

A better plan for stroke - helping NSW residents avoid, survive, and live well after stroke

- › **The NSW Government has an opportunity to strengthen its plan for better stroke prevention, treatment and support, so more NSW residents are able to avoid, survive, and recover from, stroke.**
- › This year alone there will be almost 9,000 first-time strokes in NSW¹, and there are more than 145,000 survivors of stroke living in our community¹, many with an ongoing disability.
- › Regional Australians are 17 percent more likely to suffer a stroke than those in metropolitan areas¹, and are also more likely to die, or be left with an ongoing disability as a result of a stroke, because of limited access to diagnosis and treatment. Importantly, 6 of the top 10 Australian stroke hotspots (communities where stroke currently has the greatest impact), are located in regional NSW.¹
- › Joint NSW and Commonwealth Government investment in the roll out of the NSW Telestroke Service is reducing these inequalities of access, and is ensuring NSW residents in regional and rural communities have rapid, virtual, 24/7 access to best-practice specialist stroke diagnosis and treatment. To date, more than 1,500 stroke patients in regional and rural areas of the state have received life-saving treatment as a result of this innovative Service.
- › Stroke Foundation applauds the NSW Government's commitment to funding a NSW Mobile Stroke Unit (MSU) (Stroke Ambulance) trial, only the second of its kind in Australia, and, which based on the results of the Victorian MSU, is likely to slash treatment times for patients.

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- › Stroke Foundation is proud to be partnering with NSW Health to support the roll out of the NSW Telestroke Service, by delivering the F.A.S.T. Community Education Program in those regional communities covered by the Service, ensuring residents know the signs of stroke, and the importance of calling triple zero (000) immediately. It is critical that funding for this Program is extended, to ensure the life-saving F.A.S.T. message is embedded in all the regional communities covered by the Service.
- › A recent Stroke Foundation study of awareness of the signs of stroke has shown that 42 percent of participants from regional NSW knew at least two of the F.A.S.T. signs of stroke, compared with only 24 percent of participants from metropolitan areas.² As such, it is important the F.A.S.T. Community Education Program is expanded to include metropolitan locations in NSW, ensuring all NSW residents, regardless of where they live, know the F.A.S.T. message, and that the NSW MSU trial is appropriately supported.
- › Importantly, we know that more than 80 percent of strokes can be prevented³, providing a unique opportunity to support health behaviour change and prevent subsequent stroke. Therefore, investment is also needed in the implementation of preventive health programs that help NSW survivors of stroke to change their health behaviours in relation to physical activity, diet, consumption of alcohol and smoking, and reduce their risk of future stroke.
- › **Together we can build on the solid foundation that has been established, maximising the value of the Government's significant investment, and giving NSW patients the best possible chance of surviving, and living well after, stroke.**

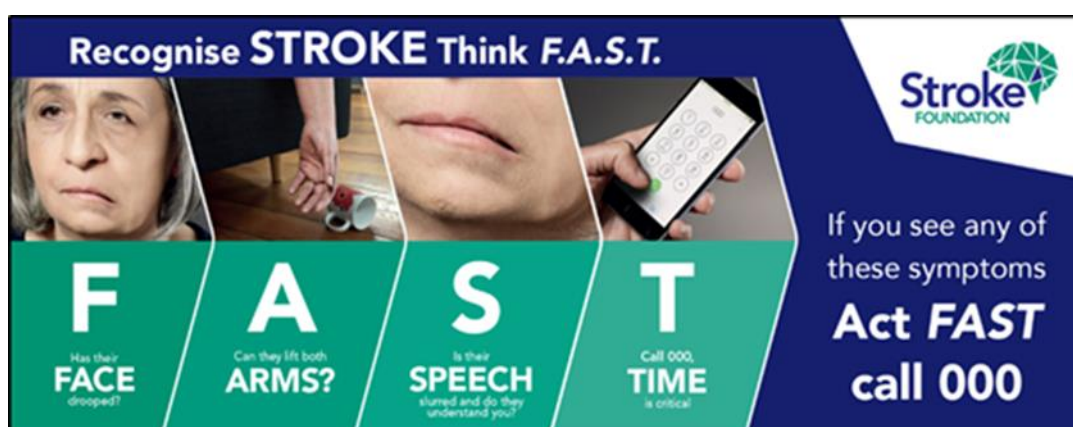
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Proposal 1

Continue the regional NSW F.A.S.T. (Face, Arms, Speech, Time) Community Education Program, and expand to metropolitan locations, to reduce stroke and speed up treatment.

Investment: \$200,000 per annum over three years.



Stroke is a time-critical illness and faster diagnosis and treatment saves lives and results in improved quality of life. 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.

It is critical NSW residents 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.

Stroke Foundation's F.A.S.T. (Face, Arms, Speech, and Time) Community Education Program, is currently being delivered in regional NSW with the support of the NSW Government, to complement the roll out of the NSW Telestroke Service. The program is targeting regional areas in a phased approach, in line with the NSW Telestroke Service implementation strategy.

