Improving discharge communication post-stroke through use of a structured pro-forma

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**** This is a DRAFT IDL- Do not print this until this is removed****
When printing IDL, please print a copy and send to XXXXX to arrange follow up.

*****Delete text above this line before printing
CHANGES TO MEDICATIONS (include reason for any changes)
1. Antiplatelet/anticoagulation plan:
2.

REQUESTS TO GP
1. Please aim for blood pressure of 130/80 (if appropriate)
2. Please repeat LFTs in _____ weeks (if statin commenced or dose increased)
_____

Dear...

STROKE DIAGNOSIS

OTHER ACUTE DIAGNOSES

PAST MEDICAL HISTORY

COURSE OF ADMISSION

STROKE RISK FACTORS (include details)
Hypertension (yes/no)
Diabetes (yes/no)
Smoking (yes/no)[please refer patients who smoke for smoking cessation via wellbeing tab on OCS]
Hypercholesterolemia (yes/no)
Atrial Fibrillation (yes/no)

SIGNIFICANT INVESTIGATIONS
ECG:
Glucose :
Cholesterol :
eGFR:
ESR:
CT HEAD:
CAROTID DOPPLER :

ALLERGIES

PRE-ADMISSION MOBILITY

FINAL FUNCTION and SUPPPORT (delete as appropriate)
Mobility: Independent/Mobile with X and assistance of Y/ Immobile
Transfers: Independent/ With assistance of X/ With X and assistance of Y
ADLs: Independent/ Assistance with X
Continence: Continent/Other:
Diet: Normal/Other:
Fluids: Normal/Other:
Speech: Normal/Dysphasia/Dysarthria
Cognition: Intact/ Other:

DISCHARGE DESTINATION

DRIVING STATUS (& advice given)

DETAILS OF DISCUSSIONS REGARDING RESUSCITATION, ESCALATION OR ANTICIPATORY CARE PLANNING (Has the patient consented for these to be included in eKIS?)

THE FOLLOWING INVESTIGATION RESULTS ARE OUTSTANDING and will be returned to the consultant (delete if not relevant):

1. 24 hour tape

FOLLOW UP (including with therapists)
1. Copy of the IDL will be sent to XXXX, Stroke Nurse, to facilitate follow up

Yours sincerely,

NAME / DESIGNATION/BLEEP

For any enquiries, please contact xxx secretary to Dr xxx, Stroke Consultant, and Saxxxxndi Haines, Stroke Nurse on 01896 xxxxxxx. Direct dial number for xxxxxx is 01896 xxxxx.

CC:
xxxxx, Stroke Co-ordinator

BACKGROUND

- SIGN 118 outlines standards for discharge communication from stroke care
- Feedback from primary care highlighted lack of clarity in communication of results and medication changes
- Significant consultant time was spent updating immediate discharge letters (IDLs) with essential information
- Frequent rotation of junior doctors through stroke unit resulted in some inconsistency in IDL structure and content

METHOD

- 31 IDLs from the Borders Stroke Unit over a two-month period were reviewed and compared to the SIGN standards
- Based on this work, previous work by NHS Lothian and primary care feedback, we designed a structured IDL template:
  - Medication changes and requests to primary care moved to the top of the letter
  - Contact details for stroke team included
  - Detailed prompts were provided for
    - Components of final function (eg mobility/transfers)
    - Results
    - Driving status and advice given
- 14 IDLs from the subsequent period were reviewed and compared to results prior to use of the proforma

RESULTS

- Fewer medication queries were made to the Stroke Nurse Specialist from primary care
- Consultant time to sign off IDLs was significantly reduced
- Junior doctors reported no increase in time to complete IDL
- Patients made use of the contact details provided on the IDL to contact the stroke team

Component	Included prior to proforma (n=31)	Included with proforma (n=14)	Significance of change
CT head result	97%	100%	NS
Carotid doppler result	87%	100%	NS
Cholesterol	13%	90%	$X^2 = 22.23$, $p<0.05$
Glucose	13%	82%	$X^2 = 18.04$, $p<0.05$
ECG findings	16%	90%	$X^2 = 18.78$, $p<0.05$
Pre-admission mobility	16%	90%	$X^2 = 18.78$, $p<0.05$
Current function	100%	100%	NS
Current diet	35%	90%	$X^2 = 9.98$, $p<0.05$
Driving advice	33%	90%	$X^2 = 10.36$, $p<0.05$

CONCLUSIONS

- Use of a structured proforma improved the handover of information
- Fewer queries were raised from primary care
- Patients were enabled to follow up on any queries

ACKNOWLEDGEMENTS

Thank you to Dr Katherine Knight and colleagues, who developed the initial structured IDL format in NHS Lothian.

REFERENCE

Management of patients with stroke: Rehabilitation, prevention and management of complications, and discharge planning. Edinburgh: Scottish Intercollegiate Guidelines Network; 2010.

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