

Ref: FOI/GS/ID 7385

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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 Impact of acute stroke services relocation during Covid.

You asked:

- 1. Has there been a change in stroke patient outcomes in Maidstone and Tunbridge Wells trust area since the acute stroke services were moved (deaths, severe disability, recovery)?*
- 2. Can you provide call to needle times for those Maidstone and Tunbridge Wells-residing stroke patients that required thrombolysis? Please show data before and after the stroke unit was relocated (ideally 2018 thru to latest data available). Call to needle meaning 999 call to administration of thrombolysis.*
- 3. Where telemedicine has been used, where were Maidstone and Tunbridge Wells patients diverted to (please give total patient numbers by location for 2020 and 2021); and were all telemedicine patients assessed by a stroke consultant?*
- 4. In the category of stroke 999 calls where telemedicine was initiated, what proportion were unable to contact a consultant, and therefore had to be admitted to a stroke unit? Please provide a total and a percentage.*
- 5. Have any Maidstone and Tunbridge Wells patients suffered intracranial haemorrhage after being thrombolysed? If so, how many?*
- 6. What is the mortality rate of your stroke patients after 5 days and 30 days, before and after stroke services were moved due to the pandemic?*

Trust response:

1. Before reconfiguration, in Tunbridge Wells Hospital between October 2018 and September 2019 - the mortality rate was 17.1%. From pre-stroke to discharge there was a median change of 1-2 (1.5) points in the Modified Rankin Scale.

Before reconfiguration, in Maidstone Hospital between October 2018 and September 2019 - the mortality rate was 12.6%. From pre-stroke to discharge there was a median change of 1-2 (1.75) points in the Modified Rankin Scale. After reconfiguration, in Maidstone Hospital between October 2019 and December 2021- the mortality rate was 15%. From pre-stroke to discharge there was a median change of 1-2 (1.83) points in the Modified Rankin Scale.

Post reconfiguration data represents an average of both Maidstone and Tunbridge wells pre-configuration. Post reconfiguration includes the demographics of Tunbridge Wells, Maidstone, and Medway. In comparison to National Stroke Mortality sits at an average 13.2% 2020-2021 - with peaks nationally of 16.2% and 17.1% during the first and second Covid wave, which Maidstone and Tunbridge Wells NHS Trust (MTW) will inevitably have seen peaks during this period.

2. If there is an amalgamation of call to needle time, SSNAP does not regularly publish this, it may be possible to ask SSNAP or SECamb for this information, however please see MTW **Door to Thrombolysis times**:

Before reconfiguration, in Tunbridge Wells Hospital between 2018 - 2019
Median door to Thrombolysis = 65 mins

Before reconfiguration, in Maidstone Hospital between 2018 - 2019 Median
door to Thrombolysis = 67 mins

After reconfiguration, in Maidstone Hospital between 2019 - 2020 Median door
to Thrombolysis - 65.5 mins

Jan - December 2021 Door to Thrombolysis = 52 minutes

3. From October 2020 (start of pathway) - December 2021 we have received 2359 calls from the ambulance service. 289 (12.3%) patients were diverted to Tunbridge Wells Hospital and 475 (20.1%) patients were diverted to Medway Hospital. Patients were only diverted if Maidstone Hospital was not their local hospital, and symptoms were not typical of Stroke. All patients assessed via telemedicine were assessed by a Stroke Consultant.

4. The Trust does not collect specific data regarding missed telemedicine calls; however, the Regional Stroke pathway dictates all FAST positive calls are conveyed to the nearest Acute Stroke Service whether an attempted telemedicine call or not.

5. Before reconfiguration, in Tunbridge Wells Hospital between October 2018 and September 2019 - 17.6% of patients had evidence of cerebral haemorrhage on brain imaging after thrombolysis.

Before reconfiguration, in Maidstone Hospital between October 2018 and September 2019 - 9.8% of patients had evidence of cerebral haemorrhage on brain imaging after thrombolysis.

After reconfiguration, in Maidstone Hospital between October 2019 and December 2021- 6.8% of patients had evidence of cerebral haemorrhage on brain imaging after thrombolysis.

6.

Year	Patients	Crude Mortality	Of Which		
			<5 days	5-29 days	30+ days
2018/19	823	14.3%	5.3%	6.8%	2.2%
2019/20	769	15.0%	6.4%	6.5%	2.1%
2020/21	977	14.8%	5.8%	7.6%	1.4%
2021/22	1,143	14.3%	4.8%	8.0%	1.6%