









# Uptake of six month post-stroke review: findings from the LoTS2Care feasibility trial

Ozer S, Forster A, Hartley S, Barnard L, Crocker T, Fletcher M, Moreau L, Hulme C, Holloway I, House A, Hewison J, Farrin A on behalf of the LoTS2Care Programme Management Group

# INTRODUCTION

The National Stroke Strategy recommends that all stroke survivors are offered a review of their health and social care needs at six months post-discharge; however, provision of this service varies widely nationally.

Through implementation of a cluster randomised feasibility trial of an intervention delivered at approximately six months post-stroke (LoTS2Care), data has been collected on the uptake of these reviews from services geographically dispersed across the UK.

### **METHOD**

Stroke services (intervention and control) were asked to record their procedures for offering 6 month reviews including means of identification and methods of contact (phone/mail).

Standardised pro-formas were provided so staff could record whether or not the stroke survivor could be contacted and whether or not they agreed to having a review as well as details of the input received where applicable.

# **FINDINGS**

Site	Trial	6 MONTH REVIEW PROCEDURES			UPTAKE (for period April-July 2017)				INPUT (n,%)				
	Arm	Format	Invitation Method	Delivery	Contact Initiated (n)	Contacted (n, % of contact initiated)	Agreed to Uptake (n, % of contacted)	Home Visit	Clinic	Telephone Review	DNA	Unknown	
Site 1	Intervention	New intervention only	OPT IN	<b>a</b>	22	17 (77.3%)	9 (52.9%)	9 (100)	-	-	-	-	
Site 2	Intervention	Standard	ОРТОИТ	<b></b>	55	55 (100%)	36 (65.5%)	35 (97.2)	-	1 (2.8)	-	-	
		New intervention optional	<b>◯</b> □ OPTIN				7 (12.7%)	-	5 (71.4)	-	2 (28.6)	-	
							37 (67.3%) – site 2 overall						
Site 3	Intervention	New intervention only	→ P OPTIN	or 🏥	297	297 (100%)	142 (47.8%)	68 (47.9)	48 (33.8)	-	1 (0.7)	25 (17.6)	
Site 4	Intervention	New intervention or standard	OPT IN		66	63 (95.5%)	50 (79.4%)	-	38 (76)	-	8 (16)	4 (8)	
Site 5	Intervention	New intervention only	ОРТОИТ	<b></b>	41	39 (95.1%)	39 (100%)	39 (100)	-	-	-	-	
Site 6	Control	Standard (GM-SAT)	OPT IN	or 8	62	58 (93.5%)	54 (93.1%)	52 (96.3)	-	1 (1.9)	-	1 (1.9)	
Site 7	Control	Standard (based on GM-SAT)	OPTIN	er 🏠	76	62 (81.6%)	6 (9.7%)	5 (83.3)	-	1 (16.7)	-	-	
Site 8	Control	Standard (no specific tool used)	ОРТОИТ	or 🏠	34	31 (91.2%)	28 (90.3%)	3 (10.7)	14 (50.0)	1 (3.6)	2 (7.1)	(28.6)	
Site 9	Control	Not offered as standard	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
			_	OVERALL:	653	622 (95.3%)	365 (58.7%)	(N/A = not applicable)					

# CONCLUSION

- Uptake of 6 month reviews across all services was 58.7%, however varied widely from 9.7% to 100%.
- Telephone invitation with opt-in review was the most common approach to offer; however, letter invitation with pre-booked appointment (opt-out) resulted in the highest levels of uptake on average.

Home was the most common location of review delivery and resulted in higher levels of uptake on average.

This poster presents independent research funded by the National Institute for Health Research (NIHR) under its Programme Grants for Applied Research Programme (Grant Reference Number RP-PG-0611-20010). The views expressed are those of the authors and not necessarily those of the National Control of Health.