

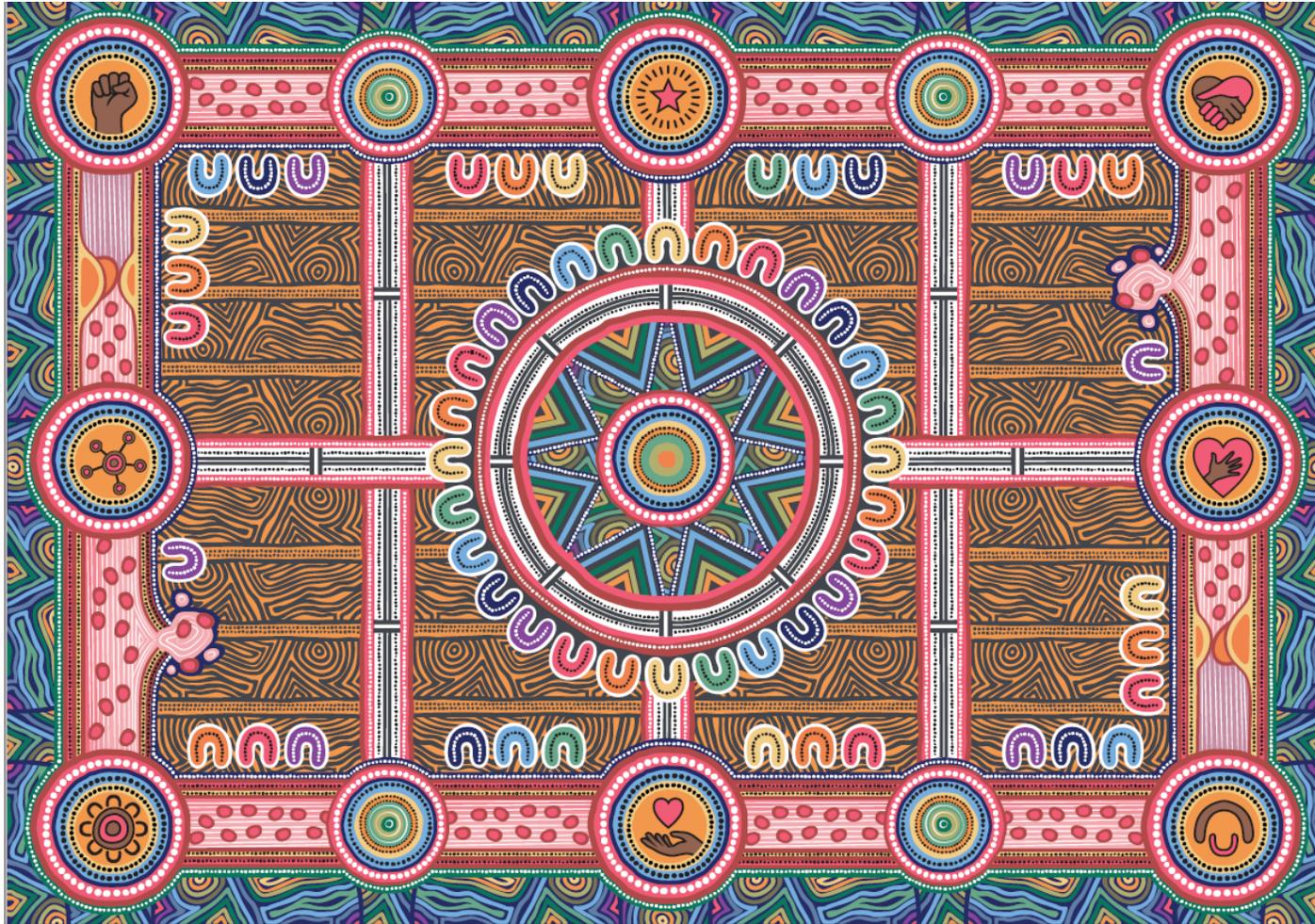


Data....a life saver

CDAO Melbourne, 2023

Dr Lisa Murphy





Artist: Carissa Paglino

I would like to acknowledge the Traditional Owners and Custodians of Country throughout Australia and acknowledge their continuing connection to land, water, sky and community. And pay my respect to the peoples, cultures, and Elders past and present for they hold the memories, culture and hope of their peoples.

