# Clinical care standard indicators: acute stroke Exported from METEOR (AIHW's Metadata Online Registry)

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# Clinical care standard indicators: acute stroke

# Identifying and definitional attributes

Metadata item type: Indicator Set

Indicator set type: Other

METEOR identifier: 719072

Registration status: Australian Commission on Safety and Quality in Health Care, Standard 03/11/2020

**Description:** The Australian Commission on Safety and Quality in Health Care has produced the

Acute stroke clinical care standard indicators to assist with local implementation of the Acute stroke clinical care standard (ACSQHC 2019). The Acute stroke clinical care standard aims to ensure that patients with acute stroke receive optimal treatment during the acute phase of management. It covers recognition of stroke, rapid assessment, early management, and early initiation of a rehabilitation plan and an individualised care plan. This set of indicators has been developed to assist

with local implementation of the Acute stroke clinical care standard.

## Relational attributes

Indicators linked to this Indicator set:

Acute stroke clinical care standard indicators: 1a- Proportion of patients with suspected acute stroke who were assessed by ambulance services using a validated stroke screening tool, 2019-

<u>Australian Commission on Safety and Quality in Health Care</u>, Qualified 09/09/2019

Acute stroke clinical care standard indicators: 2a-Proportion of patients with a final diagnosis of ischaemic stroke who were provided thrombolysis, 2019-

<u>Australian Commission on Safety and Quality in Health Care</u>, Qualified 09/09/2019

Acute stroke clinical care standard indicators: 2b- Proportion of patients with a final diagnosis of ischaemic stroke who received endovascular thrombectomy, 2019-

<u>Australian Commission on Safety and Quality in Health Care</u>, Qualified 09/09/2019

Acute stroke clinical care standard indicators: 2c-Proportion of patients with a final diagnosis of ischaemic stroke provided thrombolysis who received the therapy within 60 minutes of presentation to hospital, 2019-

<u>Australian Commission on Safety and Quality in Health Care</u>, Qualified 09/09/2019

Acute stroke clinical care standard indicators: 2d-Time from arrival to hospital to endovascular thrombectomy, 2019-

<u>Australian Commission on Safety and Quality in Health Care</u>, Qualified 09/09/2019

Acute stroke clinical care standard indicators: 3a-Proportion of patients with a final diagnosis of acute stroke who have documented treatment in a stroke unit, 2019-

<u>Australian Commission on Safety and Quality in Health Care</u>, Qualified 09/09/2019

Acute stroke clinical care standard indicators: 3b-Proportion of patients with a final diagnosis of acute stroke who spent at least 90% of their acute hospital admission in a stroke unit, 2019-

<u>Australian Commission on Safety and Quality in Health Care</u>, Qualified 09/09/2019

Acute stroke clinical care standard indicators: 4a- Proportion of patients with a final diagnosis of acute stroke seen by a physiotherapist within 48 hours of presentation to hospital, 2019-

Australian Commission on Safety and Quality in Health Care, Qualified 09/09/2019

Acute stroke clinical care standard indicators: 4b- Proportion of patients with a final diagnosis of acute stroke assessed for ongoing rehabilitation using a structured assessment tool prior to separation from acute care, 2019-

Australian Commission on Safety and Quality in Health Care, Qualified

Acute stroke clinical care standard indicators: 5a- Proportion of patients with a final diagnosis of acute stroke on blood pressure lowering medication on separation from hospital, 2019-

Australian Commission on Safety and Quality in Health Care, Qualified 09/09/2019

Acute stroke clinical care standard indicators: 5b- Proportion of patients with a final diagnosis of ischaemic stroke on cholesterol lowering medication on separation from hospital, 2019

<u>Australian Commission on Safety and Quality in Health Care</u>, Qualified 09/09/2019

Acute stroke clinical care standard indicators: 5c-Proportion of patients with a final diagnosis of ischaemic stroke and atrial fibrillation prescribed oral anticoagulants on separation from hospital, 2019-

