



Tuesday, 07 November 2017

## West Yorkshire and Harrogate stroke care update

This information has been produced to give everyone an update on West Yorkshire and Harrogate stroke care.

Working closely with our partners and keeping the public updated is an essential part of our stroke work and we want to keep you regularly updated so that you have the opportunity to discuss developments as they progress.

### Overview

We are looking at how we develop good care to prevent strokes, deliver effective care when people suffer a stroke and ensure that there is good support and rehabilitation for people after a stroke.

Our focus has been on improving 'hyper acute' stroke and 'acute' stroke services (hyper-acute refers to the first few hours and days after the stroke occurs) and making sure all stroke care services are 'fit for the future'. This is one of the priority pieces of work in the draft West Yorkshire and Harrogate Sustainability and Transformation Plan (STP). You can read more [here](#).

We are using evidence from the [stroke strategic case for change](#) and our own engagement programme to support this work. For example, there is strong evidence that outcomes following stroke are better if people are treated in specialised centres, which treat a minimum and maximum number of strokes per year, even if this increases travelling time. This is also in line with the 7 day hospital standards specific to hyper acute stroke. In parallel, ongoing care and support should be provided at locations closer to where people live and they should be transferred to these as soon as possible after initial treatment.

### Work to date

- In February and March 2017 we carried out initial stroke engagement work. This was led by Healthwatch and over 1,500 comments were received. You can read the report and supporting information [here](#).
- A clinical summit, made up of specialist stroke doctors, nurses, therapists etc., took place in May 2017. This highlighted there were opportunities to standardise how we provide care.
- On the 4 July 2017 the outcome of the engagement work and strategic case for change was presented to the West Yorkshire and Harrogate Joint Committee of the 11 Clinical Commissioning Groups (meeting in public). You can find out more about the work of the Joint Committee [here](#).
- On the 3 October 2017 the outcome of progress to date and next steps was considered by the West Yorkshire Association of Acute Trusts (WYAAT) Committee in Common



## Current work

The work we are currently doing falls into two categories:

- Work to prevent strokes. In particular, using the best evidence of how we treat atrial fibrillation across West Yorkshire and Harrogate (atrial fibrillation causes a fast and erratic heartbeat which is a major factor of stroke.) This work is about detecting and treating people who are at risk of stroke so that around 9 in 10 people with atrial fibrillation are managed by GPs with the best local treatments, saving lives and delivering efficiencies too. Our engagement work also highlighted the importance of further improving awareness of the signs and symptoms of stroke.
- Developing proposals to determine the 'optimal' service delivery models, standardised pathways and clinical standards for our specialist stroke services (the care our patients receive in the first few hours and days after having a stroke)

We continue to incorporate feedback from other key stakeholders into our work. This includes West Yorkshire and Harrogate Clinical Forum, [West Yorkshire Association of Acute Trust](#) (WYAAT Committee in Common), medical directors and the Yorkshire Ambulance Service who have access to the skills and expertise to carry out travel time analysis.

We are also working with stakeholders in other areas e.g. South Yorkshire and Bassetlaw and Humber Coast and Vale to learn from their work. We have had further discussions with the [Yorkshire and Humber Clinical Senate](#) to seek their views and expertise on clinical evidence to inform our work. Our work to date has been subject to review by NHS England as part of the assurance process.

## Next steps

- The Joint Committee of the 11 Clinical Commissioning Groups met in public on the 7 November. A stroke update was given. You can read the paper [here](#).
- Further work with partners, stakeholders including voluntary and community organisations, public, patients and unpaid carers will follow. We will involve as many people as possible in these conversations so that everyone can have their say.
- It is also important to note that no decision at this stage of our review process has been made about the number of units across West Yorkshire and Harrogate.
- We will progress the work over the coming months with the view to making a decision in spring 2018 on the readiness to consult with the public.

**We look forward to having further conversations around how best we move forward together over the coming months. Further information will be shared here.**

