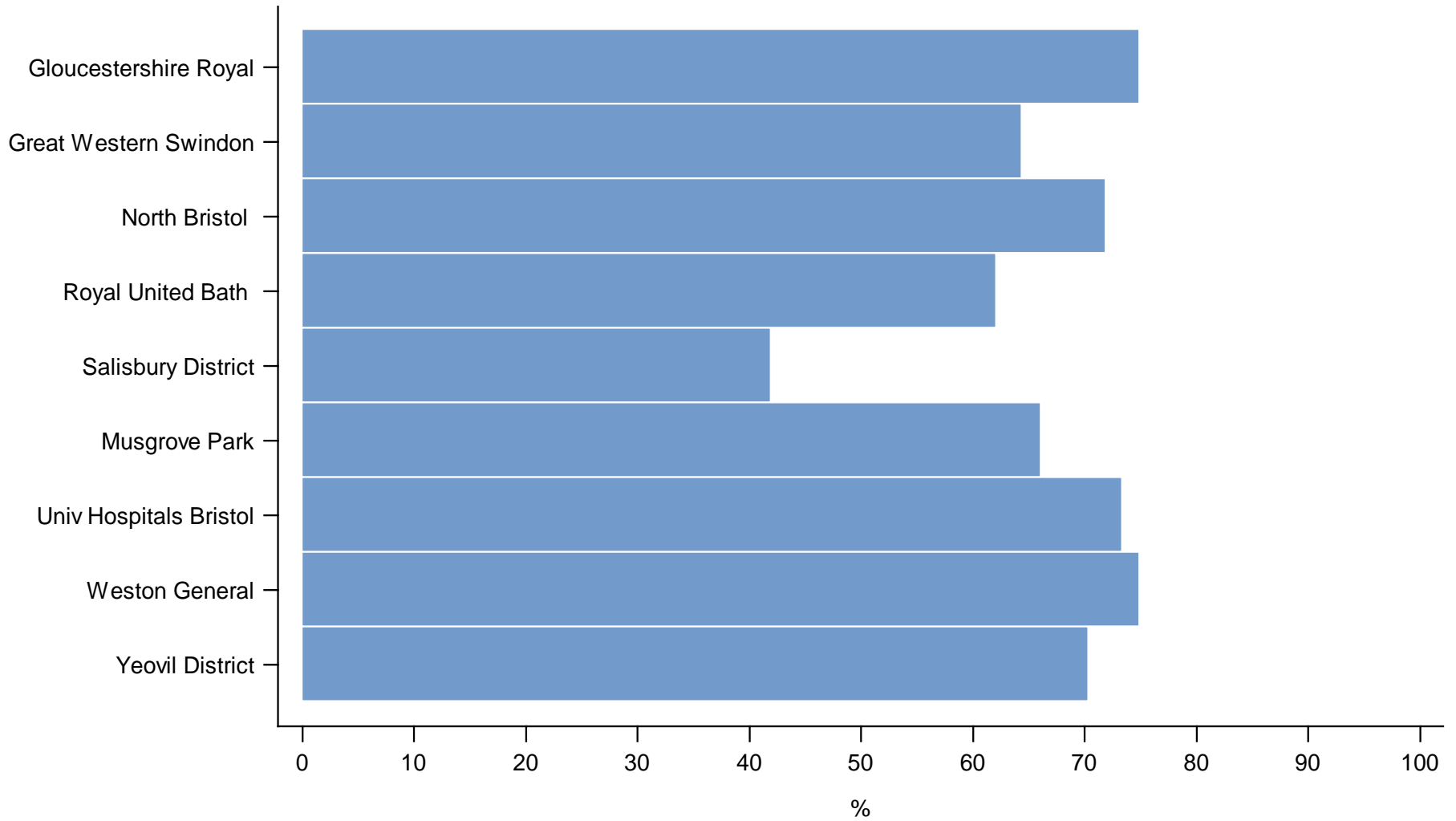
# Clock start to stroke nurse time



Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Key Indicator 4.4A

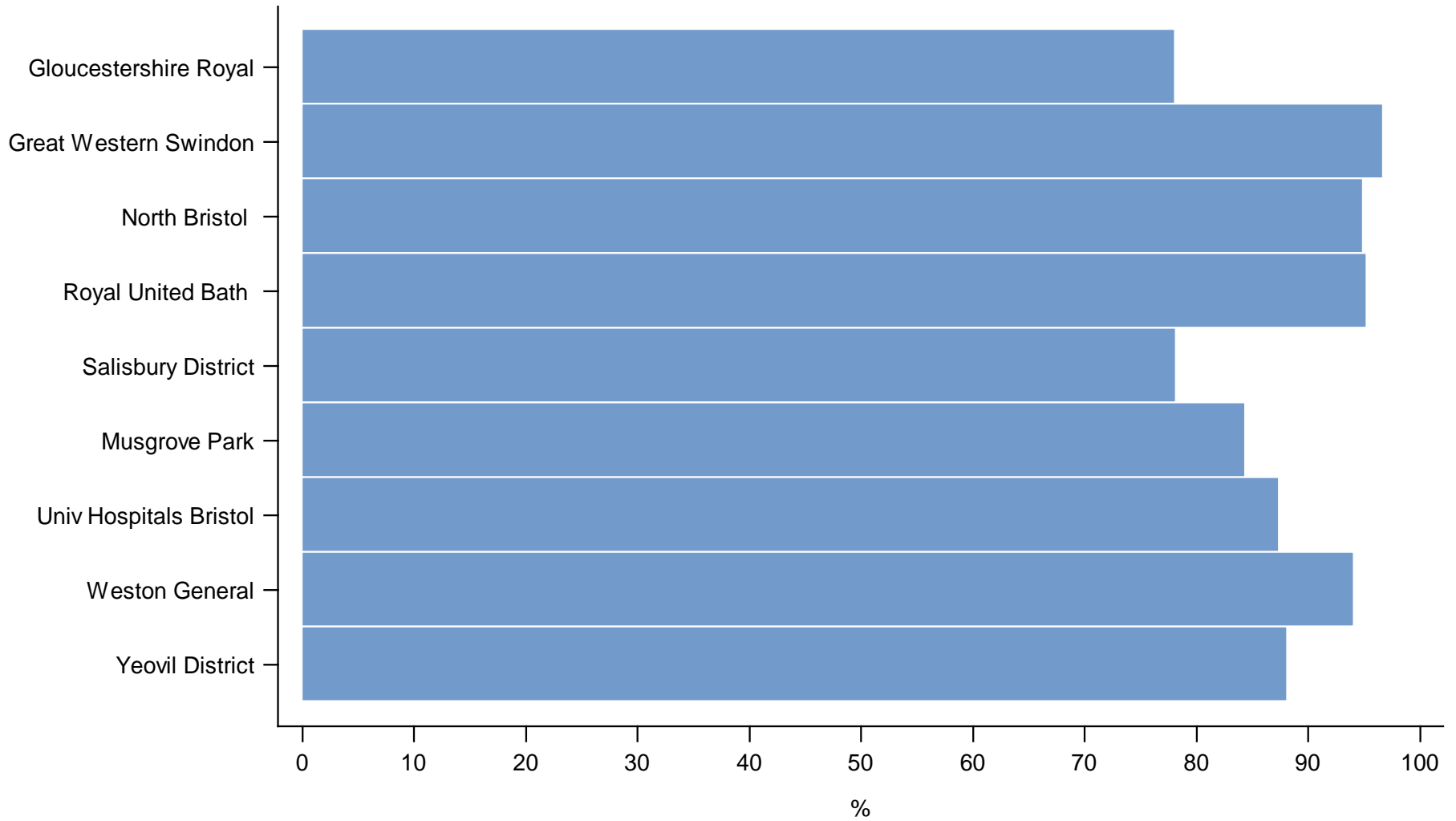


# Swallow screen within 4 hours



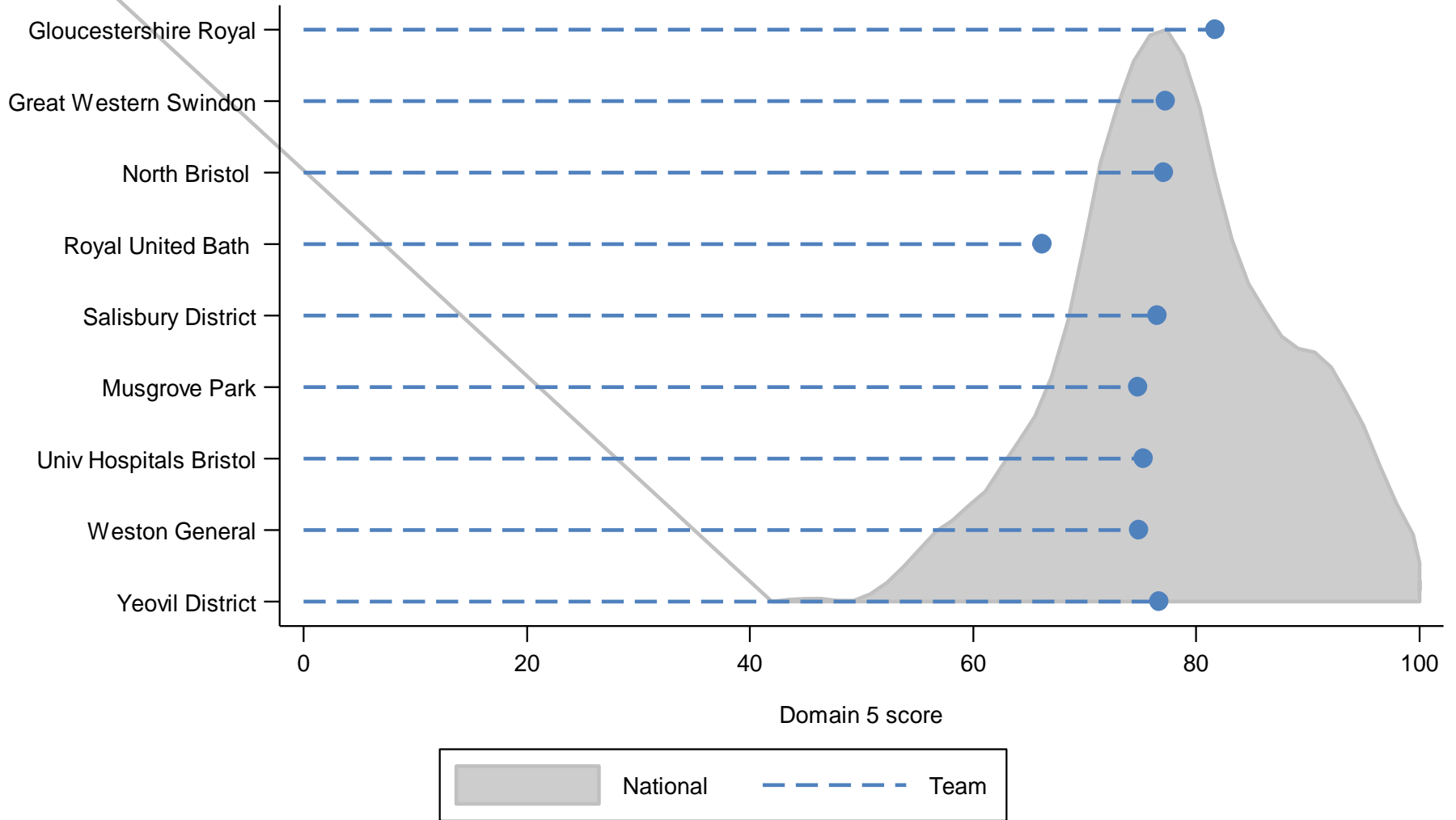
Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Key Indicator 4.5A

# Formal swallow assessment within 72 hours



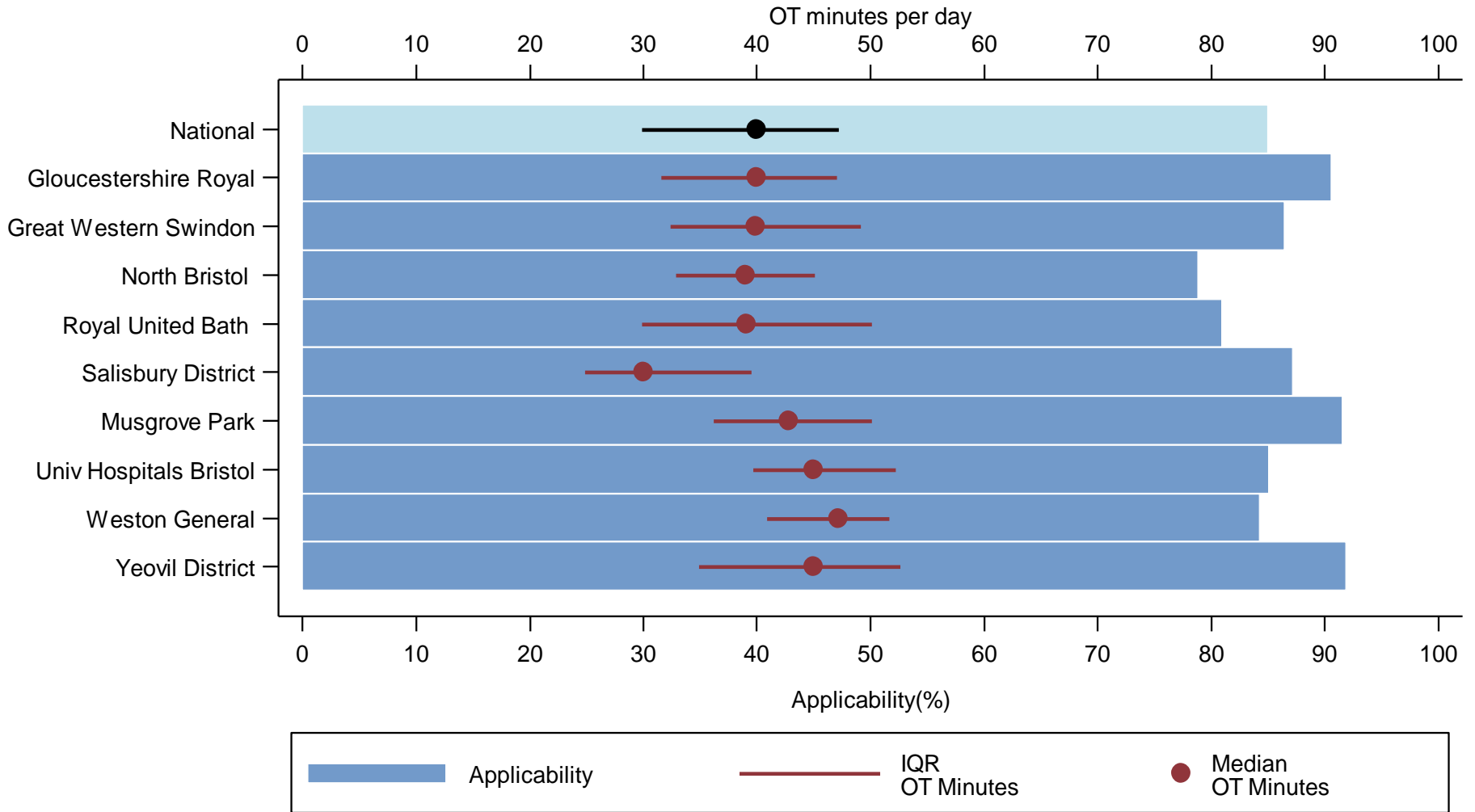
Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Key Indicator 4.6A

# Domain 5 - Occupational therapy



Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Domain 5

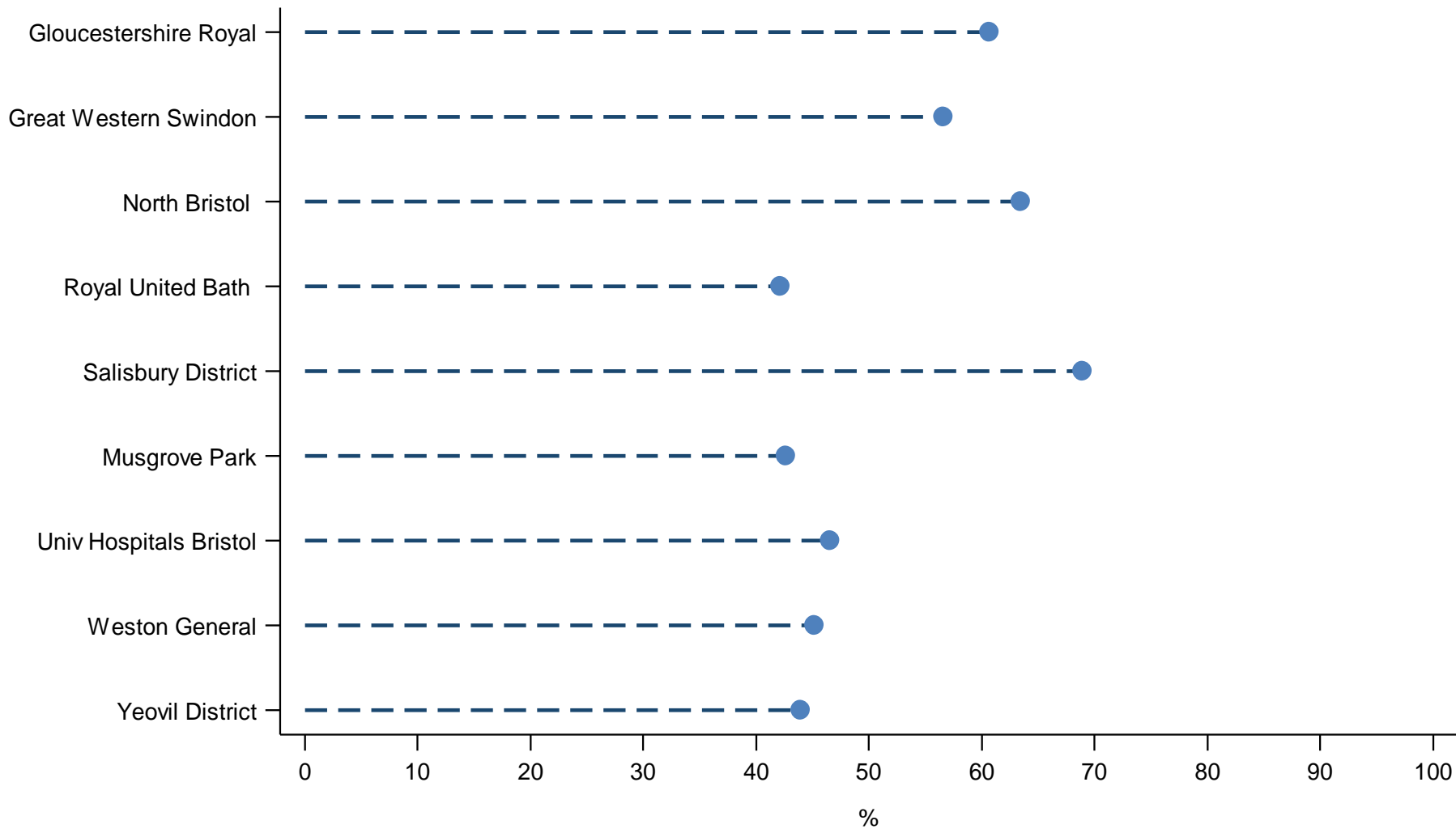
# Applicability and minutes per day of OT



