Safer Care Victoria

22 March 2019

Improving access to stroke unit care

Project Overview

VICTORIA State Government

Improving access to stroke unit care

Description

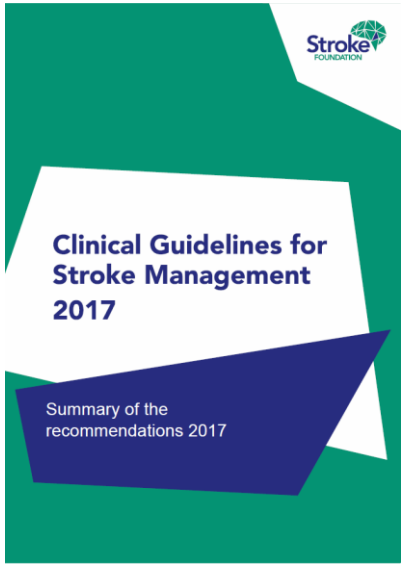
Patient outcomes are significantly improved when people with stroke receive care in stroke units. However, access and time spent in stroke units vary greatly across Victoria.

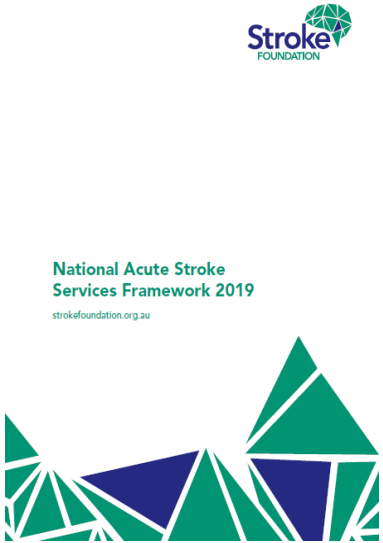
Approximately 9,000 people have a stroke annually. Current data suggests 68 per cent of stroke patients were treated in a stroke unit in Victoria in 2017 – a rate that has been trending downwards since 2010. The achievable benchmark is 94 per cent.

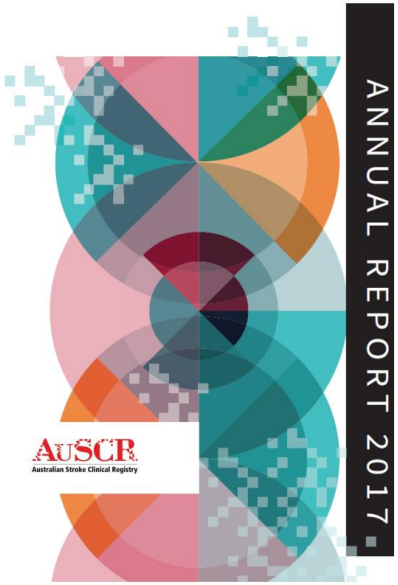
The National Stroke Foundation's Clinical Guidelines for Stroke Management recommend all stroke patients should be admitted to hospital and be treated in a stroke unit with an interdisciplinary team. Recommendation is admission to a stroke unit within 3 hours of stroke onset.

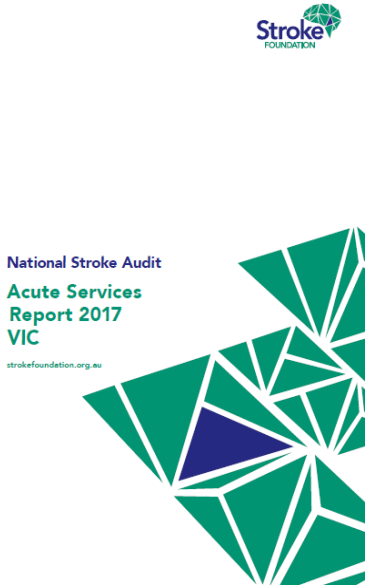
This initiative will explore the barriers and enablers to timely access for patients to a specialist stroke unit. Strategies to enhance enablers and solutions to challenges/barriers will be created and tested.

