

Line of sight: National recommendations, report evidence and related national guidance

SSNAP State of the Nation Report 2025: Stroke care received between April 2024 to March 2025

	Recommendation (R) (Audience)	Report findings underlying this recommendation	Page	Related national guidance
R1	Targeted quality improvement led by stroke networks is needed to reduce the time from stroke onset to hospital and subsequently to specialist care on a stroke unit. <i>For action by: Integrated Stroke Delivery Networks (ISDNs) and Welsh Local Health Boards (WLHBs)</i>	The median onset to arrival time at first hospital has increased from 4h00m in 2023/24 to 4h11m in 2024/25, and 3h15m in 2019/20.	Page 4: fig. 1	National Clinical Guideline for Stroke 2023 NHS England National Stroke Service Model 2021
R2	Improve adherence to the National Optimal Stroke Imaging Pathway (NOSIP) to increase the proportion of patients receiving the appropriate imaging immediately on arrival at hospital and accelerate the identification of patients eligible for hyperacute interventions. <i>For action by: ISDNs, WLHBs and Regional Radiology Networks</i>	The proportion of patients receiving brain imaging within 1 hour of arrival has increased to 61.4% in 2024/25 compared to 59.5% in 2023/24.	Page 4: fig. 2	National Clinical Guideline for Stroke 2023 NICE guideline NG128: Stroke and TIA in over 16s NHS England National Stroke Service Model 2021 [National Optimal Stroke Imaging Pathway]
R3	Restore timely access to hyperacute specialist inpatient care for stroke <i>For action by: Integrated Care Boards (ICBs) and WLHBs</i>	The proportion of patients directly admitted to a stroke unit within 4 hours has remained static: - 46.5% patients directly admitted to a stroke unit within 4 hours in 2024/25 compared to 46.7% in 2023/24. The proportion of patients spending 90% of their stay on a stroke unit has decreased: - 74% patients spending at least 90% of their stay on a stroke unit in 2024/25 compared to 75.9% in 2023/24. These figures compare to 40.2% and 72.8% respectively for 2022/23.	Page 7: fig. 7 and fig. 8	National Clinical Guideline for Stroke 2023 NICE Quality Standard 2 (QS2): Stroke in adults NHS 10 Year Health Plan For England

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R4	Provide equitable access to needs-based, 7-day stroke rehabilitation along the whole pathway including increasing access to integrated community stroke services to support the key policy shift from hospital to community. <i>For action by: ICBs and WLHBs, supported by ISDNs</i>	The proportion of patients discharged with a stroke/neurology specific service (ESD and/or CRT) has increased to 66.6% in 2024/25 compared to 63.4% in 2023/24.	Page 8: fig. 9	NICE Quality Standard 2 (QS2): Stroke in adults National Clinical Guideline for Stroke 2023 NHS England National Stroke Service Model 2021 Welsh Government Quality statement for stroke 2021 NHS England Integrated community stroke service model 2022
R5	Respond to the need for ongoing support and regular review when recovering from the life-changing effects of acute stroke and ensure that all stroke survivors receive formal follow-up 6 months after their stroke, with further support made available for those identified with ongoing needs. <i>For action by: ICBs and WLHBs</i>	The proportion of patients receiving a 6-month stroke review has declined from 39% in 2023/24 to 35% in 2024/25.	Page 9: fig. 10	National Clinical Guideline for Stroke 2023 NHS England National Stroke Service Model 2021 NICE Quality Standard 2 (QS2): Stroke in adults