

Ref: FOI/GS/ID 4947

Please reply to:
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Freedom of Information Act 2000

I am writing in response to your request for information made under the Freedom of Information Act 2000 in relation to Stroke prevention.

You asked:

1) How much money has your trust spent on stroke prevention awareness over the following time periods?

1st August 2017 to July 31st 2018

1st August 2016 to July 31st 2017

1st August 2015 to July 31st 2016

2) How many stroke diagnoses were there in your trust over the following time periods?

1st August 2017 to July 31st 2018

1st August 2016 to July 31st 2017

1st August 2015 to July 31st 2016

3) How many deaths resulted from strokes in your trust over the following time periods?

1st August 2017 to July 31st 2018

1st August 2016 to July 31st 2017

1st August 2015 to July 31st 2016

4) How many deaths from strokes were judged to have been preventable in the following time periods?

1st August 2017 to July 31st 2018

1st August 2016 to July 31st 2017

1st August 2015 to July 31st 2016

Trust response:

1) As a secondary care trust we will advise patients on hypertension, AF, smoking etc., we would be unable to estimate the cost solely for stroke prevention.

2) The below figures are for admissions of patients with a primary diagnosis of I61* (Intracerebral haemorrhage), I63* (Cerebral Infarction) or I64X (Other Stroke).

2015-08 to 2016-07: 752

2016-08 to 2017-07: 739

2017-08 to 2018-07: 833

- Dates are driven by admission date

3) The below figures are for patients defined above with a discharge method of Died (this is the crude mortality rate for Stroke diagnosis). This will count stroke patients who may have died of other causes (cancer or infection) and miss patients who were discharged alive but died shortly after

2015-08 to 2016-07: 116

2016-08 to 2017-07: 118

2017-08 to 2018-07: 135

- Dates are driven by discharge (death) date

4) The Trust would not have any information on how many stroke deaths may have been preventable had things been done differently before the stroke, however all unexpected deaths are referred to a coroner.