

Improving Stroke Therapy SSNAP Scores: Moving On Up

Julia Sartorius, Lead Physiotherapist

19 Sept 2023

A decorative graphic consisting of a large blue area at the bottom and a diagonal line of colored segments (cyan, green, purple, pink, orange) extending from the bottom left towards the top right.

ProudToBeENHT

Learning Objectives

- Share our 7 step model for quality improvement and the benefits we have experienced from working closely with our QI team (SSEF E20)
- Share our methods for improving intensity and responsiveness of Occupational Therapy and Physiotherapy on ASU and HASU (SSEF E10)
- Highlight the impact that ‘on the ground’ clinicians can make in implementing change under challenging circumstances and the importance of maintaining hope and resilience (SSEF E18)

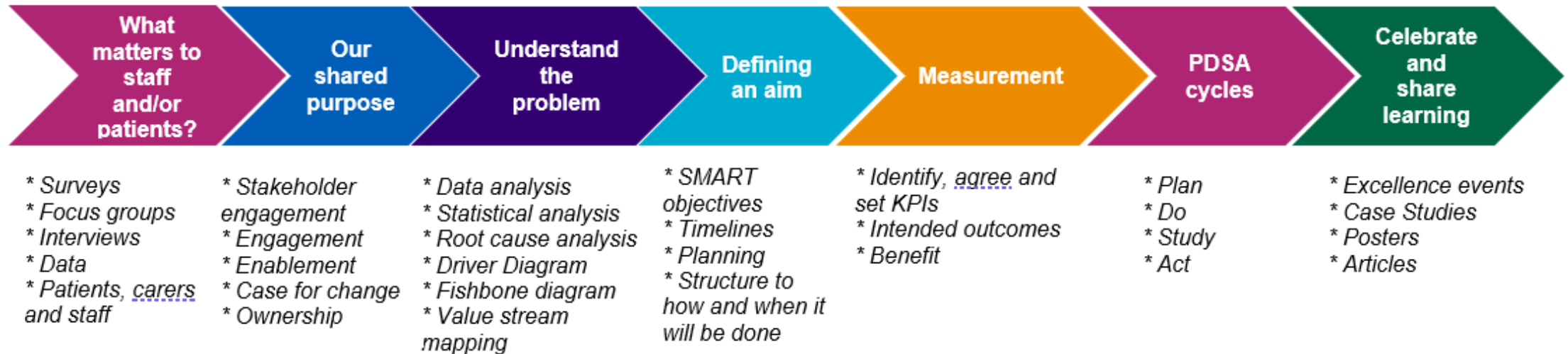
Our 'Journey' (2020 onwards)

- Mass change in therapy leadership
- Pandemic
- Staffing crisis
- No SSNAP coordinator



Here to improve – our continuous improvement model

ENHT 7-step Model for Improvement



Project Goal

To improve the stroke therapy service in Lister Hospital by increasing SSNAP scores in **domains 5, 6 and 8**.

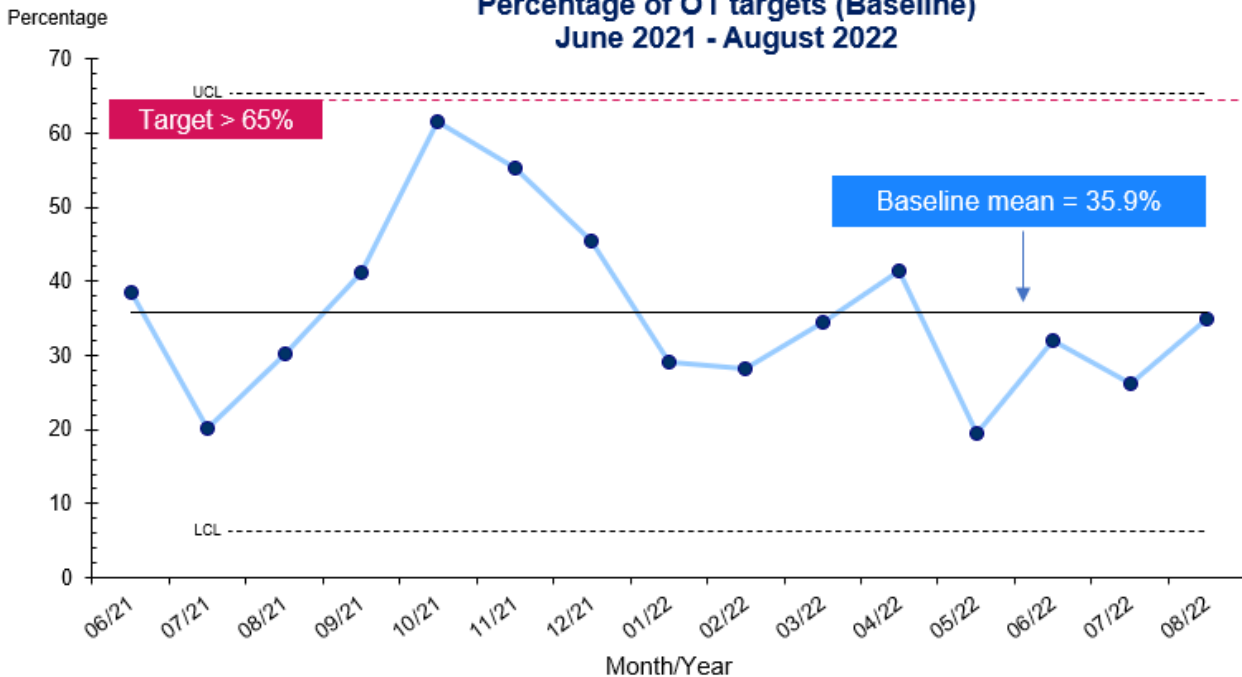
SSNAP Domains	Month/Year			
	Jan - Mar 2022	Apr - Jun 2022	Jul - Sep 2022	Oct - Dec 2022
Overall SSNAP score	D	D	D	D
D5. Occupational Therapy	E	E	E	D
D6. Physiotherapy	D	D	D	C
D8. Multidisciplinary team working	E	E	E	E

Aims of the Project (Outcome measure)

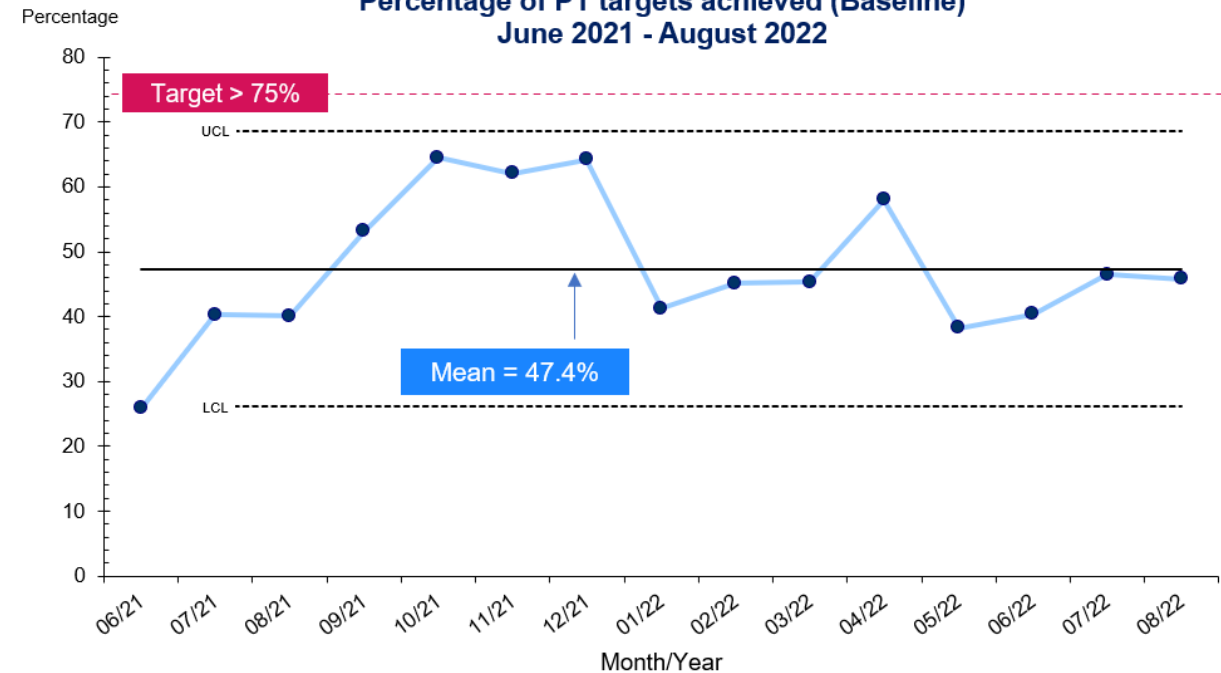
To improve the stroke therapy service in Lister Hospital, specifically:

