

A REPORT FOR PATIENTS AND THEIR CARERS

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What is the Australian Stroke Clinical Registry?

The Australian Stroke Clinical Registry (AuSCR) is a program that monitors and reports on the quality of care that is provided to patients who are hospitalised with a stroke or transient ischaemic attack (TIA or 'mini-stroke').

Currently, over 45 hospitals in 6 Australian states participate in the program. Health professionals at these hospitals send information to the AuSCR about the care received by more than 10,000 patients per year.

These patients are contacted by the AuSCR at 90 to 180 days after they are hospitalised in order to ask about their recovery and progress.

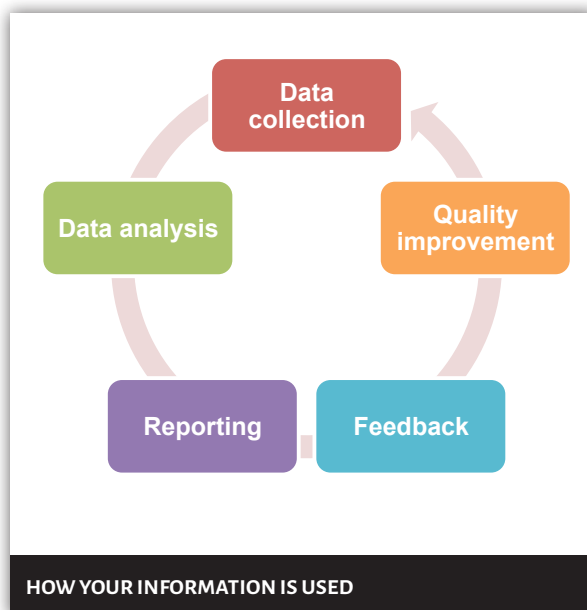
We believe that by working together, patients, families, health professionals and researchers can make a difference to the lives of people affected by stroke.

HOW YOUR INFORMATION IS USED

Information about your care is automatically included in the AuSCR. This has been approved by an ethics committee for each hospital participating in the AuSCR. The information that is collected is used to provide feedback to hospitals about the quality of care that they provide to patients and to identify areas for improvement.


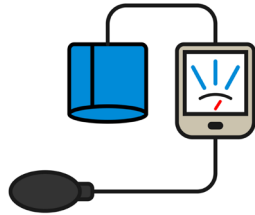
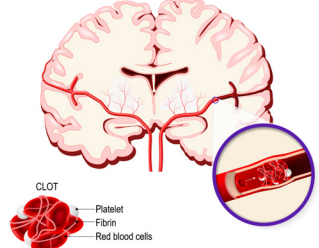

You may choose to have your information removed (opt-out) from the registry, or request that you are not contacted about your progress after you have left hospital. For more information on how to have your information removed, please ask the hospital staff or contact the AuSCR.

Currently, the AuSCR is unable to provide the name of hospitals when reporting quality of care to the public. Similarly, patients will not be identified in any reports produced so that their privacy is maintained.



INFORMATION COLLECTED WHILE IN HOSPITAL



Information collected on patients while they are in hospital includes whether or not someone has received:

<p>CARE ON A STROKE UNIT</p>		<p>MEDICATION TO LOWER BLOOD PRESSURE</p>	
<p>'CLOT-BUSTING' MEDICATION</p>		<p>A DISCHARGE CARE PLAN</p>	

These are explained in further detail on the following pages

INFORMATION COLLECTED AFTER LEAVING HOSPITAL

Patients are contacted by the AuSCR between 90 to 180 days after they are hospitalised in order to ask about their recovery and progress. The information collected includes:

PROBLEMS WITH:	RATING OF HEALTH:
<ul style="list-style-type: none"> > MOBILITY > SELF-CARE > USUAL ACTIVITIES > PAIN AND DISCOMFORT > ANXIETY AND DEPRESSION 	<p>A SCORE OF ZERO TO 100, WITH ZERO REPRESENTING THE WORST HEALTH STATE IMAGINABLE AND 100 REPRESENTING THE BEST HEALTH STATE IMAGINABLE.</p> <div style="display: flex; justify-content: space-around;">   </div>

