ACT Election Platform 2020





care, preventing and reducing the impact of stroke today and for years to come.

Australian Capital Territory (ACT) stroke survivor Melissa Aveyard-Cowie and her family.

At a glance

Stroke Foundation is calling for the next Australian Capital Territory (ACT) Government to invest \$800,000 over four years to deliver better connected health care, reducing the impact of stroke today and for years to come.

Proposal 1.

Continuing the StrokeConnect Follow-Up Service – helping ACT residents to be their happiest and healthiest after stroke.

Stroke Foundation StrokeConnect Follow-Up reaches out to those impacted by stroke, their carers and families on their return home from hospital, providing continuity of care, as well as support, advice and links with services.

Investment: \$200,000 over four years.

Result: ACT residents are connected to the services, supports, and information they need to achieve their best possible recovery, and live well after stroke.

Proposal 2.

Continuing commitment to the Australian Stroke Clinical Registry (AuSCR) and establish a Community of Practice for stroke – working together towards world-class health care.

Continued participation in the stroke clinical registry will be built on by the Community of Practice (CoP) for stroke. The CoP will bring together government, health services and stroke care clinicians to utilise registry data to guide quality improvement activities and efficiencies.

Investment: \$320,000 over four years.

Result: Safer, better, well coordinated and sustainable stroke services for ACT residents.

Proposal 3.

Targeted F.A.S.T. education at Canberra's Walk in Centres to reduce stroke and speed up treatment.

Specialist F.A.S.T. education program tailored to maximise benefits of Canberra's Walk in Centres. Clinician education will be partnered with health checks, resources and supports helping to prevent stroke and improve access to stroke treatment amongst the vulnerable.

Investment: \$280,000 over four years.

Result: ACT residents empowered to avoid stroke and access treatment quickly, ensuring a healthier ACT and a more sustainable health system.

The challenge for ACT

Stroke risk in the ACT

(% of total population)¹

- > High blood pressure: 61,500 (20%)
 - > Obesity: 81,800 (26%)

State of stroke^{2*}

- > Number of strokes: 713
- > Number of stroke survivors: 6,371
- Number of working age (under 65 years) stroke survivors: 2,000

ACT Government investment in improving the safety and quality of stroke treatment and care has delivered results³:

- \checkmark 86 percent of patients accessed a stroke unit care in 2019, up from 83 percent in 2017.
- 60 percent of all patients with strokes caused by clots received clot dissolving (thrombolysis) treatment within 60 minutes of hospital arrival, up from 31 percent in 2017.
- 93 percent of patients received education on lifestyle modification to prevent another stroke in 2019, up from 83 percent in 2017.

There are still opportunities for improvement³...

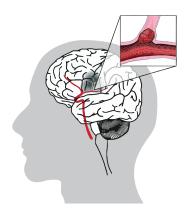
- 28 percent of patients arrived at hospital within the critical 4.5-hour time window for thrombolysis treatment, compared with 35 percent nationally.
- 14 percent of patients with strokes caused by clots received clot-dissolving treatment (thrombolysis). Best hospitals are at around 20 percent.
- 29 patients received clot retrieval (endovascular thrombectomy) treatment.

^{*}Please note Stroke Foundation is set to release an update of this report in October 2020.

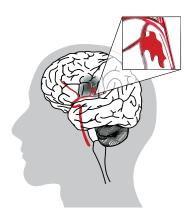
What is stroke?

Stroke attacks the brain – our most vital organ. A stroke occurs when blood supply to the brain is cut off because of a clot blocking an artery (ischaemic stroke) or due to a burst artery (haemorrhagic stroke). When blood supply to the brain is blocked brain cells begin to die at a rate of up to 1.9 million each minute.⁴

Every stroke is different depending on where in the brain it strikes and how severe it is. What is common is the devastation it can cause to the survivor, their carer and family. It is the leading cause of adult disability for Australians.⁵



Clot (Ischaemic stroke)



Bleed (Intracerebral haemorrhage)

Stroke attacks the brain, the human control centre, changing the lives of the individual and their loved ones forever.



Time to act

Stroke can be prevented, it can be treated and it can be beaten.

Stroke Foundation is calling for action now to deliver better connected health care, reducing the impact of stroke today and for years to come.