- **Improve percentage compliance against OT/PT targets by December 2023**
 - Occupational therapy from 35.9% to 65%
 - Physiotherapy from 47.4% to 75%

Percentage of OT targets (Baseline)
June 2021 - August 2022



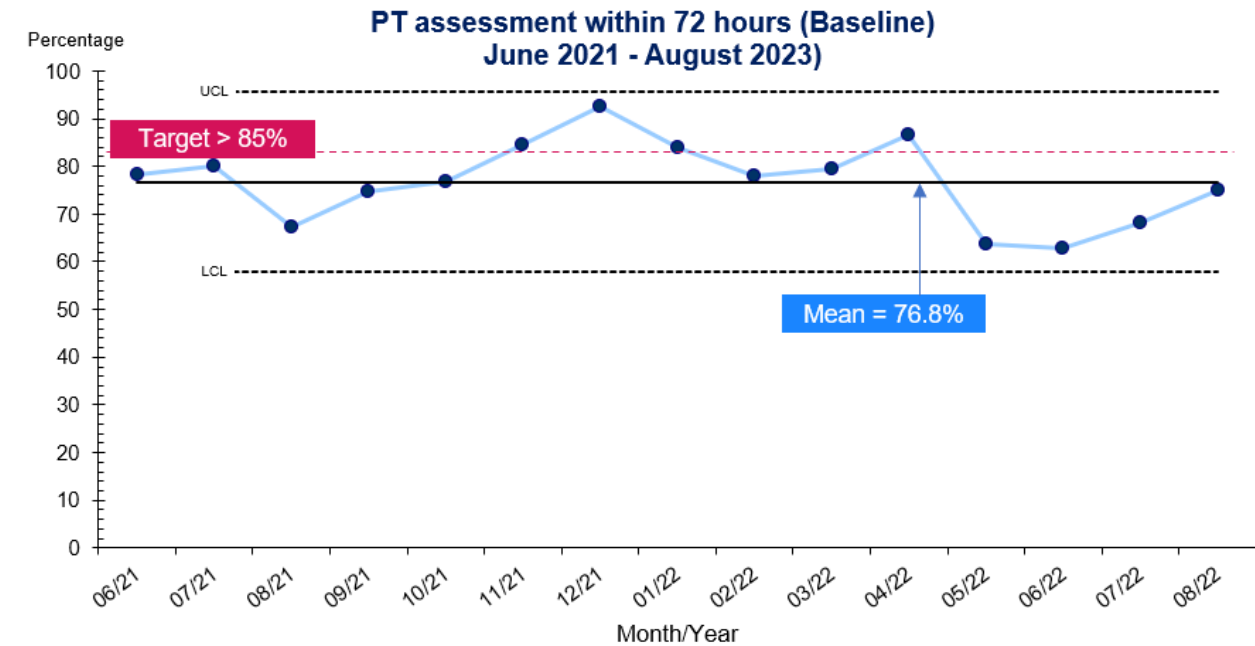
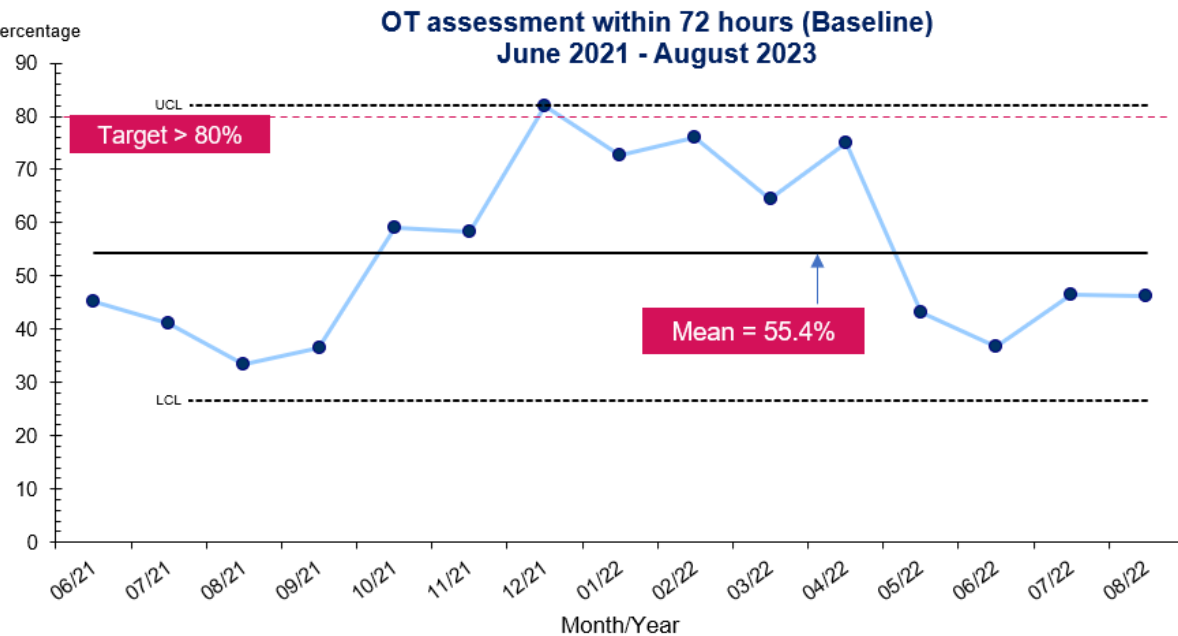
Percentage of PT targets achieved (Baseline)
June 2021 - August 2022



Aims of the Project (Outcome measure)

To improve the stroke therapy service in Lister Hospital, specifically:

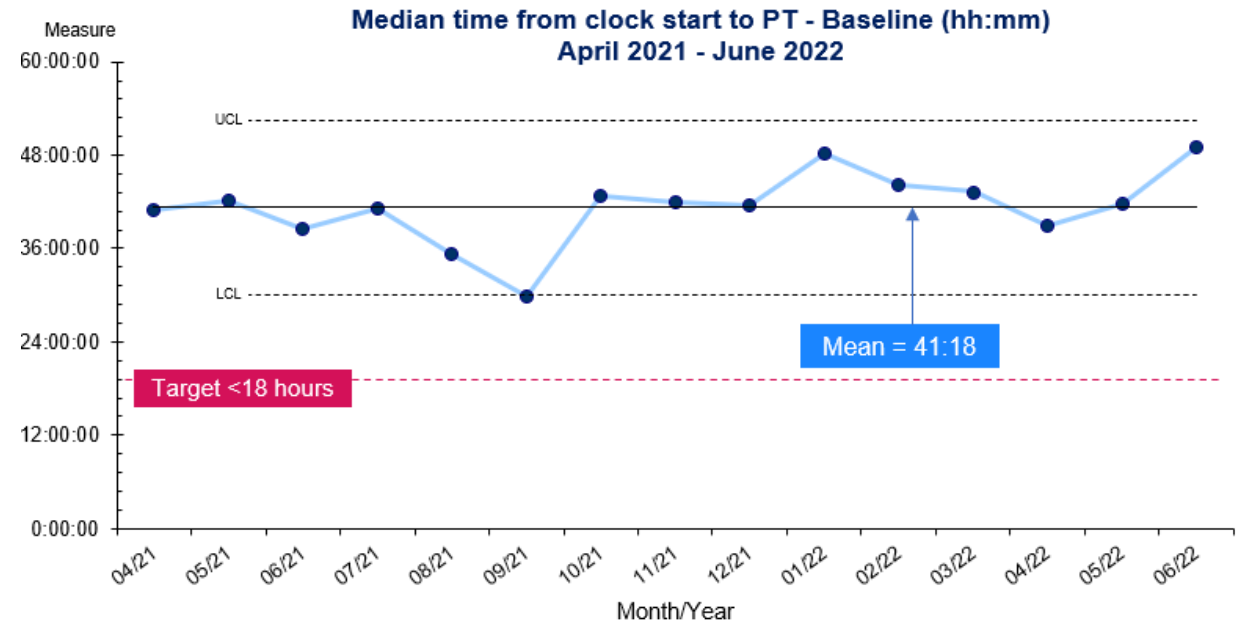
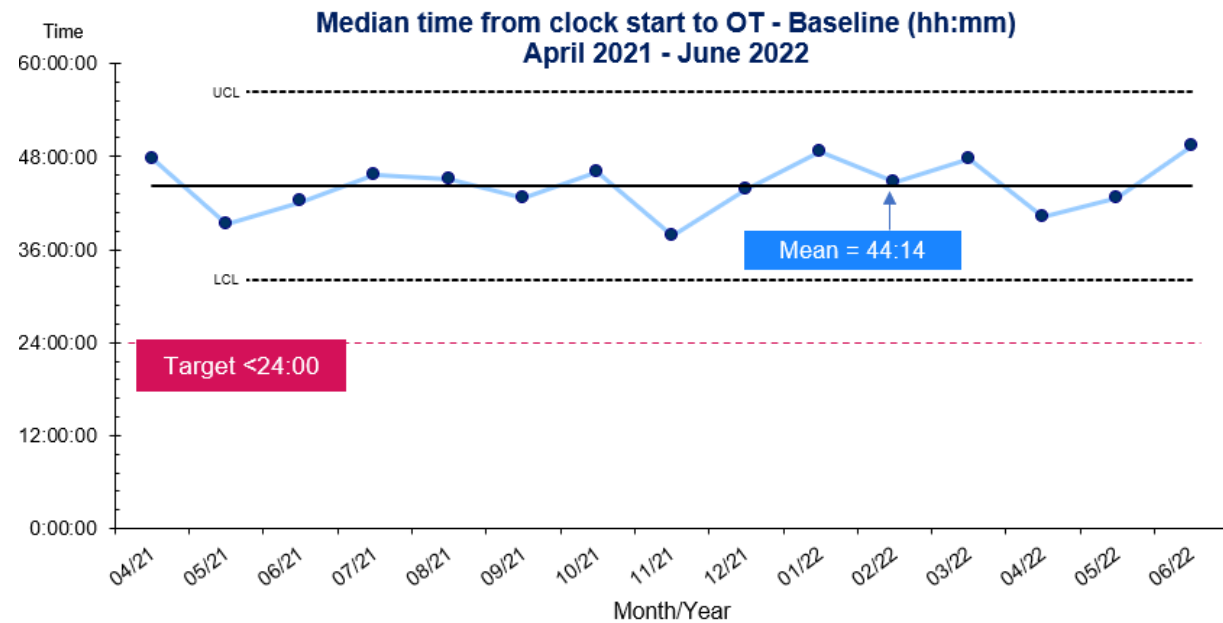
- Improve the percentage of applicable patients assessed by OT/PT within 72 hours by December 2023 by the:
 - Occupational therapy team from 55.4% to 80%
 - Physiotherapy team from 76.8% to 85%



Aims of the Project (Outcome measure)

To improve the stroke therapy service in Lister Hospital, specifically:

- **Improve the median time from clock start to OT/PT by December 2023**
 - Occupational therapy team from 44:14 to less than 24 hours
 - Physiotherapy team from 41:18 to less than 18 hours



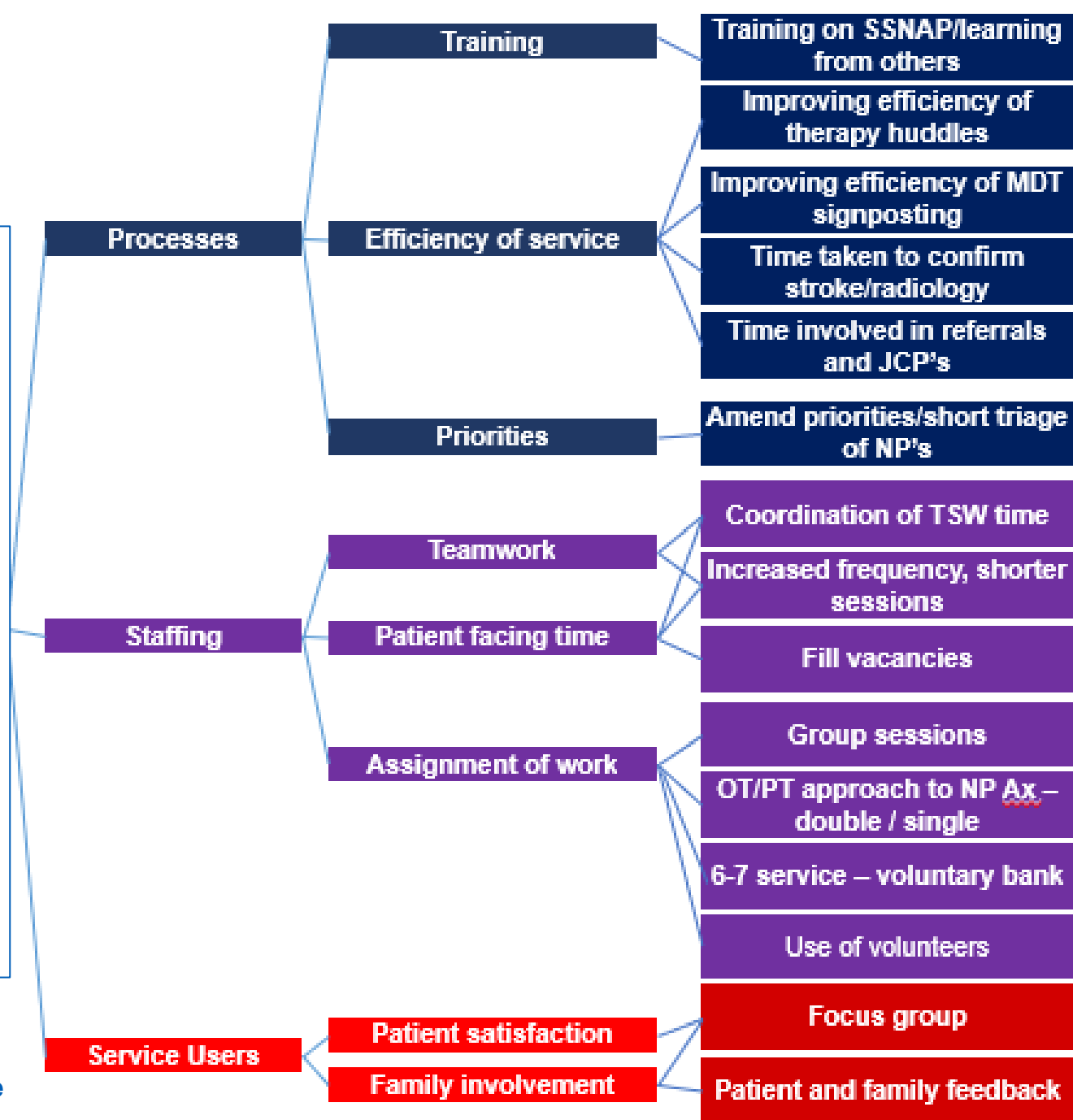
Process Measures

- **Improve the percentage of patients reported as requiring therapy by December 2023**
 - **Occupational therapy team from 77.3% to 80%**
 - **Physiotherapy team from 83.9% to 85%**
- **Maintain the median number of minutes of OT/PT per day > 32 minutes by December 2023**
 - **Occupational therapy team baseline: 44.2 minutes**
 - **Physiotherapy team baseline: 43.6 minutes**
- **Improve median percentage of inpatient days on which OT/PT is received by December 2023**
 - **Occupational therapy team from 26.5% to 55%**
 - **Physiotherapy team baseline: 35.3% to 60%**