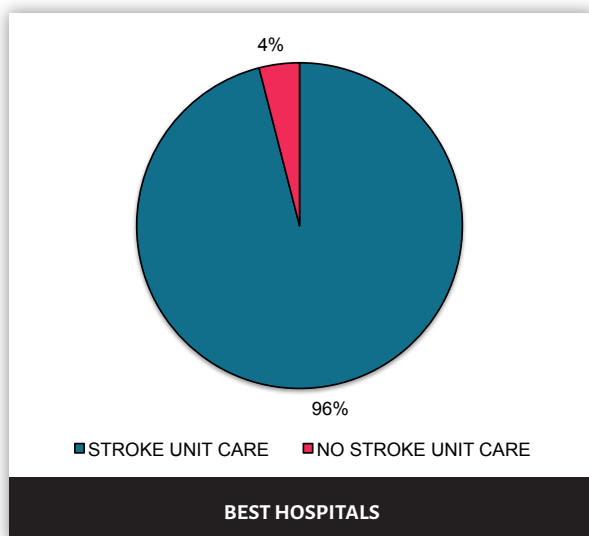
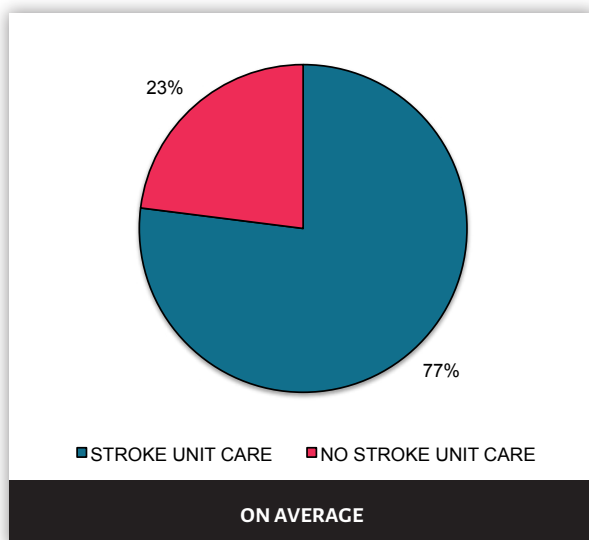
CARE ON A STROKE UNIT

WHAT IS A STROKE UNIT?

A ward or area within a hospital that is dedicated to providing care for patients with stroke or mini-stroke.

WHY IS RECEIVING CARE ON A STROKE UNIT IMPORTANT?

Patients who are treated in stroke units more often receive the care they require and, in turn, are healthier in the long-term.



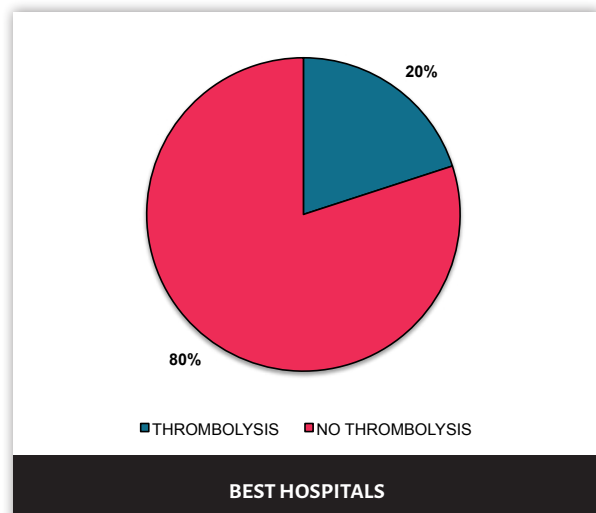
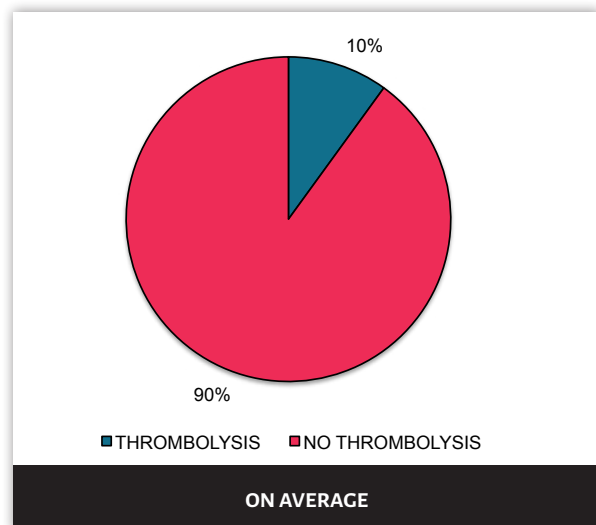
CLOT-BUSTING MEDICATION

WHAT IS CLOT-BUSTING MEDICATION?