Source: SSNAP Apr-Jun 2022

Patient-centred results at team level for Key Indicator Key Indicator 5.1A and 5.2A

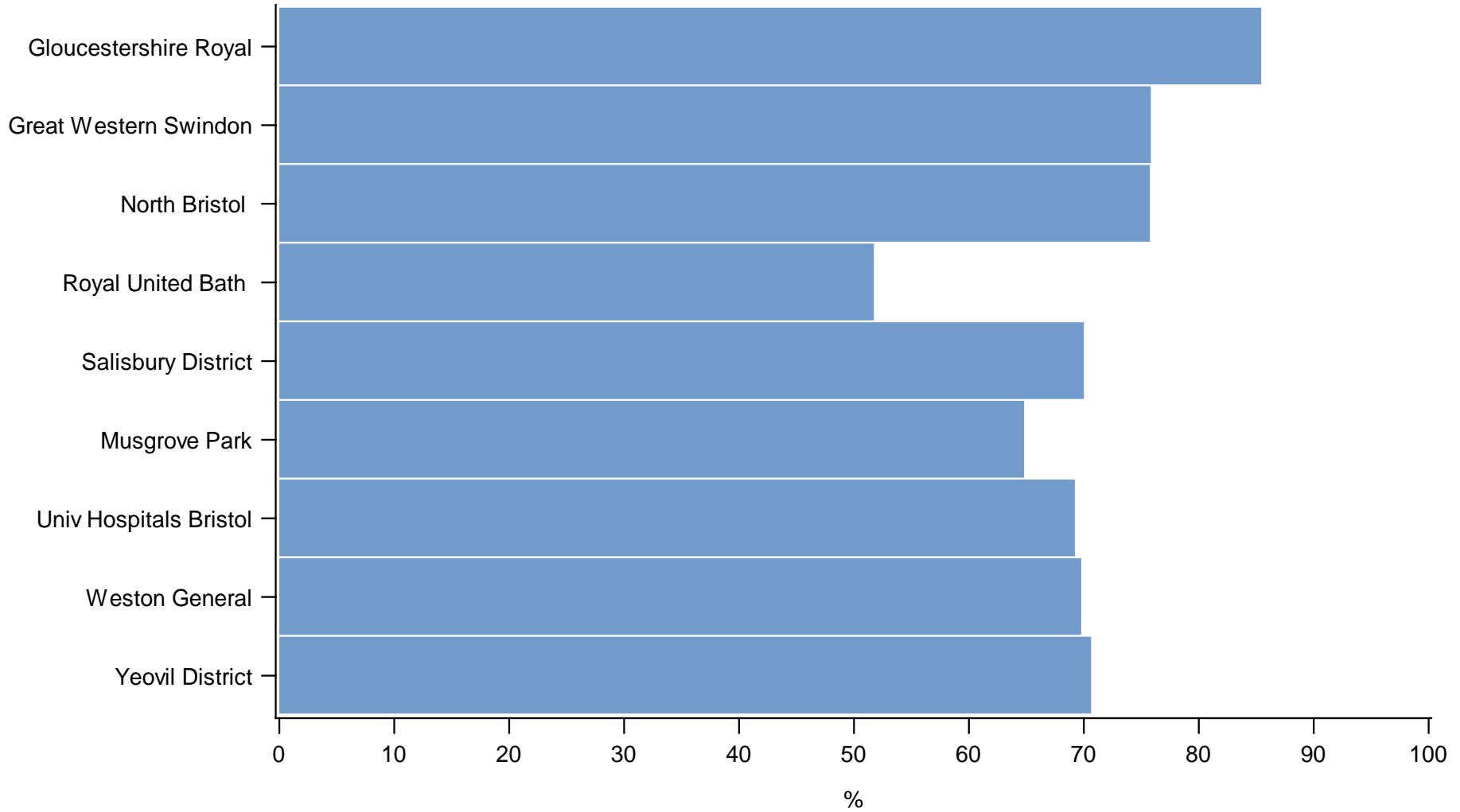
# Median % of inpatient days on which OT is received



Source: SSNAP Apr-Jun 2022

Patient-centred results at team level for Key Indicator Key Indicator 5.3A

# Compliance (%) against OT target

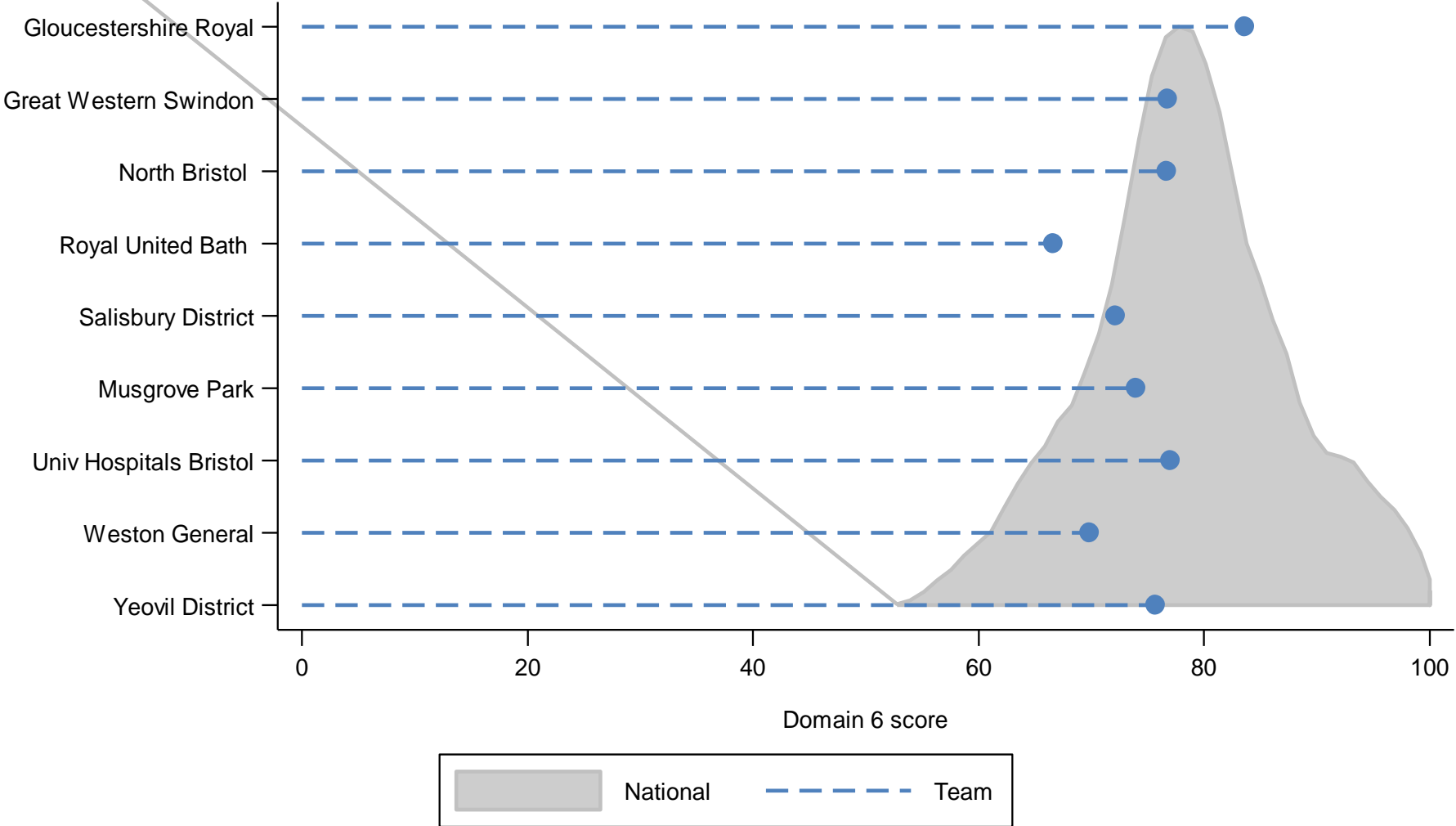


Source: SSNAP Apr-Jun 2022

Patient-centred results at team level for Key Indicator Key Indicator 5.4A

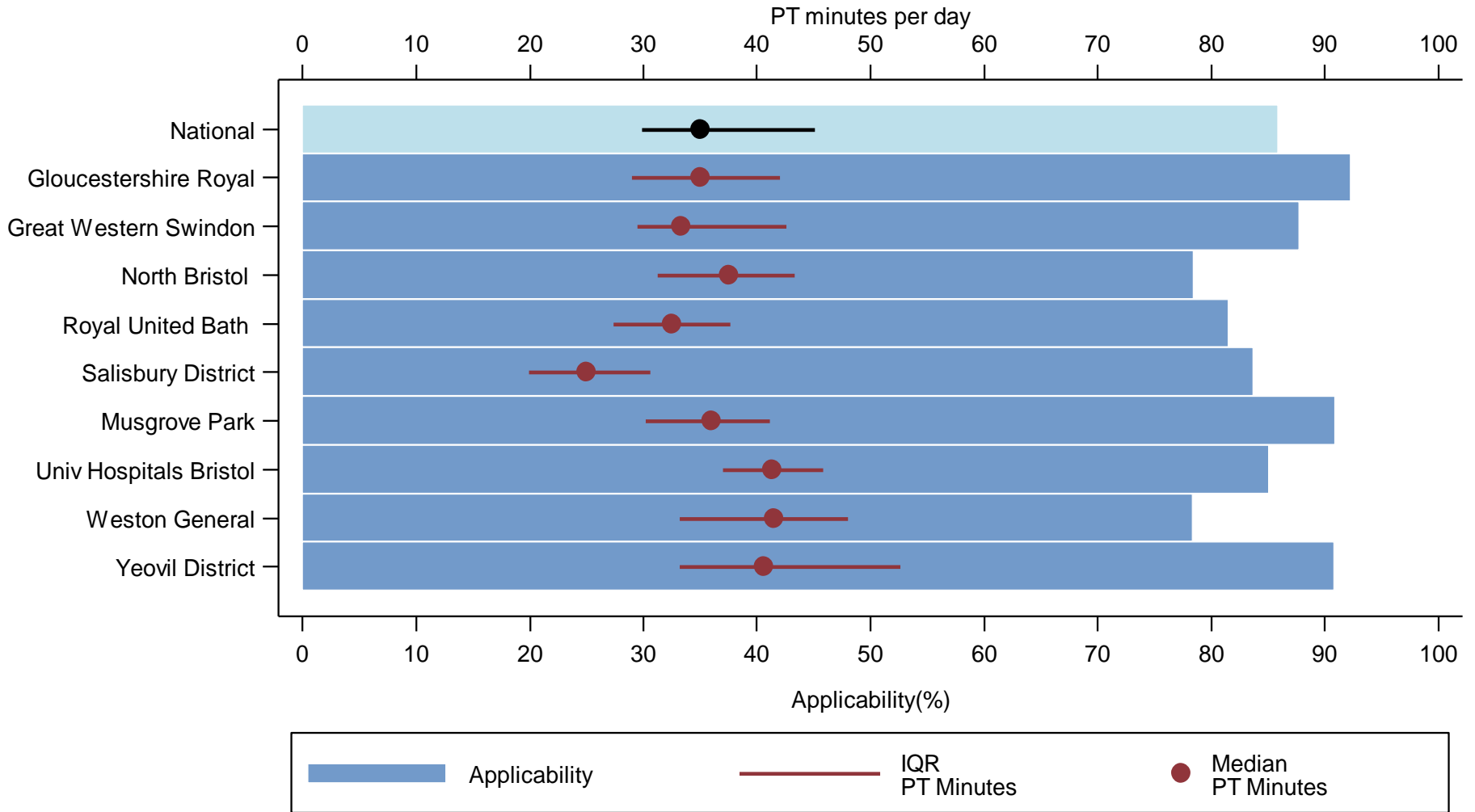
West of England

# Domain 6 - Physiotherapy



Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Domain 6

# Applicability and minutes per day of PT

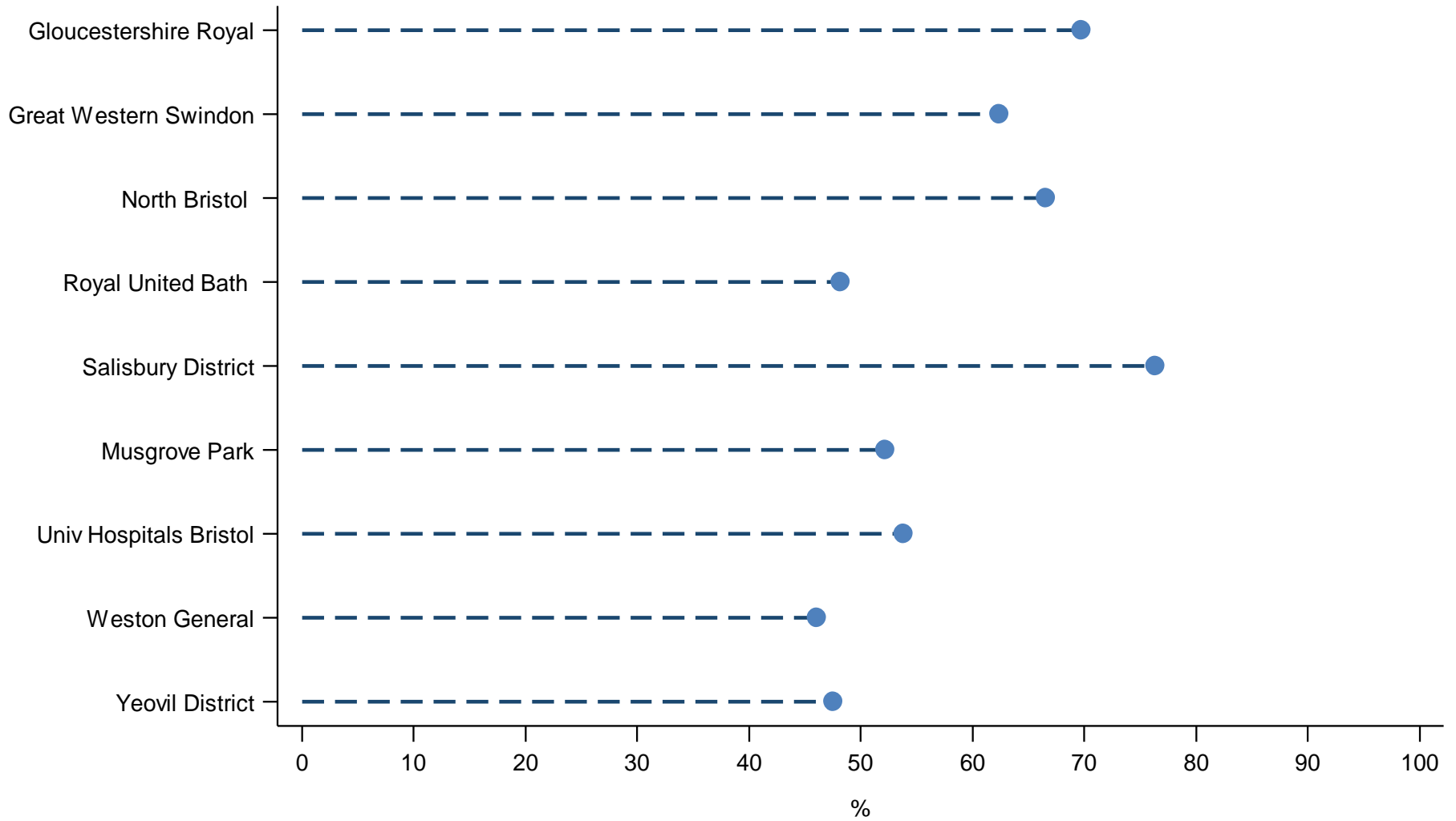


Source: SSNAP Apr-Jun 2022

Patient-centred results at team level for Key Indicator Key Indicator 6.1A and 6.2A



