

Developing a New Care Models (NCM) initiative to improve stroke services in Wessex: Conceptualisation of an evaluative framework

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Introduction

In line with national stroke policy, a key objective of a Wessex based NCM stroke services initiative, is to improve consistency of stroke services, providing availability and access to high quality stroke treatment, care and rehabilitation, prioritising the needs of the patient¹.

The Centre for Implementation Science at the University of Southampton worked in partnership with Wessex Academic Health Science Network to undertake an evaluation of Developing One NHS in Dorset stroke services workstream, as part of the overall evaluation of Developing One NHS in Dorset.

Aim

The aim of the study is to evaluate staff views, perceptions and experiences of the main changes involved in developing a NCM initiative to improve stroke services in Wessex, and to understand the perceived barriers and enablers to implementation.

Methods

Conceptualisation of the aim of the evaluation involved utilising the following methodological tools:

- A survey with respondents (n=18) from a range of occupations including managers, doctors, nurses and allied health professionals across three hospital sites and a wider engagement team.
- Semi-structured interviews (n=12) with participants (n=8) from a range of occupations including managers, doctors, nurses and allied health professionals across two hospital sites.
- Emerging analytical themes from (i) and (ii) guided the analysis of stroke performance using data available from the Sentinel Stroke National Audit Programme (SSNAP)².

Results

The evaluation showed that participants reported positively on the development of the NCM initiative (key interrelated thematic findings presented in Figure 1). Quantitative findings revealed that the main areas of development included: i. *89% of respondents agreeing that the development of the initiative is making/will make a difference to the lives of patients receiving stroke care* and ii. *72% of respondents reporting that they had made changes to how they work with colleagues in the development of the initiative*. An example of how one of the themes shaped the analysis of stroke performance data (Domain 8: Multidisciplinary Team Working)², is provided in Figure 2.

