

16th May, 2024

Deputy Louise O'Reilly, TD
Dáil Éireann
Leinster House
Kildare Street
Dublin 2

RE: PQ 18951/24

To ask the Minister for Health the reason patient access to acute stroke unit beds has remained at an unacceptable level for several years; what action is being taken to address this; and if he will make a statement on the matter

Dear Deputy O'Reilly,

The Health Service Executive (HSE) has been requested to reply directly to you in relation to the above parliamentary question, which you submitted to the Minister for Health for response. I have consulted with the National Clinical Programme (NCP) for Stroke on your question and have been informed that the following outlines the position.

Stroke is the third leading cause of death and is the leading cause of acquired adult neurological disability in Ireland. Stroke unit care is the cornerstone and foundation of all stroke care. Stroke unit care serves all stroke patients, regardless of stroke type or time of onset.

Acute stroke units have been shown to reduce stroke mortality and dependency and are a European Stroke Organisation (ESO) recommendation with clear set guidelines on what constitutes an acute stroke unit¹.

NCP for Stroke is aware that admission to, and time spent in a Stroke Unit, are key quality indicators (KQIs) measured in the Irish National Audit of Stroke. The recommended target for both of these KQIs is 90%. NCP for Stroke notes from various INAS reports that both of these KQIs have remained at a low level over the past 10 years, with admission to a stroke unit ranging from 65%-70% and time spent in a stroke unit ranging from 57%-68%².

A gap analysis of stroke unit beds has been undertaken and is reported within the HSE's National Stroke Strategy 2022-2027³. This gap analysis looked at the existing number of designated stroke unit beds (210 beds) and what would be needed over the next five years using a calculation based on the proportional growth in the over 65-year-old population.

Based on this calculation, a further 117 acute stroke unit bed designations was reported to be required to meet the KQIs of 90% of patients with a stroke admitted to a stroke unit and for those patients with a stroke who were admitted to a stroke unit that 90% of their total hospital stay is spent in a stroke unit.


The HSE's Stroke Strategy (2022-2027)³ represents a realistic deliverable approach to stroke services nationally, across the realms of prevention, acute care and cure, rehabilitation and restoration to life after stroke and education and research in stroke for the next five years. It is acknowledged that the 'entire chain of care from primary prevention to life after stroke' will not be achieved within the 5-year span of this strategy.

Increasing staff Whole Time Equivalent (WTE) levels to the required level, as outlined in the strategy, has significant costs and takes time to recruit suitable qualified and available personnel. Cognisant of these factors, NCP Stroke will seek to develop a more detailed Stroke Strategy Implementation Plan in 2024. In line with this plan, it will continue to seek additional investment to implement the strategy successfully.

The HSE will endeavour to bring all services up to recommended capacity over the lifetime of the strategy by a graduated incremental scale up process, as outlined in Appendix 3 of the strategy³. Posts are being targeted towards stroke services in both the acute and rehabilitation stages of stroke care and include a variety of healthcare professional disciplines and grades. It is anticipated that further implementation of the strategy will continue in 2024 and subsequent years, with associated funding requests/requirements.

I trust this information is of assistance to you, but should you have any further queries please do not hesitate to contact me.

Yours sincerely



Anne Horgan
General Manager

References:

1. Ringelstein et al for the ESO Stroke Unit Certification Committee (2013) European Stroke Organisation Recommendations to Establish a Stroke Unit and Stroke Centre. Stroke, 44:828-840.
2. [Publications | Clinical Audits | NOCA](#)
3. [National Stroke Strategy 2022-2027 \(hse.ie\)](#)