<u>Australian Commission on Safety and Quality in Health Care</u>, Qualified 09/09/2019

Acute stroke clinical care standard indicators: 5d- Proportion of patients with a final diagnosis of ischaemic stroke on antithrombotic medications on separation from hospital, 2019-

Australian Commission on Safety and Quality in Health Care, Qualified 09/09/2019

Acute stroke clinical care standard indicators: 5e- Proportion of patients with a final diagnosis of acute stroke who have documented evidence of advice on risk factor modification prior to separation from hospital, 2019-

<u>Australian Commission on Safety and Quality in Health Care</u>, Qualified 09/09/2019

Acute stroke clinical care standard indicators: 6a-Proportion of patients with a final diagnosis of acute stroke whose carer(s) received a formal needs assessment prior to separation from hospital, 2019-

<u>Australian Commission on Safety and Quality in Health Care</u>, Qualified 09/09/2019

Acute stroke clinical care standard indicators: 6b-Proportion of patients with a final diagnosis of acute stroke who require assistance with activities of daily living, and whose carer(s) received relevant training prior to separation from hospital, 2019-

<u>Australian Commission on Safety and Quality in Health Care</u>, Qualified 09/09/2019

Acute stroke clinical care standard indicators: 7a-Proportion of patients with a final diagnosis of acute stroke provided with a documented care plan prior to separation from hospital, 2019-

<u>Australian Commission on Safety and Quality in Health Care</u>, Qualified 09/09/2019

# Collection and usage attributes

National reporting arrangement:

The Indicator specification: acute stroke clinical care standard has been developed to assist with local implementation of the Acute stroke care clinical care standard (ACSQHC 2019). The indicators can be used to monitor the implementation of the quality statements, and to identify and address areas that require improvement. Monitoring the implementation of the Acute stroke clinical care standard will assist in meeting some of the requirements of the National Safety and Quality Health Service Standards. 2nd ed. (ACSQHC 2017).

### Comments:

The Australian Commission on Safety and Quality in Health Care has produced the Acute stroke clinical care standard (ACSQHC 2019) to support the delivery of appropriate care for a defined condition and is based on the best evidence available at the time of development. Health-care professionals are advised to use clinical discretion and consideration of the circumstances of the individual patient, in consultation with the patient and/or their carer or guardian when applying information contained within the clinical care standard. Consumers should use the information in the clinical care standard as a guide to inform discussions with their health-care professional about the applicability of the clinical care standard to their individual condition.

Technical terms used in this indicator set have the following meanings:

- 'Number of patients' refers to number of separations.
- 'Acute hospital stay' refers to where the <u>Hospital service—care type, code</u> N[N] = 1 Acute care.
- 'Acute stroke' has a specific meaning, as specified in the <u>acute</u>
   stroke glossary item. Types of acute stroke, namely <u>ischaemic</u>
   stroke and <u>haemorrhagic stroke</u>, also have associated glossary items.
- When <u>acute stroke</u> (or the specific type of stroke either <u>ischaemic</u> <u>stroke</u> or <u>haemorrhagic stroke</u>) is specified as a 'final diagnosis', it refers to when the <u>Episode of care—principal diagnosis</u>, <u>code (ICD-10-AM 11th edn)</u> <u>ANN{.N[N]}</u> or <u>Episode of care—additional diagnosis</u>, <u>code (ICD-10-AM 11th edn)</u> <u>ANN{.N[N]}</u> (only when the condition specified is sequenced as one of the first two additional diagnoses on the patient's discharge summary).

## Source and reference attributes

Submitting organisation: Australian Commission on Safety and Quality in Health Care

**Reference documents:** Australian Commission on Safety and Quality in Health Care 2019. Acute stroke

clinical care standard. Sydney:2019

Australian Commission on Safety and Quality 2017. National Safety and Quality

Health Service Standards. 2nd ed, Sydney: 2017