I would like to acknowledge that I am joining you from the lands of the Wurundjeri people of the Kulin Nation.

Coming up

Stroke

Stroke Learning Health System and patient outcomes

Lived experience perspective

Challenges and solutions

What can you do?

What is stroke?

What is a stroke?



What is a transient ischaemic attack (TIA)?

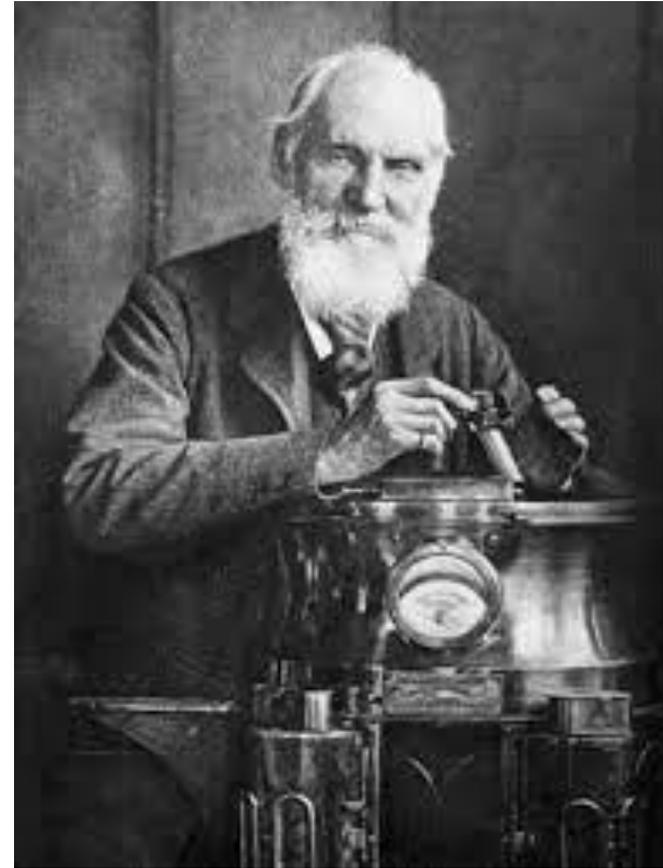
- › A TIA happens when blood supply to your brain is blocked temporarily
- › The signs are the same as a stroke, but they disappear within a short time
- › TIA is a **warning** that you may have a stroke and an **opportunity** to prevent this
- › If you suspect stroke – **call triple zero (000) immediately.**
Treat a TIA as a stroke

Stroke in Australia

- **28,000** first strokes are experienced by Australians every year....that's one **EVERY 19 Minutes**
- **450,000** Australians are living with stroke
- **24%** of new strokes occur in people **aged 54 years and under**, an increase from 14% in 2012