This program recruits, trains and provides support to local volunteers to raise awareness in the community about stroke, including the signs of stroke, and chronic disease prevention, through the delivery of StrokeSafe talks. Through the compelling voice of those impacted by stroke, we increase knowledge and help to ensure patients get to hospital in the critical time window for life-saving stroke treatment.

In addition to delivering StrokeSafe talks, volunteers set up displays and activities at community events, distribute F.A.S.T. collateral (bookmarks, fridge magnets, wallet cards and 'Understand and Prevent Stroke' booklets), and gain local workplace

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support, which facilitates improved awareness about the signs of stroke and dispatches of ambulances.

In 2021, a multi-model F.A.S.T. awareness marketing campaign, including regional television and social media advertisements, as well as F.A.S.T messaging on public transport, was launched in telestroke communities, ensuring even more regional NSW residents understand how to recognise a stroke when it occurs, and how vital it is to call an ambulance.

"I have seen the F.A.S.T. ad a few times now. We needed blanket media coverage to get the message out there. No point having great assessment and treatment options if people aren't presenting."

Regional NSW Stroke Unit Manager

Achievements since the roll out of the NSW Telestroke Service

- › 44 volunteers across NSW (including 16 in regional communities) have been trained as StrokeSafe Ambassadors, delivering free education sessions to community groups and workplaces, and attending events in target communities across the state.
- › 70 StrokeSafe presentations have been delivered in NSW, reaching approximately 2,400 people.
- › Increased F.A.S.T. awareness in regional NSW.
- › A total of 1,150 F.A.S.T. community partners (hospitals, local government, MP's, pharmacies and GP's) have been established across telestroke communities.
- › **In 2021:**
 - › A total of 12 StrokeSafe talks were held across six telestroke regions (Wagga Wagga, Port Macquarie, Coffs Harbour, Deniliquin, Tweed Heads, and Blue Mountains/Lithgow) reaching 442 people.
 - › *Social media engagement*
 - Facebook engagement (likes, shares, comments, clicks) (Reach: 60,037, Engagement: 2,845).
 - Twitter #fightstroke (Impression: 20,314, Engagement: 117).

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- Instagram engagement (likes, shares, comments, clicks) (Reach: 13,471, Engagement: 518).
- LinkedIn (Impression: 7,522, Engagement: 241).
- *YouTube digital advertising campaign* (May 2021, 6 second and 30 second advertisements using the Think F.A.S.T. Act F.A.S.T. animation) accumulated 31,291 views within four weeks.
- A 3-week *regional television campaign* launched in August 2021, broadcast on WIN (Nine regional) in 16 communities, with a cumulative reach of 50.5 percent. The campaign saw an over-delivery on Target Audience Rating Points (TARPs) across all markets.
- *YouTube digital advertising campaign* (August 2021, 30 second advertisement using the Think F.A.S.T. Act F.A.S.T. animation) accumulated 73,000 views within four weeks.
- A 17-week *bus-back advertising campaign*, launched in August 2021, in six key telestroke communities (Coffs Harbour, Nowra, Wagga Wagga, Port Macquarie, Dubbo, and Tamworth), with an estimated reach of 67 percent and frequency of 4.6 times, across the six communities.



Examples of the bus-back F.A.S.T. advertising used on buses in six regional NSW towns.

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Impact

The F.A.S.T. Community Education Program in regional New South Wales is delivering results. A recent Stroke Foundation study of awareness of the signs of stroke found 42 percent of participants from regional NSW knew at least two of the F.A.S.T. signs of stroke (an increase of 20 percent on the 2020 survey), compared with only 24 percent of participants from metropolitan areas.² However, there is still more to be done. Only 34 percent of NSW residents with stroke are arriving at hospital within the 4.5-hour window for clot-dissolving treatment.⁴ Therefore, there is a need for expansion of the F.A.S.T. Community Education Program to metropolitan NSW.

Continued NSW Government investment in Stroke Foundation's regional NSW F.A.S.T. Community Education Program, and expansion of the program to metropolitan areas, will strengthen and maximise other Government investments in stroke services. This includes providing ongoing support for the roll out of the NSW Telestroke Service, targeting those regional communities covered by the Service, and supporting the introduction of the NSW MSU, ensuring more NSW residents know the signs of stroke, and the importance of calling triple zero (000) immediately.

Proposal 2

‘Living Well After Stroke’– a stroke secondary prevention behaviour change program, empowering NSW survivors of stroke to stay well and lessen their risk of developing further strokes.

Investment: \$100,047 per annum over four years.

The ‘Living Well After Stroke’ program will improve post-discharge support, by delivering education and support for sustainable behaviour change, as well as better coordinated care. The program will focus on NSW survivors of stroke who have experienced a mild stroke, with no referral for ongoing rehabilitation, and an identified need to change health behaviours to reduce their risk of future stroke.