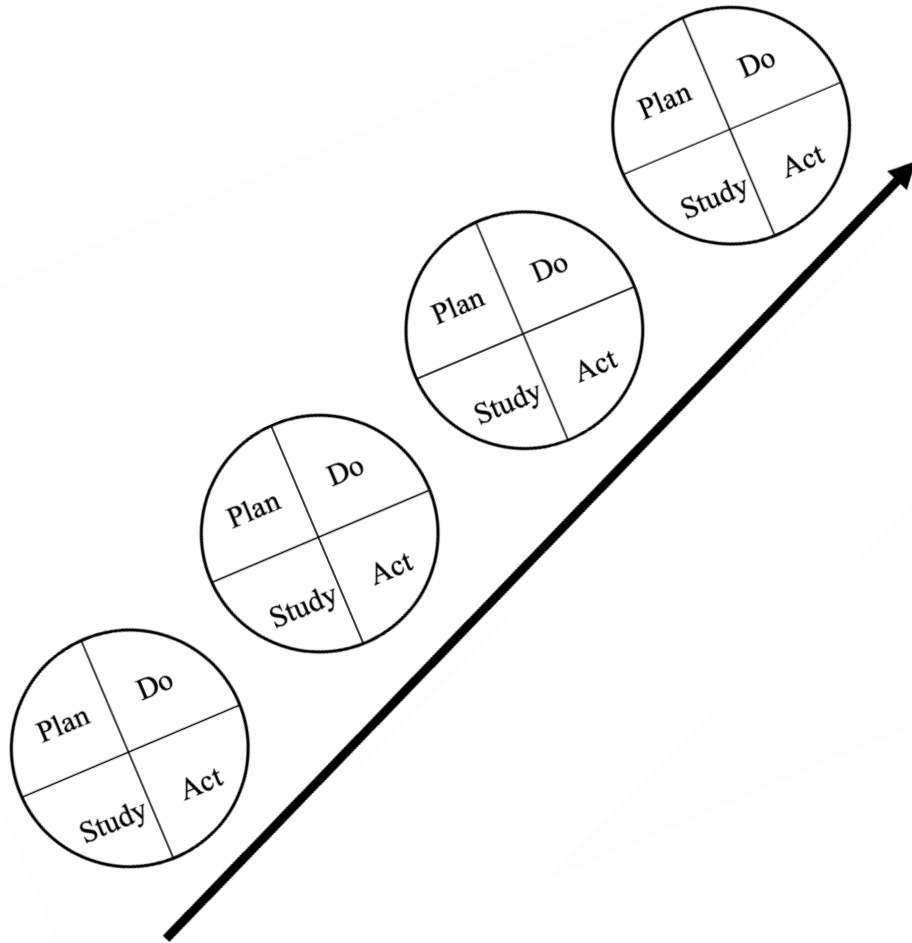
Driver diagram

To improve the stroke therapy service in Lister Hospital, specifically:

- **Improve the percentage compliance against OT/PT targets by December 2023:**
 - Occupational therapy: 35.9% to 65%
 - Physiotherapy: 47.4% to 75%
- **Improve percentage of applicable patients assessed by OT/PT within 72 hours by December 2023:**
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- **Improve the median time from clock start to OT/PT by December 2023:**
 - Occupational therapy: 44:14 to less than 24 hours
 - Physiotherapy: 41:18 to less than 18 hours



Change Ideas



- 1. Improve prioritisation of patients**
- 2. Improve Therapy Support Worker (TSW) allocation of work**
- 3. Improve efficiency and usefulness of therapy meetings**
- 4. Therapy Newsletter (education)**
- 5. Improve access to therapy service across 6-7 days**

Change Ideas

1. Improve prioritisation of patients

Weekday Priorities

Priority	A	B	C	N/A
Clinical Risk	High	Moderate	Low	Nil
Consequence of not responding	Major	Significant	Significant	Insignificant
Likelihood of assessment	Certain	Likely	Possible	Rare
Patient Need	<p>New patient: New confirmed stroke patients who need seeing today to meet <u>18-hour</u> (physio) or 24 hour (OT) SSNAP assessment deadline</p> <p>Chest: Patients requiring urgent chest <u>physiotherapy</u></p> <p>Discharge: Patients who will be medically fit for discharge within the next 24/ 48 hours with outstanding PT/ OT needs (further assessment or referral is required)</p> <p>Referrals: Completion of therapy handover/referrals</p> <p>Rehab: Patients who have active rehab needs and were not seen the previous <u>day</u></p> <p>Patients who have not had 2 qualified sessions over the past 7 days</p>	<p>New patient: New stroke patients who need seeing tomorrow to meet <u>18-hour</u> (PT) or 24 hour (OT) SSNAP assessment deadline</p> <p>New non-confirmed stroke patients who need seeing today to meet <u>18-hour</u> (physio) or 24 hour (OT) SSNAP assessment deadline</p> <p>Rehab: Patients who have active rehab needs who were seen the previous <u>day</u></p> <p>Spasticity: Patients with deteriorating spasticity or complex positioning/ splinting needs (promote to an A today if not seen yesterday)</p>	<p>Rehabilitation activities to maintain patients' current functional status (ensure x 1 qualified session a week)</p> <p>Patients who are medically unwell and who require periodic <u>review</u></p> <p><i>These patients should have a SSNAP stop date recorded</i></p>	<p>Acutely medically unwell, end of life or patients unable to engage in <u>therapy</u></p> <p><i>These patients should have a SSNAP stop date recorded</i></p> <p>Medical patients on Pilton or Barley with no PT/ OT needs</p>

Change Ideas

2. Improve Therapy Support Worker (TSW) allocation

TSW Allocation

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Tasks where minutes are only ascribed to Physiotherapy	Tasks that should be ascribed to both therapies (split time 50/50)	Tasks where minutes are only ascribed to Occupational Therapy
Strengthening exercises (LL) Active assisted exercises (LL) Sensory stimulation (LL) Berg DGI Balance exercises Stairs Mobility practice Thera-bike Transfer practice	SH/SAQ PROM (UL) Hoisting Splinting Active assisted ex (UL) Strengthening ex (UL) Sensory stimulation (UL) WHIM Scanning (general included seated and walking) Saebo MAS GRASP Falls interventions Fatigue management Positioning Outdoor walking mood	O-LOG PADLS Grooming Kitchen practice Toileting Feeding Cognition activities Handwriting/ drawing Visual tasks Social integration Leisure activities

Change Ideas

3. Improve efficiency and usefulness of therapy meetings

The screenshot shows a Microsoft Forms survey titled "Therapy Meetings Feedback". The header is teal with a white title and a three-dot menu icon. Below the title is a note: "Please note that 'therapy meetings' refer to both morning huddle and the afternoon feedback meeting after signposting. Please **DO NOT** give feedback about MDT signposting meeting here." The main content area is white with a teal border. It starts with a "* Required" label. The first question is "1. What is your current role? *". There are three radio button options: "Occupational Therapist", "Physiotherapist", and "Therapy support worker". A teal "Next" button is positioned below the options. At the bottom, there is a small disclaimer: "This content is created by the owner of the form. The data you submit will be sent to the form owner. Microsoft is not responsible for the privacy or security practices of its customers, including those of this form owner. Never give out your password." and a footer: "Powered by Microsoft Forms | [Privacy and cookies](#) | [Terms of use](#)".



The team would appreciate any feedback on these change ideas. Please take your time to answer this short survey by scanning the QR code below or by clicking this link or copying this link in a browser: <https://forms.office.com/e/HKLCYA9KAX>

The screenshot shows a Microsoft Forms survey titled "Barley Therapy Timetabling/Meeting Feedback". The header is orange with a white title and a three-dot menu icon. Below the title is a note: "Please note that 'therapy meetings' refer to both morning huddle and the afternoon feedback meeting after signposting. Please **DO NOT** give feedback about MDT signposting meeting here." The main content area is white with an orange border. It starts with a "* Required" label. The first question is "1. What best describes your role? *". There are three radio button options: "Occupational Therapist", "Physiotherapist", and "Therapy Support Worker". An orange "Next" button is positioned below the options. At the bottom, there is a small disclaimer: "This content is created by the owner of the form. The data you submit will be sent to the form owner. Microsoft is not responsible for the privacy or security practices of its customers, including those of this form owner. Never give out your password." and a footer: "Powered by Microsoft Forms | [Privacy and cookies](#) | [Terms of use](#)".