One in four people will experience a stroke in their lifetime.⁶ It is estimated hundreds of strokes will be experienced by ACT residents this year alone. Action now can prevent this and empower ACT residents to live well, resulting in a more sustainable and future-proof health system.

Investments in better hospitals and community Walk-in centres are improving health outcomes for ACT residents. We now have the opportunity to strengthen these efforts.

The Coronavirus (COVID-19) pandemic has demonstrated the value of investment in prevention, early detection and intervention. It is vital to our response and our ability to recover from this crisis. These steps also apply to stroke.

Prevention generates dividends both now and in the future. Evidence shows for every dollar invested in selected public health interventions in high income countries, there is a \$14 return on that investment.⁷

A better connected health system, with a focus on stroke prevention, detection and intervention, will reap long-term benefits, with a healthier population, reduced hospitalisations and lives saved.



The clock is ticking, if we don't act differently now by 2050 there will be a stroke every four minutes in this country and a million people living with the impact of stroke in our community. That's a devastating thought.

Sharon McGowan Chief Executive Office Stroke Foundation.

Proposal 1.

Continuing the StrokeConnect Follow-Up Service – helping ACT residents to be their happiest and healthiest after stroke.

Investment: \$200,000 over four years.

Almost half of all stroke survivors (43 percent) will experience another stroke within 10 years.⁸ Following a stroke or transient ischaemic attack (TIA), ACT residents need education and care to empower them to be healthy, happy and prevent subsequent stroke.

The ACT Government is partnering with Stroke Foundation to strengthen the capacity within our health system to ensure no ACT resident falls through the gaps. The StrokeConnect Follow-Up Service reaches out to those impacted by stroke, their carers and families, on their return home from hospital. StrokeConnect Follow-Up ensures ACT residents have continuity of care, are connected to services and supports, and have the information they need to achieve their best possible recovery and live well after stroke. The Service helps ACT residents avoid hospital readmission for complications and recurrent stroke.

Achievements since its inception in 2018:

- > Partnership developed with Canberra Hospital and Calvary Public Hospital Bruce.
- > 122 ACT residents living with stroke have benefited.
- > The percentage of participants who were aware of their stroke risk factors increased from 74 percent before the program to 100 percent after the program.
- > The percentage of participants who were confident managing their stroke risk factors increased from 74 percent before the program to 100 percent after the program.

Stroke Foundation is proposing to continue the StrokeConnect Follow-Up Service, building on the important work that has been started. It will help ACT residents to be their healthiest and boost the capacity our health system.

The StrokeConnect Follow-Up Service is playing an increasingly important role in the health of ACT residents during the COVID-19 pandemic, and as the community recovers. ACT residents living with the impact of stroke are among our community's most vulnerable to the virus. We know stroke patients are leaving hospital earlier than they normally would, and have limited access to the rehabilitation services and supports they need to be their healthiest.

The StrokeConnect Follow-Up Service is helping ACT residents living with stroke to be safe and well, benefiting our community and ensuring a sustainable health system.

John's story

John was contacted by Stroke Foundation's StrokeConnect Follow-Up Service on his discharge home from hospital.

A follow-up phone call was made to John 14 days after he returned home.

John told Follow-Up Service staff he had progressed well with his rehabilitation when he was in hospital, but when he got home, many areas were difficult. He felt as though he was going backwards with his walking and communication, and he had not been able to recommence driving.

The Follow-Up health professional listened to John's concerns and provided suggestions about how he could address each issue. John was then referred to physiotherapy, speech therapy and occupational therapy services, so he could continue to progress with his recovery.

John's knowledge about his stroke risk factors, including high blood pressure, high cholesterol, diabetes and an irregular heartbeat, and his ability to manage these risk factors was also covered.

All of John's upcoming appointments and medications were reviewed and explained, and the health professional checked John's knowledge of the signs of stroke and encouraged him to call triple zero (000) immediately if he saw or experienced any of these signs.

Proposal 2.

Continuing commitment to the Australian Stroke Clinical Registry (AuSCR) and establish a Community of Practice (CoP) for stroke – working together towards world-class health care.

Investment: \$320,000 (AuSCR \$120,000 and Community of Practice \$200,000) over four years.

