NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

QUALITY STANDARD TOPIC OVERVIEW

1 Quality standard title

Stroke

This quality standard will update the NICE quality standard for stroke (QS2), which was identified as needing an update during the 2014 annual review of published quality standards, due to a change of potential development sources.

2 Introduction

2.1 NICE quality standards

NICE quality standards are a concise set of prioritised statements designed to drive measurable quality improvements within a particular area of health or care.

The standards are derived from high-quality guidance, such as that from NICE or <u>accredited</u> by NICE. They are developed independently by NICE, in collaboration with health, public health and social care practitioners, their partners and service users. Information on priority areas, people's experience of using services, safety issues, equality and cost impact are considered during the development process.

NICE quality standards are central to supporting the Government's vision for a health and social care system that is focused on delivering the best possible outcomes for people who use services, as detailed in the <u>Health and Social</u> Care Act (2012).

The quality standard development process is described in detail on the <u>NICE</u> website.

2.2 This topic overview

This topic overview describes core elements of the quality standard. These include the population and topic to be covered, key source guidance to be used to underpin potential quality statements, any related quality standards, published current practice information and national or routine indicators and performance measures.

If the source guidance is not NICE guidance, it should meet the minimum quality criteria defined in NICE's <u>accreditation programme</u>.

3 This quality standard

This quality standard is expected to publish in April 2016.

3.1 Population and topic to be covered

This quality standard will cover diagnosis and initial management, acutephase care, rehabilitation and long-term management of stroke in adults (over 16).

It will update the existing quality standard for stroke.

3.2 Key development sources (NICE and NICE-accredited sources)

Primary source

- Stroke rehabilitation: Long-term rehabilitation after stroke (2013) NICE guideline CG162
- Stroke: Diagnosis and initial management of acute stroke and transient ischaemic attack (TIA) (2008) NICE guideline CG68

Other sources that may be used

- Royal College of Physicians (2012) <u>National clinical guideline for stroke</u>
- Scottish Intercollegiate Guidelines Network (2010) <u>Management of patients</u>
 with stroke: Rehabilitation, prevention and management of complications,
 and discharge planning

Scottish Intercollegiate Guidelines Network (2008) <u>Management of patients</u>
 with stroke or TIA: Assessment, investigation, immediate management and secondary prevention

Key policy documents, reports and national audits

Relevant policy documents, reports and national audits will be used to inform the development of the quality standard.

- Royal College of Physicians (2015) <u>Sentinel stroke national audit</u>
 programme (SSNAP): Clinical audit July September 2014 public report
- National audit office (2010) <u>Department of Health: Progress in improving</u> <u>stroke care</u>

3.3 Related NICE quality standards

Published

- Falls in older people (2015) NICE quality standard 86
- Transient loss of consciousness (2014) NICE quality standard 71
- <u>Faecal incontinence</u> (2014) NICE quality standard 54
- Anxiety disorders (2014) NICE quality standard 53
- Hypertension (2013) NICE quality standard 28
- Nutrition support in adults (2012) NICE quality standard 24
- Patient experience in adult NHS services (2012) NICE quality standard 15
- Depression in adults (2011) NICE quality standard 8
- Stroke (2010) NICE quality standard 2

In development

- Atrial fibrillation. Publication expected July 2015
- Lipid modification. Publication expected September 2015
- <u>Cardiovascular risk assessment.</u> Publication expected September 2015

Future quality standards

This quality standard will be developed in the context of all quality standards referred to NICE, including the following quality standards scheduled for future development:

- Falls: prevention
- Medicines optimisation
- Neurological problems
- Primary prevention: population and community based primary prevention strategies, including the role of A&E, at different stages of the life course.

The full list of quality standard topics referred to NICE is available from the quality standard topic library on the NICE website.

4 Existing indicators

QOF indicators for England 2015/16

- QOF indicator STIA001. The contractor establishes and maintains a register of patients with stroke or TIA
- QOF indicator STIA003. The percentage of patients with a history of stroke or TIA in whom the last blood pressure reading (measured in the preceding 12 months) is 150/90 mmHg or less
- QOF indicator STIA007. The percentage of patients with a stroke shown to be non-haemorrhagic, or a history of TIA, who have a record in the preceding 12 months that an anti-platelet agent, or an anti-coagulant is being taken
- QOF indicator STIA008. The percentage of patients with a stroke or TIA
 (diagnosed on or after 1 April 2014) who have a record of a referral for
 further investigation between 3 months before or 1 month after the date of
 the latest recorded stroke or the first TIA
- QOF indicator STIA009. The percentage of patients with stroke or TIA who have had influenza immunisation in the preceding 1 August to 31 March

Indicators from the NICE QOF menu (not included in the QOF for England 2015/16)

 NICE menu indicator <u>NM69</u>. The percentage of patients aged 79 or under with stroke or TIA in whom the last blood pressure reading (measured in the preceding 12 months) is 140/90 mmHg or less NICE menu indicator <u>NM60.</u>The percentage of patients with a stroke shown to be non- haemorrhagic, or a history of TIA whose last measured total cholesterol (measured in the preceding 15 months) is 5mmol/l or less

CCGOIS indicators for England 2014/15

- People who have had a stroke who:
 - are admitted to an acute stroke unit within four hours of arrival to hospital
 - receive thrombolysis following an acute stroke
 - are discharged from hospital with a joint health and social care plan
 - receive a follow-up assessment between 4-8 months after initial admission
 - spend 90% of more of their stay on an acute stroke unit

5 Further information

See the NICE website for more information about <u>NICE quality standards</u> and the <u>progress of this quality standard</u>.