





#### What is the Stroke QI Programme all about?

The global aim of the Stroke Clinical Quality Programme is to improve outcome and experience of care of stroke patients in NHS Lothian.

The focus so far has been on the parameters which have the best evidence for having an effect on patient outcomes, e.g. access to integrated stroke unit care, swallow screening, brain imaging, acute aspirin use, delivery of thrombolysis, delays to assessment in specialist neurovascular clinics and early carotid intervention.

There are 3 Integrated Stroke Units (ISU) across NHS Lothian:

2 x 22 bedded units at the Royal Infirmary (RIE)

1 x 24 bedded at the Western General Hospital (WGH)

1 x 22 bedded unit at St John's Hospital (SJH)

A lot of work has been done to look at patient pathways and to map current clinical care processes and identify where there are opportunities to reduce variation. Other improvement opportunities have also been identified and improvement projects using QI methodology are being carried out.

Staff have been attending the QI Academy to learn about QI methodologies and as part of the course they deliver an improvement project to allow them to apply the learning and

develop a deeper understanding of QI applications.

The Clinical Quality Improvement programme has been running since 2016 under the guidance of Dr Nikki Maran, the QI clinical lead alongside Lesley Morrow, QI improvement advisor/project manager. The programme sits under the guidance of the Stroke Services Quality Improvement Board (SSQIB) which is jointly chaired by Dr Andrew Coull, AMD, MOE and Stroke Medicine and Sheena Muir, Hospital & Hosted Services Manager, Edinburgh H&SCP, and is held on the first Tuesday of every month.

# Fantastic Feedback at National Meeting

On Thursday August 30th 2018 the stroke team from SJH were invited to present their QI work at the National Stroke Audit meeting which was held at The Royal College of Physicians and Surgeons of Glasgow. The team did 3 presentations; first up was Megan Reid, service improvement

the success of the Stroke Bundle Nurse role in ED and AMU; then Wendy Juner, stroke physiotherapist, presented the project which she and Emma Barnes did on Supported Discharge; and last but by no means least Debbie Heaney,

manager at SJH who presented on Chest, Heart and Stroke (CHSS) nurse, presented her project on ensuring that no stroke or TIA patients miss out on the support that is offered by the Chest Heart and Stroke team in West Lothian. Turn over to read more about some of these projects.

# Early project

One of the early projects, carried out by Mark Smith, Consultant AHP in Stroke, whilst attending the first ever Quality Academy course, looked at an early supported discharge model. The project focused on RIE and WGH patients who would benefit most from rehabilitation in their own home setting. The rehabilitation

for these patients was then provided by the integrated care teams from the Edinburgh Health and Social Care partnership (HSCP). Over the course of the project the model worked well and Length of Stay(LOS) for this patient group was reduced. However due to restructuring of the Edinburgh HSCP this project

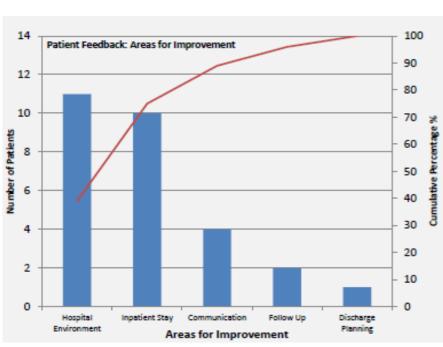
was unable to continue. The learning from this approach was not lost and the East Lothian HSCP have are now offering this model of care to suitable patients – working closely with the hospital teams to identify suitable patients for this pathway.

# Patient experience at St Johns ISU

At the Integrated Stroke Unit (ISU) in St Johns when Wendy Juner, stroke physiotherapist, and Emma Barnes, stroke occupational therapist, embarked on the QI Academy skills course back in early 2017 little did they know where their QI journey would take them. They were keen to use patient experience to guide their QI work and so their project was

to gather the experience of patients who had been treated on the unit in recent years and were back living in the Debbie Heaney, CHSS nurse for West Lothian they identified patients who were willing to be involved and through focus groups and interviews. The information they received was

community. With the support of



Everybody should be encouraged to go home...things you don't see, don't expect to have problem's with. Imagine all you want. Until you are in the situation you just don't know.'

**Patient** 

not at all what they expected and so they set about addressing what the feedback had highlighted.

Patient feedback told them that being rehabilitated in the hospital environment did not sufficiently prepare them for being back in their own home environment.

