

Accepted aggregate data requests - Physiotherapy intensity split by patient characteristics

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Background and Purpose

Evidence suggests that physiotherapy can optimise functional outcomes post-stroke although it is unclear how different patient factors influence its provision. The aim of this descriptive study was to investigate factors associated with physiotherapy provision to hospitalised stroke patients.

Methods: Data analysed were for stroke patients admitted to hospital in England, Wales and Northern Ireland between April 2013 – March 2015 recorded on the Sentinel Stroke National Audit Programme (SSNAP) national stroke register. Associations between different patient factors, amount of physiotherapy and applicability for physiotherapy were measured.

SSNAP measures of physiotherapy provision that were analysed were:

- total number of physiotherapy minutes provided to a patient during their inpatient stay
- average number of physiotherapy minutes provided per day on which physiotherapy was received
- number of days on which physiotherapy was provided to a patient
- intensity of physiotherapy provided to the patient (measured as the number of minutes of physiotherapy provided as a percentage of the time in hospital)

Factors measured by SSNAP that were analysed included:

- age
- gender
- stroke severity (measured by National Institutes of Health Stroke Scale; NIHSS)
- pre-stroke disability (measured by modified Rankin scale; mRS)
- motor weakness (measured by NIHSS motor arm and leg components)
- sensory loss (measured by NIHSS sensory component)
- neglect (measured by NIHSS neglect component)
- stroke type
- receipt of thrombolysis
- level of consciousness upon hospital arrival (measured by NIHSS component 1a)
- development of UTI and/or pneumonia within first 7 days
- discharge to an early supported discharge (ESD) team

In addition to amount of physiotherapy, the median length of stay (LOS) was also compared for each patient factor and the proportion of patients deemed to be eligible for physiotherapy by the treating clinicians at any point during their inpatient stay was measured.