Participation in the clinical quality registry ensures government, health services and stroke care clinicians have access to the data they need to understand the current state of the health system. The Community of Practice (CoP) will bring this group together to use registry data to work together to close the gap between guidelines and practice.

The registry in partnership with the CoP will drive improvements in the quality and safety of stroke services and patient outcomes. This is the next step towards providing all ACT residents with access to world-class health services.

Stroke Foundation is proud to be partnering with the ACT Government to support the participation of the Canberra Hospital and Calvary Hospital Bruce Campus in the Australian Stroke Clinical Registry (AuSCR).

Since the registry's implementation there have been demonstrated improvements. ACT now leads the nation in access to stroke unit care. However, there is more to be done.

The next ACT Government has an opportunity to maximise the Government's investment, to build on the work already started.

Better quality health care means better stroke outcomes, a healthier ACT and a more sustainable health system.

The Federal Government is committed to the development of a National Clinical Quality Registry (CQR) Strategy, focused on maximising the potential of Australian CQRs over the next 10 years. This will include establishing sustainable funding for prioritised national CQRs. In the interim, it is critical the ACT Government continues to invest in the collection of stroke patient data.

Anecdotal evidence suggests that the COVID-19 pandemic is impacting the quality of stroke treatment and care provided. This includes delays in emergency treatment, care by non-specialist stroke teams, and early discharge with minimal rehabilitation. It is likely the impact of these changes will last well beyond the end of the pandemic, and hospitals must be able to continuously monitor their performance, identify areas for improvement, and modify clinical care in accordance with the evidence.

Community of Practice

Data collection on its own is not enough. Data must be fed back to health professionals in a way that is understood. Systems to improve the quality of care and close the gap between guidelines and practice need to be developed.

Through the CoP, Stroke Foundation staff will work directly with stroke clinicians to support them in improving local standards of care.

Measures include:

- > Workshops developing plans for action.
- > Tracking of action plans through data.
- > Educational resources.
- > Research dissemination and networking.
- > Peer to peer support.

Annual forums, attended by health professionals, will be held to:

- > Encourage the exchange of ideas.
- > Facilitate an evidence-based approach to developing and testing potential solutions to improve stroke care.

A similar Community of Practice has been established by Stroke Foundation with Government support in Tasmania, where 94 percent of health professionals reported greater confidence in identifying practice gaps after these workshops.

ACT Government investment in 24/7 access to emergency stroke treatment and new, state-of-the-art health infrastructure, must be applauded.

When a stroke does occur, the best outcomes are achieved when treatment is received quickly. Recent advancements in 'time is brain' stroke therapies, including 'clot-dissolving' (thrombolysis) and 'clot removal' (endovascular thrombectomy) treatments, are saving lives and reducing disability in stroke survivors.

We applaud the ACT Government's ongoing commitment to ensuring ACT residents have 24/7 access to emergency stroke treatment.

In addition, the Government's investment in critical healthcare infrastructure as part of the SPIRE Project, including emergency department capacity and radiology and medical imaging, will deliver world-class health services for ACT residents. Once fully implemented, the benefits will be realised for years to come.

Margaret's story

ACT resident Margaret Brooks, 78, woke on a Sunday morning and got out of bed to walk to the bathroom. She fell, hitting her head, and remained on the floor until her daughter found her four and a half hours later, unable to move and slurring her speech.

Her daughter called for an ambulance, and when it arrived, the ambulance officer said Margaret had probably suffered a stroke. She was transported directly to the Canberra Hospital.

In the Emergency Department, Margaret's condition deteriorated rapidly, and doctors discovered she had a large blood clot blocking one of the main vessels in her brain.

Margaret underwent an endovascular clot retrieval (ECR) procedure to remove the clot and showed immediate improvement after the procedure.

Thanks to the ACT's new 24/7 ECR service, Margaret did not lose precious time being transported to Sydney to have this lifesaving treatment.

The longer a stroke remains untreated, the greater the chance of brain damage leading to death or disability. Margaret's prompt treatment in the ACT meant she was able to make a very good recovery. Today she is able to lead an independent life, enjoying reading and spending quality time with her grandchildren.



Proposal 3.

Targeted F.A.S.T. education at Canberra's Walk in Centres to reduce stroke and speed up treatment.

