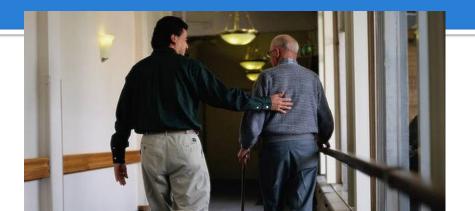


### **Essex Stroke Review** Thurrock Health Overview & Scrutiny Committee

#### William Guy, Head of Commissioning (CCGs) Wendy Smith, Communications Adviser



## What's in this presentation

- Why we are reviewing Stroke services
- Aiming for best practice
- What this means for people in Thurrock
- Where we are now
- Project plan



NHS

# Why review Stroke services? NHS

### Evidence shows we can do better for people of Essex, Southend & Thurrock

- Better chances of survival
- Lower risk of long term disability
- Better care in all Stroke services
- Better success in prevention



# Why review Stroke services? NHS

#### Not a cost saving exercise

- Aiming for cost neutral
- Likely to require investment in community services
- Securing affordable and sustainable improvement – planning for the future



# **Aiming for best practice**



- Improvements across entire Stroke pathway
- Three Hyper-acute Stroke Units for the county
- 24/7 dedicated Stroke consultants (6 per unit)
  - Immediate expert attention
  - Accurate diagnosis
  - More effective treatment faster (even with longer ambulance journeys)
- 1,200 patients or more (Basildon currently around 500)



# What this means for people in Thurrock

- Potentially, better outcomes, better care – sustainable for the future
- Potentially, hyper-acute in Chelmsford, Southend, Queens (Romford)
- Hyper acute stroke care for first 3 days
- Local stroke services after







### We have a recommendation (not a plan yet) Need more work on:

- Clinical benefits for Essex, Southend & Thurrock
- Costs & affordability
- Cross-border issues & implications
- How the model works:
  - Ambulance journey times & clinical standards
  - Clinical collaboration between service providers





- All service providers & CCGs working together
- Workstream groups for clinical model, finance & activity, communications
- Period of discussion, engagement, development
- Public consultation likely Autumn
- CCG approvals Jan 2014
- Implementation 2014/15