

Developing an Unscheduled Care KPI

Acute Stroke

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Background

QIS National Overview – 2006

Provision of Safe and Effective Primary Care Services Out of Hours

Unscheduled care KPI Steering Group formed.

Facilitated by NHS QIS Scotland.

Representation from:

Public Partners

OOH services in Lothian, Borders, Grampian, Greater Glasgow.

NHS 24

Scottish Ambulance Service

SGPC

SCIMP

Adastra

ISD

Scottish Government Health Department

Background

Key Drivers:

- 1. National work on the pre-hospital and immediate admission management of acute stroke-**
Borders Stroke Study / Info from Scottish Stroke Care Audit / National Audit Office work in England
- 2. Clear message from patient groups that better advice required in the immediate onset phase of the illness-** Chest Heart and Stroke Scotland
- 3. Variation in type and timing of responses noted in indicator work on referrals from primary care OOH***

Acute Stroke pathway identified as one of the key pathways

Opportunity should be taken to draft a Key Performance Indicator following the launch of Sign Guidance

Objectives

The draft KPI has 2 main objectives:

1. To ensure a focus on public involvement with the early recognition of potential stroke.
2. To increase the number of patients accessing thrombolysis over a 5 year period to at least 10% of ischaemic strokes.

Key Features of draft KPI

The KPI documentation advocates:

- ✓ **Monitoring of advice to public on the recognition of acute stroke**
Local health systems should demonstrate they have a strategy for informing the public on the recognition of stroke.
- ✓ **Monitoring of the response times of pre-hospital services:**
Recognition and transfer of potential acute strokes to facilities capable of managing the initial stages of the diagnosis and treatment.
- ✓ **Monitoring of the time to neuro-imaging where appropriate after handover to acute sector.**

All of this reported on a local systems basis

Key Features of draft KPI

<u>FAST Compliant Stroke</u> Contact with Triage Services to Hospital Arrival Total Target Response Time 65 minutes				
Contact with NHS24				
KPI	<50%	50-80%	>80%	
80% of calls received identifying FAST compliant stroke are transferred to SAS within 10 minutes				

This data can be built from NHS 24 records

Can be validated by SAS paramedic face to face

Will be reviewed in the coming year with regard to the accuracy of use FAST in telephone triage.

Will form part of NHS 24 developing HEAT targets for 2009-10

Key Features of draft KPI

<u>FAST Compliant Stroke</u> Contact with Triage Services to Hospital Arrival Total Target Response Time 65 minutes				
Contact with SAS				
KPI	<50%	50-80%	>80%	
80% of calls received identifying FAST compliant stroke arrive at hospital within 55 minutes				

This data can be built from SAS ePRF collating the Face to face FAST

All times are stamped with SAS systems and are reportable.

Will form part of SAS developing HEAT targets in 2009-10

Key Features of draft KPI

<u>FAST Compliant Stroke</u> ARRIVAL AT A/E TO NEURO-IMAGING TARGET RESPONSE TIME 45 MINUTES				
Local Accident and Emergency / Acute Stroke services				
KPI	<50%	50-80%	>80%	
80% of FAST compliant stroke have neuro-imaging undertaken within 45 minutes of handover from SAS				

This element is the most challenging to capture

The links here will be made with other National stroke audit.

Lanarkshire Health Board Stroke data collected in SAIL will map the way forward.

Key Features of draft KPI

All presentations of stroke to out-of-hours primary care emergency services				
FAST compliant stroke				
KPI	<50%	50-80%	>80%	
80% of patients identified as having FAST compliant stroke arrive at hospital within 65 minutes of receipt of call or self presentation to service				
80% of non-FAST compliant stroke assessed face to face within 2 hours of receipt of call or self presentation to service				

Data collection here is quite detailed

Generic coding for stroke symptoms needs to be more specific

Work with Aadastra Software Ltd will improve coding and enable reporting.



