

HYPER ACUTE STROKE SERVICES AT CHESTERFIELD ROYAL HOSPITAL

Background

- The NHS Long Term Plan (2019) identified stroke as a clinical priority for the next 10 years.
- Chesterfield Royal Hospital (CRH) along with many other stroke service providers face significant challenges in delivering these ambitions.
- Ensuring the availability of the appropriate workforce, in particular the consultant workforce, is perhaps the greatest challenge that stroke service providers face.

Improvement Plan

- CRH has been working hard to improve its stroke services and has developed a Stroke Improvement Plan to respond to the immediate challenges of:
 - Staffing and workload
 - Improving clinical leadership and presence
 - Governance mechanisms
- The Trust has made significant progress against the plan:
 - Latest Hospital Standardised Mortality Ratio (HSMR) for stroke demonstrates a reducing trend, within the expected range since Dec 2019.
 - Significant investment in the nursing workforce.
 - Sentinel Stroke National Audit Programme rating has improved from an overall C rating (Sept 20) to a **B** rating in the last two reporting periods (Dec 20 & Mar21). Reflects that the Trust is providing a good service for patients.

Medical Workforce Risk

- The Trust has successfully recruited a long term locum Consultant Stroke Physician; however this does not mitigate in its entirety the risk to the sustainability of the Hyper Acute Stroke Unit (HASU) because of medical workforce availability.
- Contingency plan implemented to mitigate short-term service risks. All surrounding trusts have signed up to the plan.

Options for Consideration

- The Chesterfield Royal Hospital's Hyper Acute Stroke Unit provision continues as is delivered by the existing substantive Consultant, locum support and telemedicine
- The current Hyper Acute Stroke Unit service at Chesterfield Royal Hospital is strengthened by redesign
- Chesterfield Royal Hospital introduces a review and convey model; a model where patients are assessed and treated within the Accident and Emergency Department followed by immediate transfer to a Hyper Acute Stroke Unit
- Decommission the Chesterfield Royal Hospital Hyper Acute Stroke Unit element of the Stroke Service pathway, with patients being directed to either a single Hyper Acute Stroke Unit provider or multiple providers noting alternative providers are Sheffield Teaching Hospital NHS Foundation Trust, University Hospital of Derby and Burton NHS Foundation Trust and Sherwood Forest Hospital NHS Foundation Trust and for a small number of patients Stockport NHS Foundation Trust
- Review of the Chesterfield Royal Hospital Hyper Acute Stroke Unit service as part of a wider East Midlands review to rationalise sites; continuing to provide the service 'as is' at Chesterfield Royal Hospital in the meantime

Task & Finish Group Progress

- The Derbyshire Stroke Delivery Group recommended a task and finish group is established to lead a service review and options appraisal of the HASU service.
- To manage the potential conflict of interest between members, Dr Deborah Lowe (NHSE/I National Clinical Director for Stroke) was appointed as Independent Chair.
- Commenced from May 2021, the task and finish group meets monthly to agree key actions to drive the programme forward and reports directly to the Derbyshire Stroke Delivery Group.
- An initial set of future delivery model options are being discussed and debated regarding their viability as options to fully appraise through the process.
- To support the identification of the preferred option and to provide transparency on decision making, an outcome matrix and criteria is being developed.

Next Steps; Timeframes

- 06 October 2021 - Hyper Acute Service Review Task and Finish Group Meeting - Key Milestone; to finalise the approach and content of the workshop
- Mid October- date yet to be confirmed - Option Appraisal Workshop. Key Milestone; to produce a comprehensive document for review and scrutiny by an independent panel
- Post Workshop - date to be confirmed. Key Milestone; to make a recommendation to Derbyshire Stroke Delivery Group of a preferred option