Scoping process – where we started



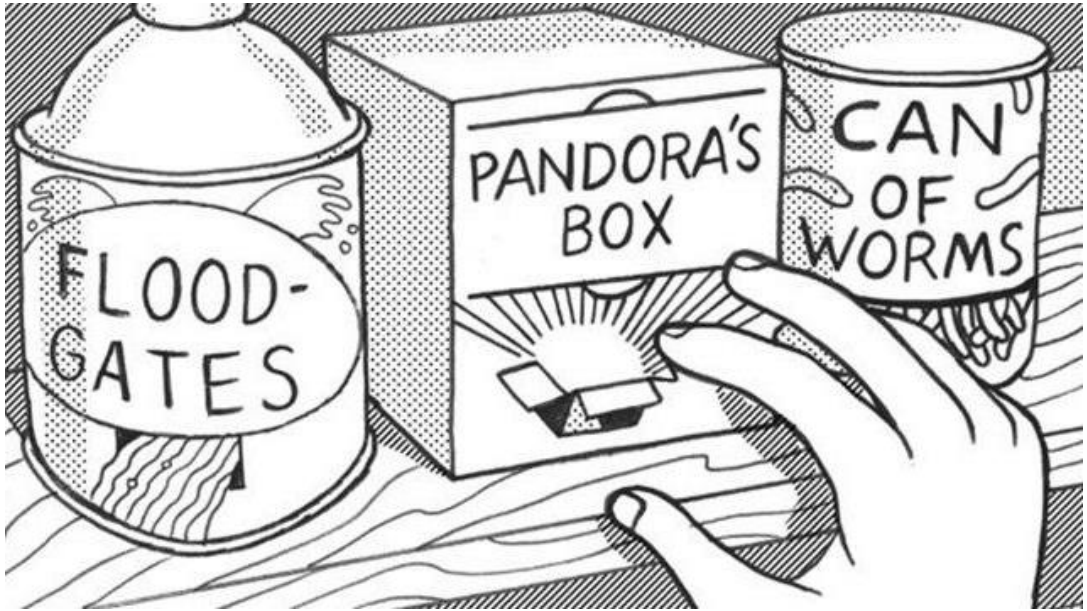




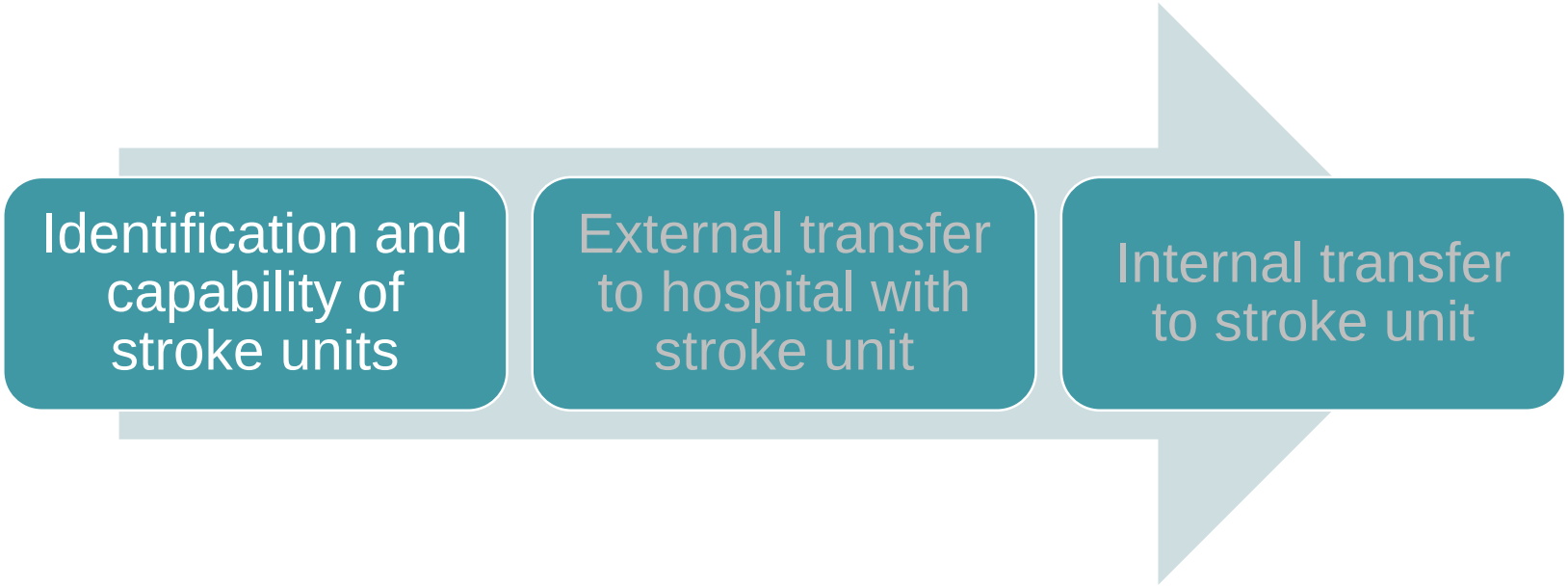


Where are the stroke units?

Where are the stroke units?



THEME 1: Identification and capability of stroke units



Where are the stroke units?

Exploring the data: current stroke unit care rates

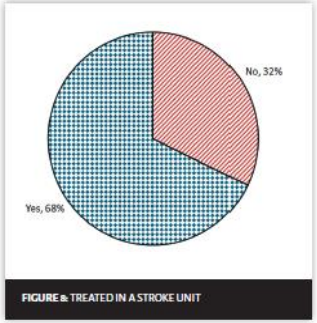


FIGURE 8: TREATED IN A STROKE UNIT

Stroke unit care

There were 8047 episodes of care where patients were treated in a stroke unit, making up 68% of the total episodes (Figure 8).

Of the patients with ischaemic stroke, 81% were treated in a stroke unit, compared to 65% of those with ICH, 54% of those with TIA and 52% of those with an undetermined type (Figure 9).

