

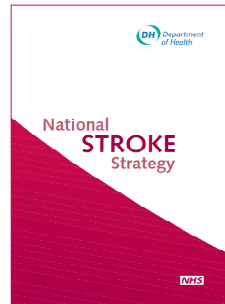
The Greater Manchester Stroke Assessment Tool (GM-SAT): Defining the content of the six month review

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What was the problem?

The effect of a stroke can be devastating, with far reaching consequences for patients, families and their carers. The problems experienced in the long term are often complex, numerous and diverse, spanning health, social and psychological care domains. For many, the full impact of a stroke is only realised following discharge from hospital or community rehabilitation when they are left to suddenly adjust to the full impact of the stroke on their life at home. It is at this stage that many report a sense of 'abandonment' and have difficulty accessing the services they need to address their long term unmet needs. The National Stroke Strategy (2007) requires all stroke survivors and their carers to receive regular reviews of their health and social care needs, including a review specifically six months after they have left hospital. This has the potential to ensure that stroke survivors feel supported in the long term and provide access to further specialist review, advice, information, support and rehabilitation where appropriate. However, the Strategy offered no further detail with respect to what such a review should consist of.



This study, therefore, aimed to **define the optimal content of the six month stroke review through development of an evidence-based, post-stroke assessment tool.**



What did we do?

The long term problems experienced by stroke survivors and their carers were identified through:

Review of the literature: an informal review of the qualitative and quantitative literature available regarding the nature of the long term problems experienced by stroke survivors and their carers was undertaken. The literature reviewed included

clinical guidelines such as those produced by the National Institute for Health and Clinical Excellence (NICE) and the Royal College of Physicians (RCP).

Professional consultation: a series of workshops and one-to-one meetings were held with stroke professionals within which they were asked to consider, from their perspectives, what long term problems affect stroke survivors and their carers. This process involved 36 professionals from across the whole multidisciplinary team, including those from local authority and voluntary sector organisations.

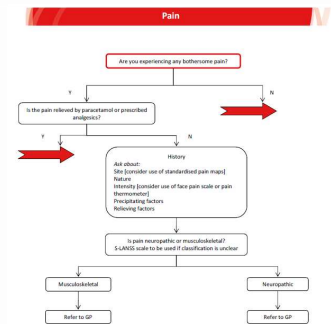
Service user consultation: several focus groups were held within which stroke survivors and their carers were asked to reflect on the nature of the problems they encountered approximately six months after they left hospital. These focus groups were attended by approximately 52 stroke survivors, the majority of whom had had their stroke under a year ago.

What did we achieve?

A total of 38 long term, post-stroke problems were identified spanning the health, social and emotional care domains. Whilst the majority of these were described within the literature, professionals and service users did identify several problems areas which were not, including hyperacusis (increased sensitivity to noise), altered sleep pattern and specific problems relating to sexual health.

These problems formed the basis of the assessment tool, with simple, evidence-based management algorithms being developed for each of the problems identified. These algorithms guide the reviewer through the assessment process, from the initial 'Trigger Questions' they should ask to determine whether there is a problem in a certain area (e.g. "Do you often feel sad or depressed?"), through to the actions(s) that should be taken by the reviewer to address any problems identified. Validated, evidence-based assessment tools were employed where appropriate.

The assessment tool was termed **GM-SAT: the Greater Manchester Stroke Assessment Tool.**



Impact

- GM-SAT is a simple, evidence-based assessment tool for use in the six month stroke review.
- Use of GM-SAT in practice ensures that all stroke survivors receive a standardised, evidence-based six month review.
- Systematic identification and addressing of unmet post-stroke needs using GM-SAT has the potential to improve outcomes and quality of life for stroke survivors, their carers and families.