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## Media Release

### **Patients receive excellent stroke care at the RUH**

Patients who have suffered a stroke are receiving some of the best care in the country at the Royal United Hospital.

The hospital has been assessed as being in the top 25% of acute organisations for the quality of stroke care. The findings were revealed in the Royal College of Physicians' Sentinel Stroke National Audit Programme report which measures all hospitals against eight aspects of stroke care to provide an overall score – the RUH's total score was 80.9, well above the national median of 73.3.

In particular, the report found that we excel at the quality of care given to patients on our specialist Acute Stroke Unit, and in our provision of the clot-busting drug treatment thrombolysis, which is available 24/7.

Consultant Stroke Physician Dr Louise Shaw says: "We are delighted that the improvements we have made in our stroke care and the hard work of our staff have been recognised. We have transformed our stroke service in recent years, and the improvements we have introduced have made a real difference to the lives of patients who have suffered a stroke, and their families.

"Patients are being assessed quicker, specialised treatment is being started sooner, and patients are being allowed home earlier to continue their recovery with the help of specialist teams – all of which gives them the best possible chance of making a very good recovery."

The report follows the hospital's Stroke Research Team being highly commended in the Team of the Year category at the National Institute for Health Research's awards at the end of last year, in recognition of their success in embedding research culture into day-to-day clinical care.

## Notes to Editors

The Sentinel Stroke National Audit Programme assesses acute hospitals against the following eight domains of stroke service organisation:

- Acute care – the presence of up to seven features representing quality of care for stroke units treating patients within the first 72 hours.
- Organisation of care – location of stroke patients in the hospital on the day of the audit, ratio of stroke unit beds to stroke patients, etc.

- Specialist roles – frequency of consultant ward rounds, access to clinical psychologists, etc.
- Interdisciplinary services – ratio of nurses and therapists to beds on the stroke unit.
- Transient ischaemic attack / Neurovascular clinic – the time the transient ischaemic attack (or mini stroke) service can see, investigate and initiate treatment for all high and low risk patients.
- Quality improvement, training and research – report on stroke services produced for the organisation's trust board, presence of a strategic group responsible for stroke and membership, clinical research studies.
- Team meetings – frequency of formal team meetings.
- Communications with patients and carers – patient access to their management plan, quality of patient information provided.

To read the full Sentinel Stroke National Audit Programme report, go to <http://www.rcplondon.ac.uk/projects/ssnap-acute-organisational-audit>

**Ends**