

Reconfiguration of acute stroke services in Kent and Medway

Purpose of briefing

The purpose of this briefing is to update the Medway Health and Adult Social Care Overview and Scrutiny Committee (HASC) on the reconfiguration of acute stroke services in Kent and Medway.

Overview of the reconfiguration of acute stroke services

The Kent and Medway Stroke Review was commissioned in response to concerns by Kent and Medway Clinical Commissioning Groups (CCGs) about the performance and sustainability of hospital stroke services across all units in Kent and Medway. The CCGs and hospital trusts were tasked with developing proposals to improve outcomes for patients, reducing deaths and disability.

The review recommended a model of care involving specialist stroke services consolidated at three hospitals, each with a hyper-acute stroke unit (HASU) and an acute stroke unit (ASU), to ensure rapid access to specialist staff, equipment, and imaging to improve quality and outcomes for patients.

HASUs enable patients to have rapid access to the right skills and equipment and be treated 24/7 on a dedicated stroke unit, staffed by specialist teams. Following a stroke, a patient will be taken directly to a HASU where they will receive dedicated expert care, including immediate assessment, access to a CT scan and clot-busting drugs (if appropriate) within 30 minutes of arrival at the hospital.

ASUs are for subsequent (after 72 hours) hospital care. These units offer ongoing specialist care with seven-day therapies services (physiotherapy, occupational therapy, speech and language therapy and dietetics input) and effective multi-disciplinary team (MDT) working.

Following the consolidation of stroke units onto three sites, service performance has increased significantly. Data from the Sentinel Stroke National Audit Programme (SSNAP), which measures the quality and organisation of stroke care in the NHS,




Reconfiguration of acute stroke services in Kent and Medway

demonstrates the improvement across provider organisations. Further improvements are anticipated following the implementation of the three HASUs.

SSNAP ratings pre and post consolidation of stroke units

Hospital	Dec 16 - Mar 17	April - Jul 17	Aug - Nov 17	Dec 17 - Mar 18	Apr - Jun 18	Jul - Sep 18	Oct - Dec 18	Jan - Mar 19	Apr - Jun 19	Jul - Sep 19	Oct - Dec 19	Jan - Mar 20	April - Jun 20	Jul - Sep 20	Oct - Dec 20	Jan - Mar 21	April - Jun 21	Jul - Sep 21	Oct - Dec 21	Jan - Mar 22	April - Jun 22	Jul - Sep 22	Oct - Dec 22	Jan - Mar 23	April - Jun 23	Jul - Sep 23	Oct - Dec 23	Jan - Mar 24	April - Jun 24
DVH	D	D	D	E	D	D	D	D	C	D	D	D		C			D	C	B	B	B	B	C	C	B	B	B	C	B
QEQM	D	C	D	D	D	D	D	D	D	C	D	D																	
WHH	C	B	B	B	B	C	C	D	D	C	D	D																	
K&C														A			A	A	A	B	B	B	A	A	A	A	A	A	A
MGH	A	A	B	B	B	B	A	A	B	B	C	D		A			A	A	B	B	B	A	B	A	A	A	A	A	A
TWH	C	C	C	C	C	B	C	B	C	C																			
MMH	D	D	D	E	E	E	E	D	D	D	E	E																	

 Clinical audit was suspended for the duration of this quarter.

Progress to date

The reconfiguration is being funded by the Kent and Medway health system from the capital allocation over a multi-year period. Due to the scale of the programme, it will be delivered in two phases, with Dartford and Maidstone included in Phase 1 and East Kent in Phase 2.

Phase 1 capital works at Dartford and Maidstone are complete. The MTW unit officially opened in May and DGT's in September. The focus is now on completing the recruitment needed to deliver the hyperacute model of care.

Development of the East Kent scheme is ongoing, with the unit scheduled to open in April 2027.

Increase in stroke beds

The number of stroke beds established through the review has increased from that agreed in December 2017. Given the time span between decision making and implementation, the Clinical Effectiveness Group (CEG) undertook a review of the clinical model and activity assumptions within the OBC to ensure they remain robust.

The review concluded that an **additional 13 beds** were required, bringing the **total number of stroke beds in Kent and Medway to 137**. MTW now has 49 stroke beds, while bed numbers at DGT remain the same as previously agreed (34 beds) following a reduction in the volume of activity transferring from Bexley.

