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## Stroke care not up to standard

Acute stroke care quality in Australia has stagnated, costing lives and leaving thousands of Australians with unnecessary disability, according to a new National Stroke Foundation Report released today.

The 2015 Acute Services Audit, launched at Royal Melbourne Hospital, revealed that despite significant advancements in the treatment and care for stroke, patients were still being denied best practice care in Australia.

National Stroke Foundation Chief Executive Officer Dr Erin Lalor said it did not have to be this way.

“There is significant opportunity for improvements across the country through tailored strategies which can impact on the quality of care provided, but concerted effort from all Australian governments is required in order to save lives and reduce stroke disability,” Dr Lalor said.

“It is time for all governments to take a stand and stop the suffering caused by stroke.

“The Audit showed that around 20,000 stroke patients a year were denied access to the full benefits of stroke unit care and seven percent of all ischemic stroke patients stroke patients were receiving life-saving clot busting treatment thrombolysis – resulting in death and unnecessary disability requiring a lifetime of care. If we reached the level of full stroke unit access that is being achieved in the United Kingdom (83 percent) outcomes would be improved for 13,000 patients.

“Actions to address the gaps in care identified through the National Stroke Audit will not only save lives from death and disability, but realise potential savings in the order of \$80 million ([Deloitte Access Economics](#)) a year, strengthening the argument for immediate action.

“We know what needs to be done. Demonstrated improvements in Queensland and South Australia, where there has been a focus on the quality of stroke services showed that with investment in planning and delivery of stroke services, as well as education of health professionals, patient outcomes will improve.

“This includes concentrating efforts on where they will have the greatest impact by ensuring comprehensive stroke services are available in every capital city. Stroke units must be appropriately resourced with the right multidisciplinary care teams, systems and support to deliver high quality care,” she said.

National Stroke Foundation Clinical Council Chair Dr Bruce Campbell said in four years Australia’s acute stroke care system had made little to no improvement.

“The number of ischemic stroke patients receiving thrombolysis treatment is the same as it was in 2011. There is currently limited access to the recently proven groundbreaking clot retrieval (endovascular) surgery which has been shown to dramatically reduce the impact of stroke,” Dr Campbell said.

“Almost half of patients were being sent home from hospital without essential ongoing care planning and one-third of patients were sent home without vital medication to help prevent another stroke.



“We know that these treatments and care significantly improve a person’s chance of a good recovery and being able to live independently. For those who don’t receive best practice care the alternative can be death or a life of dependency on a carer.

“Tragically one in six of us will suffer a stroke in our lifetime and there is no guarantee in Australia that we will receive the level of treatment and care that is required. In fact, the results of the Audit demonstrate that we will not,” he said.

The National Stroke Foundation is calling for an initial government investment of \$40 million to urgently address the gaps in stroke treatment and care identified by the Audit. There must also be a commitment from all governments to develop detailed costings for a national action plan to close the care gaps permanently. Initial focus should be on improved follow up programs for stroke survivors on their return home, and regular monitoring of stroke care.

Dr Lalor said Australia was championing significant advancements in stroke treatment and care but we need a health system that supports and resources health professionals to deliver these advancements.

“This Audit clearly demonstrates our current health system is not equipped to deal with Australia’s massive stroke burden. With an aging population and subsequent projected increase in stroke we’re calling on the Federal Government to take action now before more lives are lost to this brutal disease,” Dr Lalor said.

“2016 will mark 20 years since the Federal Government made stroke a national health priority and in that time there has never been any dedicated funding for a stroke plan. Now is the time for stroke.”

Professor Villis Marshall AC, Chair of the Board of the Australian Commission on Safety and Quality in Health Care said being able to compare the Audit results against the Commission’s Acute Stroke Clinical Care Standard, launched earlier this year, would help ensure stroke patients receive optimal treatment during the acute phase of management, regardless of where they live.

“Receiving appropriate care can significantly improve a patient’s chance of surviving a stroke and recovering to lead a full and independent life.”

## **About the audit**

The 2015 National Stroke Audit presents data central to understanding the nature of current acute stroke services in Australia. It tracks the performance of Australia’s stroke care against best practice guidelines: the Acute Services Framework 2015 and for the first time the Australian Commission on Safety and Quality in Health Care (ASQHC) Acute Stroke Care Clinical Standard 2015. The National Stroke Foundation was joined by the Australian Commission on Safety and Quality in Health Care in launching the report.

[Key findings and recommendations of the National Stroke Audit Acute Services 2015](#)  
[Full report including national and state statistics](#)  
[Facts and figures about stroke](#)

*Case studies, images and interviews available on request*

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