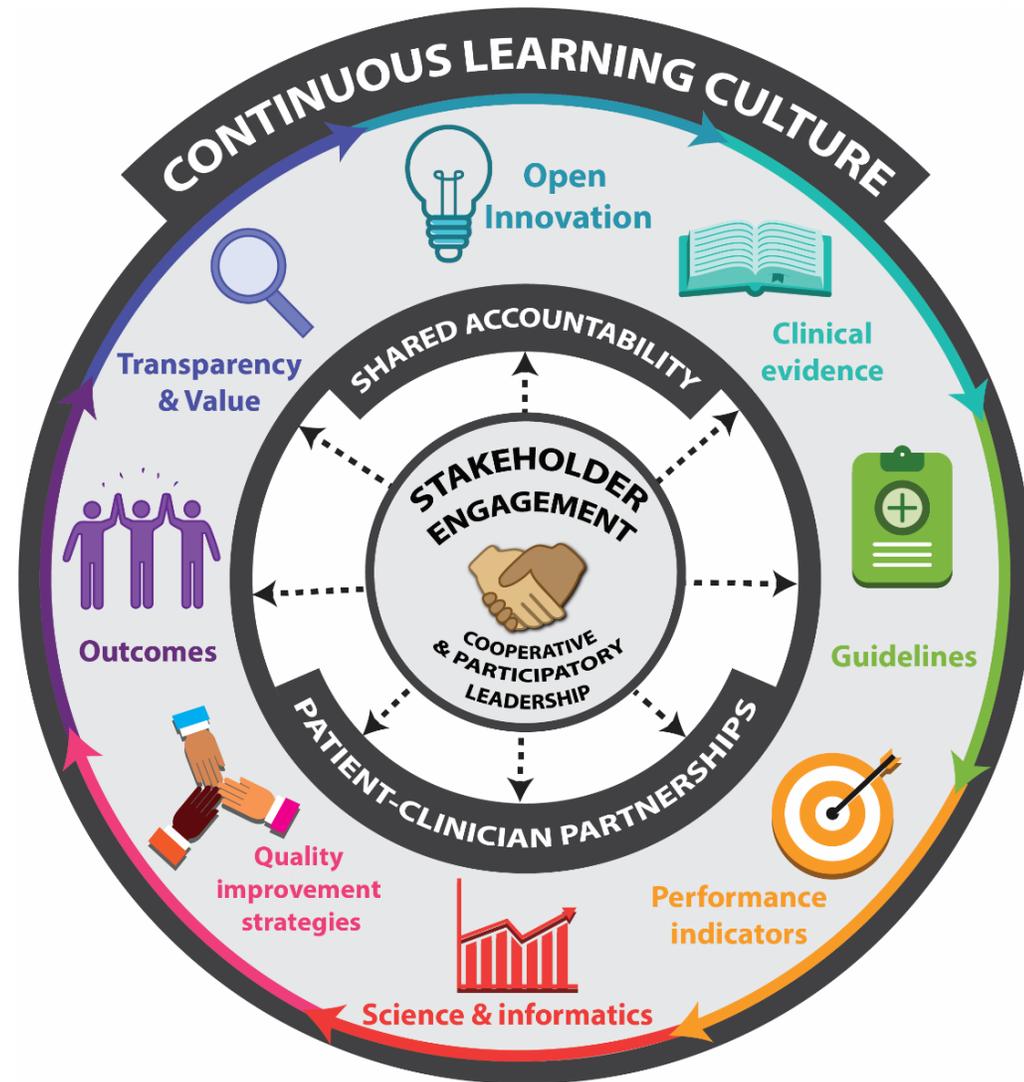
Stroke Learning Health System

*If you can't measure it,
you can't manage it*
Peter Drucker (1909-2005)