A clot-busting medication (known as thrombolysis) may only be provided within the first few hours after the onset of a stroke caused by a blocked artery in the brain. Arriving to hospital after the allowable time is a major reason why this medication is not provided.

WHY IS THIS IMPORTANT?

The clot-busting medication dissolves the clot that is blocking blood flow to the brain. This medication can prevent or reduce disability caused by a stroke.



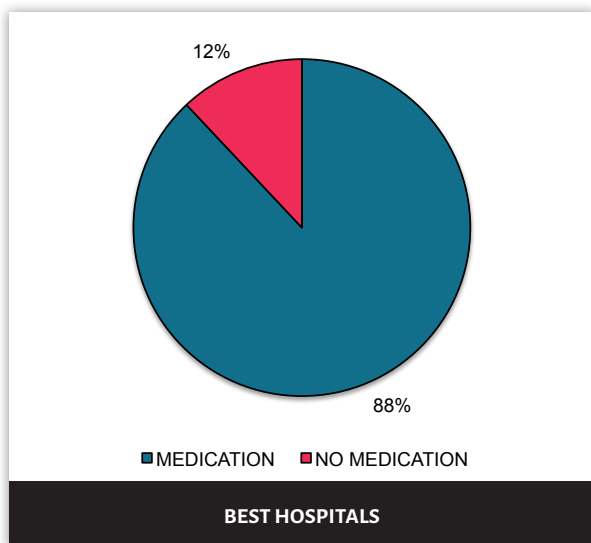
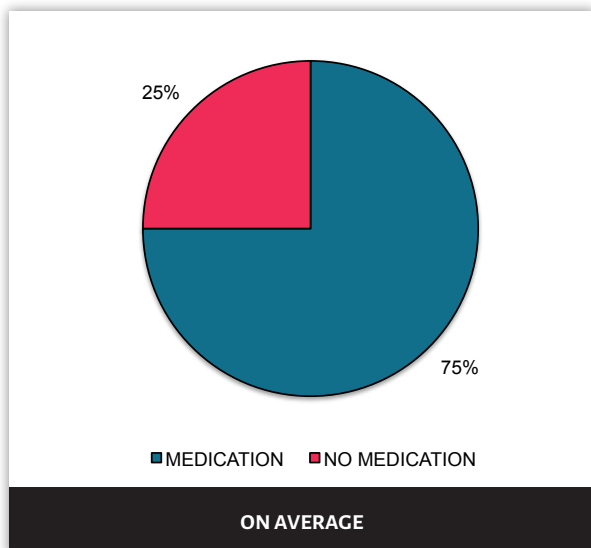
DATA COLLECTED IN 2015

MEDICATION TO LOWER BLOOD PRESSURE

DISCHARGE CARE PLAN

WHY IS RECEIVING MEDICATION TO LOWER BLOOD PRESSURE IMPORTANT?

High blood pressure is a major cause of stroke and lowering blood pressure reduces the risk of having another stroke. Those who do not have high blood pressure can also benefit from this medication. This medication should be provided when you leave hospital.

