



## **SSNAP Core Dataset**

## **Version control**

Version	Date	Changes
1.1.1	12 Dec	- Official core dataset following pilot versions (most recent 3.6.16)
	2012	
1.1.2	18 Feb	- 1.12.2 word 'incident' added to question and allowed values changed to 10
	2013	characters
		- 2.8 – sub questions renumbered
		- 6.10 – word 'First' added
2.1.1	4 Apr	- 8.1 – Added in 'N.B. 'No but' should only be answered for DNAs, patients who are
	2014	not registered with a GP, or patients who have had another stroke and a new
		SSNAP record started'
2.1.2	15 Dec	- Remove "Not known" from 8.4, 8.5, 8.6 and 8.7
	2020	
3.1.1	01 Jul	- Questions 8.8, 8.8.1 and 8.9 added to dataset
3.1.1	2021	Questions old, old.1 and old added to dataset
	2021	

For queries, please contact <a href="mailto:ssnap@kcl.ac.uk">ssnap@kcl.ac.uk</a>

Webtool for data entry: www.strokeaudit.org

## Six month (post admission) follow-up assessment

8.1.	Did this patient have a follow-up assessment at 6 months post admission (plus or minus two months)?  Yes O No O No but O No, patient died within 6 months of admission O  N.B. 'No but' should only be answered for DNAs, patients who are not registered with a GP, or patients who have had another stroke and a new SSNAP record started				
	8.1.1. What was the date of follow-up? dd mm yyyy				
	8.1.2. How was the follow-up carried out: In personO By telephone O Online O By po				
	8.1.3. Which of the following professionals carried out the follow-up assessment:  GP O District/community nurse O Stroke coordinator O Voluntary Services employee O Therapist O Secondary care clinician O Other O				
	8.1.4. If other, please specify Free text (30 character limit)				
	8.1.5. Did the patient give consent for their identifiable information to be included in SSNAP?*  Yes, patient gave consent O No, patient refused consent O Patient was not askedO				
8.2	Was the patient screened for mood, behaviour or cognition since discharge using a validated tool?  Yes O No O No but O  If yes to 8.2:  8.2.1 Was the patient identified as needing support? Yes O No O				
	If yes to 8.2.1: 8.2.2 Has this patient received psychological support for mood, behaviour or cognition since discharge? Yes O No O No but O				
8.3.	Where is this patient living? Home O Care home O Other O  8.3.1. If other, please specify Free text (30 character limit)				
8.4.	What is the patient's modified Rankin Scale score?				
8.5.	Is the patient in persistent, permanent or paroxysmal atrial fibrillation? Yes O No O				
8.6.	Is the patient taking:  8.6.1. Antiplatelet: Yes O No O  8.6.2. Anticoagulant: Yes O No O  8.6.3. Lipid Lowering: Yes O No O  8.6.4. Antihypertensive: Yes O No O				
8.7.	Since their initial stroke, has the patient had any of the following:  8.7.1. Stroke  Yes O  No  8.7.2. Myocardial infarction  Yes O  No  No  No  No  No  No  No  No  No  N				
8.8. Emp	loyment status prior to stroke:				
	Working full-time O Working part-time O Retired O Studying or Training O Unemployed O Other O				

3.8.1. En	nployment status current	tly:			
	Working full-time	O CONTRACTOR OF THE CONTRACTOR			
	Working part-time	0			
	Retired	0			
3.9. EQ5D-5L score six months after stroke:					
	a. Mobility (1-5, 9 if missing) <sub>1-5</sub>				
	b. Self-Care (1-5, 9 if missing) 1-5				
	c. Usual activities (work, study, etc.) (1-5, 9 if missing) 1-5				
	d. Pain/discomfort (1-5,	9 if missing) 1-5			
	e. Anxiety/Depression (2	1-5, 9 if missing) <sub>1-5</sub>			
	f. How is your health too	day? (1-100, 999 if missing) 1-100			

\*8.1.5. This question is mandatory to be collected at the 6 month review and is a requirement for collecting patient identifiable information as part of our section 251 (NHS Act 2006) approval from the Ethics and Confidentiality Committee of the National Information Governance Board.