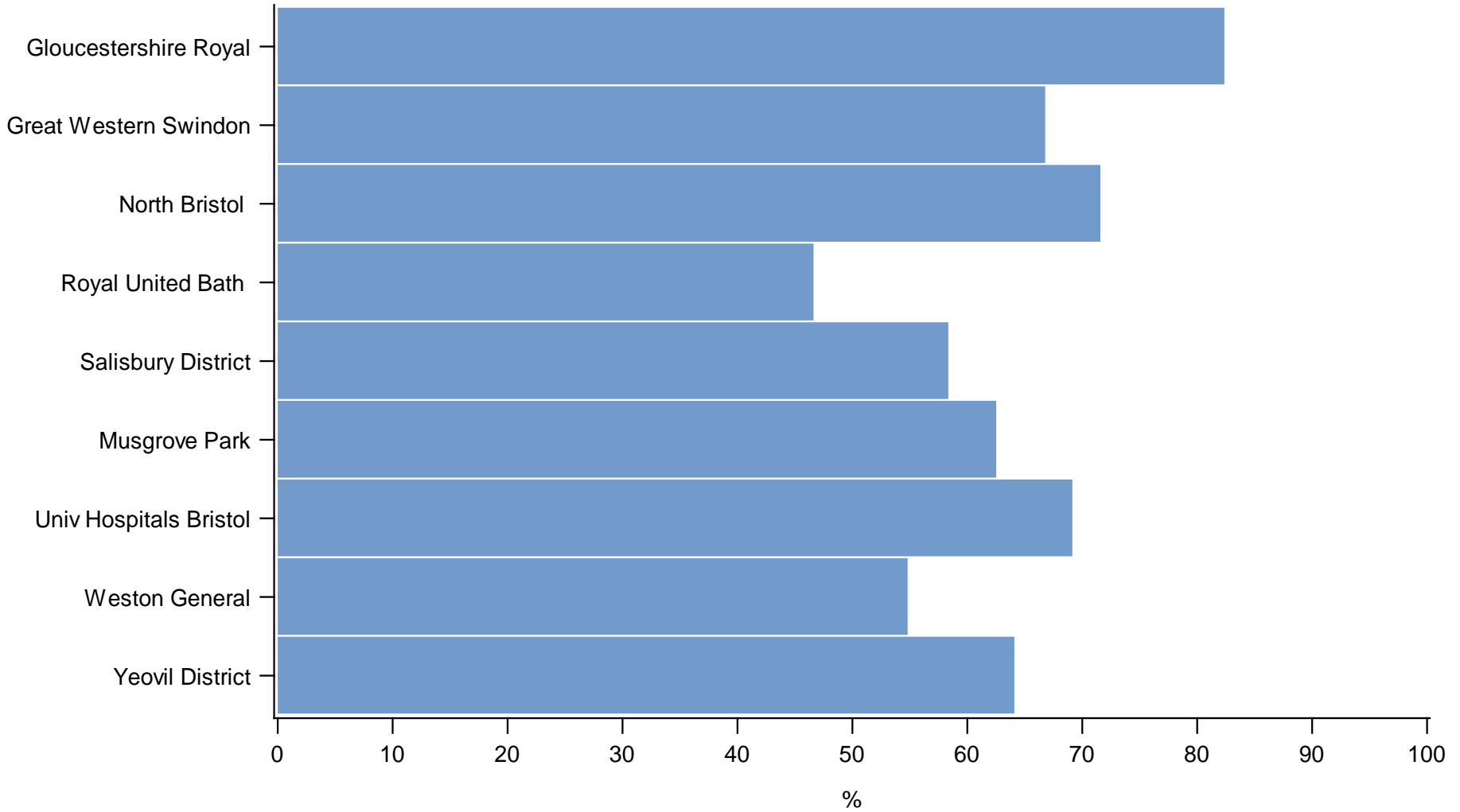
# Median % of inpatient days on which PT is received



Source: SSNAP Apr-Jun 2022

Patient-centred results at team level for Key Indicator Key Indicator 6.3A

# Compliance (%) against PT target

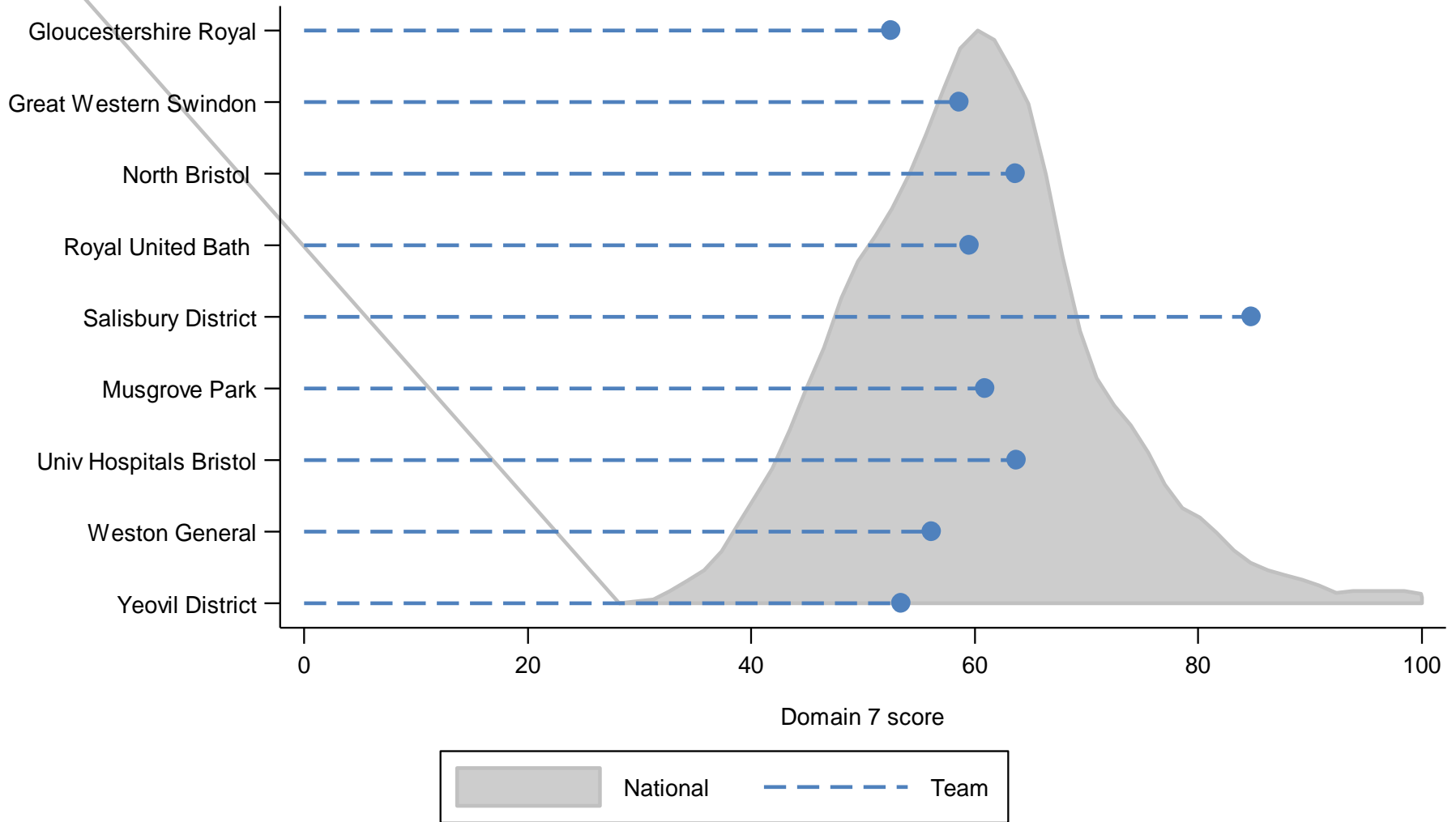


Source: SSNAP Apr-Jun 2022

Patient-centred results at team level for Key Indicator Key Indicator 6.4A

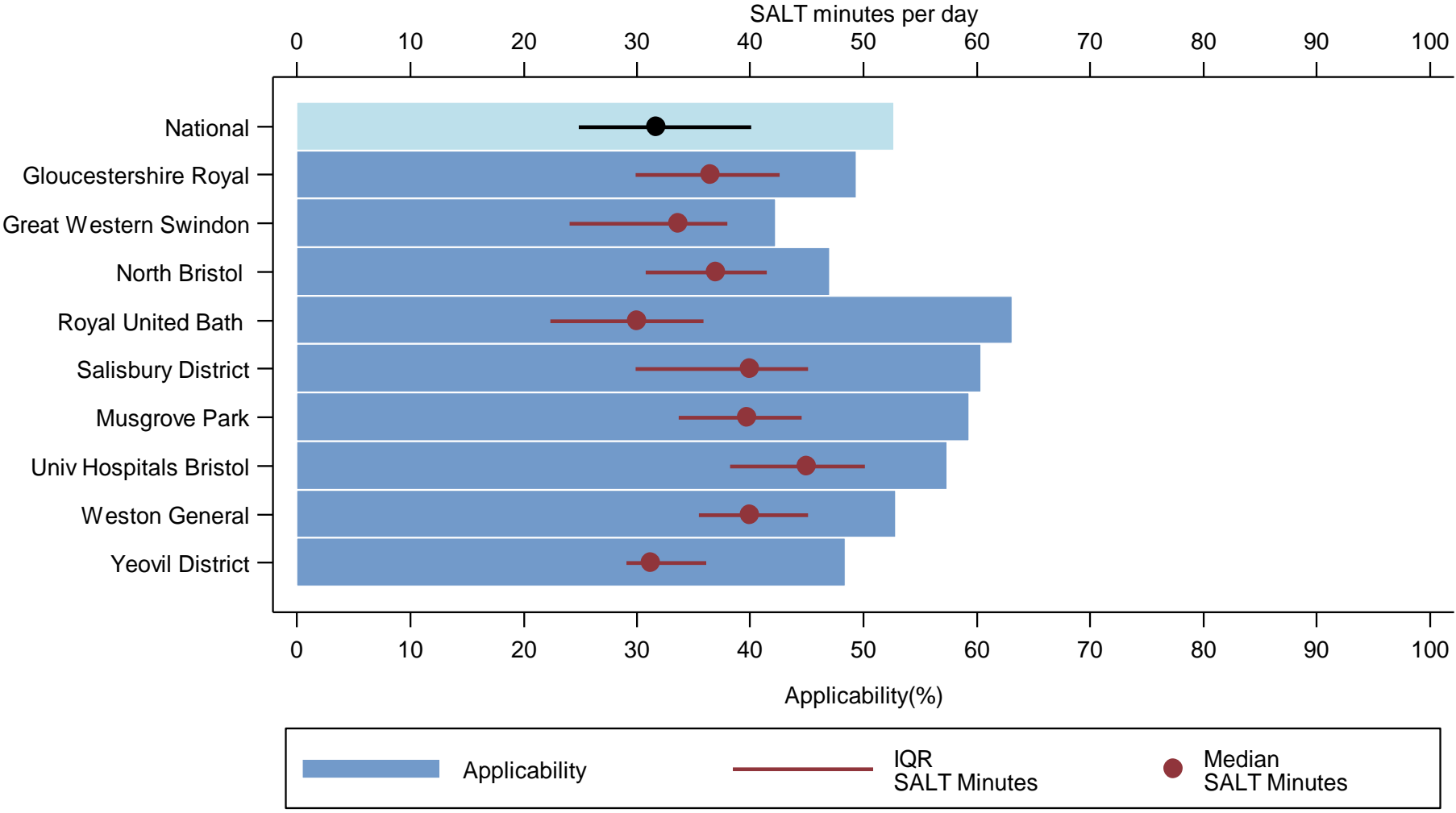
West of England

# Domain 7 - Speech and language therapy



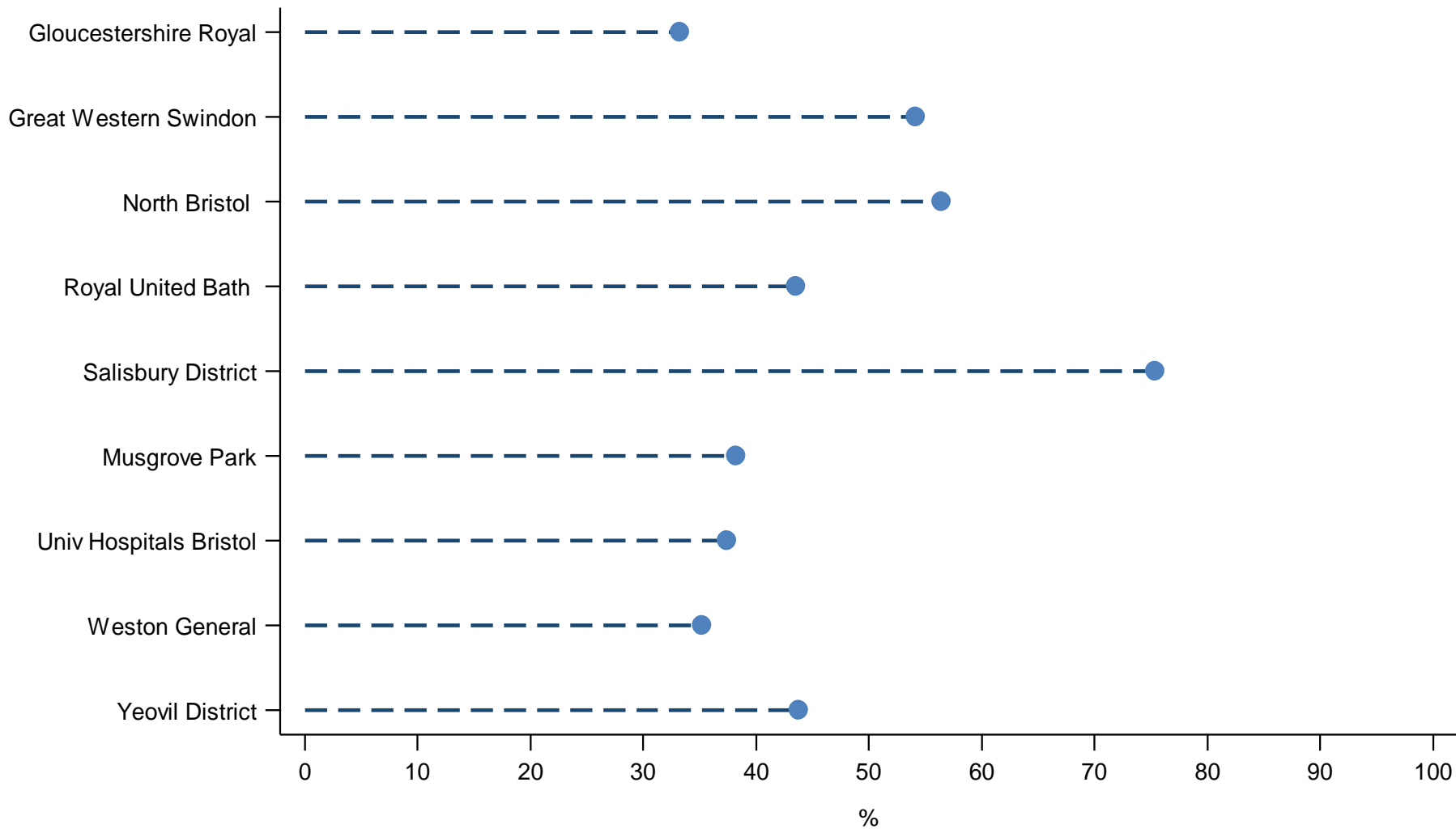
Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Domain 7

# Applicability and minutes per day of SALT



Source: SSNAP Apr-Jun 2022  
 Patient-centred results at team level for Key Indicator Key Indicator 7.1A and 7.2A

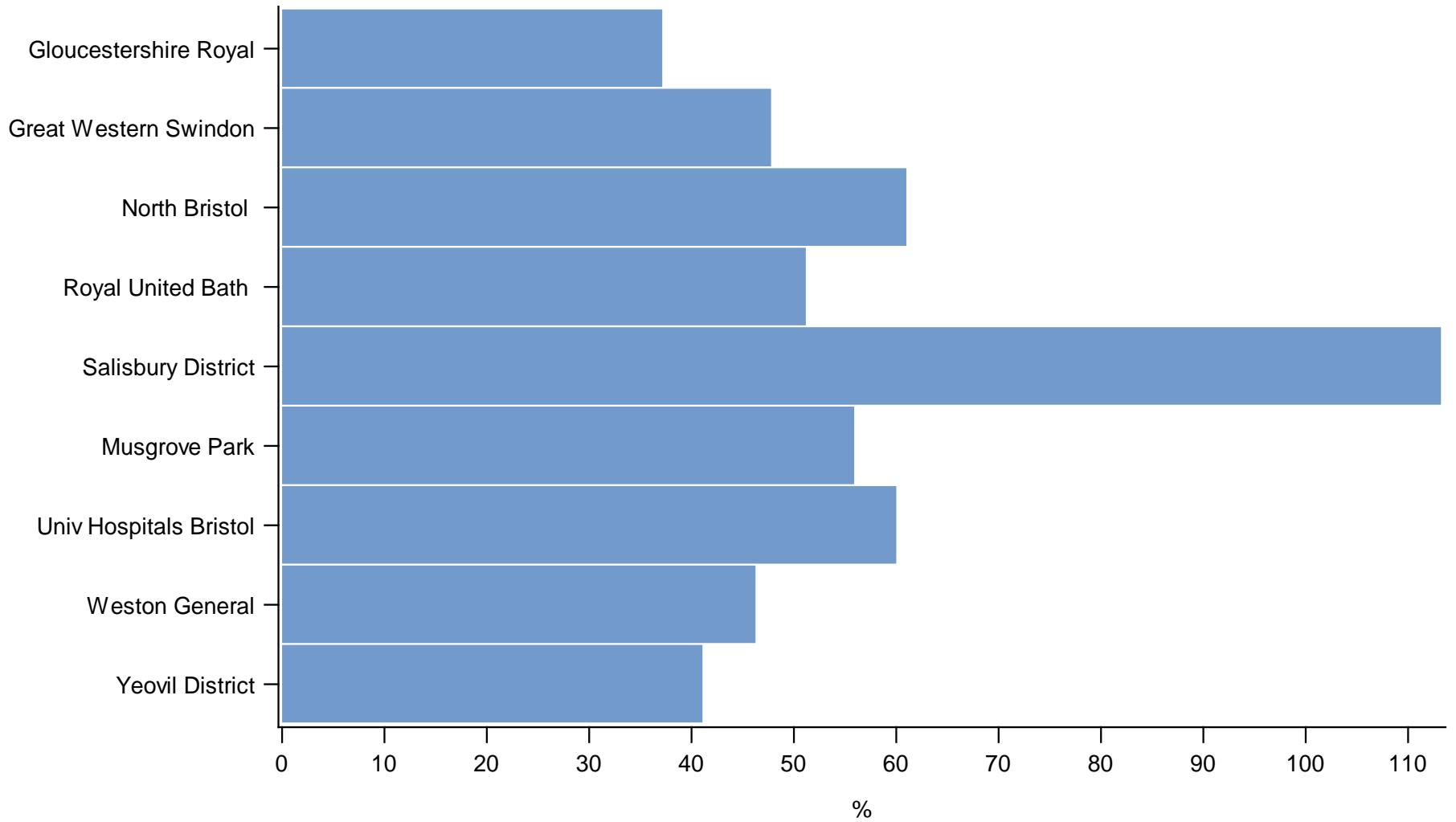
# Median % of inpatient days on which SALT is received