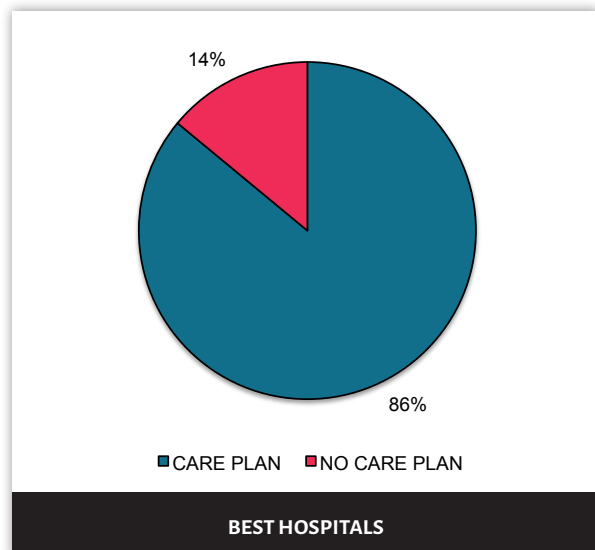
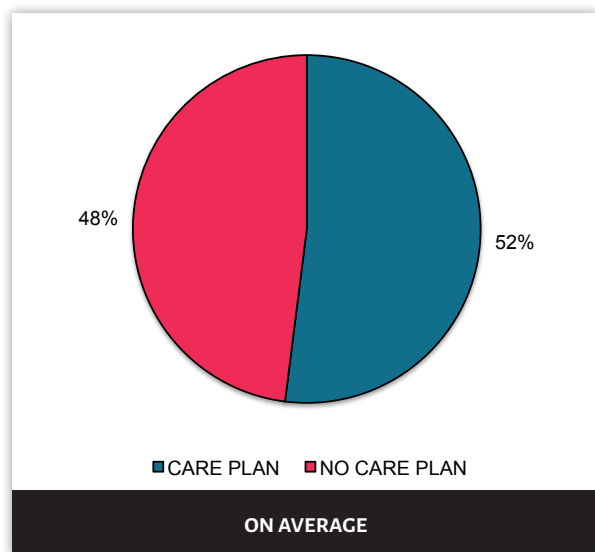


WHAT IS A DISCHARGE CARE PLAN?

A written plan that details the next steps for care and recovery after leaving hospital.

WHY IS RECEIVING A DISCHARGE CARE PLAN IMPORTANT?

