





# NATIONAL SNAPSHOT





The Australian Stroke Clinical Registry (AuSCR) was established in 2009 to collect information to monitor and improve the quality of acute stroke care. This report provides summary information on the quality of care provided to people with stroke at the participating Australian hospitals and their long-term health outcomes. The data highlights areas we are doing well and other areas we need to improve.

## AUSTRALIAN STROKE CLINICAL REGISTRY IN 2023

	<b>65</b> hospitals		<b>7</b> states and territories
	<b>18,662</b> episodes of stroke		<b>5 in 6</b> strokes were ischaemic

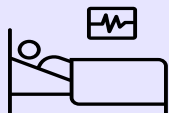
## ADHERENCE TO THE ACUTE STROKE CLINICAL CARE STANDARD (adult episodes)\*

The [Acute Stroke Clinical Care Standard](#) includes quality statements describing the care that should be offered to a person after a stroke. Collecting data and reporting on these standards of care can assist hospitals and health departments to monitor how well they care for people with stroke and identify areas to direct efforts to improve care.

Clot-busting medication		Endovascular Therapy	
Clot-busting medication (thrombolytic therapy) can dissolve the clot that is causing the stroke and restore oxygen to the brain. This medication, known as thrombolysis, needs to be provided as soon as possible after the onset of a stroke and can reduce the risk of disability.		Endovascular therapy (EVT) is a procedure to remove a large blood clot that is found to be blocking a blood vessel in the brain. Specialised skills are required to perform this procedure and it is only available at some large hospitals in Australia.	
	<b>13%</b> of patients received clot-busting therapy		<b>11%</b> received endovascular therapy
	<b>35%</b> received clot-busting therapy within target time		Median time from arrival to surgery <b>110 mins</b>

### Care in a stroke unit

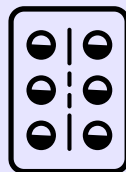
A stroke unit is a ward or area within a hospital that is dedicated to providing care for patients with stroke. Patients who are treated in stroke units more often receive the care they require and have better outcomes after stroke.



**1 in 5**  
were **not** treated in a  
stroke unit

### Secondary prevention medications

Different types of medication may be given to patients to prevent future strokes.



**82%**  
discharged with  
blood-pressure  
lowering  
medications



**92%**  
discharged with  
lipid-lowering  
medications



**97%**  
discharged with  
blood-thinning  
medications

### Discharge Care Plan

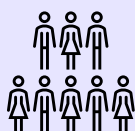
A discharge care plan is a personalised written plan that details the next steps for care and recovery after leaving the hospital. This should be developed with patients and their families or support people and be provided before leaving the hospital.



**75%**  
received a care plan  
on discharge

### LONGER-TERM PATIENT OUTCOMES (3-6 months, adult episodes)

Eligible patients are contacted to complete a survey about their current health status between three and six months after admission to hospital for stroke.



**6,812**  
people living with  
stroke completed the  
survey



**1 in 5**  
reported being  
readmitted to  
hospital



**1 in 2**  
reported problems  
with mood, mobility,  
pain, or usual  
activities



**1 in 3**  
reported moderate  
to severe disability

\* Episodes of transient ischaemic attack and data from two hospitals that began participation in the AuSCR in 2023 and provided predominantly demographic data only have been excluded from clinical data reporting.



The AuSCR is pleased to endorse the National Stroke Targets.  
For more information, please see the [AuSCR 2023 Annual Report](#).



The Florey



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