Please help us improve how we run our meetings by answering a short survey. Please scan the QR code below or by clicking this link or copying the link in a browser: <https://forms.office.com/e/nJQkZBqCXt>

Change Ideas

4. Therapy Newsletter

Issue 1 | May 2023
Stroke Therapy Team
Newsletter

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Stroke Therapy Team Newsletter

About SSNAP

The **Sentinel Stroke National Audit Programme (SSNAP)** aims to improve the quality of stroke care by measuring both the structure and processes of stroke care against evidence based standards.

- SSNAP provides regular, routine, reliable data to:
- Benchmark services nationally and regionally
 - Monitor progress against a background of change
 - Support clinicians in identifying where improvements are needed, and help the, lobby for change and celebrate success
 - Empower patients to ask searching questions

SSNAP Sentinel Stroke National Audit Programme



Why this matters

SSNAP Item	Score	Target
Care coordination	D	A:50%
Audit compliance	D	A:50%
Total KII Score	D	D
D1 Screening	A	A
D2 Stroke Unit	E	E
D3 Therapies	D	D
D4 Specialist Assessments	B	B
D5 Occupational Therapy	D	E
D6 Physiotherapy	D	D
D7 Speech and Language	D	D
D8 Multidisciplinary team working	E	E
D9 Standards by Discharge	B	B
D10 Discharge Process	B	C

Legend: Patient centred (A, B, C), Team centred (D, E)

Source: SSNAP Jan-Mar 2022

National clinical guidelines for stroke recommend providing as much scheduled therapy as possible to stroke survivors. Appropriate patients should be assessed by an Occupational therapist (OT) and a Physiotherapist (PT) within 72 hours of admission and accumulate at least 45 minutes of each appropriate therapy daily at a frequency that enables them to meet their rehabilitation goals. Currently, stroke survivors in hour hospital are not receiving recommended amounts of active therapy against the target.

Change ideas being tested
Improve prioritisation of patients. By prioritising patients to be seen quicker, we will improve the percentage of applicable patients assessed by both OT and PT.
TSW allocation. The intention is to improve clarity of TSW tasks and priorities that should lead to improved efficiency.

In these change ideas survey by scanning the plying this link in a [QR code](#)



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SSNAP performance Therapy QI Project

The therapy QI team have set these aim in January at Pinner Hospital, specifically:
• 80% of patients assessed within 72 hours by: 6% to 85% by June 2023
• 70% of patients assessed within 72 hours by physiotherapy in terms of percentage bed days

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Relevant project measures



By answering a short survey. Please scan the link in a browser:

Improve access to therapy across 6-7 days. The intention is to improve cover across the ward to optimise assessment and treatment of patients within targets, initially using voluntary staff service.

Percentage of patients assessed within 72 hours, both teams have done a survey and achieved 84.7% and 86.5% of their patients within 72 hours

Percentage of inpatient days that PT is assessed within 72 hours is steadily increasing for 7 months (please see charts on the next pages).

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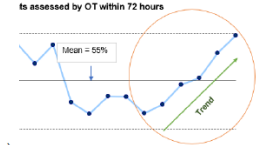
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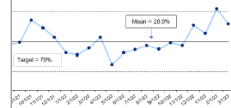
Relevant project measures

OT compliance

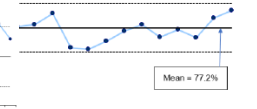
This key indicator represents the percentage of patients who were reported as requiring occupational therapy on the stroke ward (numerator) over all patients on the ward (denominator).
The team has been meeting the target 7 months in a row.
How can we achieve a sustained improvement? If our team would continue to go over 80.8% next month, there will be a **shift** in our data in the direction of good.



Percentage of days as an inpatient on which OT is received



Percentage of applicable patients who were assessed by PT within 72 hours



- This key indicator represents the OT compliance score. This score is influenced by three factors: the percentage of stroke patients requiring OT, the average time that a patient receives OT, and the percentage bed days that an inpatient receives therapy.
- If we continue to work on the key indicators above in the next 4 months, we can also expect a sustained improvement in our overall OT compliance data.

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Relevant project measures



- ##### Length of meetings
- One of the processes that we wanted to improve our therapy meetings. Our intention is to reduce the time spent on meetings and reduce the number of people attending the meetings to create the capacity.
 - In Barley, the baseline total amount of time that we spend for meetings was 63.5 minutes. Since we started timetabling, we now spend 60.5 minutes/day on meetings. We are optimistic that this can further be reduced in the next months. In Pilton, we spend about 62.2 minutes/day on meetings.

"Alone we can do so little; together, we can do so much."
- Helen Keller

We are looking for people who can help us in any capacity with the project. Any contribution will be much appreciated. If you are interested, please let us know.
Claire Wells, Lead Occupational Therapist
Julia Sartorius, Lead Physiotherapist



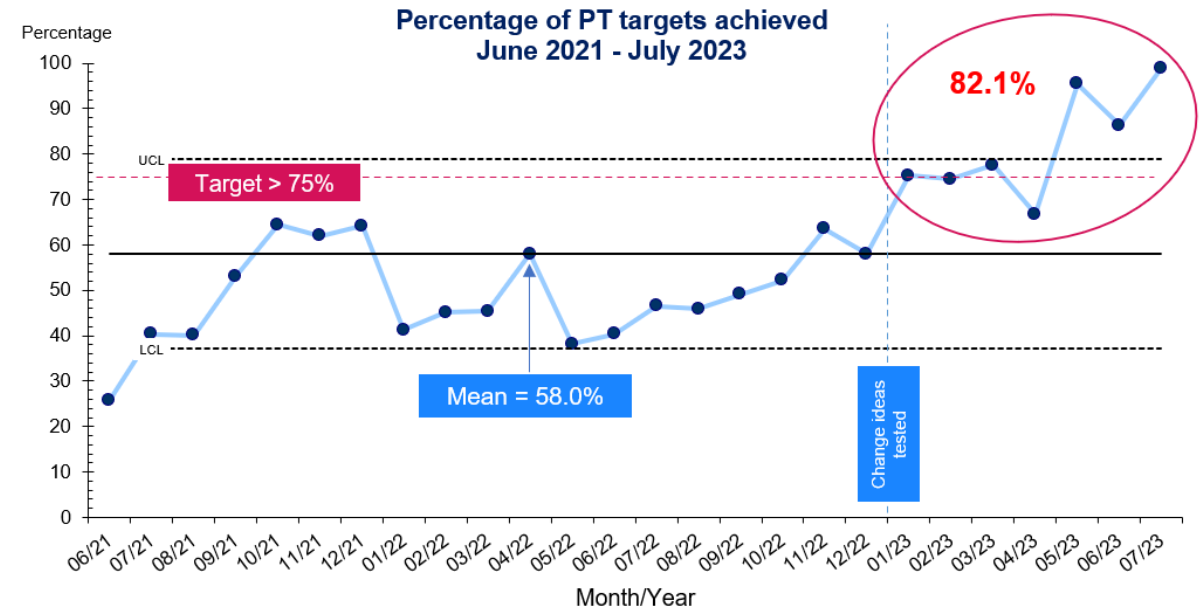
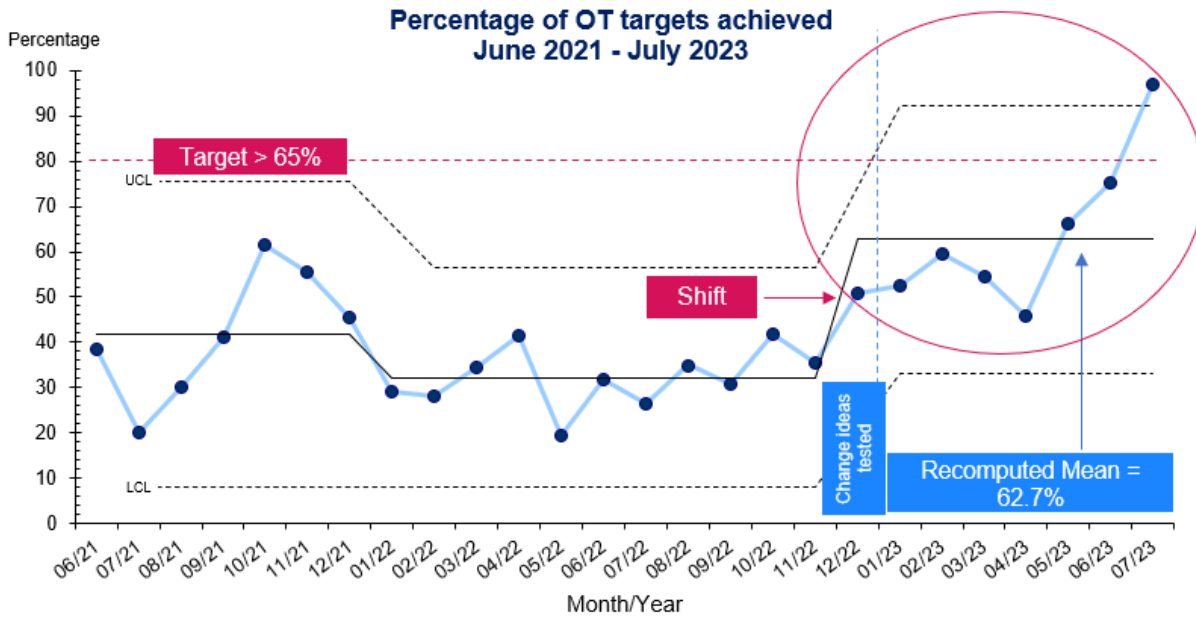
Change Ideas

