

# SSNAP Domains and Key Indicators

<b>1. Scanning</b>
1.1 Proportion of patients scanned within 1 hour of clock start
1.2 Proportion of patients scanned within 12 hours of clock start
1.3 Median time between clock start and scan (hours:mins)
<b>2. Stroke unit</b>
2.1 Proportion 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 Proportion of patients who spent at least 90% of their stay on stroke unit
<b>3. Thrombolysis</b>
3.1 Proportion of <u>all</u> stroke patients given thrombolysis (all stroke types)
3.2 Proportion of <u>eligible</u> patients (according to the RCP guideline minimum threshold) given thrombolysis
3.3 Proportion of patients who were thrombolysed within 1 hour of clock start
3.4 Proportion 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)
<b>4. Specialist assessment</b>
4.1 Proportion of patients assessed by a stroke specialist consultant physician within 24h of clock start
4.2 Median time between clock start and being assessed by stroke consultant (hours:mins)
4.3 Proportion 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 Proportion of applicable patients who were given a <u>swallow screen</u> within 4h of clock start
4.6 Proportion of applicable patients who were given a <u>formal swallow assessment</u> within 72h of clock start
<b>5. Occupational therapy</b>
5.1 Proportion 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)
<b>6. Physiotherapy</b>
6.1 Proportion 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 Proportion 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 Proportion 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 Proportion 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 Proportion 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 Proportion of applicable patients who have rehabilitation goals agreed within 5 days of clock start

8.8 Proportion 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 Proportion of applicable patients screened for nutrition and seen by a dietitian by discharge

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

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

## **10. Discharge processes**

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

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

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

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