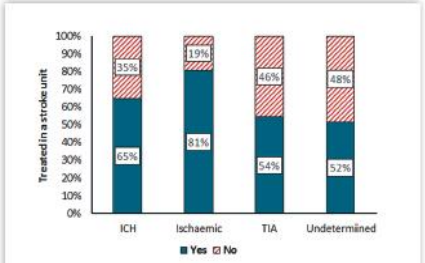


FIGURE 9: TREATED IN A STROKE UNIT STRATIFIED BY STROKE TYPE

Figure 17: Received Stroke Unit care (all patients), by State

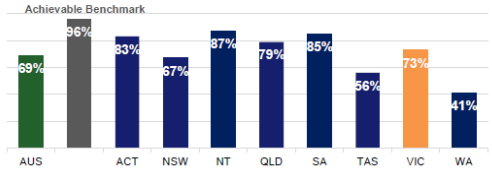
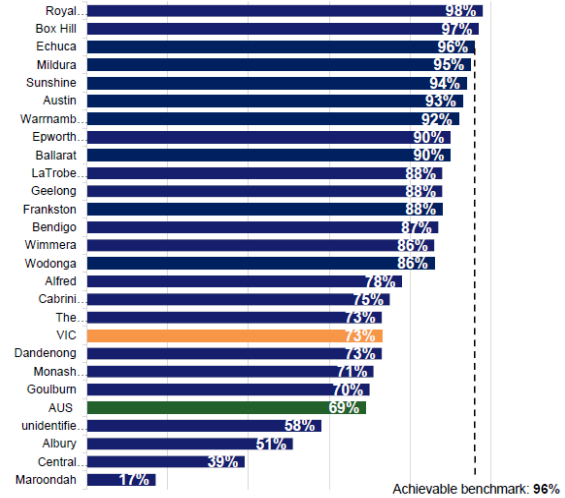
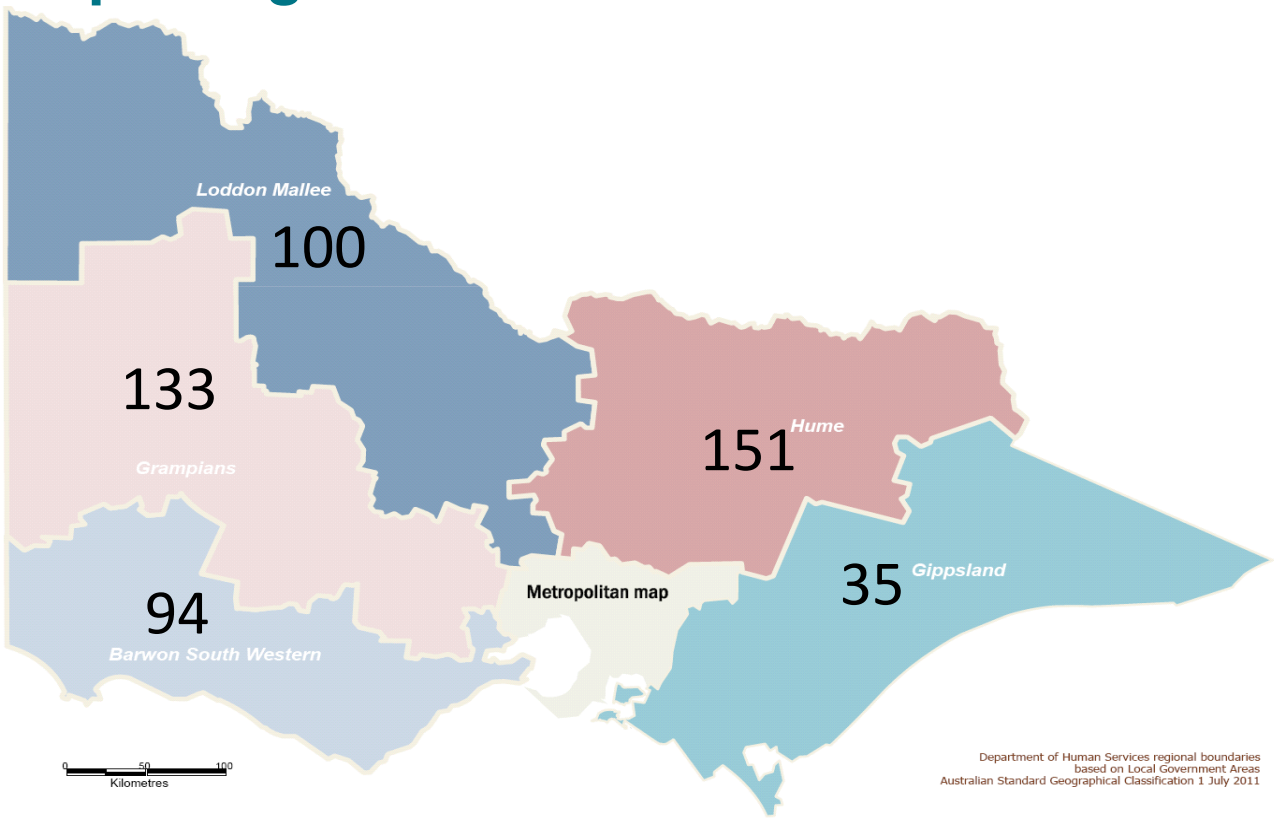


