

# Thrombolysis in Acute Stroke Collaborative Update

January 2025

## A message from...

**Professor Simon Conroy, Clinical Lead, NHS Elect**



Welcome to this edition of the TASC newsletter. The collaborative continues to achieve exceptional milestones the finalisation of 10 Principles, recognition at conferences, and improved thrombolysis rates in Cohorts 1 with cohort 2 off to a flying start. These principles encapsulate years of learning and provide a robust framework to improve thrombolysis rates. As we prepare for the TASC Toolkit launch and our next phase of data analysis, let's build on these successes to drive sustainable improvements.

## Exciting News: TASC Principles Finalised!

The 10 TASC Principles, co-designed with Cohort 1, are now finalised. These principles provide actionable approaches to optimise stroke care pathways and deliver timely thrombolysis:

**Coming Soon: *The TASC Toolkit***  
A practical guide offering insights into implementing these principles, with case studies, improvement plans, and tools.

1. **Optimise front door processes to deliver timely thrombolysis**
2. **Work closely with radiology to deliver timely imaging**
3. **Design a workforce to manage stroke effectively**
4. **Identify Clinical Change Champions**
5. **Design an Effective Stroke Workforce**
6. **Actively Manage the Stroke Pathway**
7. **Actively Involve Patients and the Public**
8. **Embed a Quality Improvement Approach**
9. **Education and Training for All Staff**
10. **Utilise Executive Leadership Effectively**

## Showcasing TASC at National and International Levels

- **UK Stroke Forum 2024:** Two posters showcased the improved thrombolysis rates via QI methodology and SPC data analysis. If you're interested in knowing more, the posters are available [here](#) (you need to be signed up to NHS Futures to access)

"These six teams have delivered unprecedented improvement in the quality of care they are giving"

Dr David Hargroves, National Clinical Director for Stroke Medicine - NHS England

- **European Stroke Organisation Conference Abstract:** An abstract was submitted to ESOC 2025, showcasing findings from Cohort 1 and the use of SAMUEL data to identify opportunities for targeted improvement. This work led to sustained increases in thrombolysis rates across all sites (see left). Key improvements included better treatment of "less than ideal" patients and streamlined in-hospital processes.

Site	Thrombolysis rate at start of TASC programme	Thrombolysis rate at end of TASC programme	% Change
Royal Hampshire	10%	14%	29%
Lincoln	8%	12%	33%
Eastbourne	8.5%	18.8%	55%
Torbay	8%	15%	47%
Lister	8%	10%	20%
Preston	9.6%	14%	31%

## Learning and Development Opportunities

**Webinars to Catch Up On:**

Missed a webinar? [Access here](#) (you need to be signed up to NHS Futures to access)

**Upcoming Webinars:**

- **Understanding and Using SPC Data:** 12 February 2025, 12:30–13:30 ([Registration link](#))
- **Rehabilitation Pathways Out of Hospital:** 6 March 2025, 12:00–13:00 ([Registration link](#))
- **Digital e Clerking proforma webinar – HHFT:** 3 April, 12:30–13:30 ([Registration link](#))

## Worth Exploring: Tools and Resources

- NHS Elect QI Digital Resource: Tools and resources to help you begin or progress your quality improvement work. Access it [here](#)
- SAMuel Web App: Benchmark your thrombolysis performance and explore improvement opportunities. Access it [here](#).

## Site Spotlight: Hampshire Hospitals

### *Enhancing Thrombolysis Decision Making:*

The team addressed variability in thrombolysis decision-making, especially for patients with milder symptoms, by fostering a psychologically safe environment for discussion and collaboration. Monthly MDT meetings were introduced, where consultants present challenging cases anonymously, and the team votes using a card system (Red for 'No,' Green for 'Yes'). Therapy teams also provide input on the long-term impact of decisions. This approach has increased thrombolysis rates, improved confidence, reduced variability, and strengthened team engagement, supported by a "phone a friend" culture for challenging cases.



*"Taking part in TASC has given us a safe space for collaborative clinical discussions, helping us challenge deep-set beliefs, drive culture change, and use data more effectively to make improvements."*

Zehra Mehdi, Consultant Stroke Physician  
 Clinical Lead for HHFT Stroke Service

The full vignette for this improvement work can be found [here](#) (you need to be signed up to NHS Futures to access)

Would you like to be the next Site Spotlight? If you have a learning or improvement story to share in the next TASC update, please contact your QI Associates, or email [networksinfo@nhselect.org.uk](mailto:networksinfo@nhselect.org.uk).

## Join the Conversation: Your Input Matters

- TASC drop in networking session: Join our monthly drop-in session to share your improvement work, exchange ideas, and collaborate with others from across the network to continue enhancing thrombolysis practices in stroke care. This session takes place on the 4th Thursday of every month, 12:30–13:30. Click here to [access](#)

## Next Steps for All Sites

- **Cohort 1:** In May 2025, NHS Elect will request updated SSNAP data from all Cohort 1 sites to assess sustained improvements and identify further opportunities. Please be ready to submit your data.
- **Cohort 2:** Continue collaborating with QI Associates to identify challenges and opportunities in your pathways. Use QI tools and insights from your measurement visit to guide this process, and develop your driver diagrams to capture key issues and your change ideas for testing.

## Closing Remarks

Thank you for your commitment to improving stroke care. For support, questions, or to share your stories, contact us at [networksinfo@nhselect.org.uk](mailto:networksinfo@nhselect.org.uk).