The rationale

This year there will be almost 9,000 first-time strokes in NSW, and there are more than 145,000 survivors of stroke living in our community.¹ However, more than 80 percent of strokes can be prevented³, providing a unique opportunity to support health behaviour change and prevent subsequent strokes.

People are at higher risk after their first stroke, yet many don’t receive effective intervention for health behaviour change. In the community, many people find appropriate evidence-informed interventions unavailable or difficult to access. The ‘Living Well After Stroke’ program will address this health care gap and support NSW survivors of stroke to improve their health outcomes.

The Clinical Guidelines for Stroke Management state that stroke patients should be assessed and informed of their risk factors for recurrent stroke and educated about strategies to reduce their risk.⁵ **In NSW, there is a need for services that address behaviour modification for the reduction of stroke risk factors, to reduce further stroke or transient ischaemic attack (TIA).**

For those with mild stroke, and no rehabilitation admission, short lengths of stay in hospital reduce opportunities for health behaviour education and intervention. After discharge, there is no clear pathway for effective, evidence-based education and intervention to support health behaviour change. This underserved group is at risk of falling through the gaps after experiencing a first stroke.

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The program

To reduce the risk of subsequent stroke, the 'Living Well After Stroke' program will target health behaviours related to physical activity, diet, consumption of alcohol and smoking. This will be done through an evidence-based, person-centred, Health Action Process Approach (HAPA), that supports people to build motivation, set goals, plan, and implement and track health behaviour change. HAPA has been shown to be an effective model for people with chronic illness and disability.⁶ A focus on mental health, and accessing treatment and support when needed, underpins the program.

Table 1 Overview of sessions with an allied health professional as part of the 'Living Well After Stroke' Program

Session 1	Engagement, education, and choosing health behaviours to focus on.
Session 2	Motivation, intention setting and development of SMART (specific, measurable, achievable, relevant, and time-bound) goals.
Session 3	Individualised action plan.
Session 4	Monitoring progress.
Session 5	Tackling setbacks.
Session 6	Celebrating and setting new goals.
Session 7	Online resources to maintain and build on change.

Acute and primary care settings can identify individuals with risk factors for further stroke and refer them to the 'Living Well After Stroke' program. Participants' GPs (with their consent) will be provided with information about the participant's goals and activities, supporting effective medical management of risk factors, including increased prescribing of, and adherence to, medication, and improved continuity of care.

Participants will receive a mix of individual and group assessments and interventions, delivered face-to-face and/or via telehealth. Education and interventions will be tailored to each individual, in line with their needs and preferences. Existing Stroke Foundation products and services will deliver ongoing information and support to participants after they complete the program.

Stroke Foundation is well placed to lead the translation of an evidence-based, person-centred approach into practice in NSW. We have existing, effective

relationships with acute and rehabilitation stroke services that are delivering our products and referring to our services such as StrokeLine.

Evaluation

An evaluation plan will be developed to produce a report on the outcomes at the end of the project. Precise measures will be devised at the commencement of the project, and evaluation of the 'Living Well After Stroke' program will focus on its impact on health behaviours, stroke risk and coordination of care. If successful, this approach could be utilised for people who have experienced TIA, as well as for other disease groups.

Proven success of similar behaviour change programs for chronic conditions

In Queensland, Stroke Foundation is part of an alliance of organisations that delivers *My health for life (MH4L)*, a similar chronic condition prevention program, that has also been developed using the HAPA model.

Since the program was rolled out in Queensland, over 210,000 Queenslanders have been engaged in a conversation about their health through undertaking a chronic disease risk assessment, more than 16,000 are currently enrolled in the program, and over 10,000 have completed *MH4L*, exceeding the program targets. An example of the results include:

- › More than 200 locally based healthcare organisations are actively involved in delivering the program in their communities, targeting prevention as a key activity.
- › More than 97 percent of participants that completed the program were satisfied or very satisfied with it.
- › 97 percent of participants retained their intention to change at the end of the program.
- › 60 percent of participants increased their vegetable consumption by the end of the program.
- › 70 percent of participants reduced their waist circumference by the end of the program, and at 6-months post-completion, 48 percent further decreased their waist circumference.
- › 49 percent of participants met physical activity guidelines by the end of the program, and by 6-months post-completion, 83 percent were active for 150 minutes or more each week.

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- › By 6-months post-completion, 53 percent of participants were not drinking sugar sweetened beverages.
- › By 6-months post-completion, 43 percent of participants were eating two serves of fruit a day.

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5. Stroke Foundation (2021). Clinical Guidelines for Stroke Management. Melbourne, Australia.
6. Schwarzer R et al. (2011). Mechanisms of health behaviour change in persons with chronic illness or disability: the Health Action Process Approach (HAPA). *Rehabilitation Psychology*. 56(3): 161-70.

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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 do this through raising awareness, facilitating research and supporting stroke survivors.

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