Stakeholder diary

Prior to project start

Key feedback from stakeholders interviewed in SAMueL-1:

- Include outcomes
- Include organisation factors (e.g. use of speciality stroke nurses)
- Include health economics (for commissioners)

18/10/2022 Sally Evans

Senior Project Manager, National Stroke Programme

- Will be useful to use SAMueL output for thrombolysis Communities of Practice (COP) - trial in spring 2023?

- Produce 'hospital profiles' summarising hospital (and in comparison with others).

2/11/2022 RD&E stroke physicians

1. Consider including patient age in our simplified model, as the docs said they used that, in combination with time elapsed, in their decision-making (and it was only just outside the reduced list of features we use in the simplified model).

2. Show hospitals where they are in comparison to other hospitals regarding the groups of patients we have identified where decision-making varies between hospitals (we think we have a robust method for that, by comparing the same cohorts of patients across all hospital models) . These being:

   - Milder strokes
   - Patients with pre-existing disability
   - Patients with estimated (rather than precisely known) stroke onset time

Note: a reason was given why thrombolysis use may fall with increasing pre-stroke disability. The possible benefit (such as mRS improvement) is reduced, so that changed the perceived risk-benefit 'calculation' a doc is making.