5. Improving access to therapy across 6-7 days



The story so far – Outcome measures

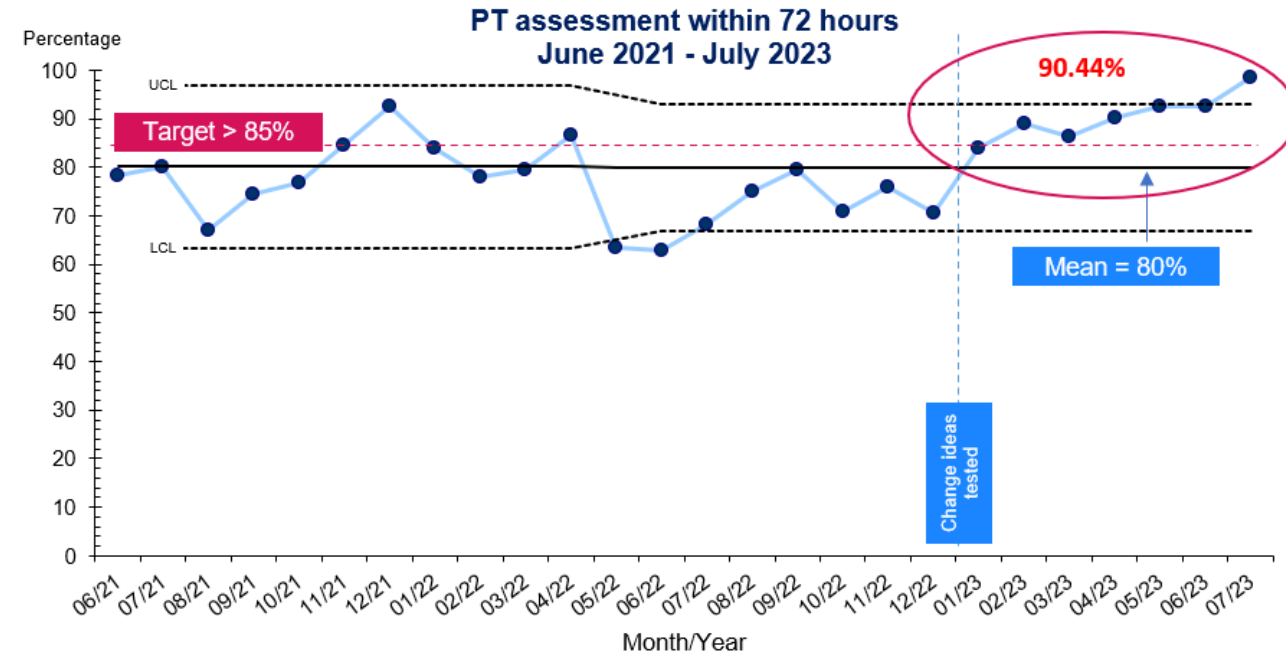
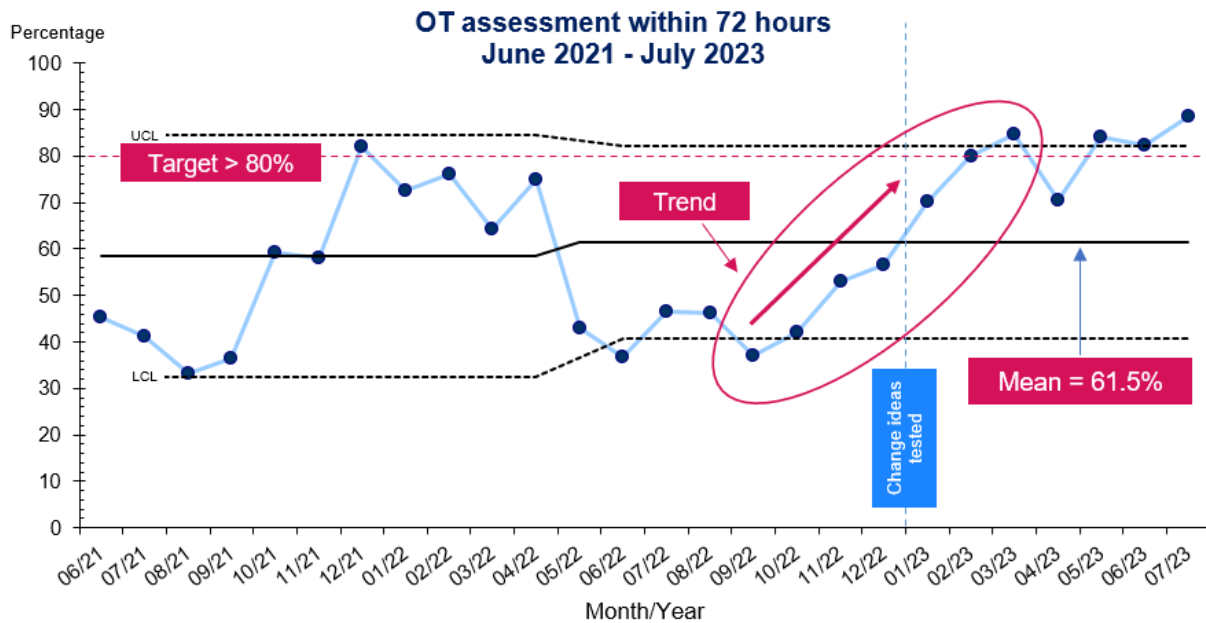
- Improve percentage compliance against OT/PT targets by December 2023
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The story so far – Outcome measures