Source: SSNAP Apr-Jun 2022

Patient-centred results at team level for Key Indicator Key Indicator 7.3A

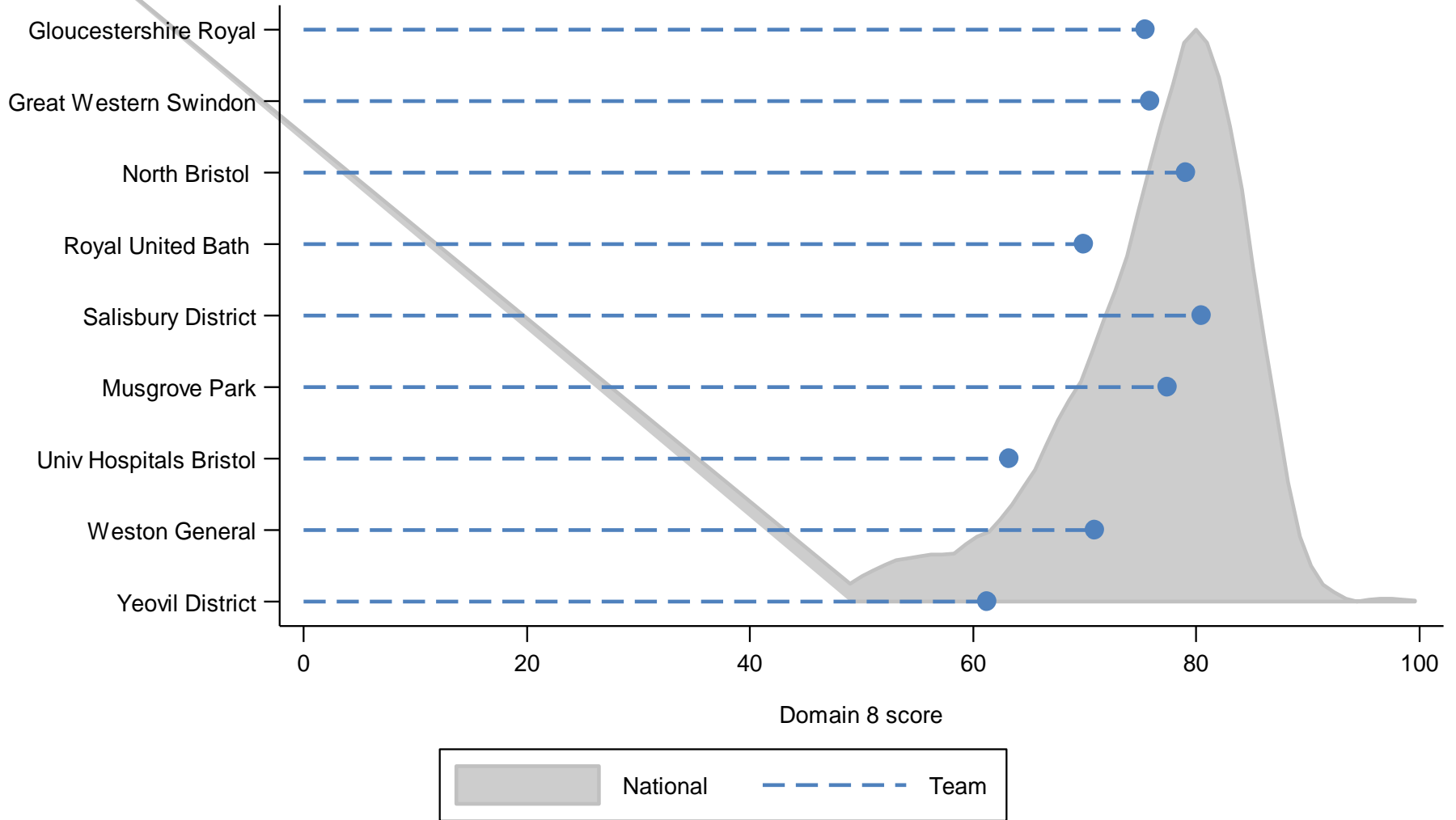
# Compliance (%) against SALT target



Source: SSNAP Apr-Jun 2022

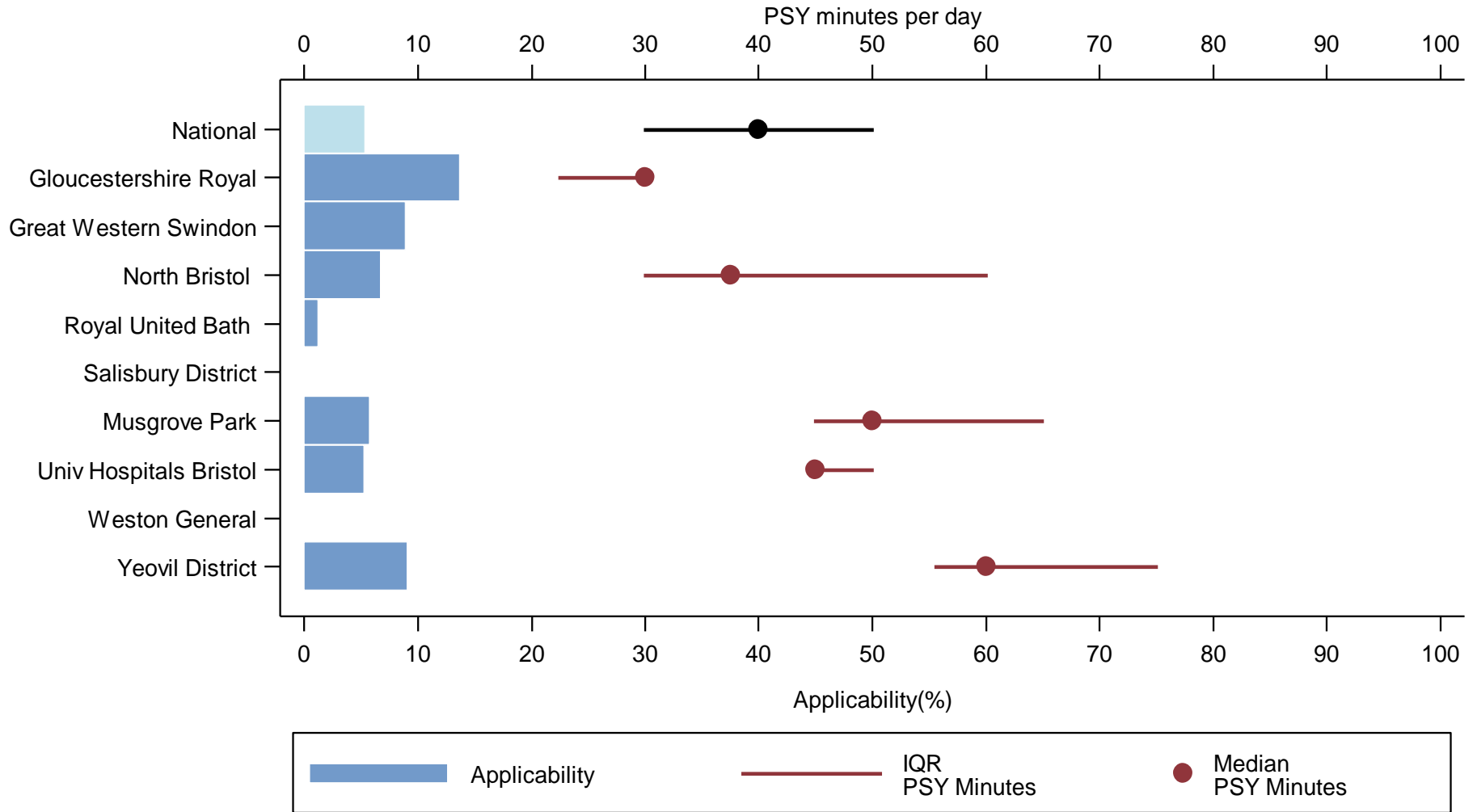
Patient-centred results at team level for Key Indicator Key Indicator 7.4A

# Domain 8 - Multidisciplinary team working



Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Domain 8

# Applicability and minutes per day of PSY

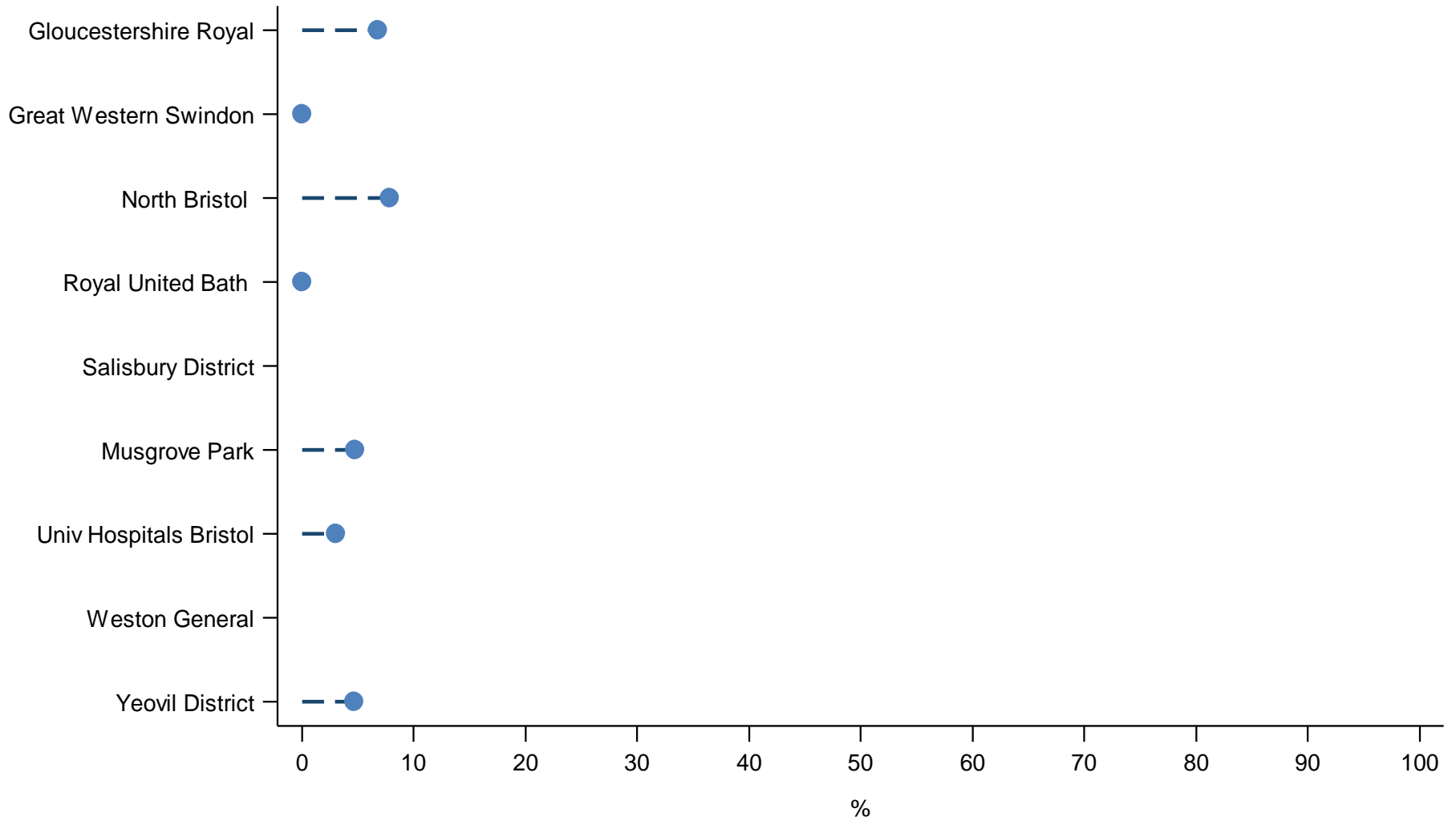


Source: SSNAP Apr-Jun 2022

Patient-centred results at team level for Key Indicator Item Reference J7.3-J7.7

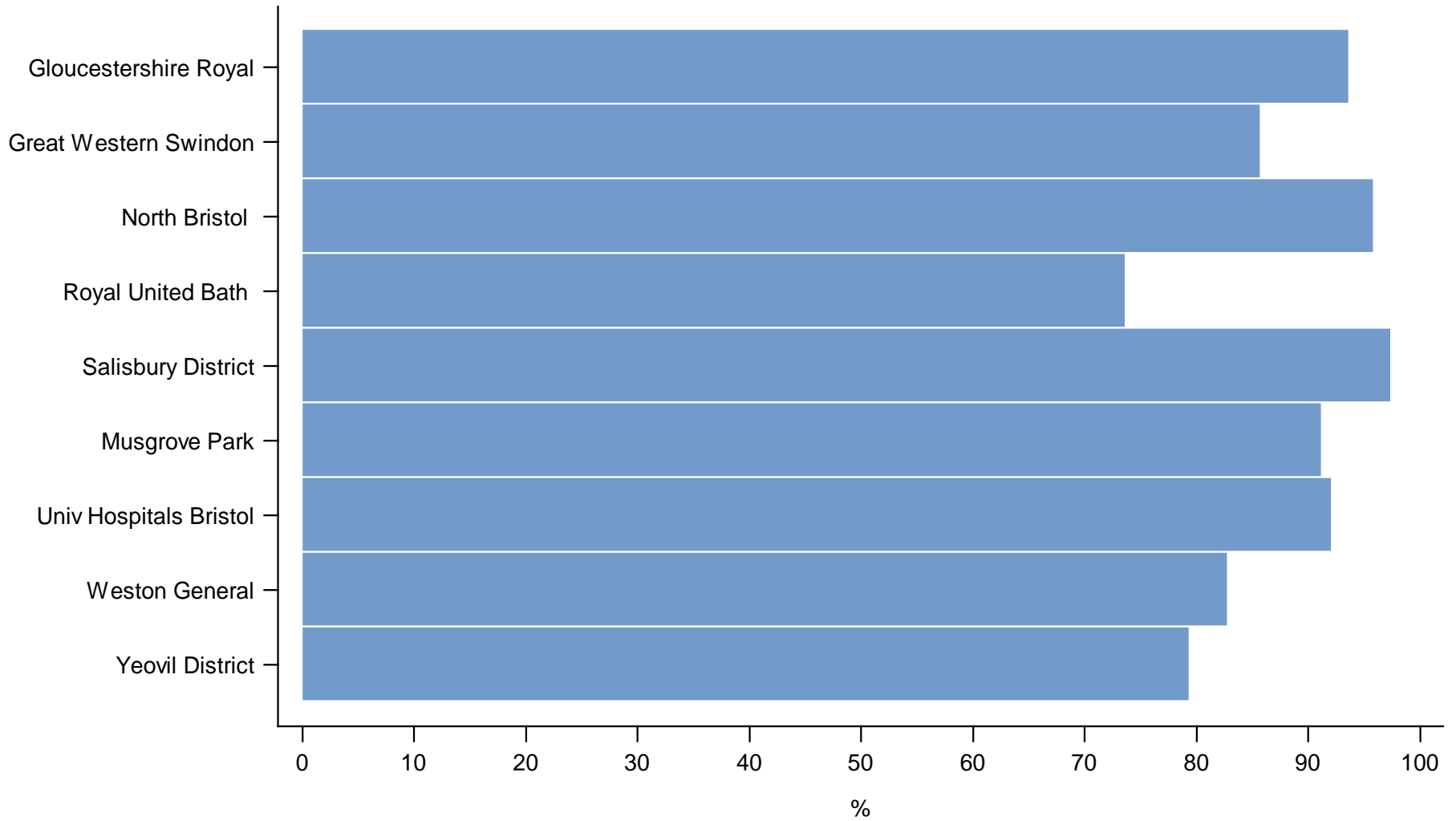


# Median % of inpatient days on which PSY is received



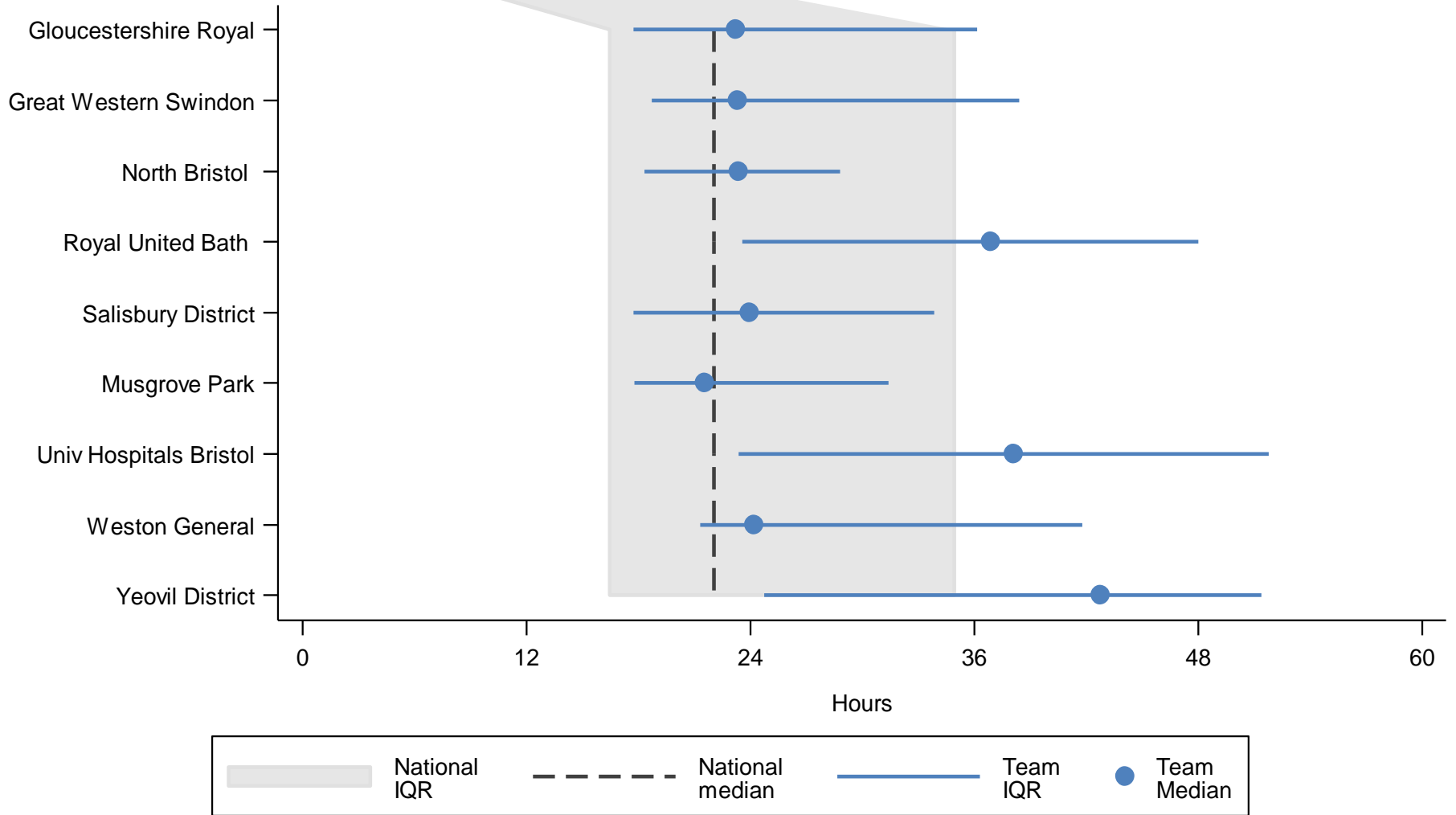
Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Key Indicator Item Reference J7.4