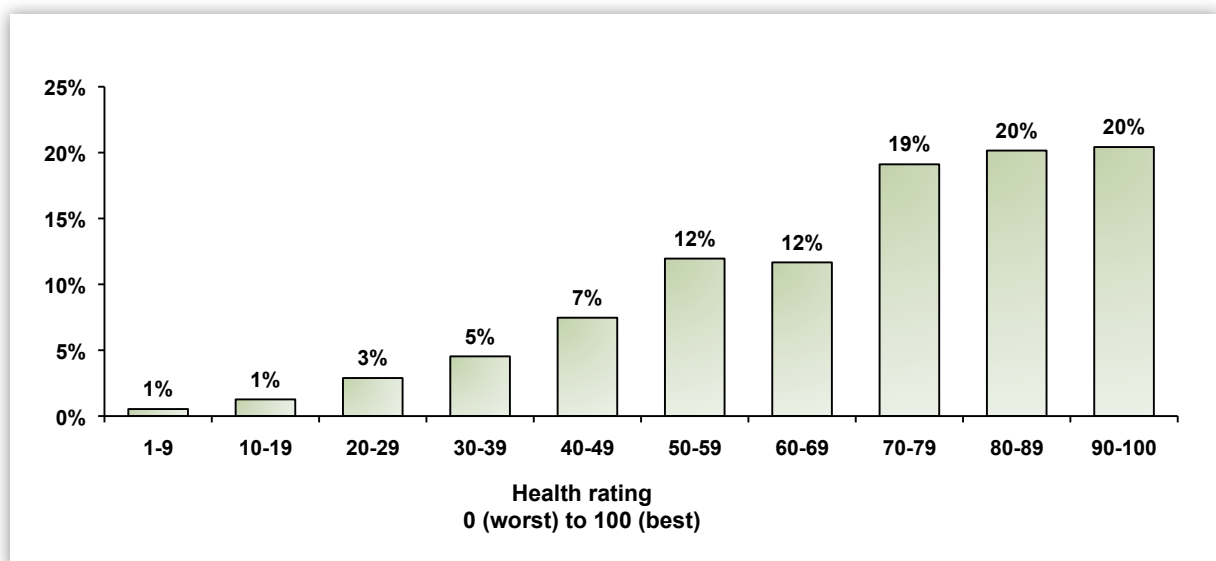
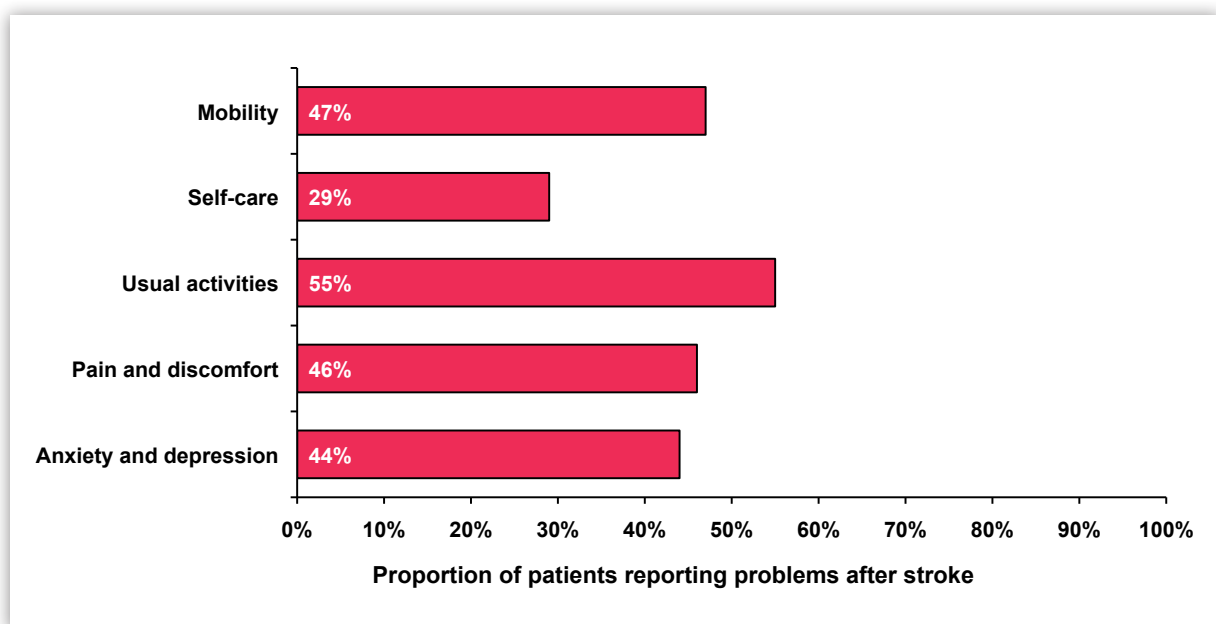
Recovery and treatment do not finish in hospital. A plan that details additional care required after leaving the hospital should be developed with you and your family. You should then discuss this plan with your doctor.



DATA COLLECTED IN 2015

RECOVERY AND PROGRESS AFTER STROKE

Below is information collected from patients between 90 to 180 days after being in hospital:



DATA COLLECTED IN 2015 AND 2016

USEFUL RESOURCES AFTER STROKE

THE STROKE FOUNDATION

www.strokefoundation.org.au

The Stroke Foundation website has information about:

- » symptoms of stroke and the FAST message
- » risk factors for stroke
- » treatments for stroke
- » how to prevent stroke
- » recovery after stroke
- » assistance available after stroke

STROKELINE

Strokeline: 1800 787 653

Strokeline is a free call number operated by the Stroke Foundation. It is available between 9am and 5pm EST, Monday to Friday. They can help answer any questions you might have.

ENABLE ME

www.enableme.org.au

Here you can read about other people's experiences with stroke, and share your own.

CARERS AUSTRALIA

Carers Australia: 1800 242 636

A useful free call resource offering information and counselling to carers from 8:30am to 4:30pm, Monday to Friday.

BEYOND BLUE

Beyond Blue: 1300 224 636

Beyond Blue provides compassionate information for those experiencing mood disorders. The free call phone line is available 24 hours a day, 7 days a week.

More information about the AuSCR is available on the website www.auscr.com.au

Keep updated on our progress using

 Twitter: @AustStrokeReg