

## Methodology Overview

### Audit dataset

- A core, minimum dataset was developed by the ICSWP in collaboration with other key stakeholders, including a strategic group comprising representatives from a number of organisations which have an interest in stroke data, notably NHS Improvement (Stroke) and representatives of the former stroke networks
- The dataset was piloted in May 2012 with good geographical representation
- There are detailed help notes which should be used alongside the dataset; these ensure that there is standard interpretation of the dataset questions across all participants
- A list of frequently asked questions (FAQs) and answers are provided to participants (via the SSNAP webtool) in order to clarify how to answer questions, particularly for more unique cases

### Data collection, submission and analysis

- Data collection for the SSNAP clinical audit opened on 12 December 2012, with the intention that teams should be able to set themselves up to collect routine continuous data on every stroke admission from 1 January 2013 onwards
- SSNAP data are collected via a purpose-built user friendly internet-based webtool
- Security and confidentiality are maintained through the use of passwords and a person specific registration process
- High data quality is ensured through the use of built in validations which prevents illogical data being entered
- A dedicated helpdesk is in place to answer queries from SSNAP participants and this helps to ensure that questions are interpreted consistently (this in turn informs updates to the FAQs and dataset help notes)
- Users can register for their team on the SSNAP webtool and input data for their team. Once records are complete and correct they can be 'locked' at different levels. Records can be 'locked' to 72 hours once this information is completed, they can then be locked to discharge once this is applicable
- Locking confirms that all data have been clinically signed off and are ready for central analysis. The 'Lead clinical contact' role (as identified in registration for the SSNAP webtool) is responsible for ensuring that the overall system of data collection and entry onto the webtool is accurate, robust and functioning. We encourage the lead to routinely check data, either directly on the webtool or by using the export function
- Only complete and locked to 72 hours records go into data analysis for the 72 hour section and complete and locked to discharge records go into data analysis for the post-72h section
- Data are analysed using Stata 12