# OT assessment within 72 hours



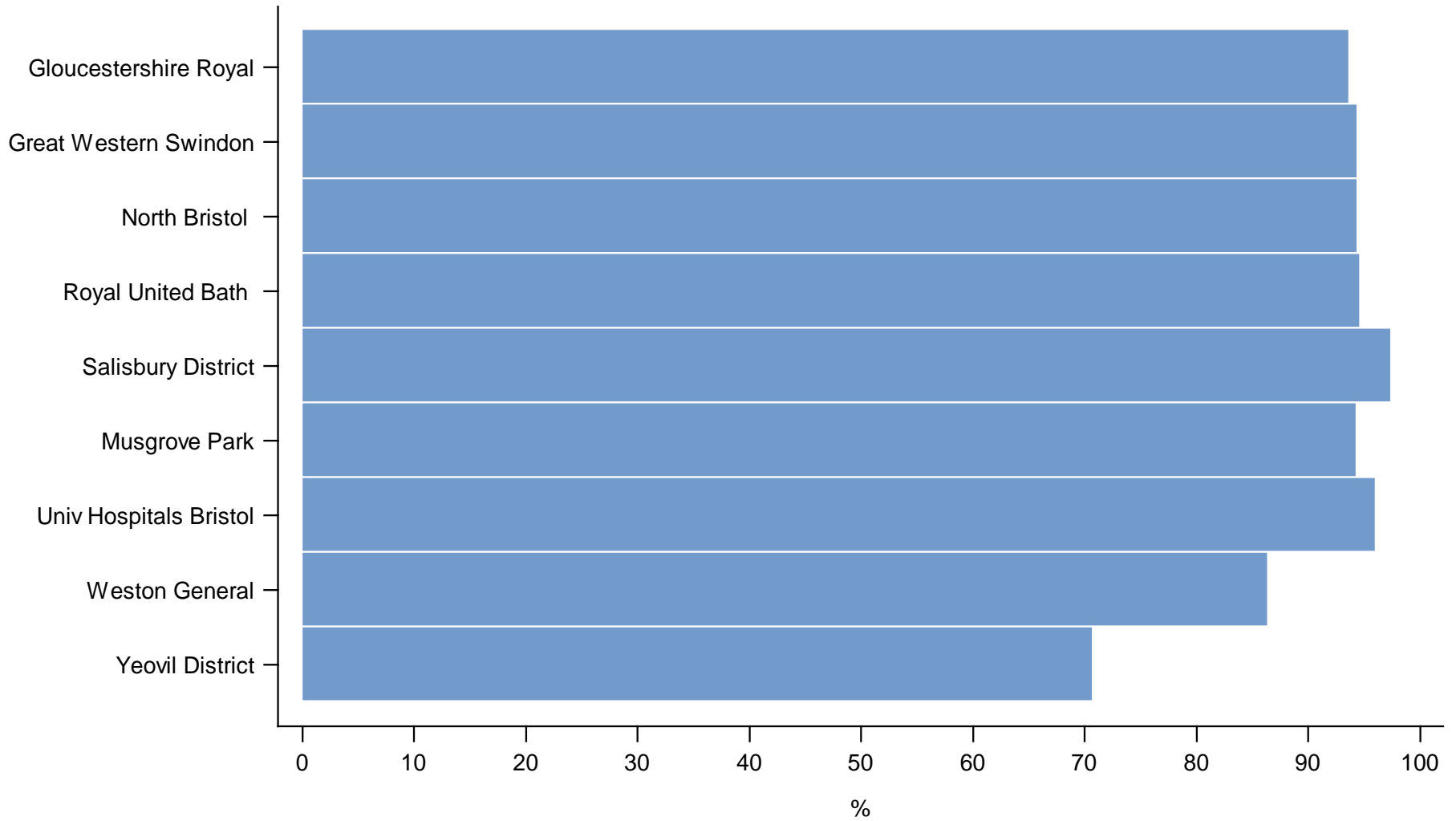
Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Key Indicator 8.1A

# Clock start to OT assessment time



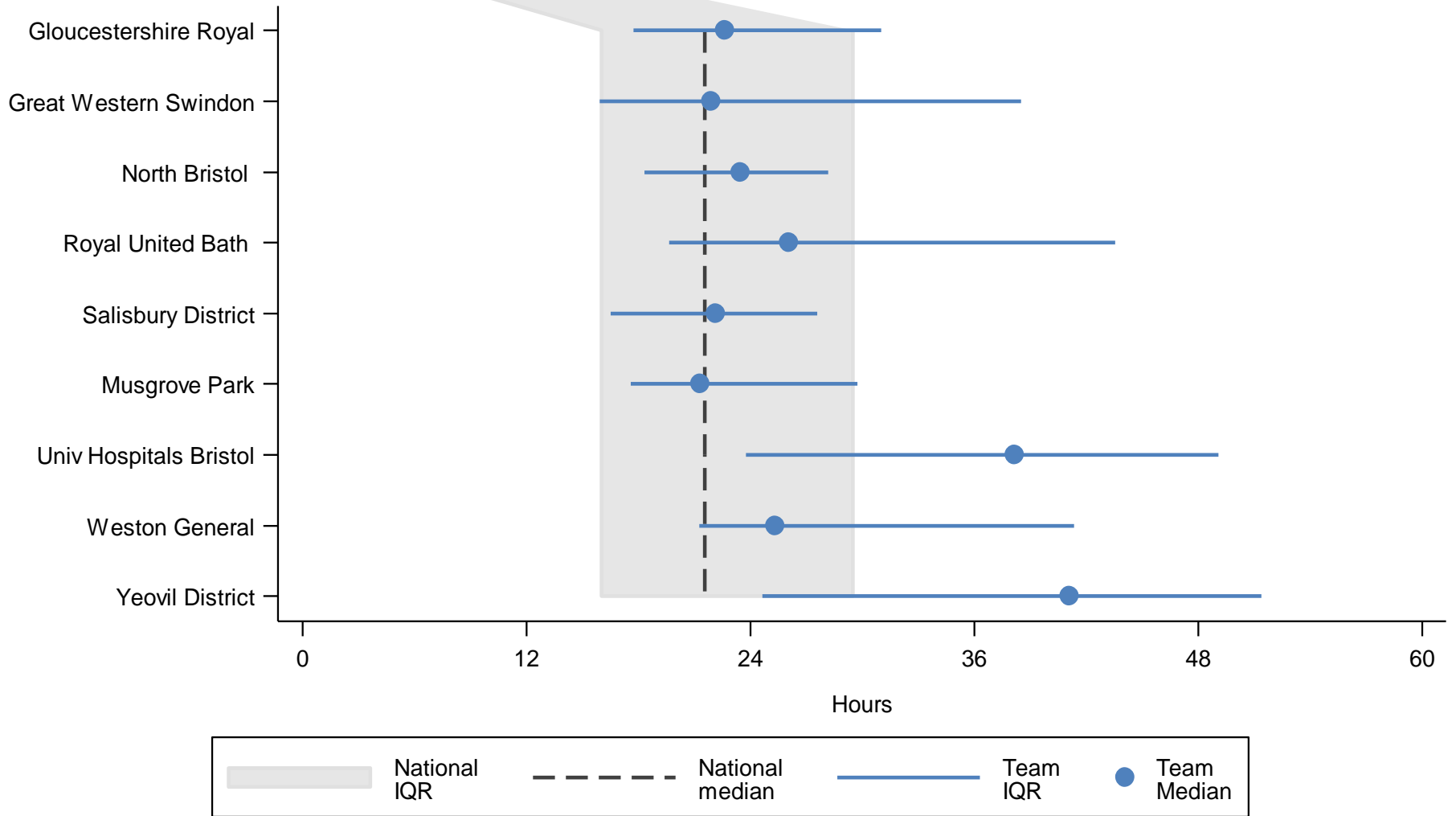
Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Key Indicator 8.2A

# PT assessment within 72 hours



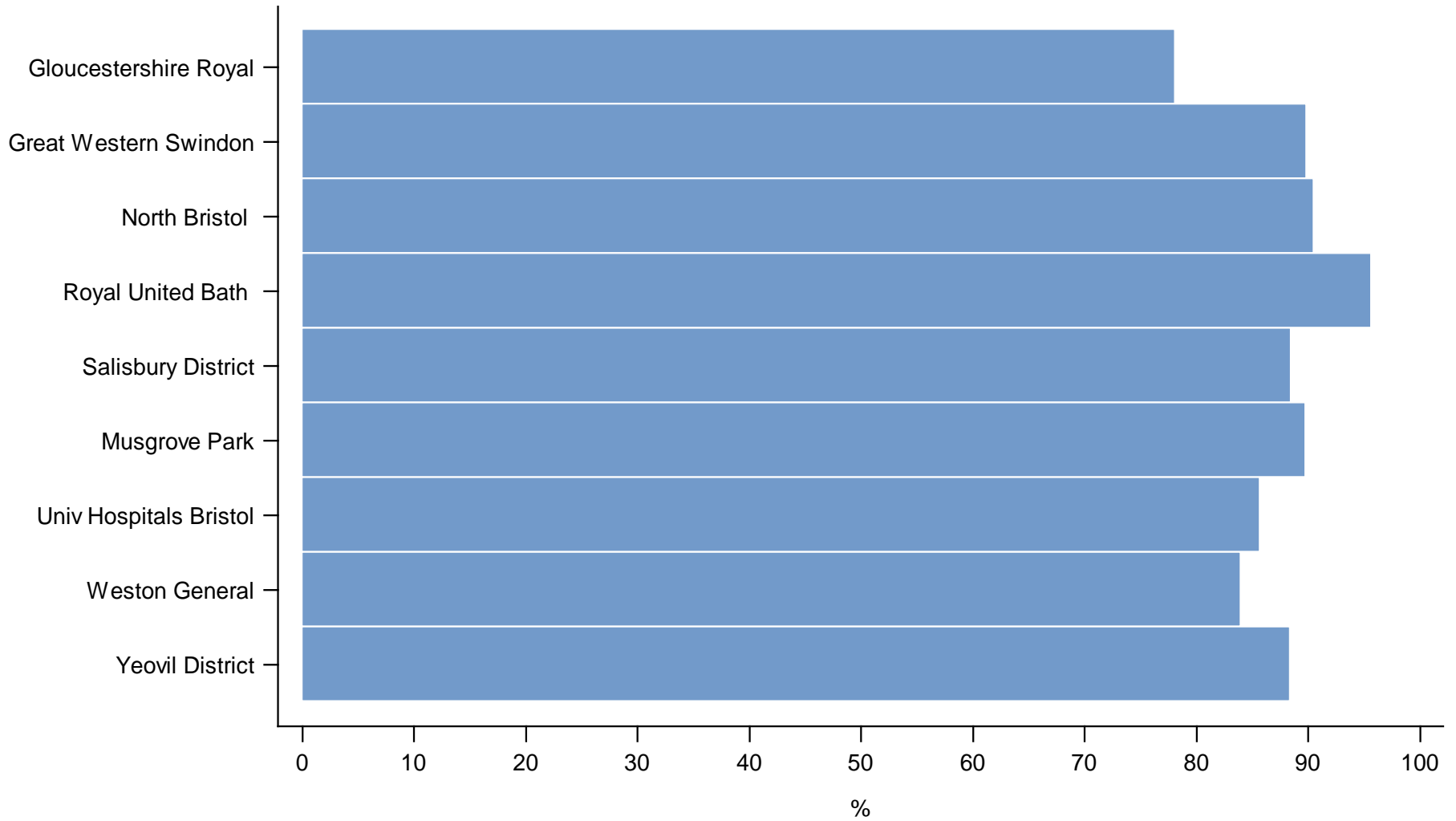
Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Key Indicator 8.3A

# Clock start to PT assessment time



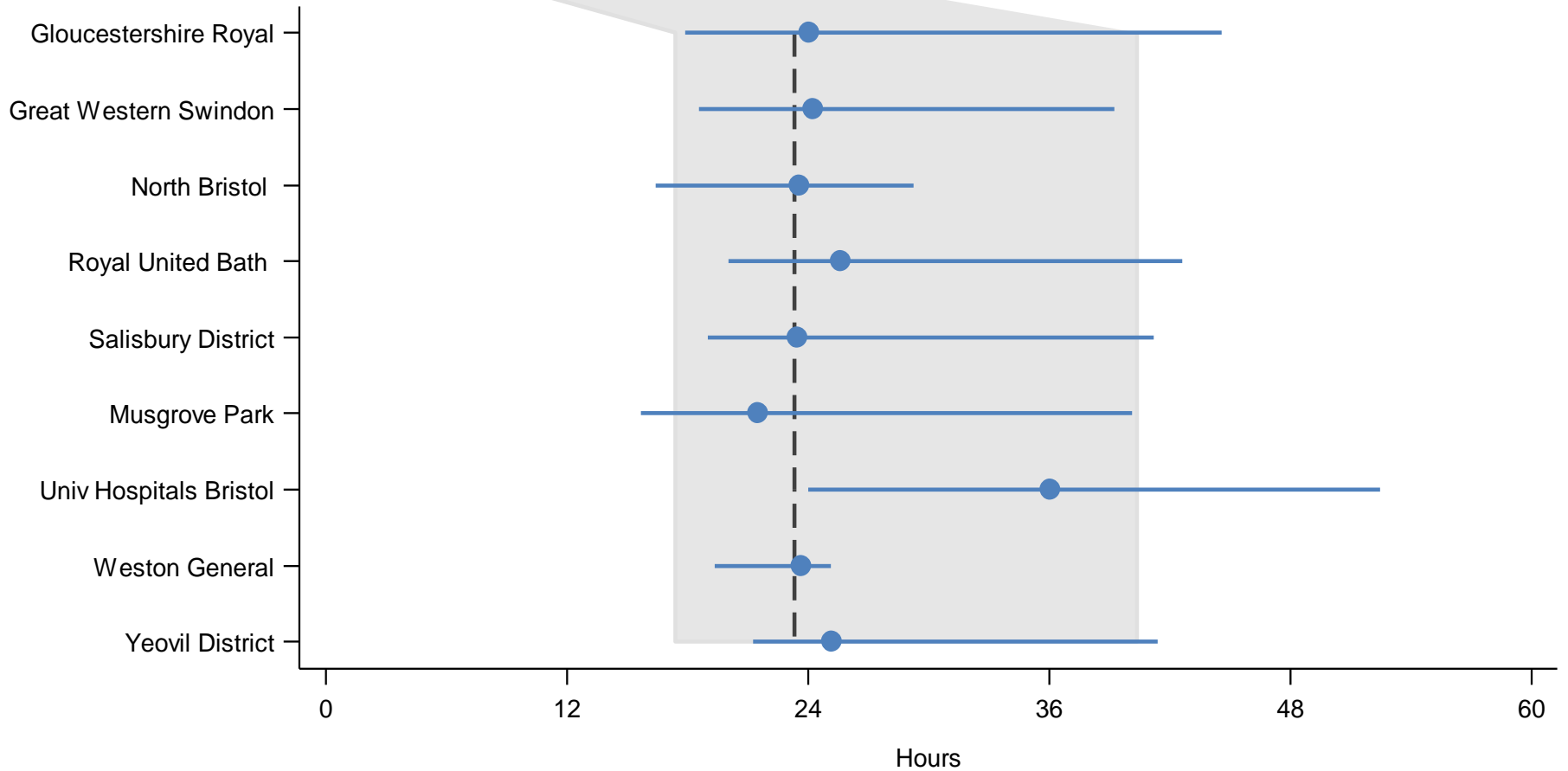
Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Key Indicator 8.4A

