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# Reaching the Target for Stroke Swallow Screening

**BACKGROUND:** Swallow screening allows for early identification & management of dysphagia, which is highly prevalent after acute stroke. In 2014, SA Health instigated a 4 hour target timeframe for swallow screening from admission, in line with national stroke guidelines (2017). Implementation of a 'Swallow Screen Tool' commenced in 2017.

**AIM:** To conduct systematic analysis of compliance with swallow screening within the 4-hour target timeframe, determine whether barriers are present and generate potential solutions to improve compliance.

**METHOD:** Mixed method approach, involving quantitative and qualitative data. The quantitative data was extracted from medical records of stroke admissions between March 2018 and February 2019. The qualitative data involved semi-structured interviews of the stroke nurses, doctors and speech pathologists.

## RESULTS: Quantitative data

- 271 (74%) patients received a swallow screen by trained **nursing staff**
- 189 (**70%**) were screened by nursing staff **within the 4 hour target**
- 94 (26%) patients received a comprehensive clinical assessment by a **Speech Pathologist** in lieu of a screen but only 14 (**15%**) **within the 4 hour target**.
- Meeting the 4 hour target was not dependent on the month or day of admission but was predicted by **timeframe of admission**; significantly less likely to have their swallowing screened within the 4 hour target, if admitted between the **hours of 21:30-07:59**.
- **66%** of patients **passed** the swallow screen and commenced oral intake without waiting for Speech Pathology assessment

## RESULTS: Qualitative data (preliminary)

- All staff interviewed indicated that (a) the swallow screen is a **valuable** tool; (b) is a priority to complete and supports timely access to **oral medication**; (c) 4 hour target was suitable but **not** always **realistic** to achieve
- Barriers to achieving the 4 hour target included (a) stroke presentations to emergency and/or admission to outlier wards **between 21:30-07:59** when there is no 'code stroke' nurse; (b) ED and outlier ward **awareness of the swallow screen** as they do not contact the stroke ward to inform nursing staff of stroke outside of the 'code stroke'; (c) capacity for nursing staff to **leave the stroke ward** or their assigned patients for the shift to complete a swallow screen on another patient

## RECOMMENDATIONS:

- Continue swallow screening at LMH with 4 hour target
- Explore opportunities to improve compliance with 4 hour target in consultation with key stakeholders including education to staff working in ED and outlier wards