Investment: \$280,000 over four years.

Stroke is a serious medical emergency, requiring urgent attention. When someone suffers a stroke every minute counts. F.A.S.T. access to treatment means a greater chance of recovery and decreased costs for our health system.

Just 28 percent of ACT stroke patients are arriving at hospital within the critical 4.5 hour time window for thrombolysis treatment.³

It is critical people understand if they, or someone they know, experiences the signs of stroke, including facial drooping, arm weakness, or speech changes, they must call triple zero (000) immediately.

Too often, treatment is delayed because not enough ACT residents know the signs of stroke.

F.A.S.T. education campaigns have been proven to directly result in increased awareness of the signs of stroke and calls to emergency services nationally.¹⁰

Preliminary data shows hospitals are experiencing a serious reduction in the number of stroke admissions during the current pandemic.¹¹ This is likely due to patients not wishing to be a burden on the hospital system, or fearing infection with COVID-19 if they go to hospital.



Stroke Foundation will partner with the ACT Government to deliver a specialist F.A.S.T. education program tailored to maximise benefits of Canberra's Walk in Centres.

Clinician education will be partnered with community health checks, resources and supports, helping to drive people to the Walk in Centres, prevent stroke and improve access to stroke treatment amongst the most vulnerable.

For health professionals	For the community
Work shops	Digital marketing
Education	FAST collateral (posters, magnets and wallet cards)
Webinars	Connection to health checks
Online learning	Referrals, connections and support to make positive lifestyle changes
	StrokeSafe talks

Activities will be strengthened by Stroke Foundation's established StrokeSafe Speaker Program. The program has seven trained volunteer speakers across the ACT delivering education talks in the community about stroke prevention and the signs of stroke, and through a F.A.S.T. online community education campaign.

Melissa's story

ACT resident, and mother-of-two Melissa Aveyard-Cowie, 33, knows the reality of stroke.

Melissa hadn't been feeling great. She had been fatigued and had experienced 'some visual disturbances'. She saw a doctor who thought it might have been stress causing her issues. Melissa was given some time off work to rest.

On the morning Melissa was due to return to work everything changed.

"I woke up and my alarm was going off, but I didn't really comprehend what was happening," she said.



"I just assumed I'd slept funny and I'd be fine."

Melissa eventually made it to hospital where her stroke was diagnosed.

Following her stroke, Melissa spent two weeks in the hospital and a further two years having rehabilitation. Today, Melissa is doing well and helps educate others about the signs of stroke and stroke prevention as a Stroke Foundation StrokeSafe Speaker.



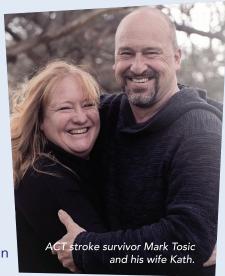
Mark's story

ACT resident Mark Tosic was just 49 years old when he suffered a stroke in December 2017.

He was standing at the kitchen sink, when suddenly an agonising headache came on and he felt extremely unwell.

Mark's eldest daughter called triple zero (000) straight away, and he was taken to hospital where a CT scan revealed he had suffered a bleed on the brain.

Due to the type of stroke Mark suffered, neurosurgery was not an option. He spent 24 days in hospital to allow time for his brain to heal on its own.



Within 6 months, Mark was able to return to work. He currently works 3 days a week, but still suffers regular migraines, chronic fatigue, and right-side weakness.

"Having access to stroke treatment and care has been incredibly important on my recovery journey even though some days are tough," Mark said.

"It would be great to see more education and services available to the community around stroke, particularly as there are a number of different types of stroke people can suffer and the impacts are far-reaching."

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About the Stroke Foundation

The Stroke Foundation is a national charity that partners with the community to prevent, treat and beat stroke. We stand alongside stroke survivors and their families, healthcare professionals and researchers. We build community awareness and foster new thinking. We support survivors on their journey to live the best possible life after stroke.



How to get more involved

- **6** Give time become a volunteer.
- Raise funds donate or hold a fundraising event.
- Speak up join our advocacy team.
- Y Leave a lasting legacy include a gift in your Will.
- **Characteristics** check your health regularly.
- Stay informed keep up-to-date and share our message.

Contact us

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