Building the Key Performance Indicator

Greater Glasgow
& Clyde
OOH
Services

Current collaboration between key partners:

NHS 24

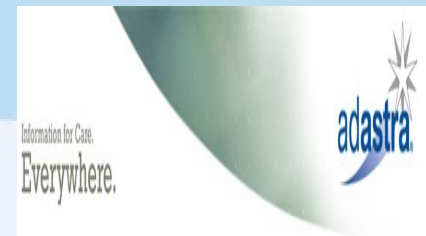
SAS

Clyde Sector of Glasgow and Clyde OOH services

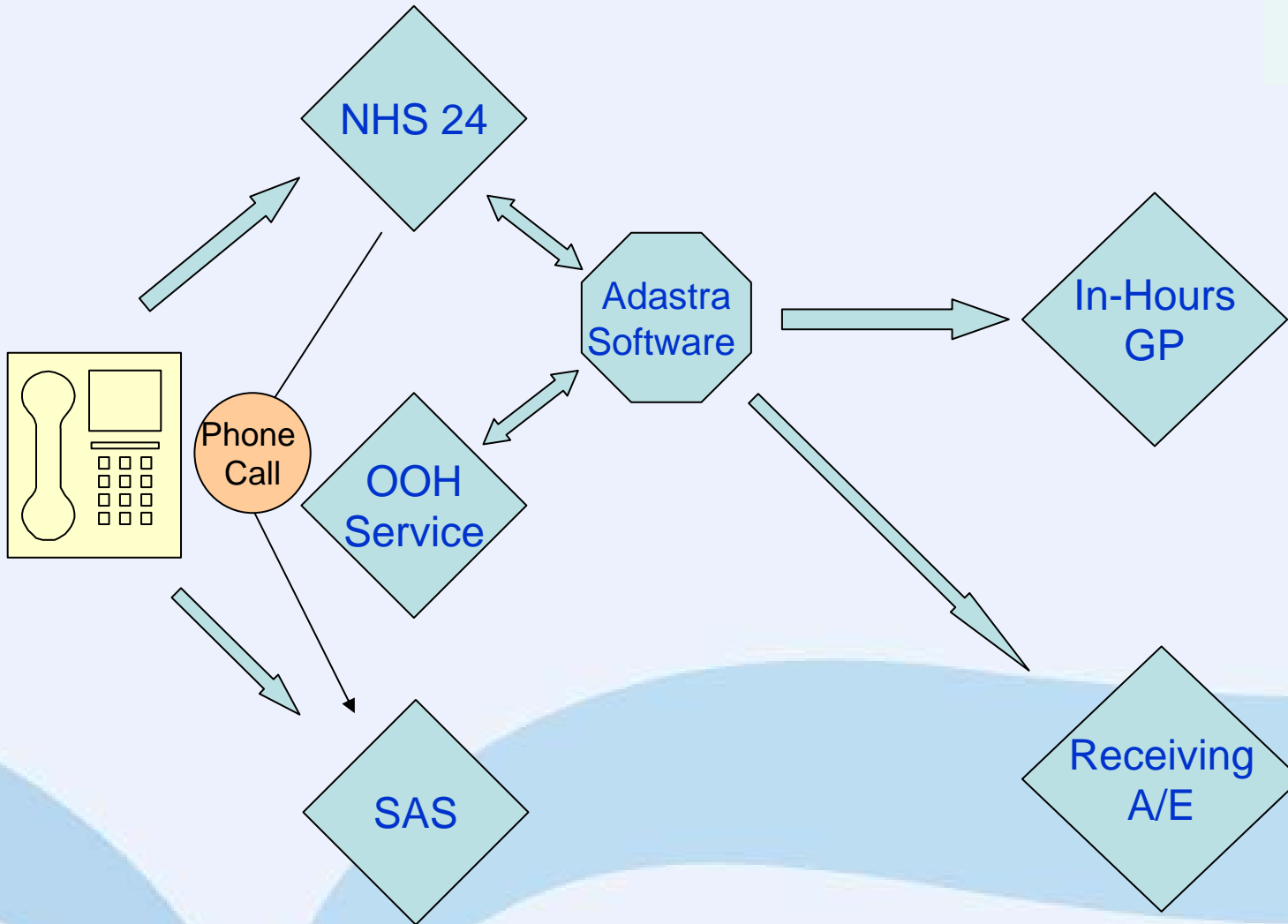
Adastra

Future collaboration with:

