

Meeting: SE London Joint Health Overview and Scrutiny Committee
Location: Bromley Council, Civic Centre
Date: Thursday 21st March 2019
Title: Decision on Hyper Acute Stroke Units in Kent
Presenter: Julie Lowe, Programme Director, Our Healthier South East London

1. Summary

The purpose of this paper is to update the committee on decisions made to change the configuration of stroke services in Kent. The impact on SE London residents is minimal with the exception of Bexley (see below).

2. Background

Stroke services in London were reconfigured nearly a decade ago to enable patients experiencing a stroke to benefit from modern treatment options which significantly improve the chances of survival and then recovery. Simply patients with a suspected are taken to a Hyper Acute Stroke Unit (HASU) where expert staff and equipment are available 24 hours a day, 7 days a week. After initial treatment and stabilisation they are transferred to an Acute Stroke Unit (ASU) which may be at the same hospital or closer to home for further treatment and early rehabilitation before being discharged home or to a community-based unit. This model has worked well and evaluation has shown significantly improved survival and recovery rates.

In Kent the HASU and ASU model does not yet exist and patients suspected of having a stroke are taken to their local A&E department. The recent decision taken by Kent CCGs will lead to the creation of a HASU and ASU model in Kent. A letter describing the decision is attached. In Kent HASUs and ASUs will all be co-located (this has the advantage that patients will not move hospital part way through their treatment and more experts in stroke are based together, but the disadvantage that they may spend a longer period in a hospital at some distance from home). There will be a HASU and ASU at Darent Valley Hospital.

3. Impact on S E London

Bexley CCG were consultors in the recent decision making process in Kent because for many Bexley residents a HASU in Darent Valley Hospital will be closer than one in London. (Bexley residents with a suspected stroke are currently taken to a London unit, usually the Princess Royal University Hospital). Bexley patients who responded to the consultation were generally supportive of a HASU at Darent Valley.

S E London STP was involved in the consultation more generally as some of the proposed changes for Kent would have resulted in significant increases in patients attending London units. Kent CCGs have now decided that there will be a stroke unit at Darent Valley and the impact of the changes is expected to have a minor impact only on the London units.

Sent: 15 February 2019 16:01
To: [redacted]
Subject: Kent and Medway Stroke Services

Dear Colleague

I am writing to let you know that yesterday the Stroke Joint Committee of Clinical Commissioning Groups reached unanimous agreement on the future of emergency stroke services in Kent and Medway and has made the decision to implement the preferred option to establish hyper acute stroke units at William Harvey Hospital, Darent Valley Hospital and Maidstone Hospital.

Yesterday's decision comes after a five-year review of urgent stroke services. The committee members considered a wealth of data and evidence which they believe shows that this is the right thing for patients.

At the moment despite the hard work of dedicated NHS staff, stroke services in Kent and Medway are some of the poorest in the country. This is not acceptable and that is why the Stroke Review Team has worked so hard over the last five years to bring about change to improve stroke care. I would like to thank everyone who has been involved in the review. This has been a detailed and robust process, led by stroke specialists dedicated to improving care for patients.

I realise this outcome may be disappointing for some areas and some organisations, however these new units will make it possible for the NHS in Kent and Medway to offer specialist stroke care round the clock, every day of the year. This will reduce disability and we believe will save an additional life every fortnight as a result.

As you know, there was an extensive public consultation on the proposed changes, involving thousands of people. Those who responded said they understand why stroke services need to change, but many had concerns about the impact of those changes.

The Stroke Review Team and the Joint Committee of CCGs listened carefully to those concerns and considered them in detail. While the proposals have not changed, we are working to address issues such as travel and transport and putting plans in place to make sure that rehabilitation and support services are closer to home and better planned.

We will now work in partnership with local hospital trusts, on the implementation phase of this programme, and we anticipate the new stroke service will begin in Maidstone and Darent Valley hospitals in about a year, and the service at William Harvey will begin in spring of 2021 due the larger scale building work required at this site. The two-phase approach to implementation has been recommended by local stroke clinicians. The clinicians feel very strongly that this is the best option to improve care for as many people as possible as quickly as possible. This approach will be confirmed in the coming weeks.

We will continue to keep you updated on the work of the Stroke Review, particularly around the timeline for implementation, the development of new rehabilitation services and travel mitigations for patients and carers.

Best wishes

Rachel Jones
Senior Responsible Officer for the Kent and Medway Stroke Review and Director of Acute Strategy and Partnerships, Kent and Medway STP