# SALT communication assessment within 72 hours



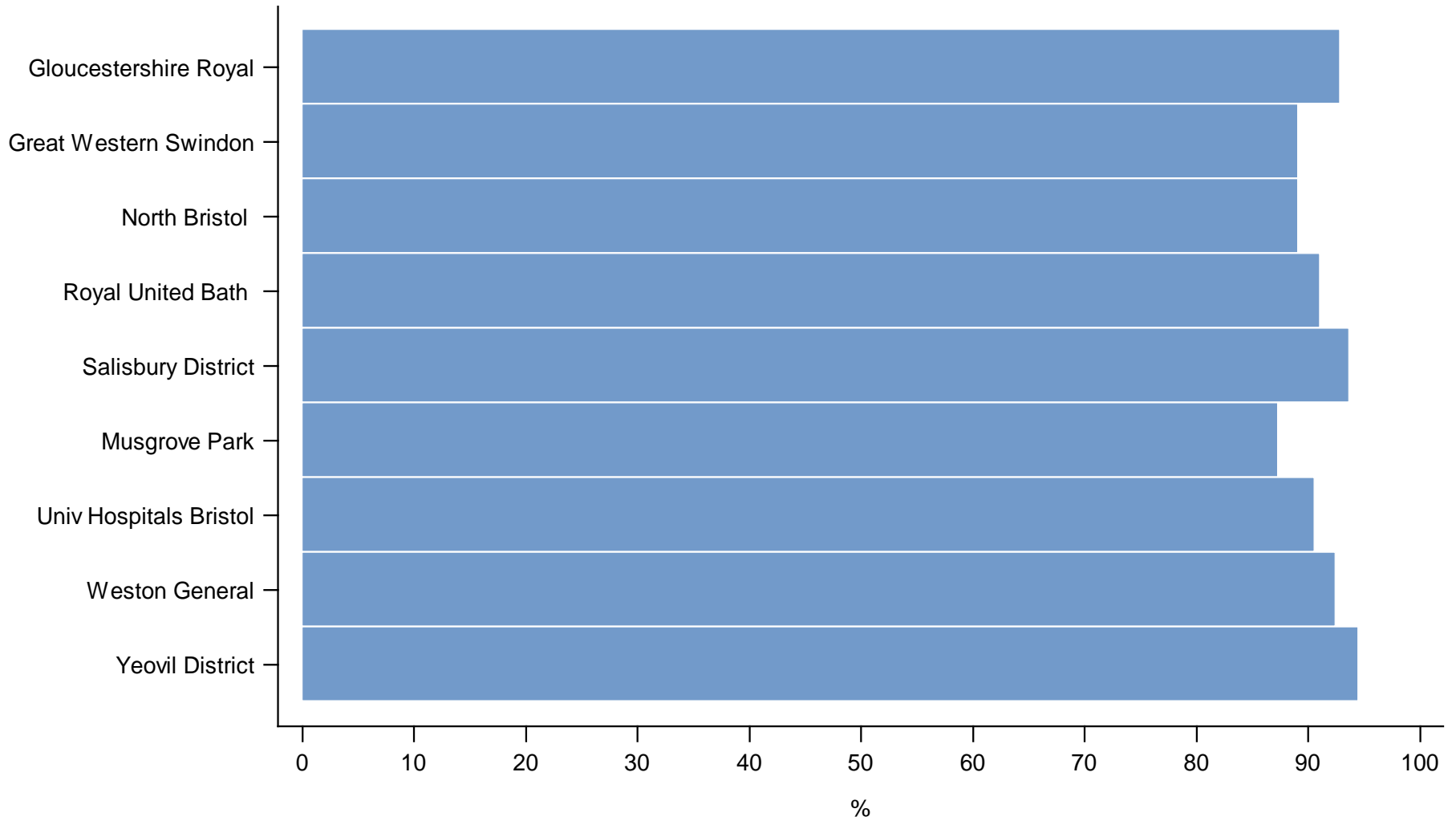
Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Key Indicator 8.5A

# Clock start to SALT communication assessment time



Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Key Indicator 8.6A

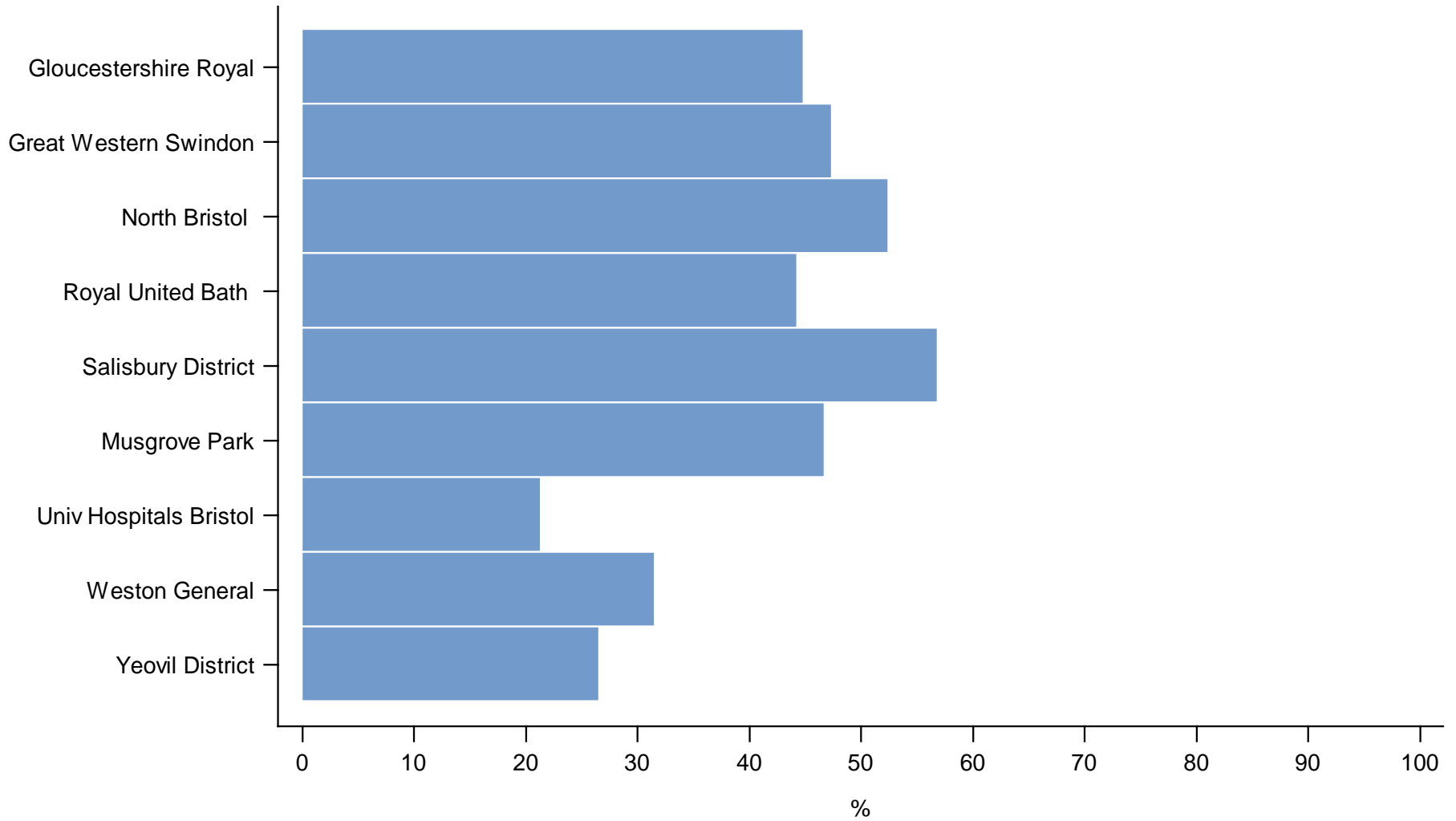
# Rehabilitation goals within 5 days



Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Key Indicator 8.7A

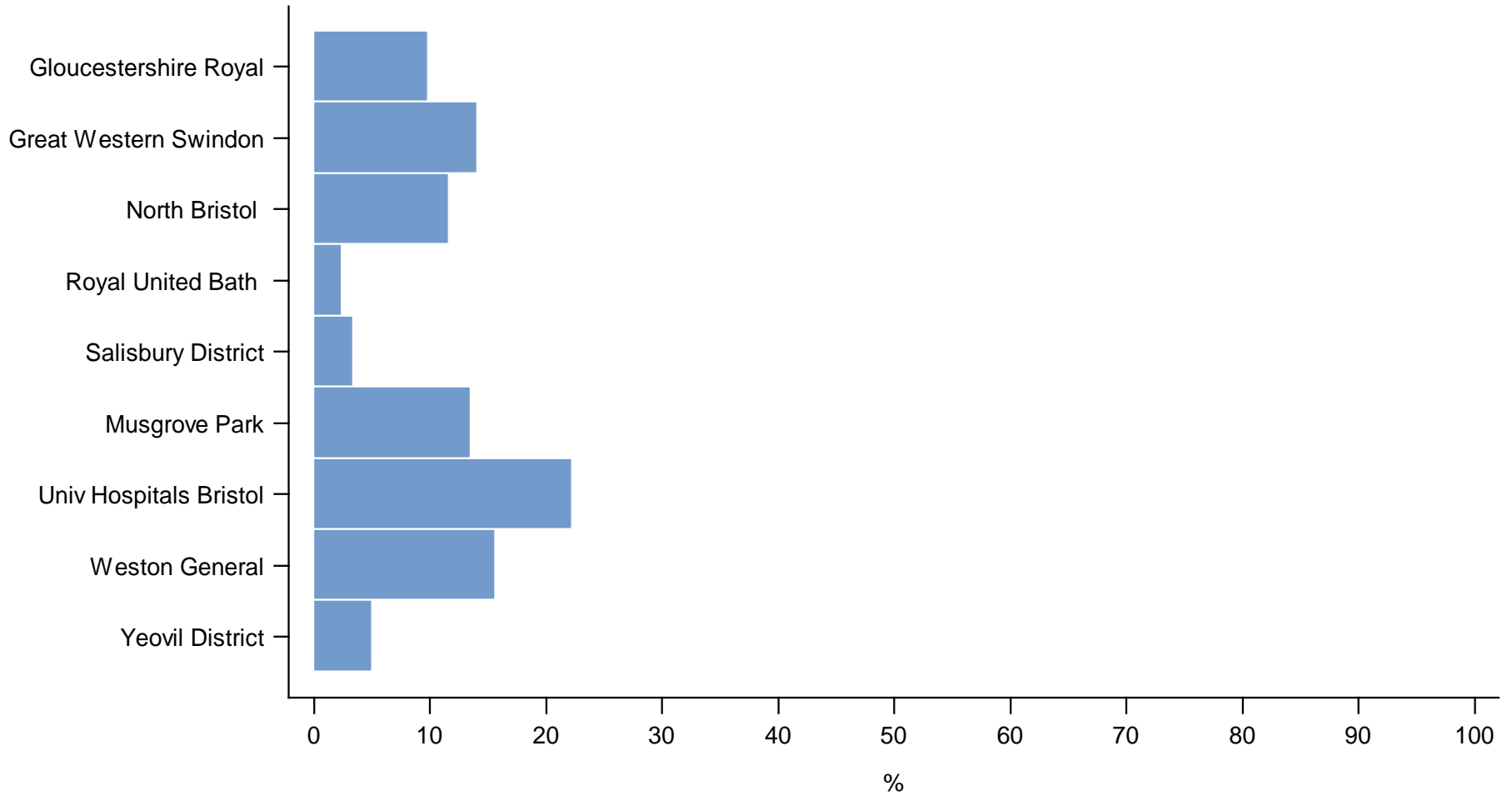


# Nursing, therapy and rehab goals within time limits



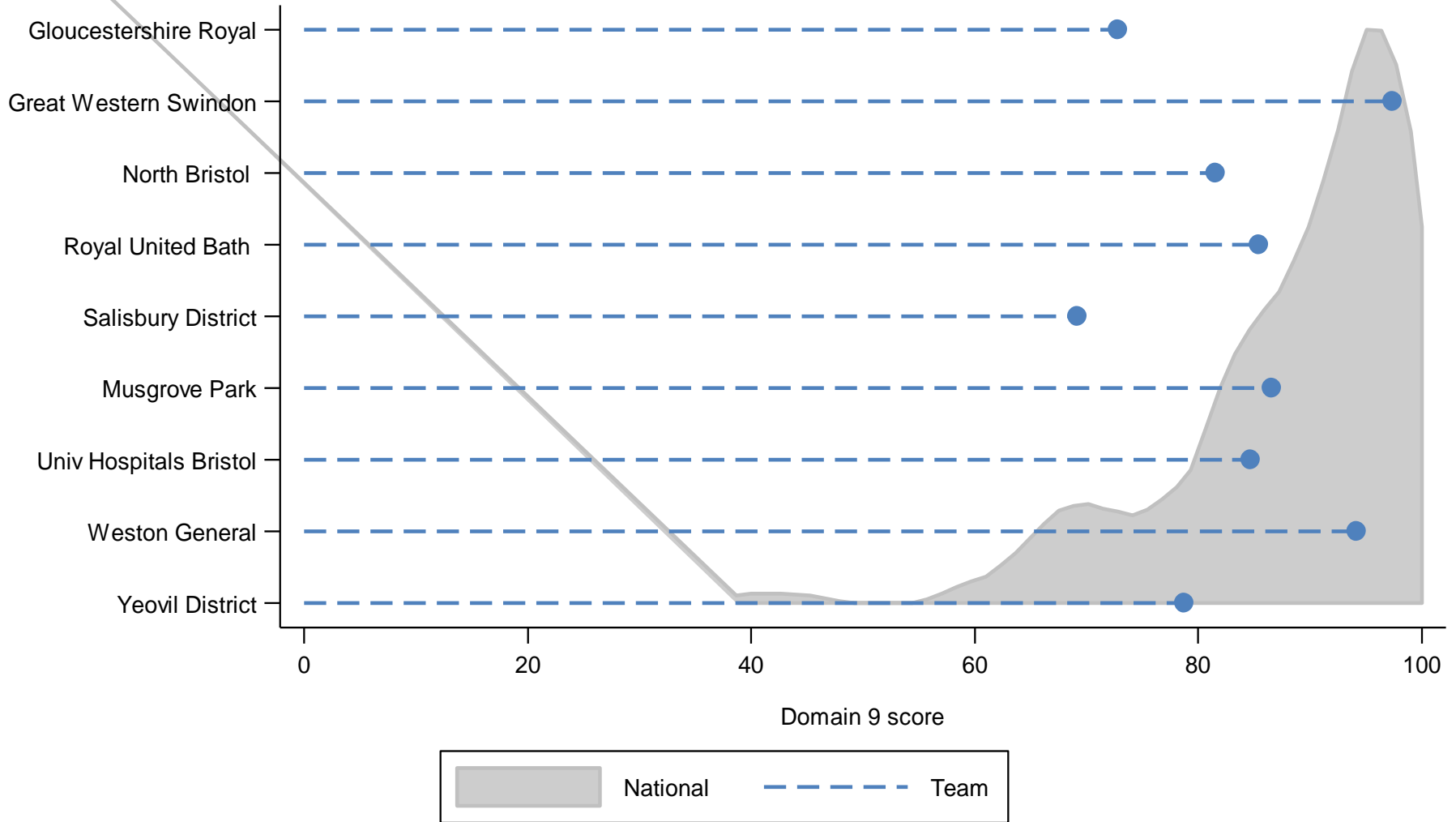
Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Key Indicator 8.8A

# Antibiotics given for newly acquired pneumonia in first 7 days



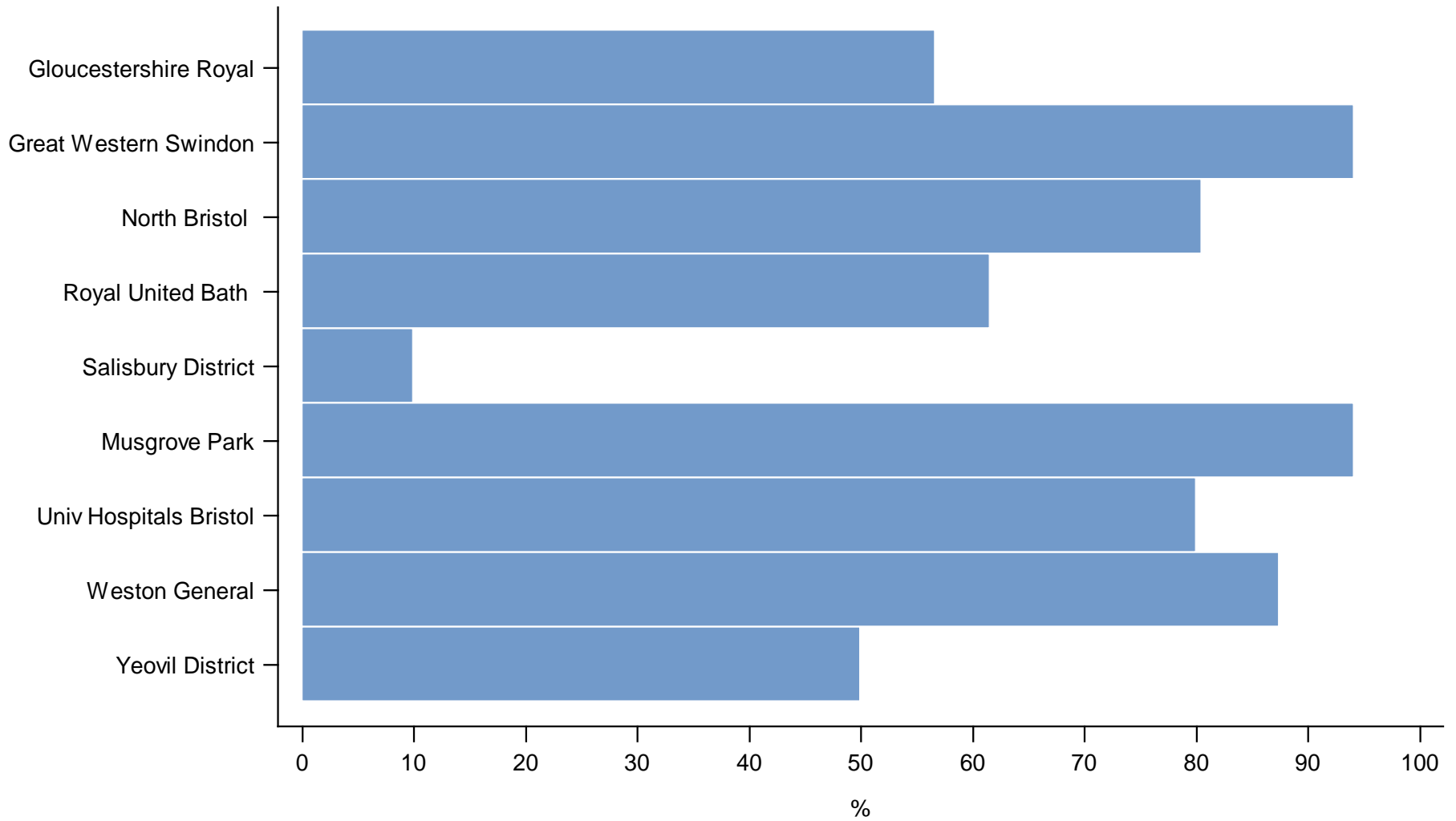
Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Item Reference J26.3