Emma and Wendy were keen to address this issue and they set about looking at how they could address this issue. At the end of 2017 when the winter funding was being allocated they decided to use the money in a different way and so their next QI project was born...

#### Supported Discharge Project at St Johns ISU

The team utilised the funding available to fund 0.8 WTE OT and 0.2 WTE PT –the individuals involved had prior experience with stroke patients which was felt to be essential for the project. This was also supported with inpatient therapy resource and CRABIS (community rehabilitation and brain injury service) rehabilitation assistants. The aim of the project was to; reduce the number of inpatient therapy days for patients on SJH Stroke Unit, where there are no other barriers to discharge.

So patients not awaiting a care

package would be discharged home and then be rehabilitated in their own home. The project was a resounding success and LOS on the unit for the period of the project was reduced from a mean of 25.2 days for the same period last year to a mean of 13.6 days. The project results were shared at a meeting of West Lothian PDSP and Extended Management Team. This resulted in funding being provided until the end March 2019.

The next steps are to recruit staff and recommence the service,

re-establish clear criteria and formalise relationships with the main stakeholders.

Very happy to be home, was concerned initially about coping.'

**Patient** 

A couple of patients cancelled their package of care very quickly, we had not expected that!

Member of SJH stroke team

# Optimising physical gains following rehab

Meanwhile at the ISU at the WGH another QI Academy graduate Fiona Johnson stroke PT has been looking at patients whose discharges are delayed. Once patients are no longer receiving PT their levels of activity tend to decline while waiting on ward for discharge. This can lead to their physical attainment deteriorating before they leave the ward. The aim of the project is to maintain level of activity

throughout day for patients no longer receiving PT intervention. The project is aimed at stroke patients who are mobile independently or with minimal support e.g. walking aid or assistance of 1 and involves the whole team such as a walk with the doctors on the ward round. Maintaining good levels of mobility can reduce constipation, UTIs, potentially falls and resulting injury and any resulting delays to

discharge. In order to encourage patients there are various routes displayed on the ward such as the Royal Mile, 5km walk around Arthurs Seat and the route from Edinburgh to Glasgow along the Caledonian Canal. Some patients have also been using the exercise bike to clock up the miles.

#### **Current QI Academy**

Currently on the 2 cohorts running are 3 members of the stroke teams from the WGH and the RIE.

Eilidh Hannan, a nurse from ISU at WGH is looking at reducing isolation for stroke patients on the ward through increased use of the dayroom and organised activities.
Nicola Hedley OT from WGH and
Anna Redpath PT from RIE are
jointly looking at goal setting as
well as project whereby patients in
the RIE ISU in active rehab can be
transferred to the ISU at the WGH

to continue their rehab journey where capacity issues at the RIE could mean their rehab is compromised. All great projects and we will be hearing more about their progress in the next edition.

#### Chest, Heart and Stroke Service in W Lothian

This project was carried out by Debbie Heaney, CHSS nurse for West Lothian, as part of her QI Academy Skills course.

In 2016/17 the number of Stroke/TIA patients discharged from SJH was greater than the number referred to the CHSS Nurse service.

The aim of the project was to improve referral process for ALL Stroke/TIA patients seen at SJH, to ensure they had access to the specialist advice, information and support that this service offers.

A test of change was done using the ICD coding and weekly reports being sent to the CHSS nurse resulted in an increase in the numbers of Stroke/TIA patients referred.

More work is needed to develop a more robust pathway, and to monitor any impact in may have, on how the service is delivered to these patients across Lothian.

# Goal setting project at St Johns ISU

Also as part of her QI Academy Skills course Irene Davidson, stroke occupational therapist, tackled an issue using quality improvement methodology. The aim of Irene's project was to improve the communication and goal setting process for Stroke patients and carers on the Stroke Unit. Patients and carers have highlighted that communication can be variable. Stroke rehabilitation requires a structured process that considers the patients personal goals and empowers them during the process.

Fosters a culture of collaborative risk taking and management between staff and relatives '

Member of SJH Stroke Team

#### **Stroke Programme Contact**

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Each stroke unit has its own QI team which meets regularly.

The team at RIE meets on the first Thursday of each month. The meeting is held in the seminar room outside Ward 101 from 12:00—13:00.

The WGH team meets twice monthly every second and fourth Thursday in the seminar room on ward 50 from 10:00—11:00.

The SJH team meet once every 4 weeks on a Monday in the Education Centre, 1st floor, from 15:00—16;30.

The teams use these meetings to share progress on the various QI projects. Lesley attends all the meetings and shares progress and learning from the other sites.

