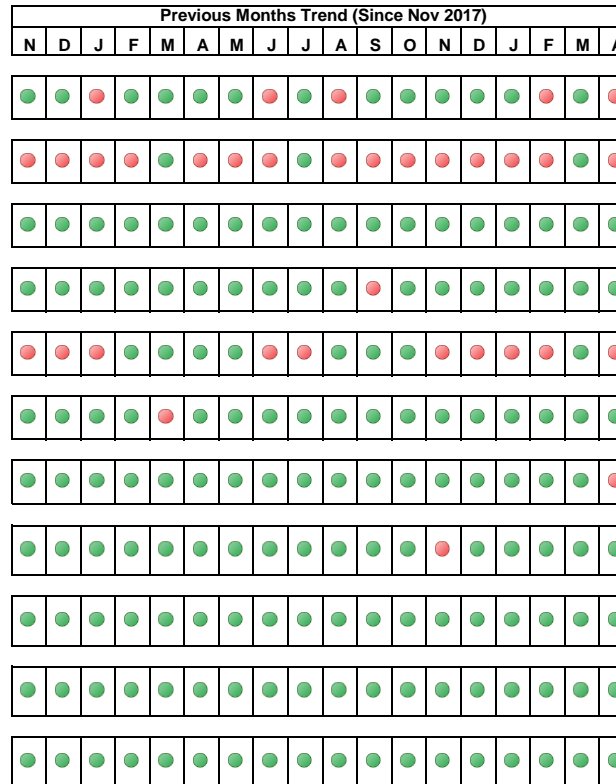
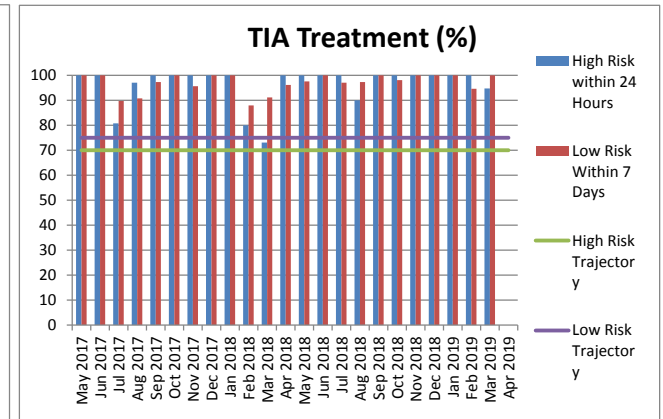
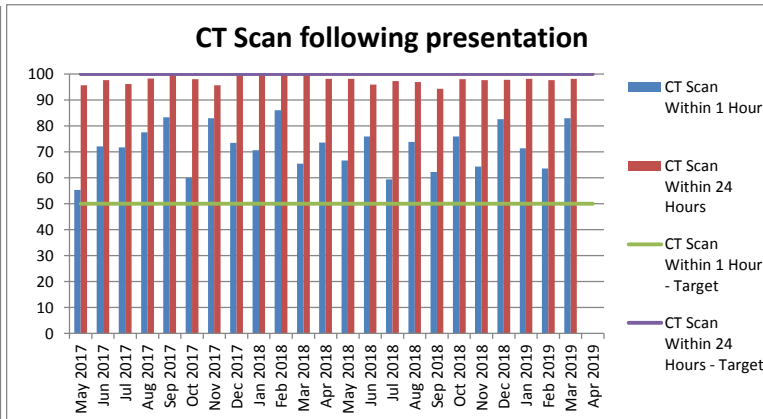
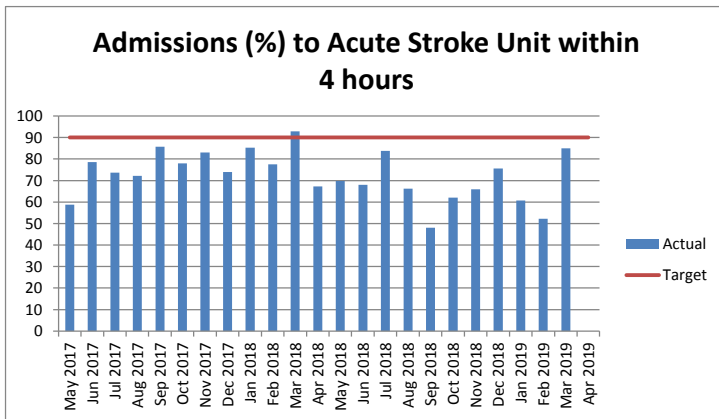


Clinical Effectiveness - Stroke Care & Cardiology

Data Source	Data Quality	PerfFrame work	Indicator	Measure	Trajectory	
					Year	Month
3		National	5WD: Pts spending >90% stay on Acute Stroke Unit	=> %	90.0	90.0
3		National	5WD: Pts admitted to Acute Stroke Unit within 4 hrs	=> %	80.0	80.0
3		National	5WD: Pts receiving CT Scan within 1 hr of presentation	=> %	50.0	50.0
3		National	5WD: Pts receiving CT Scan within 24 hrs of presentation	=> %	95.0	95.0
3		National	5WD: Stroke Admission to Thrombolysis Time (% within 60 mins)	=>	85.0	85.0
3		National	5WD: TIA (High Risk) Treatment <24 Hours from receipt of referral	=>	70.0	70.0
3		National	5WD: TIA (Low Risk) Treatment <7 days from receipt of referral	=>	75.0	75.0
3		National	Stroke Admissions - Swallowing assessments (<24h)	=> %	98.0	98.0
9		National	Primary Angioplasty (Door To Balloon Time 90 mins)	=> %	80.0	80.0
9		National	Primary Angioplasty (Call To Balloon Time 150 mins)	=> %	80.0	80.0
9		National	Rapid Access Chest Pain - seen within 14 days	=> %	98.0	98.0



Data Period	Month	Year To Date	Trend
Apr 2019	88.5	88.5	
Apr 2019	50.8	50.8	
Apr 2019	68.9	68.9	
Apr 2019	98.4	98.4	
Apr 2019	66.7	66.7	
Apr 2019	100.0	100.0	
Apr 2019	73.9	73.9	
Apr 2019	100.0	100.0	
Apr 2019	95.2	95.2	
Apr 2019	95.5	95.5	
Apr 2019	100.0	100.0	



The stroke indicators in the IPR are based on 'patient arrivals' not 'patient discharged' as this monitors pathway performance rather than actual outcomes which may / may not change on discharge. National SSNAP is based on 'patient discharge' which is more appropriate for outcomes based reporting. Both are valid but designed for slightly different purposes, however they will align overall, especially over a longer period of time (eg annually)