Figure 1. Circle of main interrelated themes

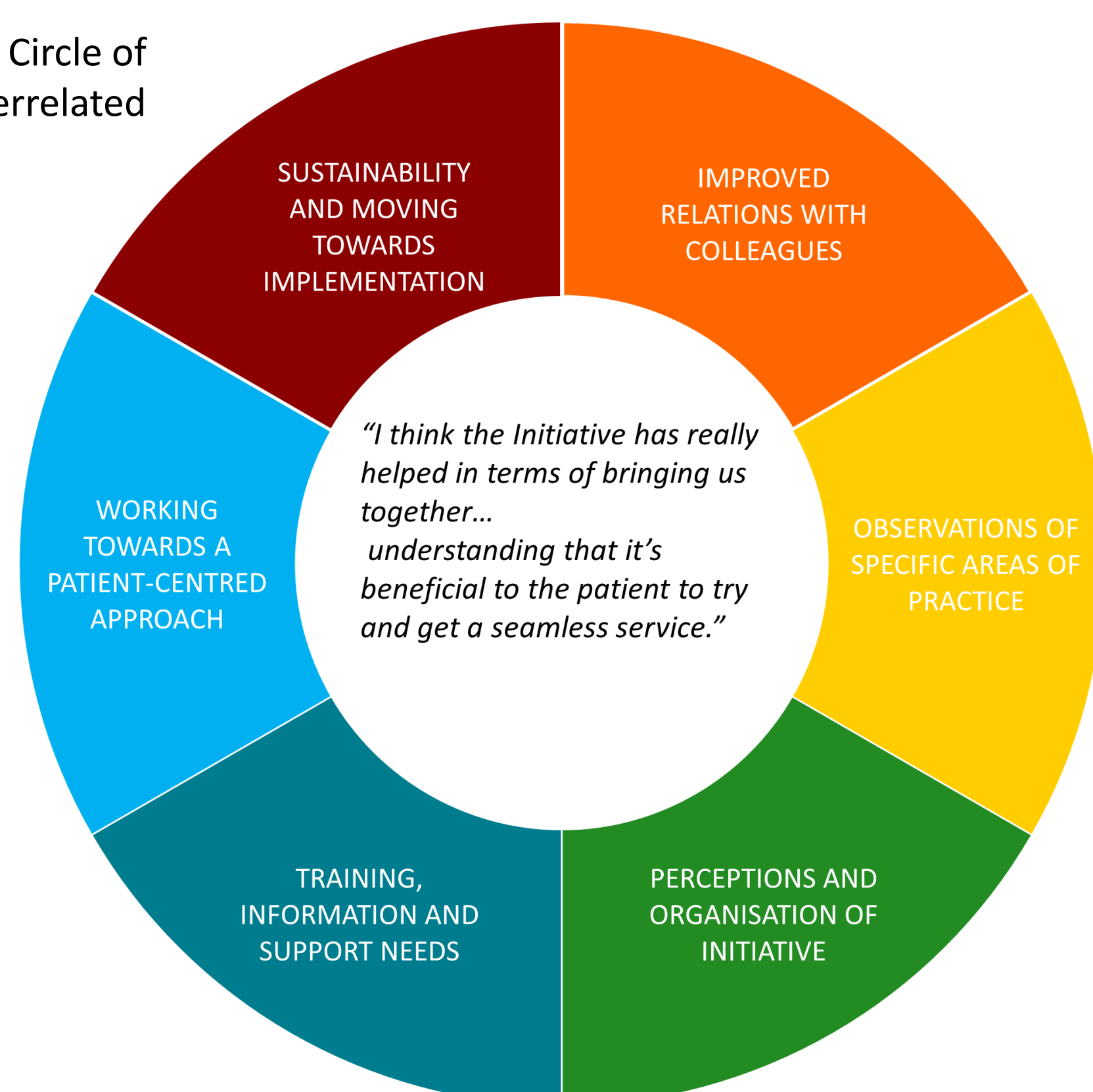
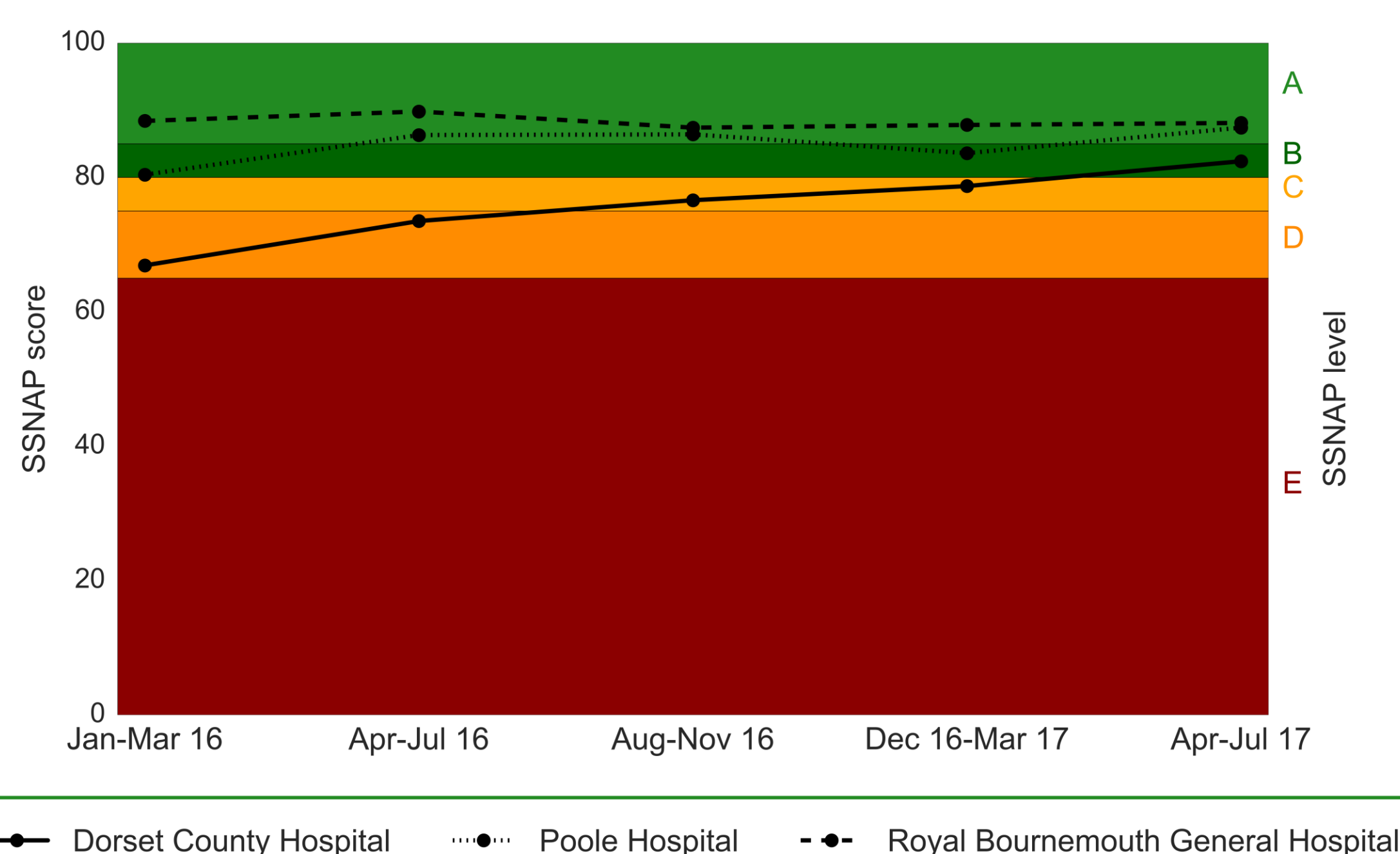


Figure 2. Multidisciplinary Team Working

(SSNAP level Grading: A= first class service, B= good or excellent in many aspects, C= reasonable overall-some areas require improvement, D= several areas require improvement, E= substantial improvement required)



Conclusions

Conceptualisation of an evaluative framework using mixed methods tools yielded thematic insights into the development of the NCM initiative. Examples of further areas to develop include ensuring involvement of all relevant staff within the hospital and community, involvement of patients and carers and provision of 'protected' staff time, resources, training and support.

- Department of Health (2007). National Stroke Strategy. Available from The National Archives: http://webarchive.nationalarchives.gov.uk/20130105121530/http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyandguidance/dh_081062 [Accessed August 2017]
- Royal College of Physicians, Sentinel Stroke National Audit Programme (SSNAP), Clinical Audit. Available from: <https://www.strokeaudit.org/results/Clinical-audit.aspx> [Accessed January 2017]