

SSNAP Domains and Key Indicators

1. Scanning
1.1 Percentage of patients scanned within 1 hour of clock start
1.2 Percentage of patients scanned within 12 hours of clock start
1.3 Median time between clock start and scan (hours:mins)
2. Stroke unit
2.1 Percentage of patients directly admitted to a stroke unit within 4 hours of clock start
2.2 Median time between clock start and arrival on stroke unit (hours:mins)
2.3 Percentage of patients who spent at least 90% of their stay on stroke unit
3. Thrombolysis
3.1 Percentage of <u>all</u> stroke patients given thrombolysis (all stroke types)
3.2 Percentage of <u>eligible</u> patients (according to the RCP guideline minimum threshold) given thrombolysis
3.3 Percentage of patients who were thrombolysed within 1 hour of clock start
3.4 Percentage of applicable patients directly admitted to a stroke unit within 4 hours of clock start AND who either receive thrombolysis or have a pre-specified justifiable reason ('no but') for why it could not be given
3.5 Median time between clock start and thrombolysis (hours:mins)
4. Specialist assessment
4.1 Percentage of patients assessed by a stroke specialist consultant within 24h of clock start
4.2 Median time between clock start and being assessed by stroke consultant (hours:mins)
4.3 Percentage of patients who were assessed by a nurse trained in stroke management within 24h of clock start
4.4 Median time between clock start and being assessed by stroke nurse (hours:mins)
4.5 Percentage of applicable patients who were given a <u>swallow screen</u> within 4h of clock start
4.6 Percentage of applicable patients who were given a <u>formal swallow assessment</u> within 72h of clock start
5. Occupational therapy
5.1 Percentage of patients reported as requiring occupational therapy
5.2 Median number of minutes per day on which occupational therapy is received
5.3 Median % of days as an inpatient on which occupational therapy is received
5.4 Compliance (%) against the therapy target of an average of 25.7 minutes of occupational therapy across all patients (Target = 45 minutes x (5/7) x 0.8 which is 45 minutes of occupational therapy x 5 out of 7 days per week x 80% of patients)
6. Physiotherapy
6.1 Percentage of patients reported as requiring physiotherapy
6.2 Median number of minutes per day on which physiotherapy is received
6.3 Median % of days as an inpatient on which physiotherapy is received
6.4 Compliance (%) against the therapy target of an average of 27.1 minutes of physiotherapy across all patients (Target = 45 minutes x (5/7) x 0.85 which is 45 minutes of physiotherapy x 5 out of 7 days per week x 85% of patients)

7. Speech and language therapy

7.1 Percentage of patients reported as requiring speech and language therapy

7.2 Median number of minutes per day on which speech and language therapy is received

7.3 Median % of days as an inpatient on which speech and language therapy is received

7.4 Compliance (%) against the therapy target of an average of 16.1 minutes of speech and language therapy across all patients (Target = 45 minutes x (5/7) x 0.5 which is 45 minutes of speech and language therapy x 5 out of 7 days per week x 50% of patients)

8. MDT working

8.1 Percentage of applicable patients who were assessed by an occupational therapist within 72h of clock start

8.2 Median time between clock start and being assessed by occupational therapist (hours:mins)

8.3 Percentage of applicable patients who were assessed by a physiotherapist within 72h of clock start

8.4 Median time between clock start and being assessed by physiotherapist (hours:mins)

8.5 Percentage of applicable patients who were assessed by a speech and language therapist within 72h of clock start

8.6 Median time between clock start and being assessed by speech and language therapist (hours:mins)

8.7 Percentage of applicable patients who have rehabilitation goals agreed within 5 days of clock start

8.8 Percentage of applicable patients who are assessed by a nurse within 24h AND at least one therapist within 24h AND all relevant therapists within 72h AND have rehab goals agreed within 5 days

9. Standards by discharge

9.1 Percentage of applicable patients screened for nutrition and seen by a dietitian by discharge

9.2 Percentage of applicable patients who have a continence plan drawn up within 3 weeks of clock start

9.3 Percentage of applicable patients who have mood and cognition screening by discharge

10. Discharge processes

10.1 Percentage of applicable patients receiving a joint health and social care plan on discharge

10.2 Percentage of patients treated by a stroke skilled Early Supported Discharge team

10.3 Percentage of applicable patients in atrial fibrillation on discharge who are discharged on anticoagulants or with a plan to start anticoagulation

10.4 Percentage of those patients who are discharged alive who are given a named person to contact after discharge