
The Stroke patient's journey - an infographics description

Initiative Type

Service Improvement

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Deliver

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Summary

Stroke care in Queensland is complicated by the heterogeneity of stroke presentations, strict time-limited provision of hyperacute treatments and the geography of the state. True understanding of the impact of coordination of services and linkage of broader systems that support stroke care is vital. This project highlights opportunities and priorities for improvement and long term patient outcomes:

The infographics support visual understanding of these complexities and support each clinician, service, Hospital and Health Service (HHS) and wider Queensland Health decision maker to identify opportunities for focus and improvement.

Key dates

Nov 2020

Feb 2021

Implementation sites

Statewide - including all 22 stroke units in Queensland

Partnerships

Queensland Ambulance Services, Regional Services Queensland, Queensland University of Technology (HEAL)

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Aim

The aim of the project was to visually describe the complexity of the stroke patient journey and highlight variation in access and delivery of stroke care at a statewide level.

Benefits

The infographics were developed to support conversations with Queensland Health and HHS decision makers at all levels:

- assist with messaging and understanding of the complexity of the stroke care system
- support provision of education, specifically around the importance of minimising time disruptions in emergency elements of care
- improve understanding of the wider teams, governance structures, resources and strategies that overlap and support delivery of stroke care in an evidenced based way

Background

Across 2019 and 2020, the Statewide Stroke Clinical Network (SSCN) has requested to attend the System Management Committee with the goal of improving access to reperfusion therapies for acute stroke. It became evident in these meetings and broader conversations that the breadth and depth of variations' impact on the outcome of Queenslanders with stroke was not known or understood within the context of the patient journey. Concurrently, the Statewide Stroke Clinical Network was engaged in project work to synthesis reperfusion therapy services. The infographic development visually demonstrated the complexity of the system and, subsequently, supported understanding of the flow on effects of system improvement activities.

Solutions Implemented

Seven infographics and patient journey maps were developed over the course of four workshops. The fictional patient, "Jenny" had the same type of stroke in different state locations which flow into one of three comprehensive stroke services. Seven patient journey maps describing "Jenny's" flow through the system were designed with the engagement of clinicians from regional and metro sites, RSQ and QAS. Depending on the location of where "Jenny" had her stroke and where she was

referred to, there was a difference of over seven hours to access.

Endovascular clot retrieval (emergency reperfusion therapy) for her stroke:

The impact this potentially had on "Jenny's" long term deficits post stroke was shown to be significant with access to care rapidly showing the less long-term effects post stroke. Three types of infographics were developed in total

1. highly descriptive
2. concise
3. simple

It is anticipated that the stroke clinicians may choose the type of infographic they need to support their local advocacy and conversations supporting coordinated stroke care services.

Evaluation and Results

The Infographics project products were shared to the broader SSCN in April 2021. They are freely available to Queensland clinicians on the Stroke Management and Reperfusion Therapies intranet page.

Further evaluation on the use and impact of the tools will be conducted after this point. Evaluation will occur by monitoring traffic and downloads from the intranet page and, in the latter half of the year, a survey will be sent to the Stroke Nurse Coordinators across the state to understand how they have used the infographics and any potential impacts they may have at a stroke unit level.

Lessons Learnt

There was a short time window for this project meaning the small team had to be realistic about what could be achieved. We would have liked to expand this work to also include cost effectiveness and the impact of delays in access to care.

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