# Domain 9 - Standards by discharge



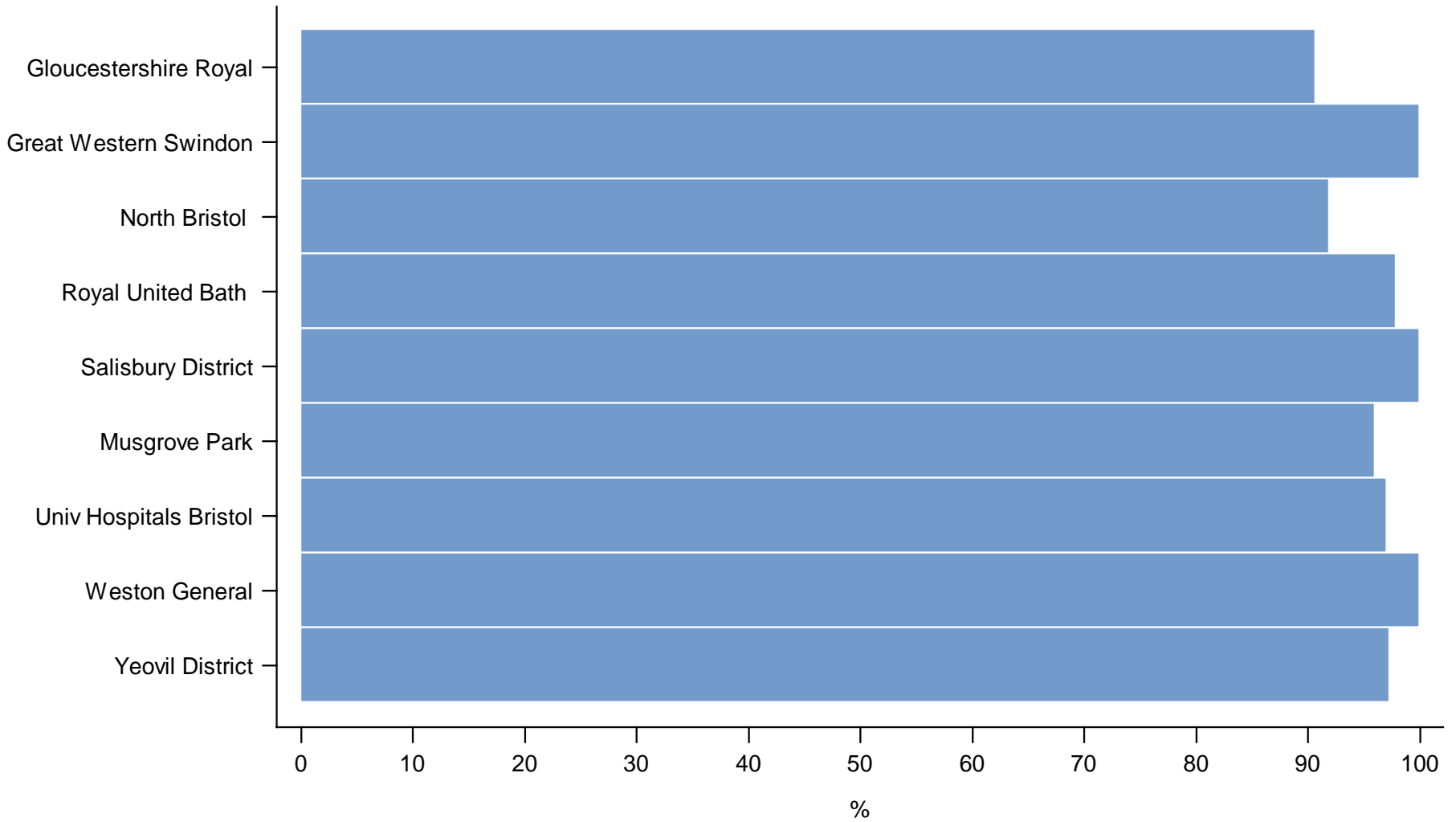
Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Domain 9

# Nutrition screen and seen by Dietitian by discharge



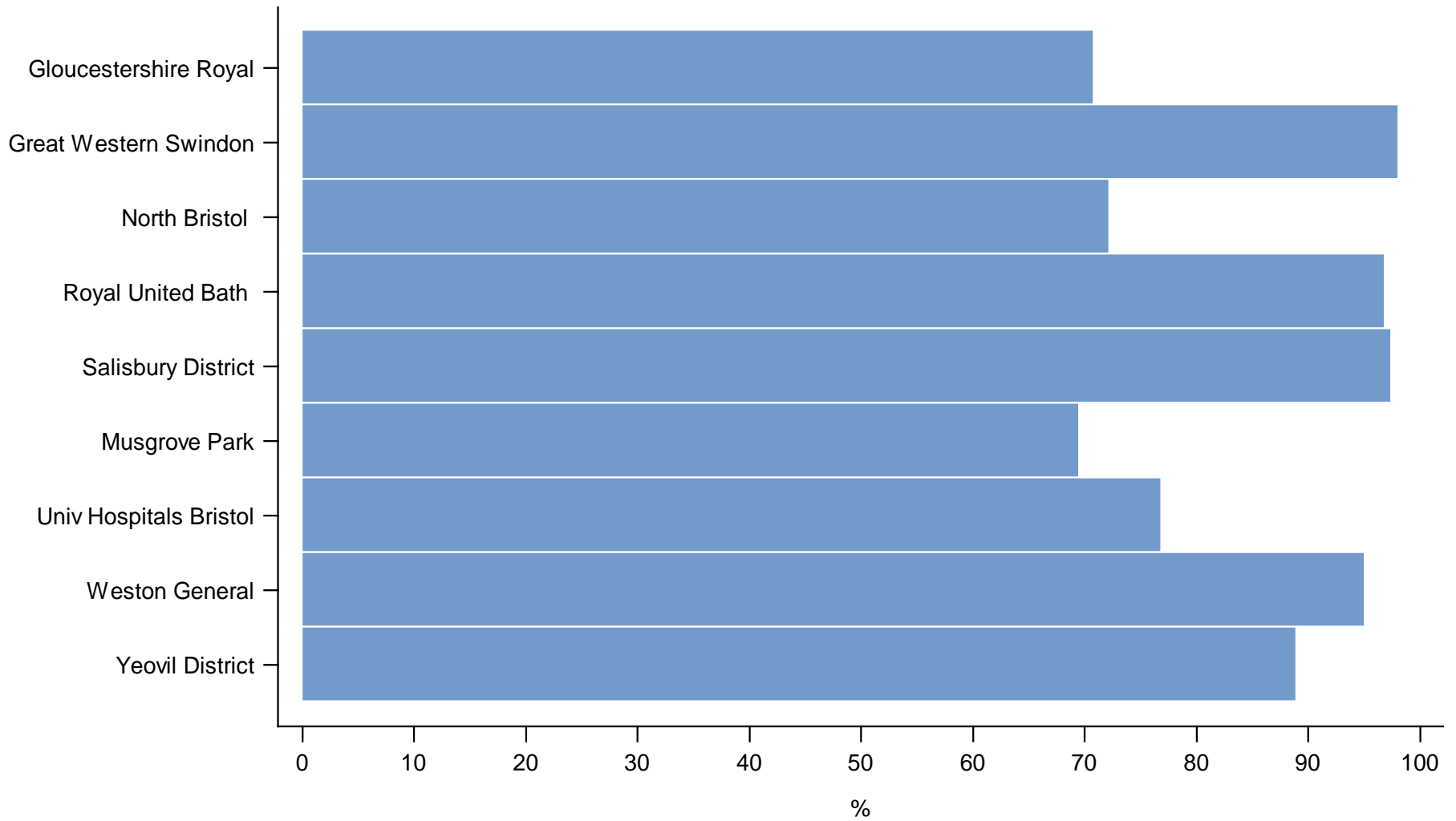
Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Key Indicator 9.1A

# Continence plan within 3 weeks



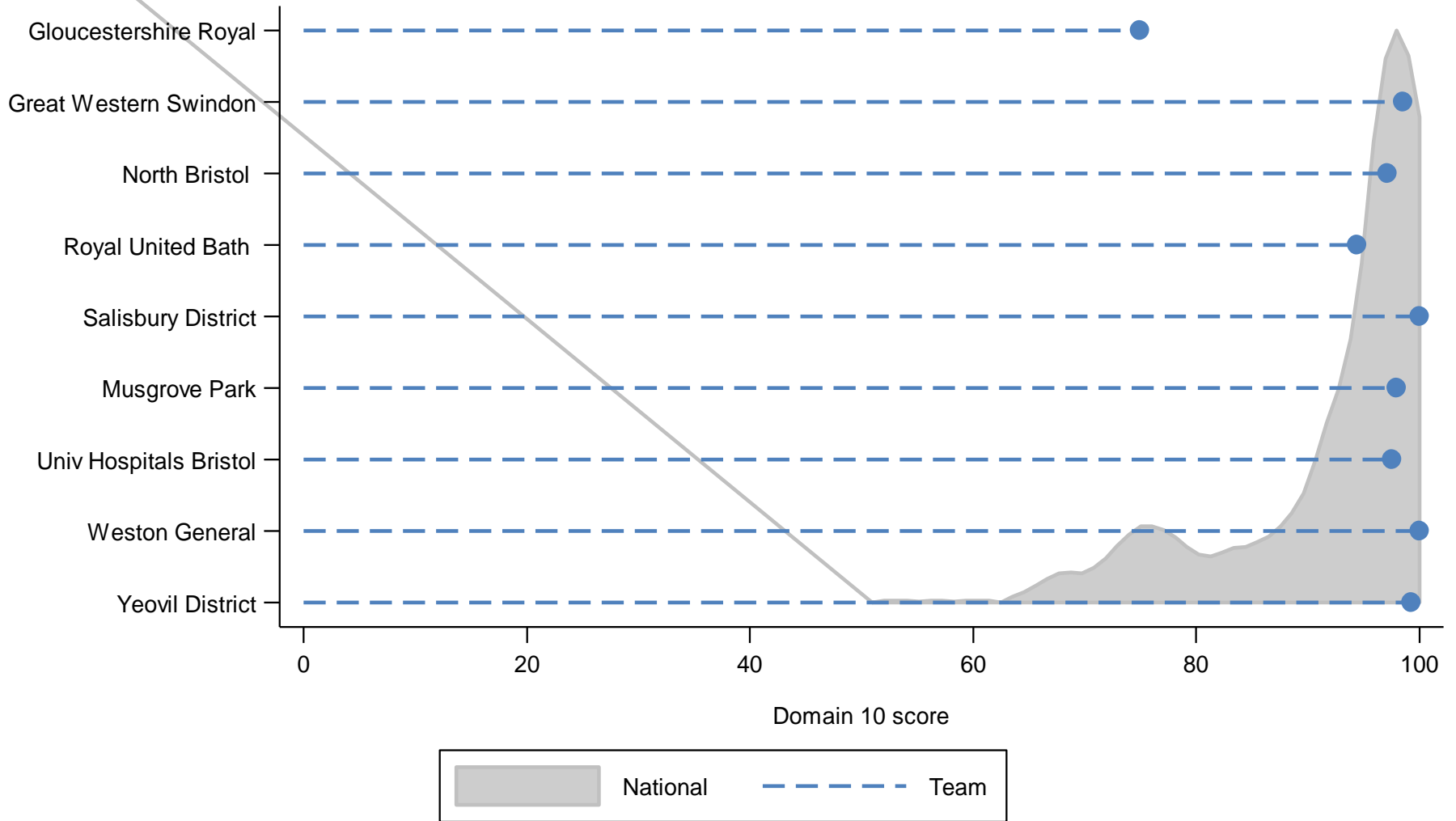
Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Key Indicator 9.2A

# Mood and cognition screening by discharge



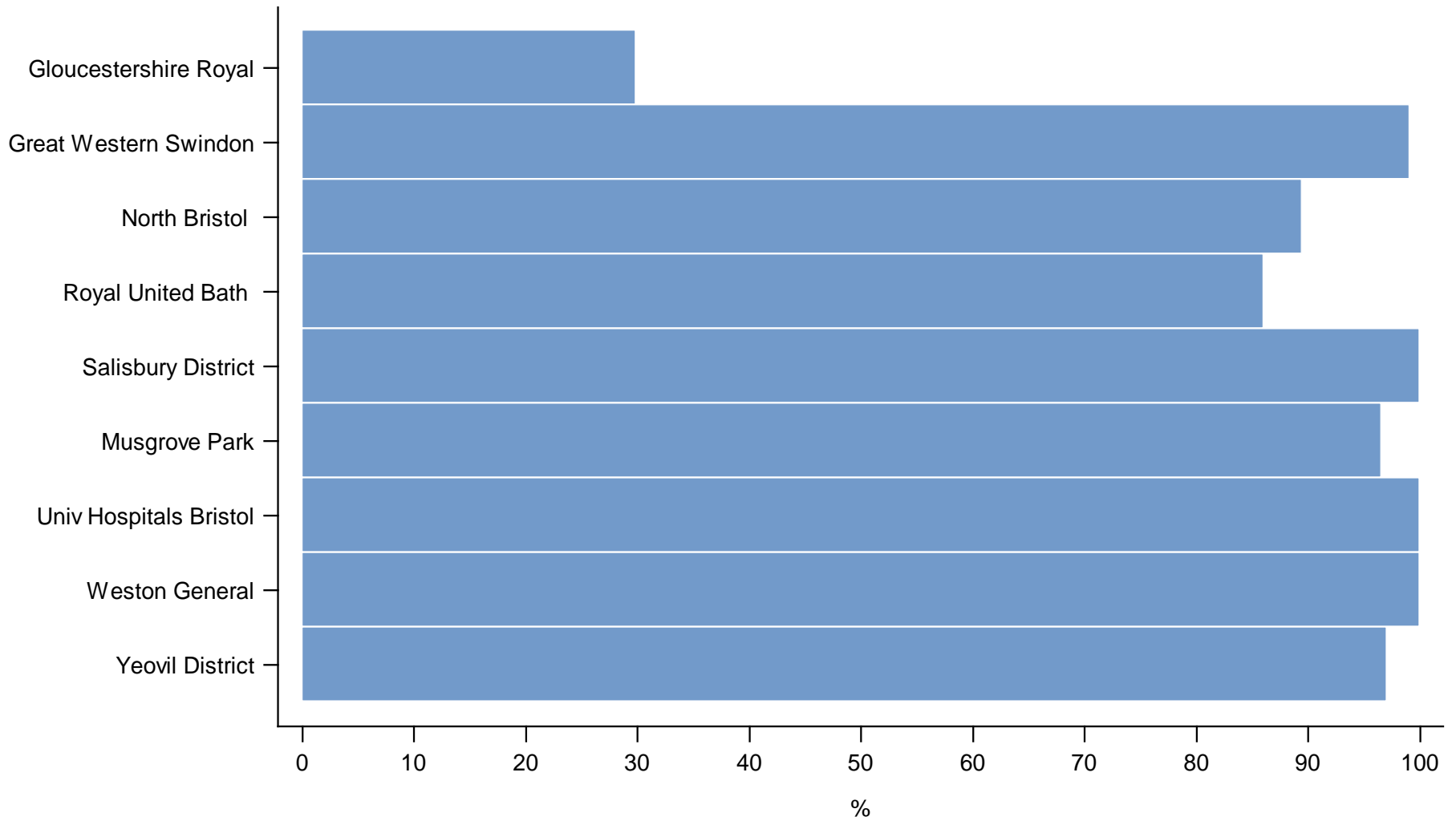
Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Key Indicator 9.3A