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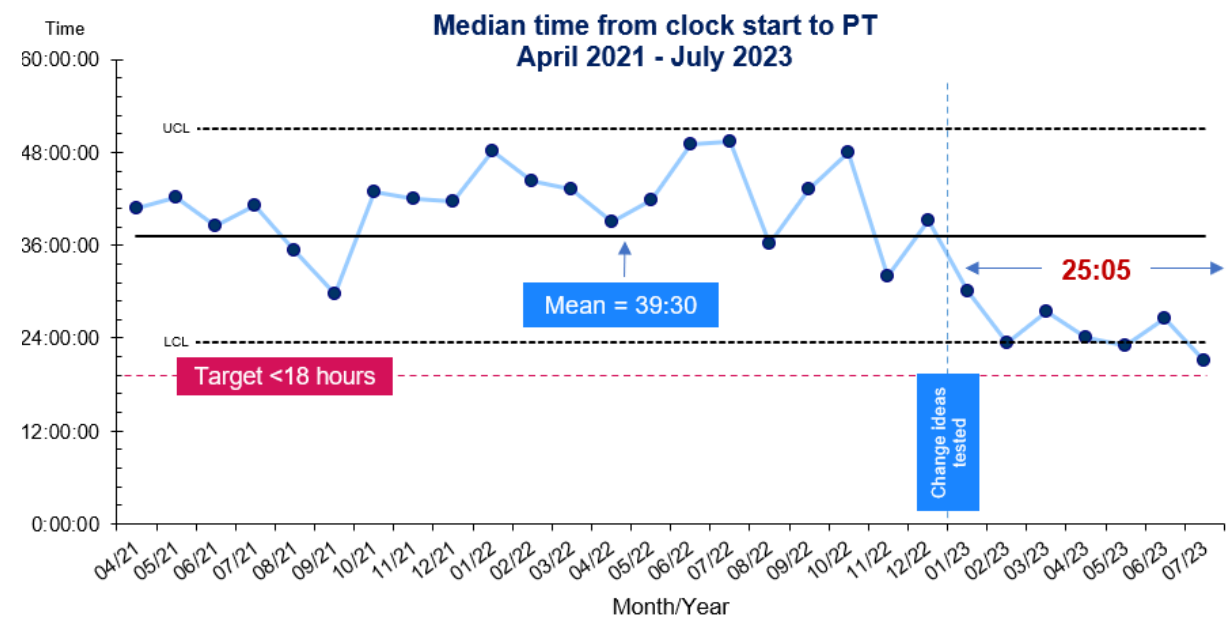
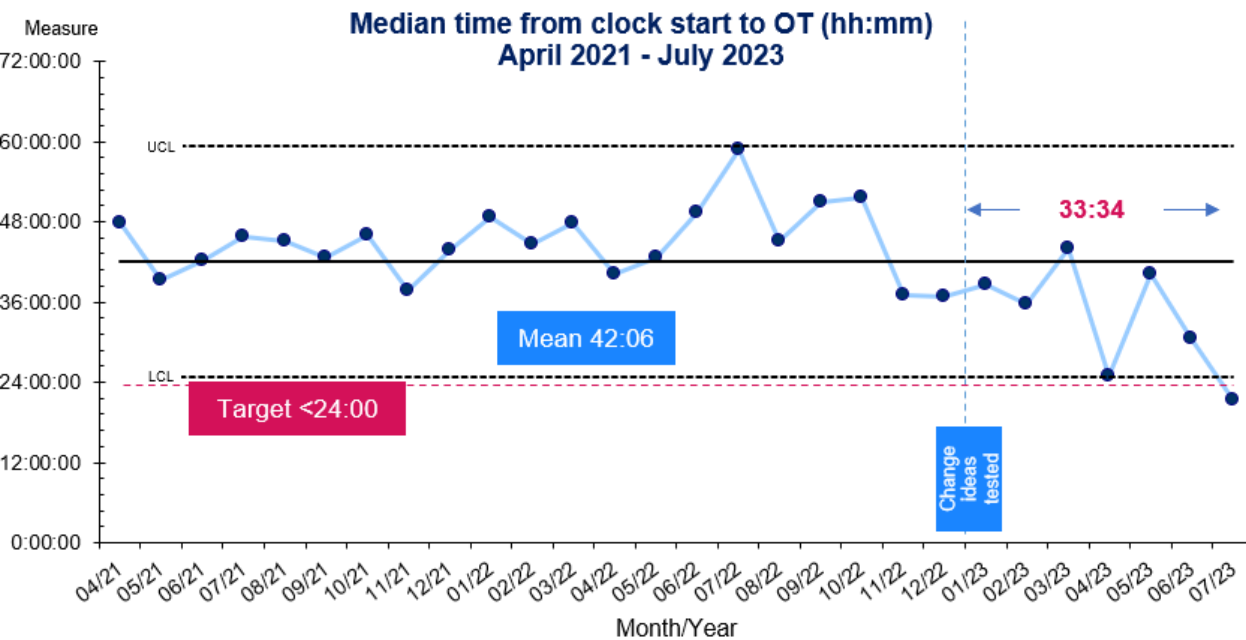
- Improve the percentage of applicable patients assessed by OT/PT within 72 hours by December 2023 by the:
 - Occupational therapy team from 55.4% to 80% - D/C
 - Physiotherapy team from 76.8% to 85% - C/B



The story so far – Outcome measures

To improve the stroke therapy service in Lister Hospital, specifically:

- Improve the median time from clock start to OT/PT by December 2023
 - Occupational therapy team from 44:14 to less than 24 hours - D
 - Physiotherapy team from 41:18 to less than 18 hours - C



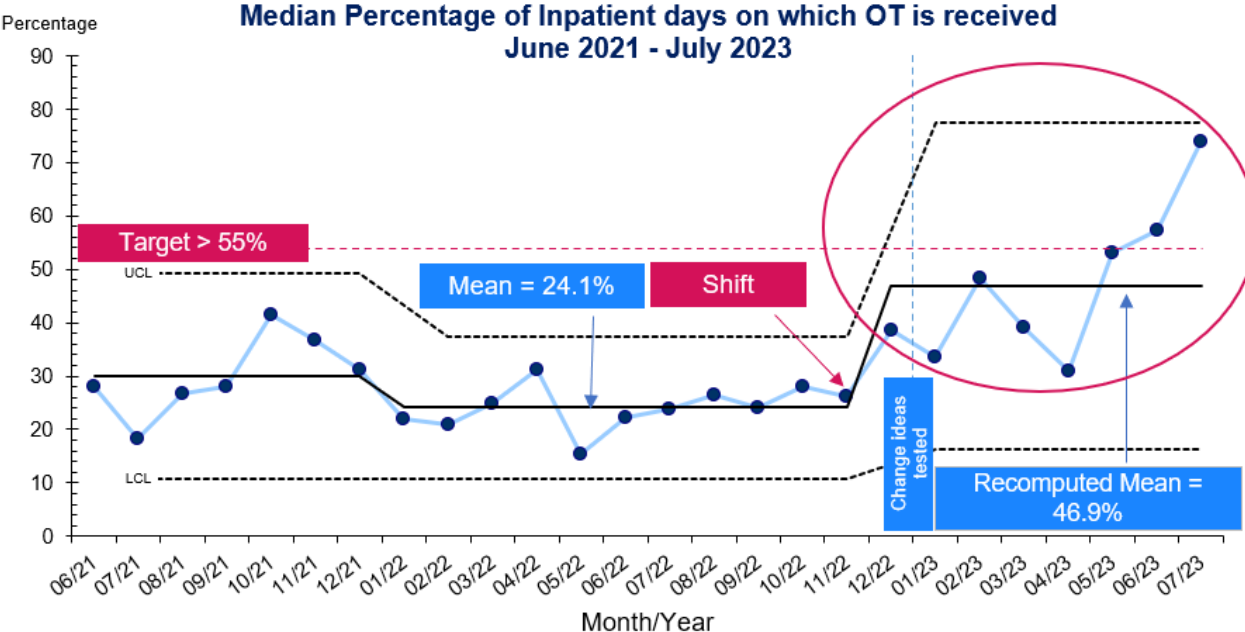
The story so far – Process measures

- **Improve the percentage of patients reported as requiring therapy by December 2023**
 - Occupational therapy team from 77.3% to 80%, now: 89.7% - A
 - Physiotherapy team from 83.9% to 85%, now: 93.5% - A
- **Maintain the minutes of OT/PT > 32 minutes by December 2023**
 - Occupational therapy team baseline: 44.2 minutes, now: 42.1 minutes - A
 - Physiotherapy team baseline: 43.6 minutes, now: 41.9 minutes - A