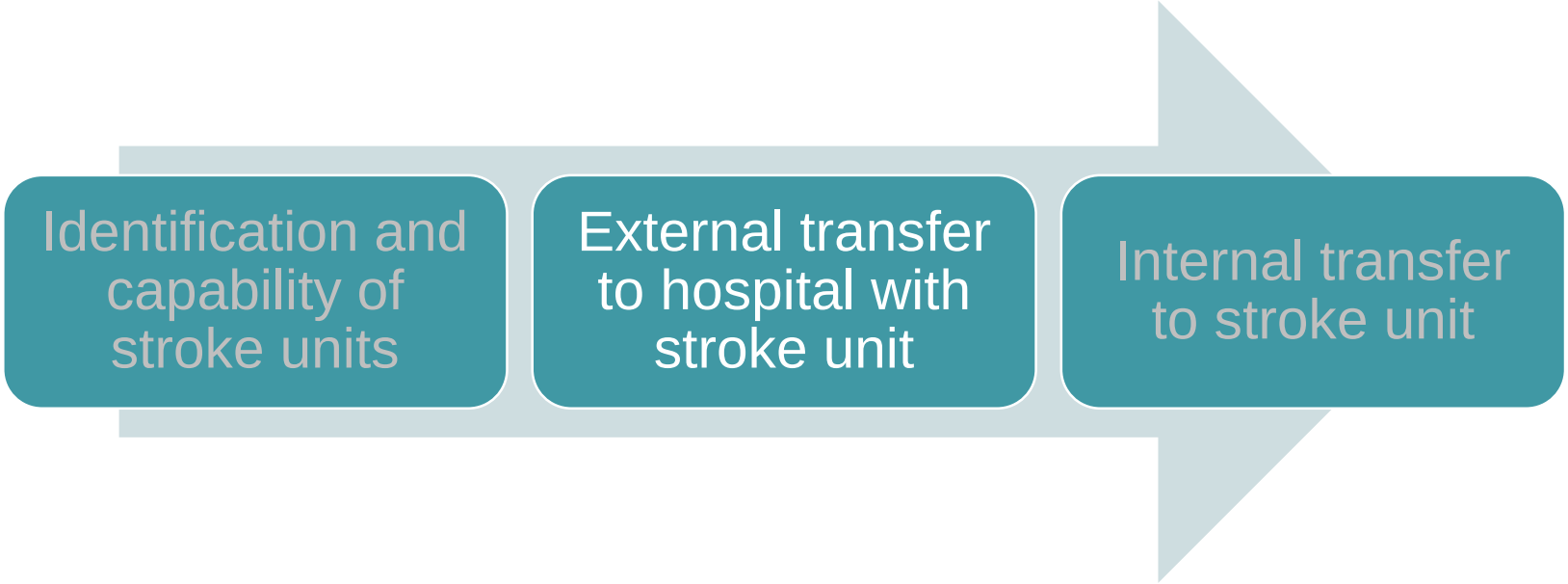
Figure 18: Received Stroke Unit care (all patients), by service