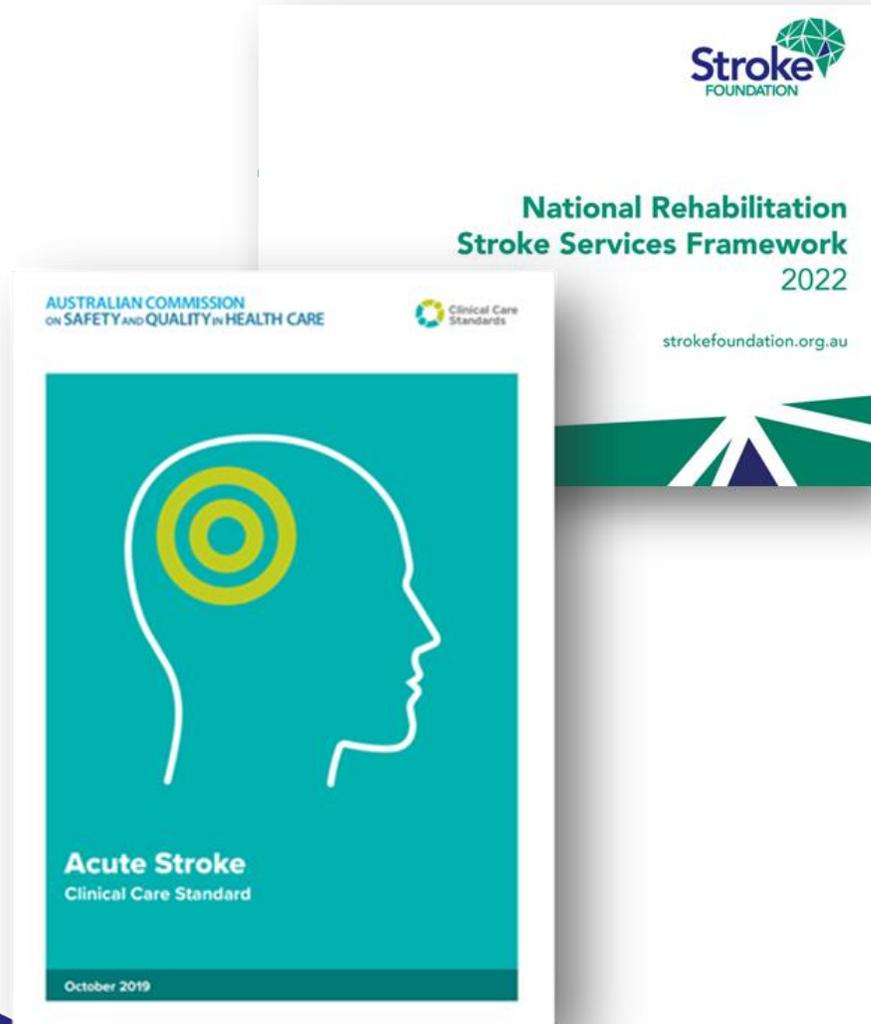


*If you can't measure it,
you can't improve it*
Lord Kelvin (1824-1907)

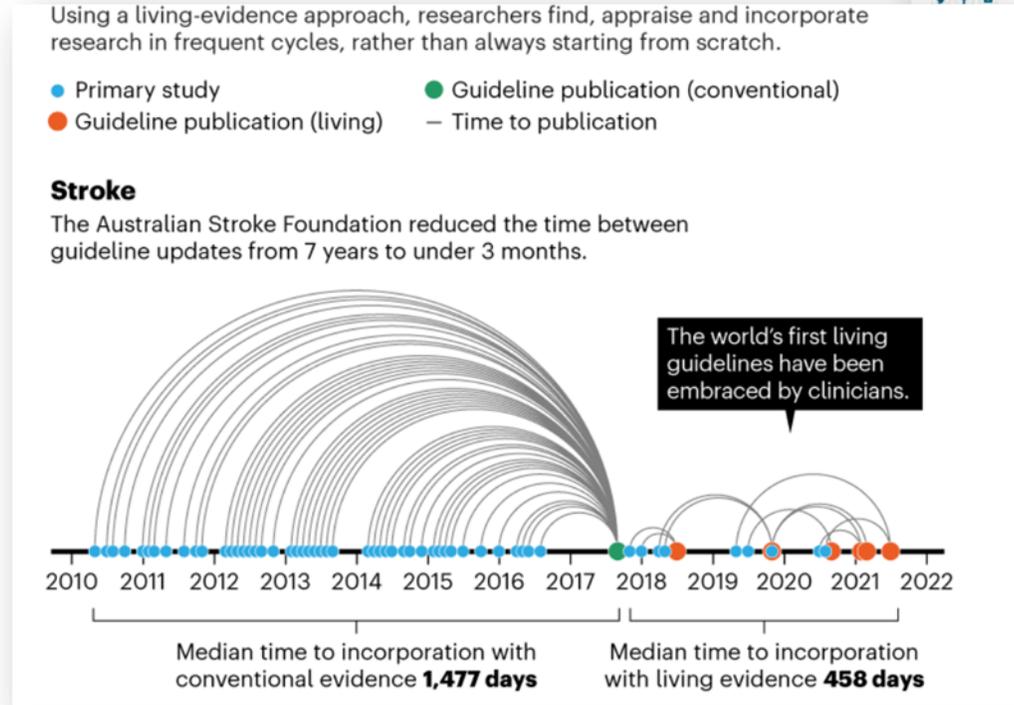
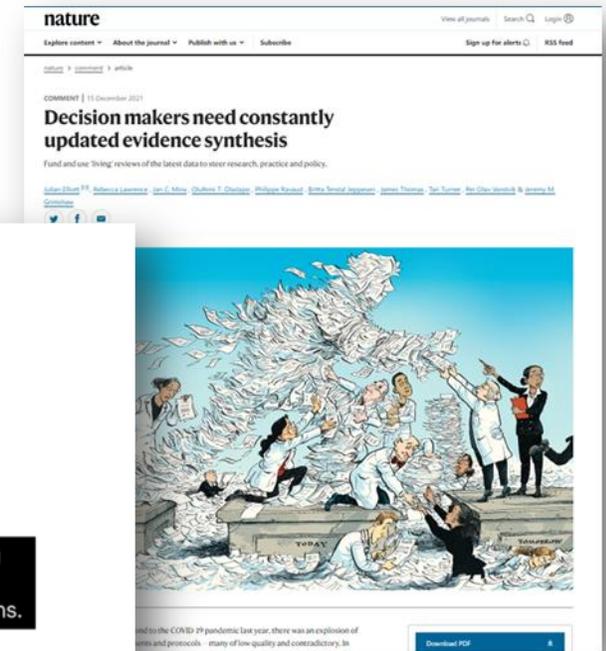
Stroke Learning Health System