# Domain 10 - Discharge processes



Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Domain 10

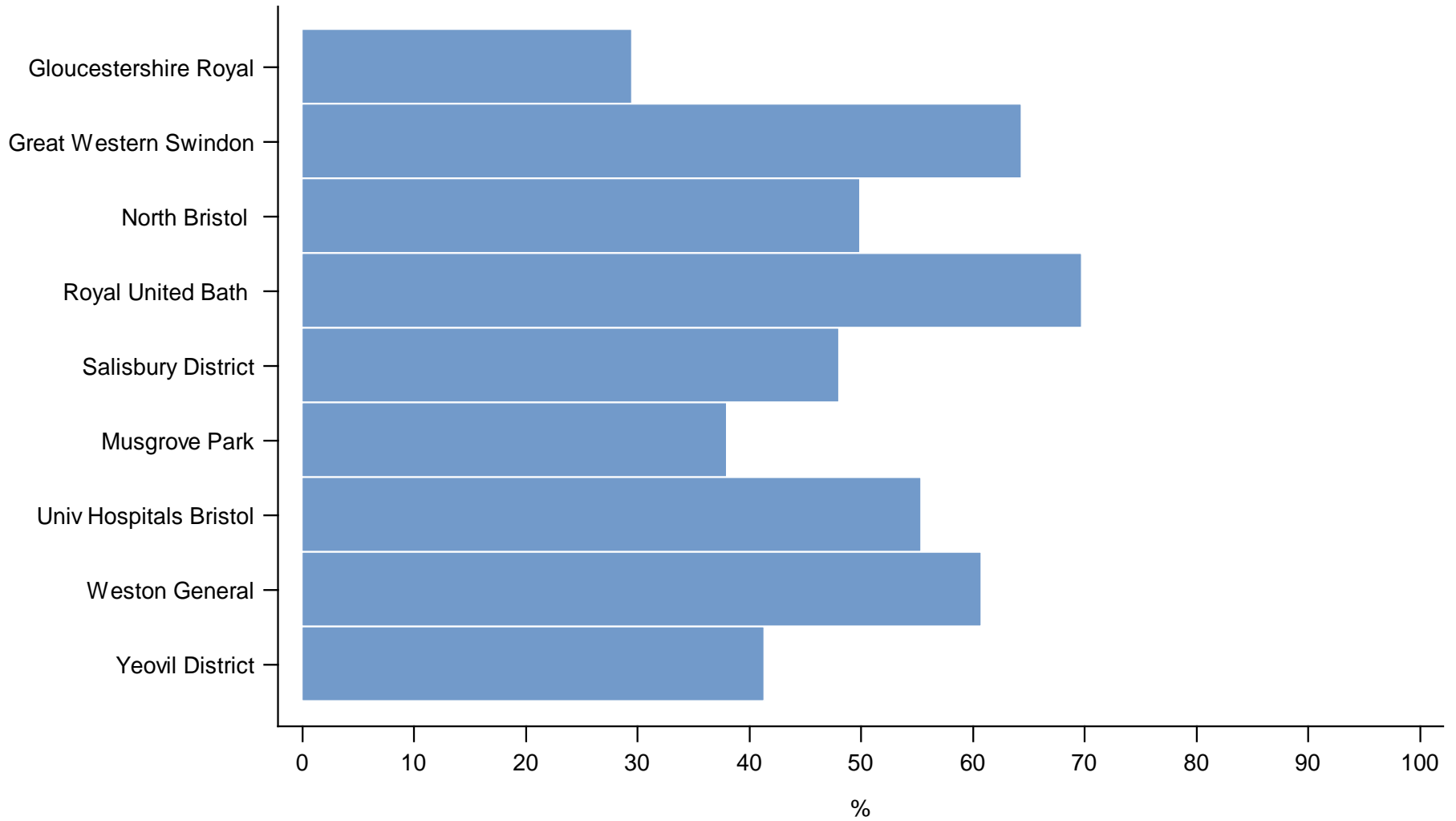
# Joint health and social care plan by discharge



Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Key Indicator 10.1A

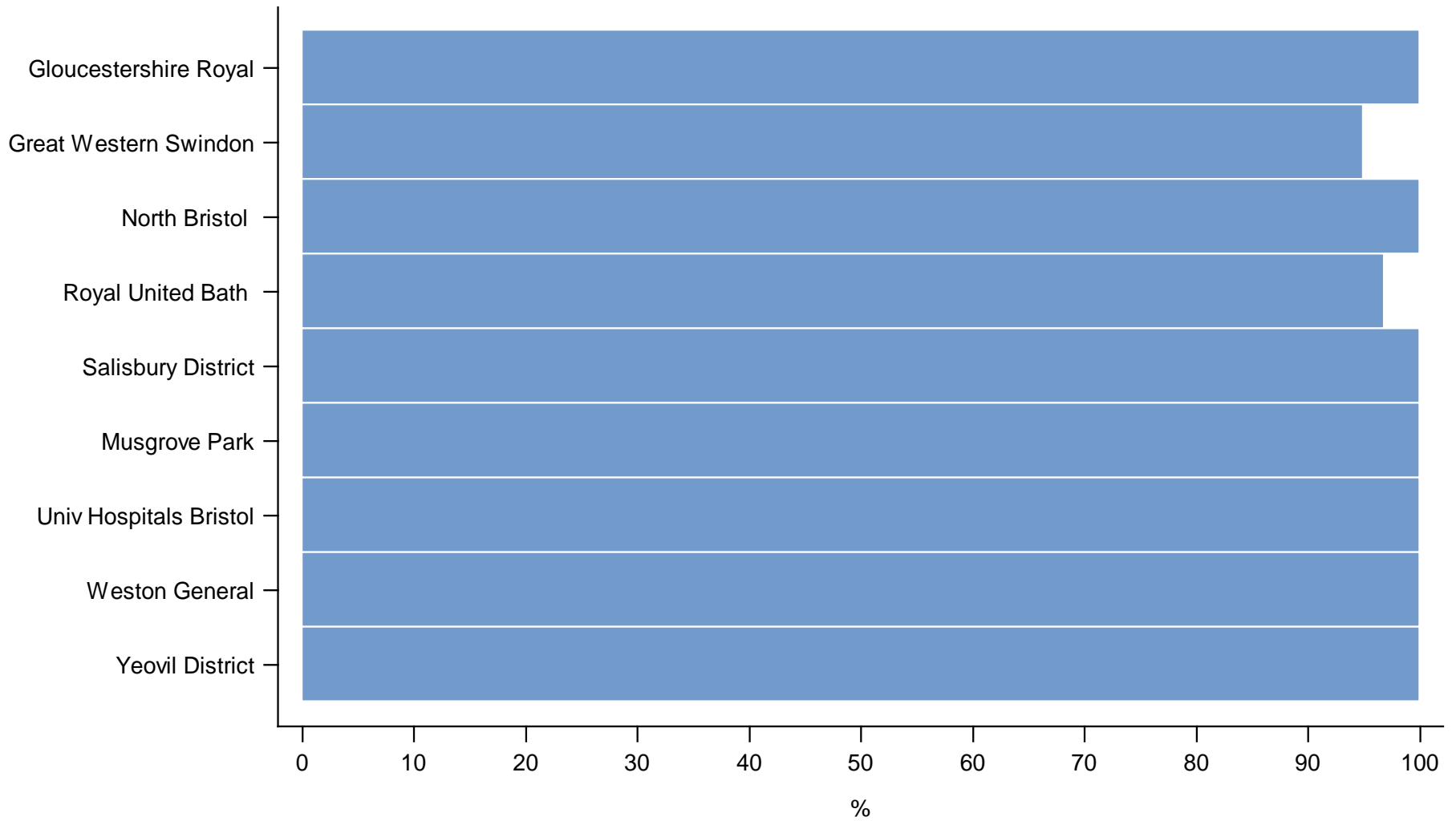


# Discharged with stroke skilled ESD team



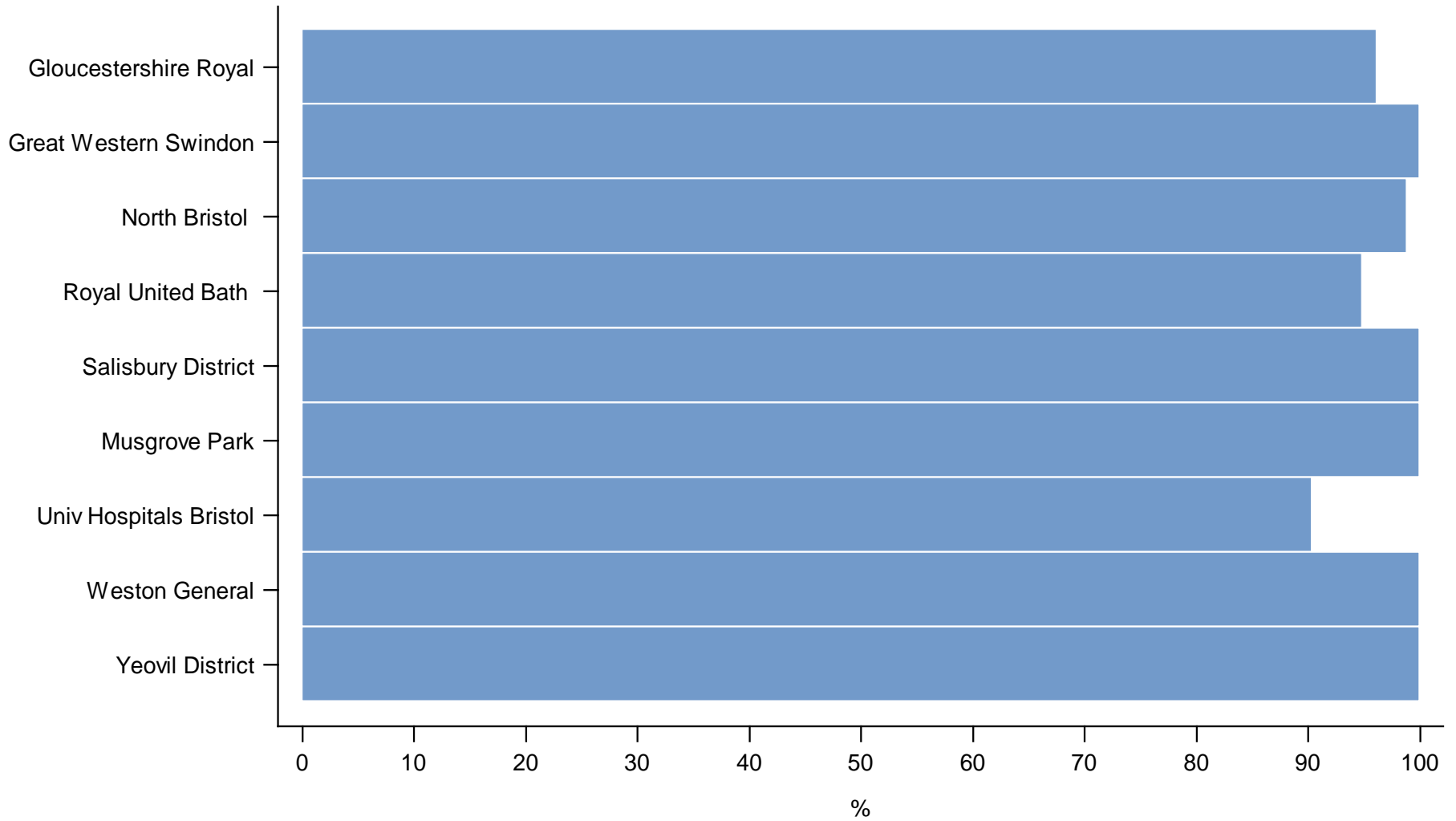
Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Key Indicator 10.2A

# If in Atrial Fibrillation discharged on anticoagulants



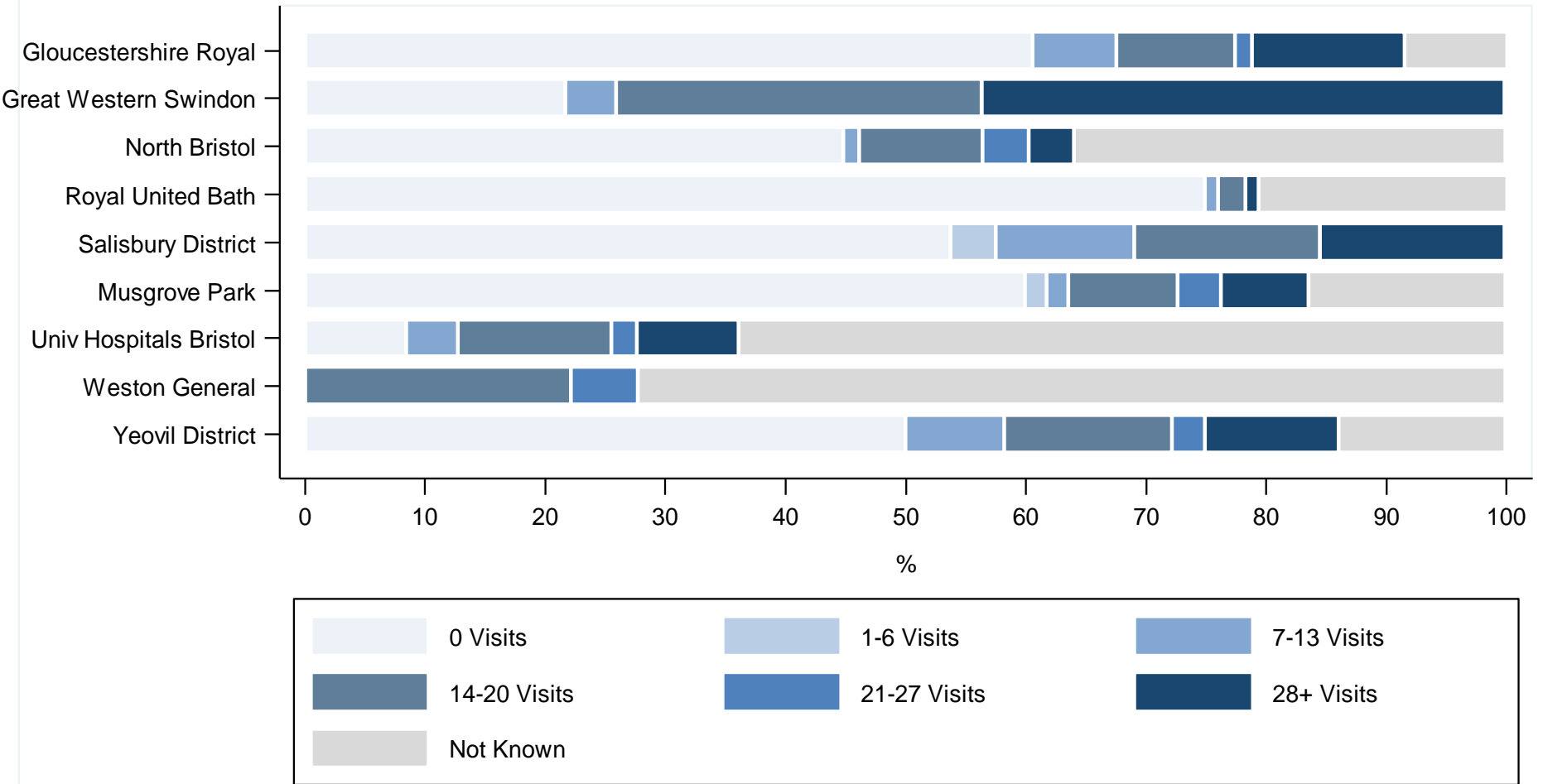
Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Key Indicator 10.3A

# Discharged with a named contact



Source: SSNAP Apr-Jun 2022  
Patient-centred results at team level for Key Indicator 10.4A

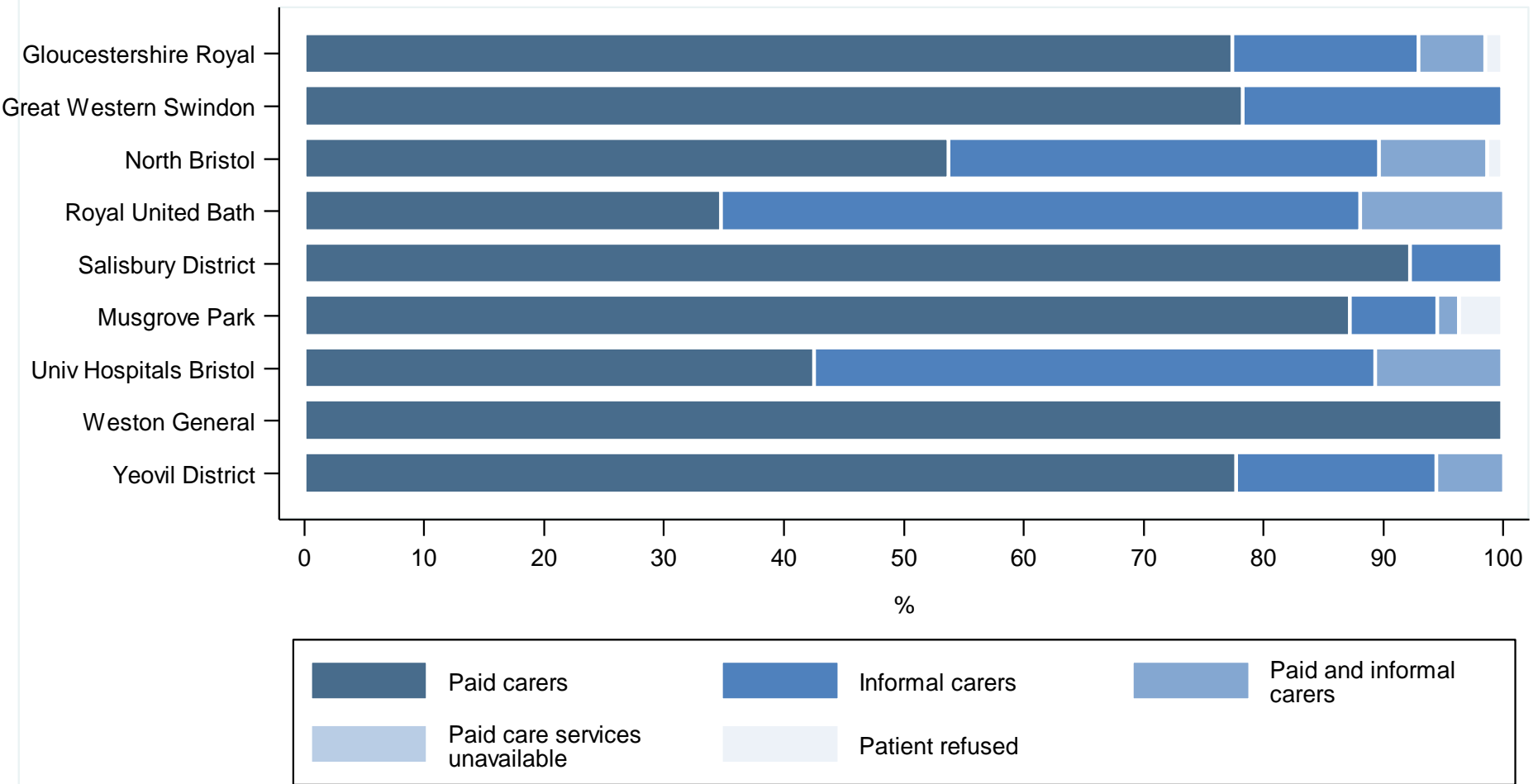
# If help required with activities of daily living, number of social service visits per week



Source: SSNAP Apr-Jun 2022

Patient-centred results at team level for Item Reference J31.2-J31.15

# If help required with activities of daily living, type of help received



Source: SSNAP Apr-Jun 2022

Patient-centred results at team level for Item Reference J30.5-J30.14