Exploring the data: additional data sources



THEME 2: External transfers



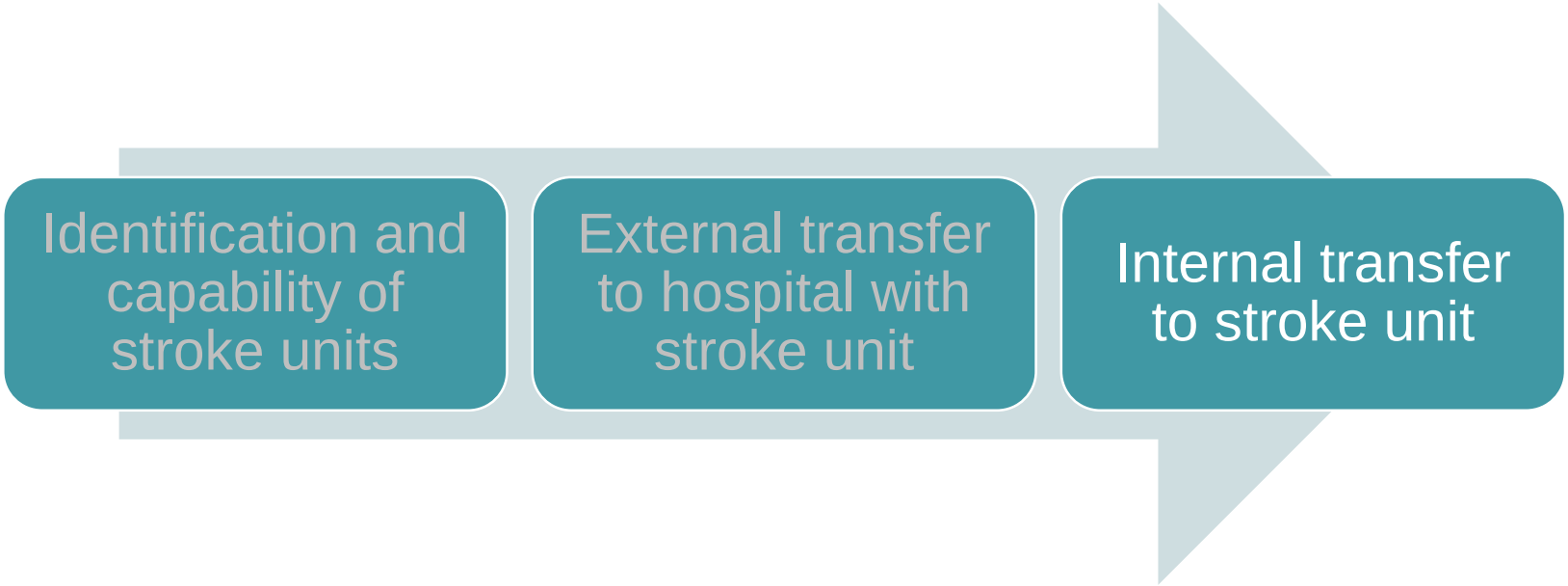
Initial triage and transfer

- Considerations:
  - Within the time window for access to reperfusion therapies
  - Outside the time window for reperfusion therapies
  - The impact of the recently updated ECR protocol timeframes
  - Haemorrhagic stroke population

Secondary transfers

- Considerations:
  - Self presentations to non-stroke hospitals
  - In-hospital strokes experienced at non-stroke hospitals
  - VST sites without stroke units
  - Repatriation from ECR centres
  - Repatriation from neurosurgical centres

THEME 3: Internal transfers



Site visits


Mildura Base Hospital
Robinvale District HS. Robinvale
Mallee Track Health & CS, Ouyen
Swan Hill District Health
Sea Lake & District Health Service Inc
Kerang District Health
Cohuna District Hospital
Cobram District Health
Yarrawonga Health
Albury Wodonga Health, Albury
Albury Wodonga Health, Wodonga
Nathalia District Hospital
Numurkah District HS
Echuca Regional Health
Boort District Health
Rural Northwest Health, Warracknabeal
Tallangatta HS
Upper Murray Health & CS, Corryong
West Wimmera HS, Nhill
Rochester & Elmore District HS
Kyabram & District HS
Northeast Health Wangaratta
Goulburn Valley Health, Shepparton
Beechworth HS
Inglewood & District HS
Benalla Health
Alpine Health, Myrtleford
Dunmunkle HS , Rupanyup
East Wimmera HS, St Arnaud
Wimmera Health Care Group, Horsham
Bendigo Health Care Group
Heathcote Health
Edenhope & District Hospital
Maryborough District HS
