

“Don’t Call it FAST, Call it EXTREME” –

A Qualitative Analysis of the Daily Clinical Practice of Health Care Professionals Providing Acute Stroke Treatment

Summary

Introduction

The organisation of stroke care pathways is being continuously optimised. This study investigated to what extent the daily clinical practice of health care professionals providing acute stroke treatment and staff-patient interactions in a university hospital providing endovascular thrombectomy (EVT) have changed following the implementation of a regional EVT network.

Methods

Within a qualitative monocentric study design 26 non-participant observations involving 28 stroke patients and 15 semi-structured interviews with 16 interviewees were conducted and analysed, using an open coding process undertaken by two independent coders at a university hospital providing EVT support in a regional stroke network.

Results

Increased stroke case volumes, shortened length of stay, extension of treatment indications, modifications in the stroke clientele, establishment of interinstitutional pathways and provision of telestroke support lead to an increased workload of the health care professionals involved. Consequently, less time was available for professional care and emotional support of patients.

Conclusion

The daily clinical practice of stroke health care professionals working in an EVT hospital and related staff-patient interactions changed following the implementation of a regional EVT network. Further research on the impact of stroke networks on staff members and patient satisfaction and quality of care provided is warranted.

Keywords

- Endovascular thrombectomy ■ Intravenous thrombolysis ■ Staff-patient interaction
- Stroke ■ Stroke care pathway ■ Stroke network