

Stroke Rehabilitation NHS Derby City and NHS Derbyshire County Briefing for Derby & Derbyshire Overview & Scrutiny Committees

Reforming stroke rehabilitation is a major focus of the National Stroke Strategy. NHS Derbyshire County and NHS Derby City have been working closely with local clinicians, social care and stroke survivors on the development of stroke services

Importantly, the group has developed an agreed care pathway for stroke. The major part of the pathway for patients who have had a stroke is rehabilitation. Part of rehabilitation takes place in acute hospitals when a patient is first admitted with a stroke; part takes place in other inpatient settings (such as community hospitals); and part takes place in the community. Different contracts are in place with different providers to provide different parts of the pathway.

Several things have informed the proposed improvements to stroke care.

National Stroke Strategy

The National Stroke Strategy sets out a number of quality markers, the following are the key areas impacting on the rehabilitation part of the pathway.

Quality Marker 10 – High Quality Specialist Rehabilitation

People who have had a stroke access high quality rehabilitation, and with their carer, receive support from stroke skilled services as soon as possible after their stroke, and be available in hospital, immediately after transfer from hospital and for as long as they need it.

Quality Marker 12. Seamless Transfer of Care

Individuals have a clear and workable discharge plan responding to an individual's circumstance

Quality Marker 13 Long Term care and Support

A range of services are in place and easily accessible to support the individual long term.

Quality Marker 14 Assessment and review

People who have had a stroke and their carers will be offered a review of health and social care needs within 6 weeks of discharge home and again 3 and 6 months after discharge.

This is supported by the clinical evidence that the outcome for individuals is much improved if they the have treatment from specialist staff.

Engagement Feedback

Having talked to a number of stroke survivor groups we had some clear issues raised with the current and past services.

There were many positive comments often relating to Individual therapist or nurses offering excellent care, and services provided good experiences, whilst people were receiving them.

Some of the less positive comments stated that people could be left feeling isolated and could lose contact with services, especially for those seen as having lower needs. People often struggled to know who to contact and how, and some staff did not understand the needs of stroke patients.

A number of issues were identified with the current services:

- There is no clear continuity of care, across the providers.
- Patients do not necessarily receive all the rehabilitation that they need as soon as they need it, or delivered by staff that have the right stroke specialist skills.
- Patients can become 'stuck' at different parts of the pathway because of lack of communication between providers or lack of clear protocols to govern transfers. Also people can get lost in the system, and can struggle to access the appropriate support.
- There may be duplication in assessments.
- Individual providers do not fully understand the resources that are available in the next part of the pathway, and are unsure how and where to access help, this is also applicable to service users.

The Stroke Commissioning Group, which is joint agency group, has developed a service specification for a single stroke rehabilitation pathway to improve stroke rehabilitation services across Derby and Derbyshire. We believe this is a service development with a basis in the consultation on the National Stroke Strategy.

Key aspects of the specification:

• Single Point of Access

There will be one telephone number and stroke hub which will be accessible to patients and carers so they can access appropriate support and interventions. This will also ensure all patients have appropriate follow up at 3 and 6 months.

• Pathway

The providers will collaborate together under a responsible provider model to ensure the smooth running of the pathway.

Providers will also ensure there is a proactive process to ensure people are cared for in the community rather than acute settings.

Inpatients Rehabilitation

This will ensure that there are in-patients facilities for stroke patients that meet the requirements to deliver specialist rehabilitation in two localities in the north and two in the south. Currently there is one specialist unit in the north and one in the south.

• Early Supported Discharge

This will be a new service where community services are enhanced to be able to deliver stroke specialist care to people to enable quicker discharge home, and delivery of stroke specialist rehabilitation at home.

Community Rehabilitation

There will be stroke specialist staff that can see people in the community. This may also mean better access to a specialist outpatient services.

• Stroke Co-ordination

There will be enhancements to the current services, by partnership working with Derbyshire County Council who has received specific monies to support this part of the pathway. Derbyshire County Council tendered for these services and Derbyshire Community Health Services were successful. This will provide increased numbers of staff who can see patients' longer term, support their self care and rehabilitation, and maximise their independence. In Derby city a Project Officer for stroke services has been appointed whose role is to improve the access to services for stroke patients.

Service User Engagement

To begin the engagement process, we propose to develop three service user engagement events, to be held in the first week of August 2010. One event will be held in north Derbyshire, one in south Derbyshire, with a third event to be held in Derby city to reflect the diversity of that population. Key stakeholders, including support groups, would be invited to this event to hear about, discuss and make comment on the details of the proposals for the rehabilitation services.

By early August, we expect proposals would be far enough developed to help us present a coherent story of the current situation and elements which are proposed to change or improve. This timescale would also give us the opportunity to assess our proposals against any suggestions made through the events.

The events would be coordinated by a planning group, involving commissioners, providers and key stakeholder representatives. The structure of the event would include:

- Outline presentations by commissioners to describe the stroke pathway (including acute phase) and to establish that the event is to discuss care after day 8 of the pathway; "the rehabilitation" phase.
- Presentations from each provider on their role in this process and an overview of the proposals for service and pathway development.
- Table discussions, facilitated by providers (where staff are trained), consultation staff from local authorities and PPI staff from each Trust, each discussing a key element of the pathway, care setting or other identified areas.

Link to the East Midlands proposals

The East Midlands acute stroke project is focussed on the first seven days of stroke care. The Derby city and Derbyshire rehabilitation specification starts at the end of this period, although the threshold of seven days is a guide only and not a decision rule. The rehabilitation specification requires providers to ensure there is integration of the acute and rehabilitation pathways.