

PE2048/Z: Review the FAST stroke awareness campaign

Stephen Kerr MSP written submission, 24 September 2025

Dear Convener,

When the Committee last considered petition PE2048 and heard evidence from stroke charities, members highlighted the absence of evidence about the use of BE FAST in live medical settings. That absence now appears less clear-cut.

Research on BE FAST—conducted by the petitioner, James Bundy, and published by Enlighten (formerly Reform Scotland)—has already shaped the debate. For the sake of transparency, James is a former employee of mine, and I can personally attest to the thoroughness with which he approached this work. His analysis provided a framework for testing the BE FAST model in Scotland, and it has already helped to inform public discussion on whether current systems for identifying and treating stroke are fit for purpose.

What makes the position even more compelling now is the practical evidence emerging from the NHS. In their submission to the Committee, NHS Forth Valley confirmed that BE FAST has been in use in their A&E since early 2024. That makes them the first health board in Scotland to adopt BE FAST formally, providing a live test case that the Committee cannot afford to overlook. Their latest performance data deserves serious attention:

- NHS Forth Valley is currently the best performing health board in Scotland for delivering thrombolysis within 60 minutes, which is a critical benchmark for positive outcomes.
- They have also achieved a statistically significant improvement in the proportion of stroke and TIA patients being reviewed at a specialist service within four days of referral.

The scale of improvement in these areas is not only measurable but material to patient outcomes. While it is too early to claim direct causation between BE FAST and these results, the correlation is strong enough to warrant closer investigation. At the very least, these outcomes suggest that NHS Forth Valley's approach is creating conditions that support faster and more effective stroke care.

It would therefore strengthen the Committee's consideration of this petition to hear directly from those on the front line. An invitation to a senior member of the NHS Forth Valley stroke team would provide the Committee with valuable first-hand testimony of how BE FAST has been integrated into clinical practice, the challenges encountered, and the benefits observed so far. Such evidence would allow the Committee to deliberate not on abstract theory but on real-world experience, in a Scottish health board context.

This is precisely the kind of practical insight that a petitions process should draw upon to reach balanced, informed conclusions. I hope you will agree that the timing is right for the Committee to hear from NHS Forth Valley, and that doing so would materially enhance the quality of scrutiny applied to petition PE2048.

Thank you for your consideration of this suggestion.

Yours sincerely,

Stephen Kerr MSP

Member for Central Scotland