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

**SSNAP Domains and Key Indicators**

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| 1. **Speech and language therapy** |
| 7.1 Percentage 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) |
| 1. **MDT working** |
| 8.1 Percentage 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 Percentage 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 Percentage 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 Percentage of applicable patients who have rehabilitation goals agreed within 5 days of clock start |
| 8.8 Percentage 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 |
| 1. **Standards by discharge** |
| 9.1 Percentage of applicable patients screened for nutrition and seen by a dietitian by discharge |
| * 1. Percentage of applicable patients who have a continence plan drawn up within 3 weeks of clock start |
| * 1. Percentage of applicable patients who have mood and cognition screening by discharge |
| 1. **Discharge processes** |
| 10.1 Percentage of applicable patients receiving a joint health and social care plan on discharge |
| 10.2 Percentage of patients treated by a stroke skilled Early Supported Discharge team |
| 10.3 Percentage of applicable patients in atrial fibrillation on discharge who are discharged on anticoagulants or with a plan to start anticoagulation |
| 10.4 Percentage of those patients who are discharged alive who are given a named person to contact after discharge |