Reconfiguration of acute stroke services in Kent and Medway

Table 1: Impact of the updated bed model

	DGT			MTW			EKHUFT			K&M		
	HASU	ASU	Total	HASU	ASU	Total	HASU	ASU	Total	HASU	ASU	Total
2022 bed review	10	24	34	14	35	49	15	39	54	39	98	137
2017 bed review	10	24	34	11	27	38	15	37	52	36	88	124
Increase	0	0	0	3	8	11	0	2	2	3	10	13

Bexley activity

The Kent and Medway catchment area has altered with the establishment of a HASU at Dartford as it is quicker for Bexley patients to access the stroke service at DVH. The service for Bexley patients is planned to commence from the end of October 2024.

- The pathway for patients with a suspected stroke in Greenwich, Lewisham and Bromley remains unchanged, and patients from these populations will continue to be cared for at a London site
- Patients in Bexley currently treated at Kings College Hospital in Denmark Hill will continue to be treated at this site as it is hypothesised that the primary reason for these patients being treated there is major trauma rather than travel time
- 100% of Bexley patients currently seen in DVH and PRUH will be included in the scope for the Kent and Medway catchment area.

Impact on workforce

As part of the reconfiguration of acute stroke services in Kent and Medway, significant investment in the workforce has been agreed to support the new units. The model requires staffing 24 hours a day, seven days a week by a multidisciplinary team of medical, nursing and allied health professionals, as well as effective management and support teams.

Each provider has developed detailed recruitment plans to fill the posts. Plans include employing 'grow your own' strategies' through career progression and development, local and international recruitment and collaborating with local universities. Recruitment to full establishment is ongoing.

Phase 2: East Kent

The designs for East Kent scheme have been revised which has impacted the timeline for delivery. Establishment of the unit at the William Harvey Hospital is now scheduled for April 2027.

Overview of programme timeline

The reconfiguration of acute stroke services has taken many years. The pace of the programme has been impacted by issues including:

- The duration of legal and statutory processes
- The covid pandemic and emergency service changes. The stroke review was paused to focus on the system-wide response
- The lack of availability of national capital. The scheme has been financed through NHS Kent and Medway's annual capital allocations, which has meant the works have been phased over multiple years to be affordable.

An overview of the timeline of programme highlights is detailed below:

Dec 2014	Stroke review launched.
Dec 2016	Case for change and vision finalised following significant pre-consultation stakeholder engagement.
Dec 2017	Completion of options development and appraisal, and agreement of the clinical model. The first Joint Committee of CCGs in Kent and Medway is established to develop the future arrangements for acute and hyper-acute stroke services.
Feb 2018	The CCGs publish the pre-consultation business case (PCBC) and undertake formal consultation into the proposed service changes.
Feb 2019	Joint CCG announces preferred option to create three HASUs at Dartford, Ashford and Maidstone. Submission of the Decision-making business case (DMBC) to NHSEI.
Mar 2019	Joint CCG decision referred to the Independent Reconfiguration Panel (IRP). Assurance process for DMBC is paused as a result.
Apr 2019	Applications for judicial review into the Joint CCG's decision launched.
Oct 2019	Temporary emergency service change: The acute stroke service at Pembury Hospital in Tunbridge Wells is transferred to Maidstone Hospital.
Feb 2020	Judicial review outcome: High court ruled in favour of the proposed service changes.
Apr 2020	Temporary service change due to COVID: The acute stroke service provided by EKHUFT at William Harvey Hospital and Queen Elizabeth the Queen Mother Hospital is transferred to the Kent and Canterbury Hospital.
Jul 2020	Temporary emergency service change: The acute stroke service at Medway Hospital was transferred to Maidstone Hospital and Darent Valley Hospital.

Reconfiguration of acute stroke services in Kent and Medway

Nov 2021	Approval to proceed with stroke reconfiguration from Secretary of State following the referral to the IRP.
April 2023	Commence review of all previous assumptions within the decision-making business case to ensure all remain valid and robust given delays to the programme and impact of the pandemic.
August 2022	Phase 1 schemes (MTW and DGT) commence early draw down of capital to increase the pace of the programme and maintain the updated timeline. Phased capital works start Sept 2022.
Winter 2022 /2023	All building works cease from Dec to April to enable the winter response.
April 2024	MTW HASU opens.
August 2024	DGT HASU opens.
April 2027	EKHUFT unit at William Harvey Hospital scheduled to open.