

# What are the opportunities and challenges of auditing post-acute stroke care? SSNAP Post-Acute Organisational Audit (PAOA) 2021

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## Introduction

The Sentinel Stroke National Audit Programme (SSNAP) is a national registry of stroke services in England, Wales and Northern Ireland. In 2021, SSNAP conducted an organisational audit of post acute rehabilitation services.



The audit's aim was to benchmark inpatient and community based rehabilitation services against newly published national policy and stroke care guidelines on processes of care and configurations.

## Methods

Data were collected using an online proforma between 1 -30 April 2021. Preceding this, SSNAP hosted webinars with the 20 English Stroke Networks to support engagement from teams, including non-stroke specialist services. During data collection, guidance was provided by a helpdesk and weekly drop in online sessions to support data accuracy and consistency. Inpatient teams responded to 47 questions and community teams answered 57. We developed a total of 17 Key Indicators (KIs) representing high-quality stroke rehabilitation. Data was reported in a public report (you can access it [here](#)), at the UK Stroke Forum '21 and in an interactive online dashboard.

Question No	Data item	Answer options
1.12.2	What is the total establishment whole time equivalents (WTE's) of nurses which treat stroke patients?	
1.13	Do patients within this unit have access to the following therapy staff (select all that apply):	(a) Occupational therapy (b) Physiotherapy (c) Speech and Language Therapy (i) How many days per week do your patients normally have access to these disciplines? (ii) How many individuals does this service have? (iii) What is the total establishment whole time equivalents (WTE)

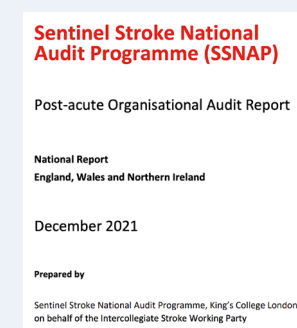
47-57 Online Questions



Weekly Webinars



17 Key Indicators



Data presented in a Report and the UK Stroke Forum 2021

## Results

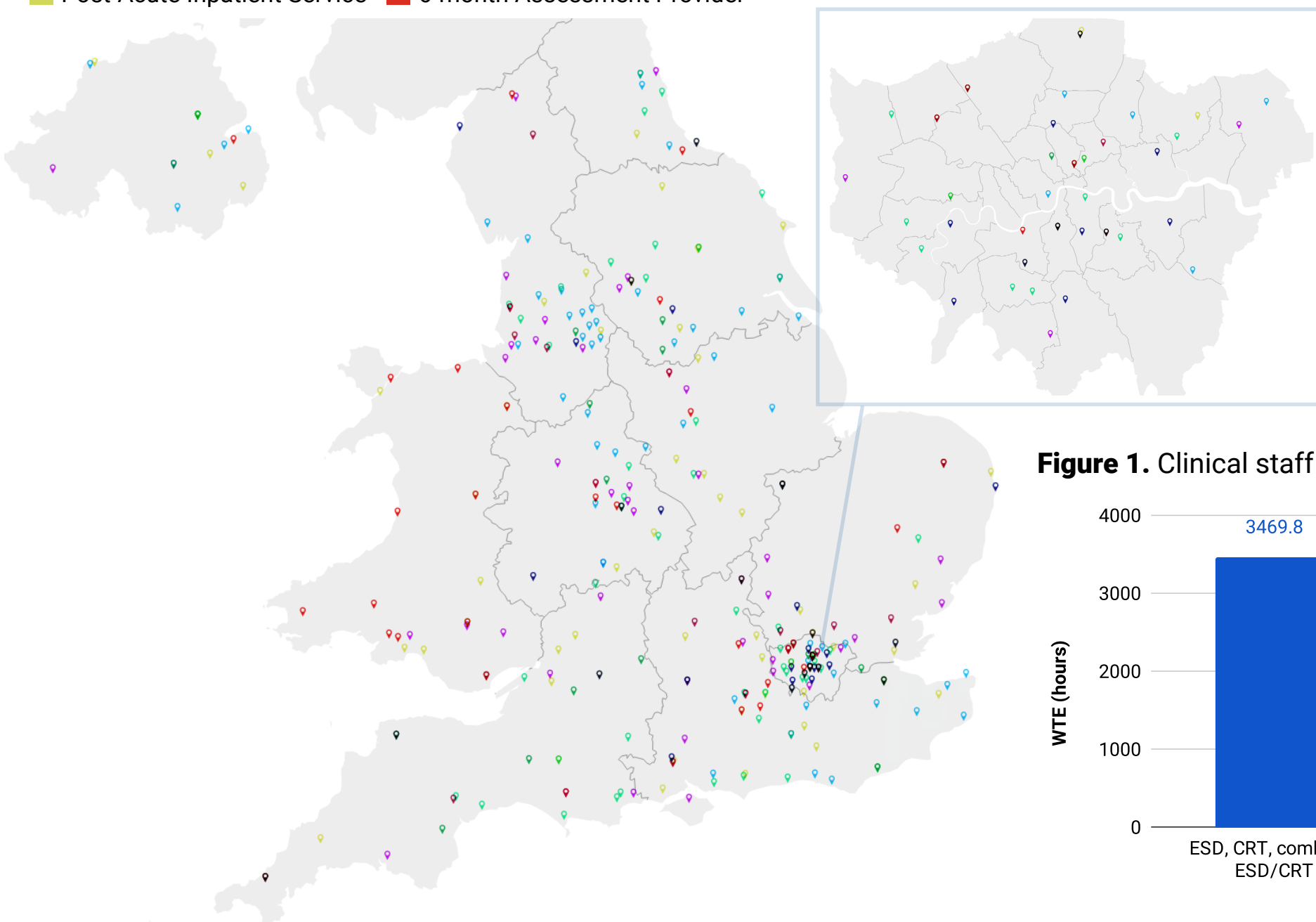
**664 teams completed the proforma** - 87.6% were stroke/neuro specific. Participating services included post-acute inpatient teams, Early Supported Discharge (ESD) teams, Community Rehab Teams (CRT), Combined ESD-CRT, 6-month assessment providers, single discipline services and other. **Participation represented 6,700 WTE workforce** delivering rehabilitation to 112,000 stroke patients in 12 months. Overall, 42.9% of indicators were met by teams; median of 4/10 KIs for inpatient teams, 6/13 KIs for community teams. Seven key recommendations were produced based on the Audit results.

## Conclusion

Auditing complex post-acute stroke rehabilitation through a national registry is possible but requires engagement and support. **Teams required dedicated time for the audit, which was challenging during a pandemic.** Definition of service types and standards to be monitored against was a complex process, and needed to reflect national policy as well as clinical guidelines. Audit offers an important method to benchmark services and stimulate evidence based quality improvement. We hope the data will stimulate discussion and attention to post acute services where continued improvement is required.

**Map 1.** Distribution of services by service type in England, Northern Ireland and Wales. London detail.

■ Early Supported Discharge (ESD) 
 ■ Community Rehabilitation Team (CRT) 
 ■ Combined ESD/CRT  
■ Post-Acute Inpatient Service 
 ■ 6-month Assessment Provider



Overall, **42.9%** of indicators were met by teams.



**4/10** is the median number of key indicators met by inpatient teams.



**6/13** is the median number of key indicators met by community teams

**Figure 1.** Clinical staff whole time equivalent (WTE) hours per service type.

