



West Yorkshire and Harrogate Health and Care Partnership (WY&H HCP) Improving Stroke Outcomes 'You said, we did'

Friday, 14 September, 2018

Introduction

It is important that the public and patients know how their views have shaped our work to improve stroke outcomes across West Yorkshire and Harrogate. This includes preventing strokes, work to further improve specialist stroke services (the care people receive in the first few hours and days after stroke) and improving the support people receive when leaving hospital following a stroke. We aim to show that we have listened to the important views of people who have had a stroke, their carers and community organisations.

'What people have told us'

We have talked to over 2000 people over the past 18 months. People said....

- We want more to be done to **prevent strokes**
- We will travel to **access the best specialist support**
- We want ongoing **rehabilitation care as close to home as possible**
- We **value the role of community organisations**
- We want **more support for carers**
- We should **support our staff** to deliver the best outcomes for people.

We have listened and are...

Preventing strokes

- Improving care for people with atrial fibrillation (AF), with the aim of preventing over 190 strokes over the next three years. This means detecting, diagnosing and treating people who are at risk of stroke so that around 9 in 10 people with atrial fibrillation are managed by GPs, with the best local treatments. Between May and August 2018 we identified and treated 450 new people with atrial fibrillation, helping to save more lives.
- Reducing other risk factors linked to stroke. For example the treatment of hypertension (high blood pressure) which could prevent a further 620 strokes within three years.
- Working with Public Health England to promote the Face Arms Speech Time (FAST) campaign.
- Developing a standardised hyper acute stroke care pathway to an agreed set of key clinical standards/guidelines. For example, all patients with suspected stroke should



receive a brain scan within 1hr of arrival at hospital; and people should return as close to home as quickly possible.

Accessing the best specialist support

- We have developed proposals for what the best delivery of care models and pathways could look like, in line with national clinical standards by reviewing the current hyper acute stroke services across West Yorkshire and Harrogate.
- Local clinicians and health care professionals have developed clinical standards, standardised care pathways and policies to reduce variation and further improve stroke outcomes.
- These have been developed by reflecting national guidelines and feedback from all of our engagement.

Care closer to home

- We have set out standards and outcomes covering the whole stroke pathway, including rehabilitation and community services. We are at the beginning of our conversations with our local areas about care closer to home and identifying and sharing good practice.

Role of community organisations and more support for unpaid carers

- We are discussing with each of our six local places what further actions (if any) will be needed locally to deliver the standards and outcomes in the whole stroke pathway. This includes the role of community organisations and support for unpaid carers.

Supporting our staff

- We are supporting our staff to make the most of their valuable skills and expertise. We have surveyed specialist stroke services staff and have secured £20, 000 funding to establish a stroke clinical network to better support, recruit and retain our skilled workforce.
- We are developing new and extended roles (such as advance practice)
- We are responding to national guidance and strategies relating to the stroke workforce.



Background information

We have talked to over 2000 people over the past 18 months, this has included working with Healthwatch and our communications and engagement leads. We:

- Engaged with people in 2017 to seek their views on stroke care – these findings laid the foundation for our work to date. Over 1500 people gave their views via an online survey, outreach sessions with voluntary and community groups, and interviews with people in GP practices, rehabilitation units, stroke wards, and libraries. Stroke consultants also took part in sessions so that people could hear first-hand about the care and support available from health professionals.
- Held a stroke clinical summit in May 2017 where over 50 health care professionals came together to discuss how best they could work together to prioritise the way we deliver stroke care now and in the future
- Had further conversations in public to further develop our work in February, March and May 2018. This included voluntary, community organisations, people who have had a stroke, carers and councillors. Over 500 people took part in these conversations.
- The Stroke Association is represented on our stroke programme board and we have discussed our work with other VCS organisations and carers. We also have a patient representative on our Stroke Programme Group.

Providing the best stroke services possible across West Yorkshire and Harrogate to further improve quality and stroke outcomes is a priority for us all and something we are committed to achieving.

In 2016/17 there were approximately 3,700 strokes in West Yorkshire and Harrogate. The Partnership's ambition is to have fewer stroke across the area, more lives saved, reduced delays and improved recovery outcomes. Our aim is to improve quality outcomes for people requiring stroke care, ensuring that services are resilient and 'fit for the future'.

Stroke care is one of the priority areas of work highlighted in the draft [West Yorkshire and Harrogate Sustainability and Transformation Plan \(STP\)](#) published in November 2016. It is also highlighted in "[Our next steps to better health and care for everyone](#)" document published in January 2018.

WY&H currently has five hyper-acute stroke units (HASU), based in:

- Bradford Teaching Hospitals NHS Foundation Trust – Bradford Royal Infirmary
- Calderdale and Huddersfield NHS Foundation Trust – Calderdale Royal Hospital
- Harrogate and District NHS Foundation Trust
- Leeds Teaching Hospitals NHS Trust – Leeds General Infirmary; and
- Mid Yorkshire Hospitals NHS Trusts – Pinderfields Hospital.

Work across West Yorkshire and Harrogate via the Clinical Forum and Joint Committee of Clinical Commissioning Groups has highlighted the importance of stroke prevention, community rehabilitation and after care support delivered in our six local places (Bradford District and Craven; Calderdale, Harrogate, Leeds, Kirklees and Wakefield).

This is especially important given that we have an ageing population and people are living with multiple long term conditions for longer. A key part of our work is preventing ill health so people can live a long and healthy life.



A National Stroke Plan is expected in the autumn. This will cover a number of important areas, including rehabilitation and on-going care; urgent and emergency care; preventing avoidable strokes, for example atrial fibrillation and hypertension; workforce, and health research.

What do we want to achieve?

We want to:

- Prevent strokes happening
- Commission 'high quality' sustainable hyper acute stroke services that are 'fit for the future' and save more people's lives in West Yorkshire and Harrogate
- Provide a fully integrated, end-to-end stroke service for West Yorkshire and Harrogate
- Implement the recommendations of the National Stroke Strategy
- Meet the service standards and specifications set by the Royal College of Physicians, NICE and the locally agreed stroke service standards
- Ensure that stroke services deliver improved clinical outcomes.

You can find out more about this work by visiting the West Yorkshire and Harrogate Health and Care Partnership website [here](#).

