Stroke Improvement

NHS

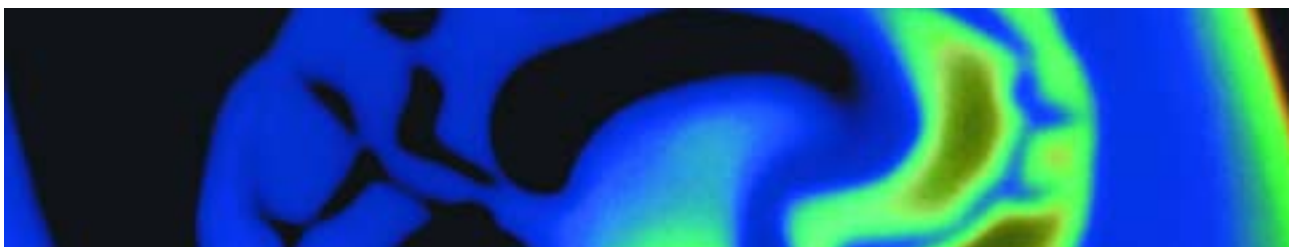## Supporting service development with Stroke Care Networks

What is a Stroke Care Network?

A Stroke Care Network is an alliance of services and patients whose common purpose is to improve the care of people experiencing stroke and TIA. It is a cooperative association of those providing and receiving care who work together to ensure that stroke and TIA care is the best that is can be.

The services included in the network are all those contributing to the stroke and TIA care, such as healthcare staff (doctors, nurses, ambulance personnel, speech and language therapists, psychologists etc.), social care staff, and voluntary and charitable organisations.

Those experiencing stroke or TIA, their families and carers, are an integral part of the network and, as partners in the network, guide and support its aims and activities.

How can Stroke Care Networks help improve services?

Establishing stroke care networks will support the implementation of the stroke strategy and the delivery of improved services for stroke patients and their families.

Experience in other services, such as those for coronary heart disease and cancer, has demonstrated that networks are of great value to the organisations which comprise them. Networks can support development in individual services as well as improve cooperation and coordination between different organisations involved in the same care 'pathway'. This latter function is essential to guarantee the prompt, safe, efficient and high-quality delivery of care.

Networks are also of huge benefit to patients. Networks can help move from a series of disconnected episodes of care from apparently disjointed services, to seamless, co-ordinated care across health services, social care and the voluntary sector. This is particularly important when leaving hospital and planning support and ongoing care in the community.

What will Stroke Care Networks do?

Stroke Care Networks will have three central themes to their work, all of which will build cooperation within local services and support development. These are to:

- promote cooperation and working across service boundaries. This will be achieved by developing the self awareness of the local stroke 'community' - clinical and managerial staff, patients, carers, commissioners, social care and all others involved the provision of services for stroke patients - and encouraging improved understanding, closer cooperation and joint working;
- facilitate necessary improvements to service delivery and coordination. Supporting and undertaking a programme of service improvement work should initially address development priorities within and between services as well as form the foundation for ongoing focus on quality of services and continuous service improvement;
- ensure commissioning processes underpin high-quality services. Providing expert advice to ensure that the commissioning process is fully informed of the complexities of stroke services and understands the perspectives of clinicians and patients.

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The initial work of the network will be implementation of the stroke strategy. By drawing together the care community, patients and carers, the network should initially consider the current state of local services against the strategy, and identify a work programme to address local needs.

How do we set up a Stroke Care Network?

Each local stroke network will require a small team to coordinate and support the functioning of the network, comprising a lead clinician and/or social care lead, a manager, one or two service improvement workers and some administrative support. The structure of the network and how it operates will bear broad similarity to other networks, although the form of the network should follow its desired function, rather than be constrained to any particular model.

The boundaries of individual stroke networks should mirror the functional footprint of services, incorporating the 'hub and spoke' model but also including broader services (e.g. primary care, social care, ambulance service etc.) that contribute to the local care pathway.

In many areas, these boundaries will roughly coincide with existing networks, such as cardiac. However, a pragmatic approach should be taken to defining the area covered by an individual networks. The focus should be on developing a 'membership' organisation defined by those who have an interest in working together to the benefit of the people whose care they contribute to.

As funding is identified to support stroke networks, the first steps should be to gather together representatives of the stroke care community and discuss the key principles of the network. This meeting, supported by local discussions with key stakeholders, should aim to identify clinical/care leads to guide and champion the development of the network.

How do Stroke Care Networks relate to cardiac networks?

Cardiac networks have expertise in service improvement techniques and extensive experience in helping different organisations work together, which may be helpful in supporting stroke services. In some areas, the scope of existing cardiac networks has been expanded to cover both heart disease and stroke. Whether this becomes more widespread should be decided at local level. However, all cardiac networks should offer their support, and the learning from the developmental journey they have undertaken, to their stroke colleagues.

How will Stroke Care Networks be supported? Substantial assistance is available through the cardiac network system. In addition, a national team is being established to coordinate and support Stroke Care Networks through a variety of avenues including training and development for stroke network staff; coordinating regional or national forums; hosting national meetings and organising improvement events and conferences to ensure shared learning and understanding of national perspectives.

A number of national projects will be offered to networks based on the priorities identified in the stroke strategy. Participating in these projects will accelerate improvement progress at local level and contribute to the growing body of knowledge on developing stroke services.