Maldon Hospital
Seymour Health
Stawell Regional Health
Castlemaine Health
Mansfield District Hospital
Omeo District Health
Alexandra District Hospital
East Grampians HS, Ararat
Kyneton District HS
Yea & District Memorial Hospital
Hepburn HS, Daylesford
Kilmore & District Hospital
Beaufort & Skipton HS, Beaufort
Casterton Memorial Hospital
Ballarat HS
Djerriwarrh HS, Bacchus Marsh
Melton Health
Orbost Regional Health
Western District HS, Hamilton
Bairnsdale Regional H
Central Gippsland HS, Sale
Heywood Rural Health
University Hospital Geelong
Kooweerup Regional HS
West Gippsland Healthcare Group, Warragul
Terang & Mortlake HS, Terang
Latrobe Regional Hospital, Traralgon
Hesse Rural HS, Winchelsea
Portland District Health
Colac Area Health
Moyne HS, Port Fairy
South West Healthcare, Warrnambool
Timboon & District Healthcare Service
Gippsland Southern HS, Leongatha
Lorne Community Hospital
Yarram & District HS
Bass Coast Health, Wonthaggi
South Gippsland Hospital, Foster
Otway Health, Apollo Bay
0
50
100
Kilometres
Hospitals current at 29 June 2015

Site visits: Summary of findings

Stroke processes

- Admission to ICU/HDU for first 24 hours post thrombolysis in regional Victoria
- Don’t always have a stroke bed card
- Push from ED versus pull from SU

Site visits: Summary of findings

Stroke unit criteria

- Stroke unit beds usually located on medical ward
- Generally no dedicated stroke beds. Flexible bed capacity.
- Rotational medical workforce
- Variable stroke coordinator positions
- Variation of MDT meetings and stroke education and training

Thank you