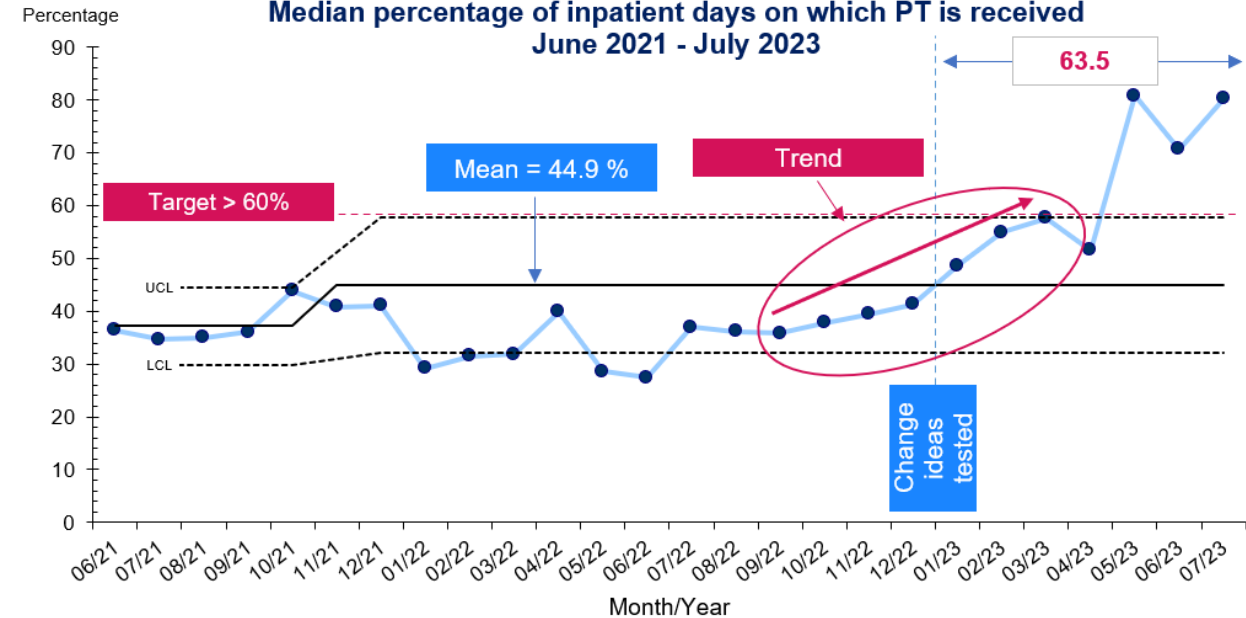
The story so far – Process measures

- Improve median percentage of inpatient days on which OT/PT is received by December 2023
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 - Physiotherapy team baseline: 35.3% to 60% - C/B

Median Percentage of Inpatient days on which OT is received
June 2021 - July 2023

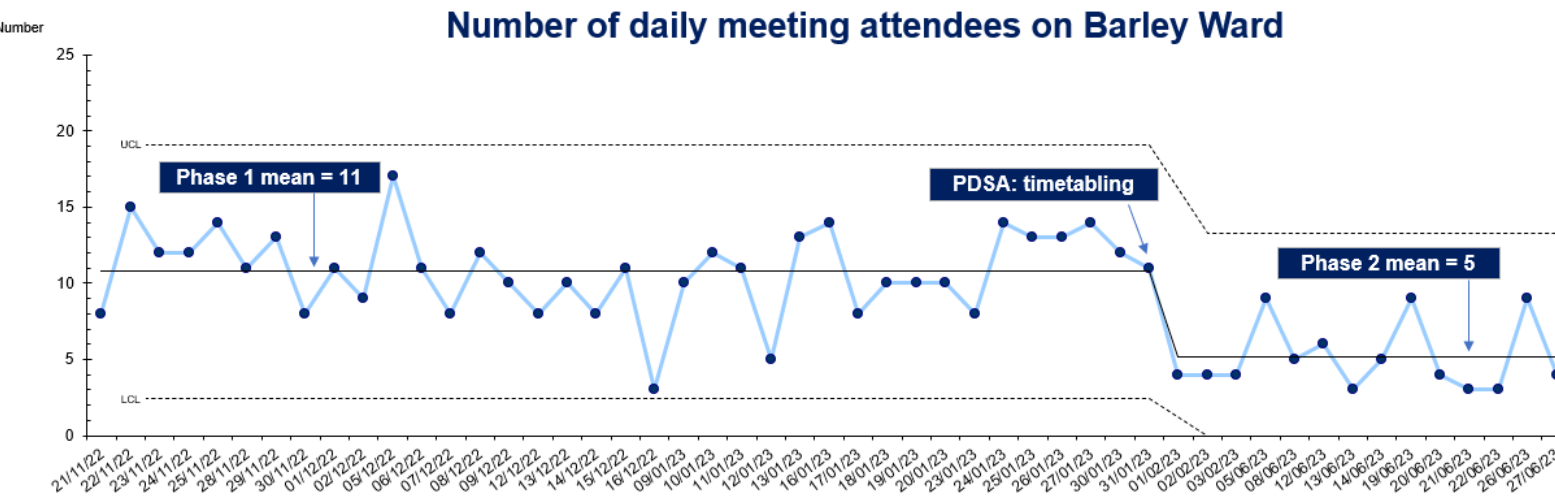
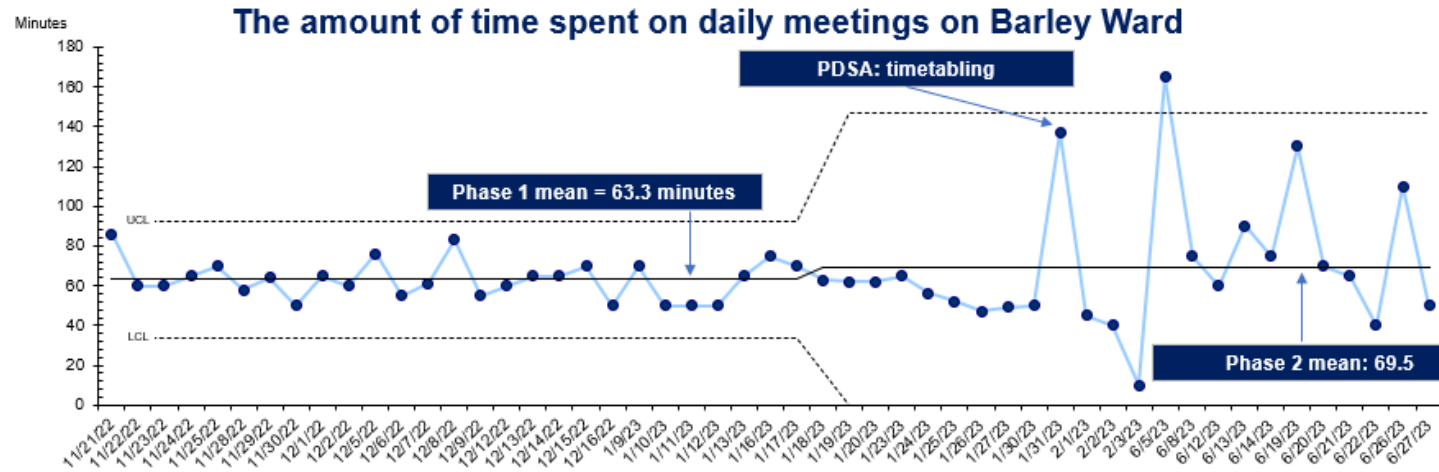


Median percentage of inpatient days on which PT is received
June 2021 - July 2023



Other measures

Length of meetings and the number of daily attendees on Barley Ward



Pre-timetabling
63.3 minutes x 11
members of staff =
696.3 minutes

Post timetabling
69.5 minutes x 5
members of staff =
347.5 minutes

The story so far – SSNAP rating

SSNAP Domains	Month/Year				
	Jan - Mar 2022	Apr - Jun 2022	Jul - Sep 2022	Oct - Dec 2022	Jan - Mar 2023
SSNAP score	D	D	D	D	D
D5. Occupational Therapy	E	E	E	D	C
D6. Physiotherapy	D	D	D	C	B
D8. Multidisciplinary team working	E	E	E	E	D

In summary

The Wins

- Met over 50% of our intended targets
- More efficient ways of working
- More knowledgeable team, improved morale and team working
- A culture of change

The Learning

- Maintaining momentum and engagement can be challenging
- Measurement can absorb time of busy clinicians – trial and error approach
- The QI team are an amazing resource – there is always somewhere to go for help
- What works for one team may not work for another



Next steps

- New Stroke Guidelines – considering the impact
- Minimise duplication of processes
- Use data set to understand impact of other variables
- Expand study of domain 8 (goals, SLT)
- On-going joint working with MDT
- Move to a 7 day service
- Incorporate patient feedback

A yellow sticky note is positioned on the right side of the slide, tilted slightly. It features the text "What's Next?" written in a blue, hand-drawn, sketchy font. The note is held in place by a grey corner tab at the top left. The background of the slide is white, and the text is black.

PROJECT TEAM

- Julia Sartorius, Lead Physiotherapist
- Claire Wells, Lead Occupational Therapist
- Czar Cacanindin, QI Coach

Acknowledgements

- Georgina Rees, SSNAP Coordinator
- Lister Stroke Therapy Team
- Lister Stroke Service