Lanarkshire Stroke MCN

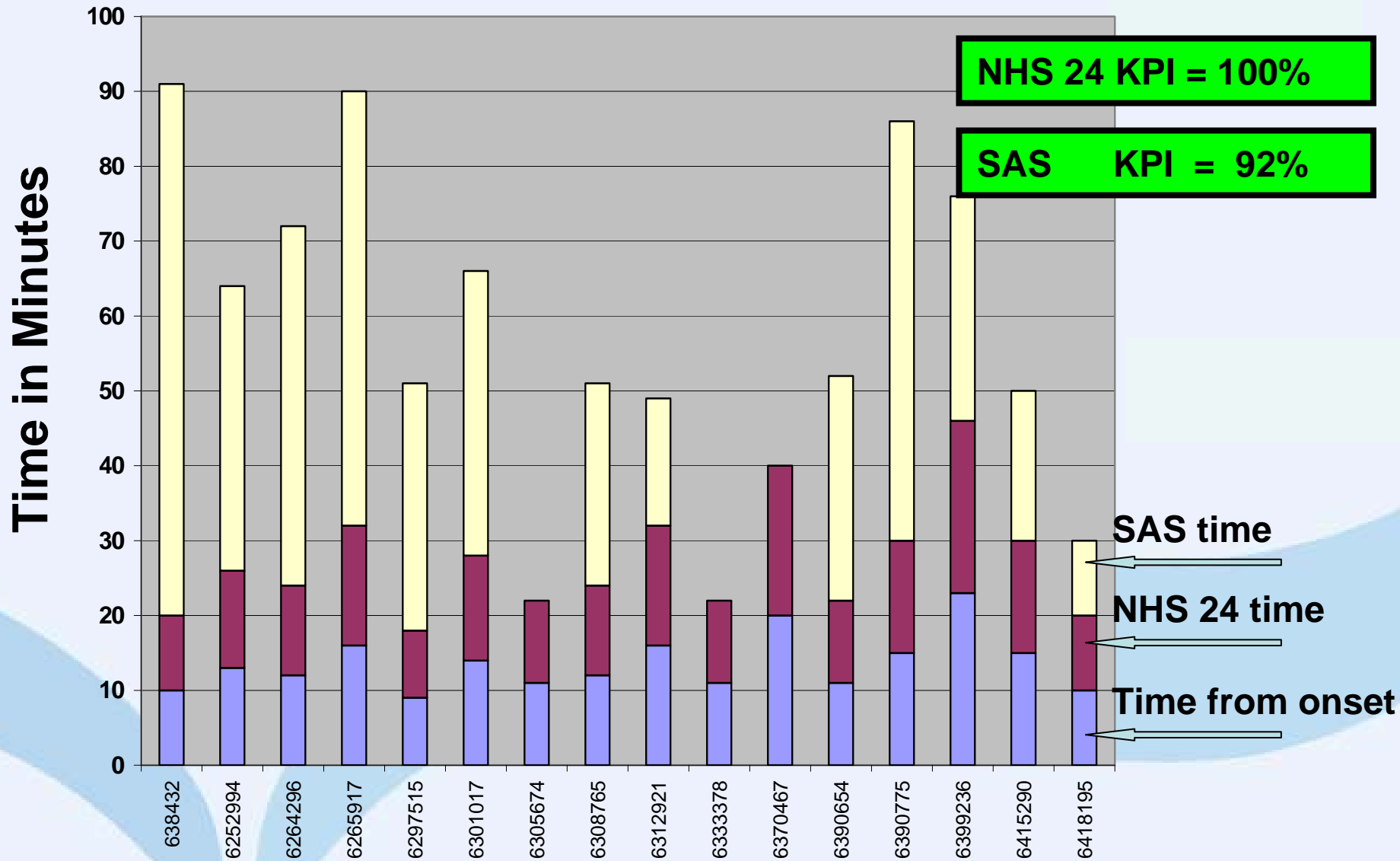


Improving Data flows in future

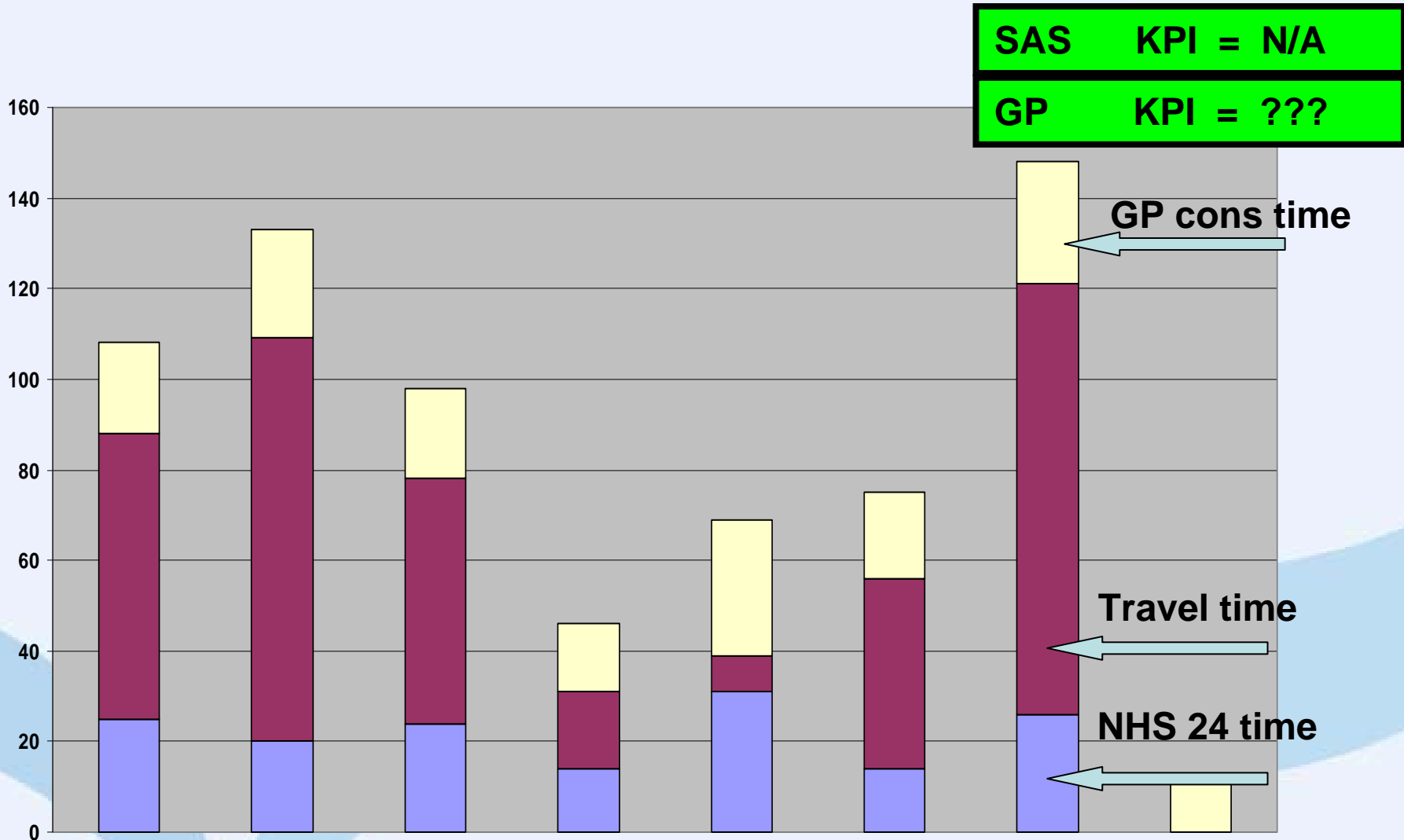


Current data transfer links

FAST Calls taken by NHS 24 Call Handlers & directly transferred to SAS

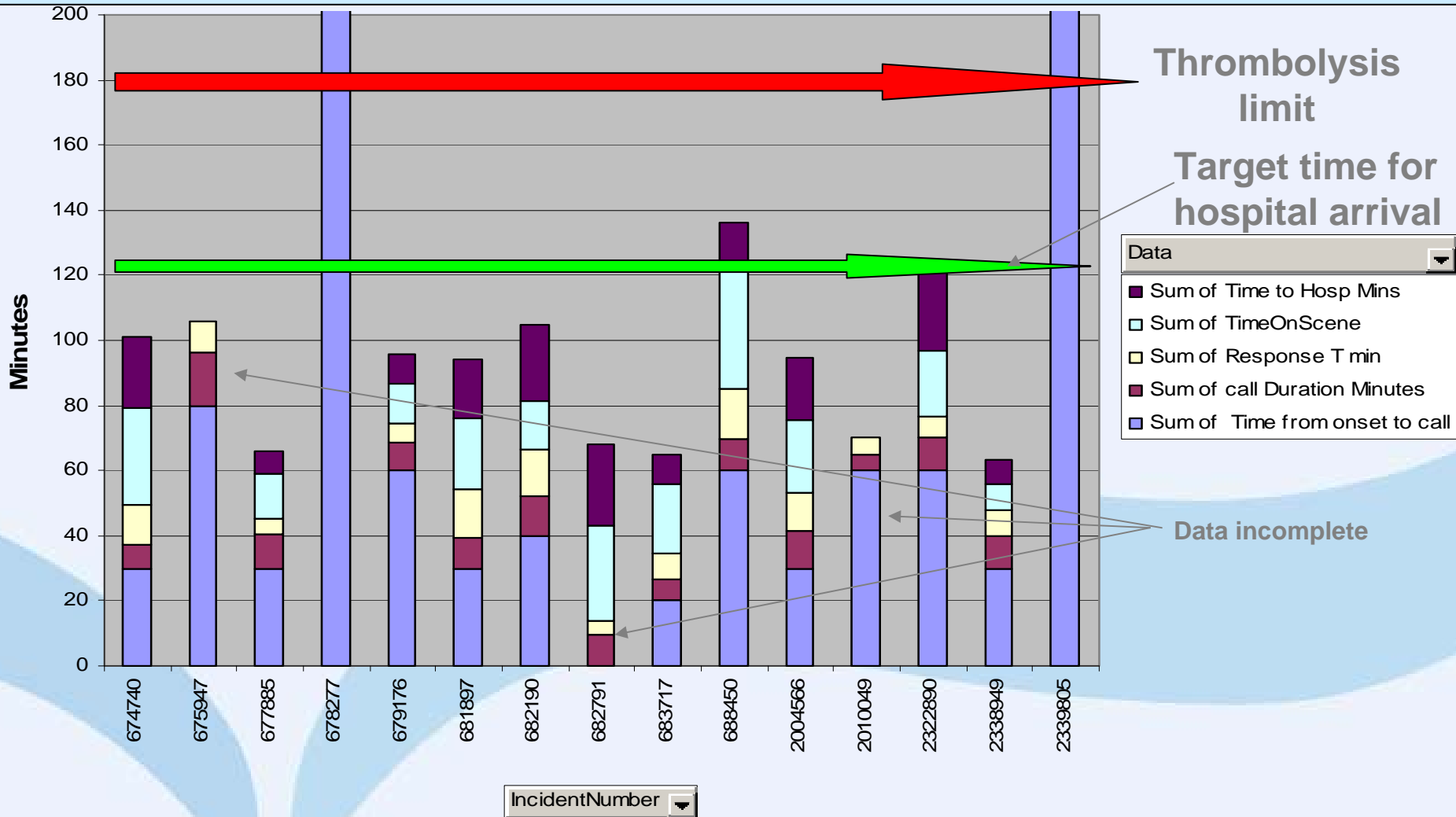


Calls taken by NHS 24 Nurse Practitioners & referred to primary care



Total time from reported onset to hospital arrival north of Scotland

FAST compliant potential stroke



Next steps

Work with NHS Lanarkshire stroke service:

- ✓ **End to end validation of KPI**
Plan to complete this by end March 2009
- ✓ **Model reports built**
Plan to complete this by end March 2009
- ✓ **Validation of FAST criteria in telephone triage**
Plan to complete this by end Dec 2009

Outstanding issues:

- 1. Further discussion with stakeholders**
- 2. Understanding overall of the resource requirements.**
- 3. Ownership of the KPI once developed**
- 4. Ongoing reporting and report maintenance.**