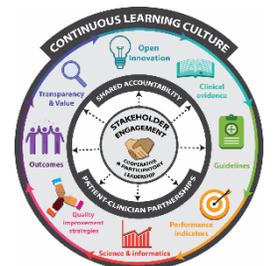
Clinical guidelines, frameworks and care standards



InformMe

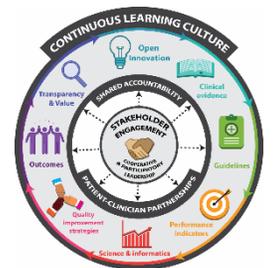
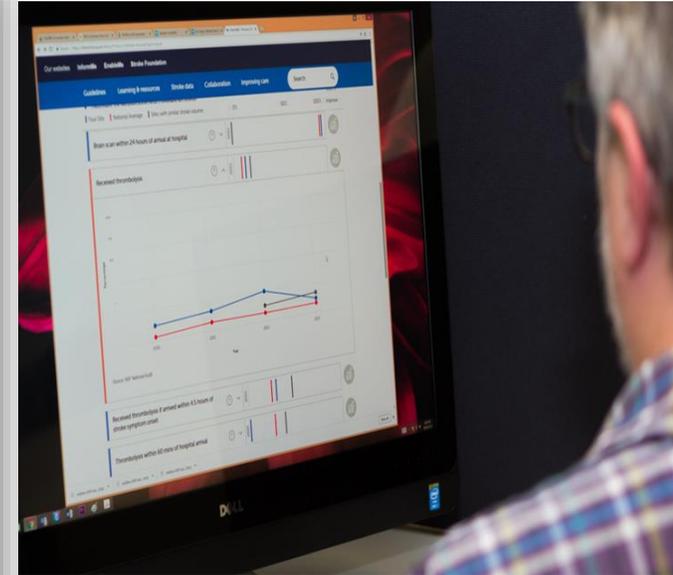
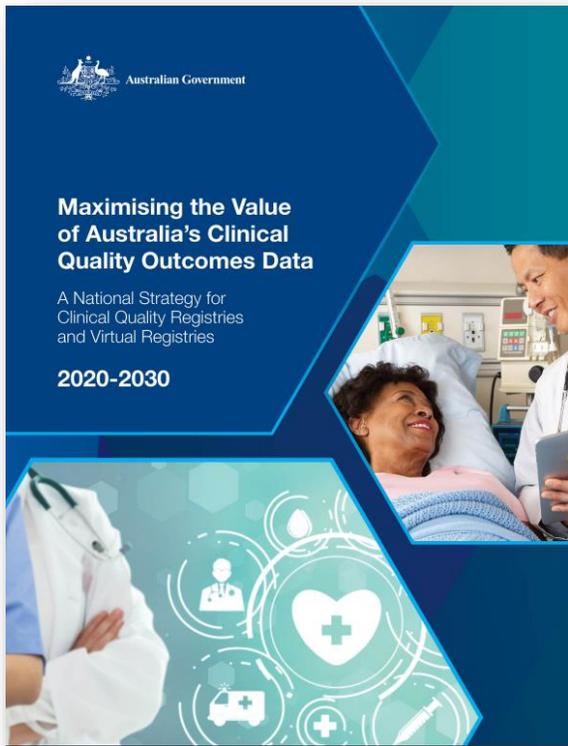


Elliott J et al 2021, Nature

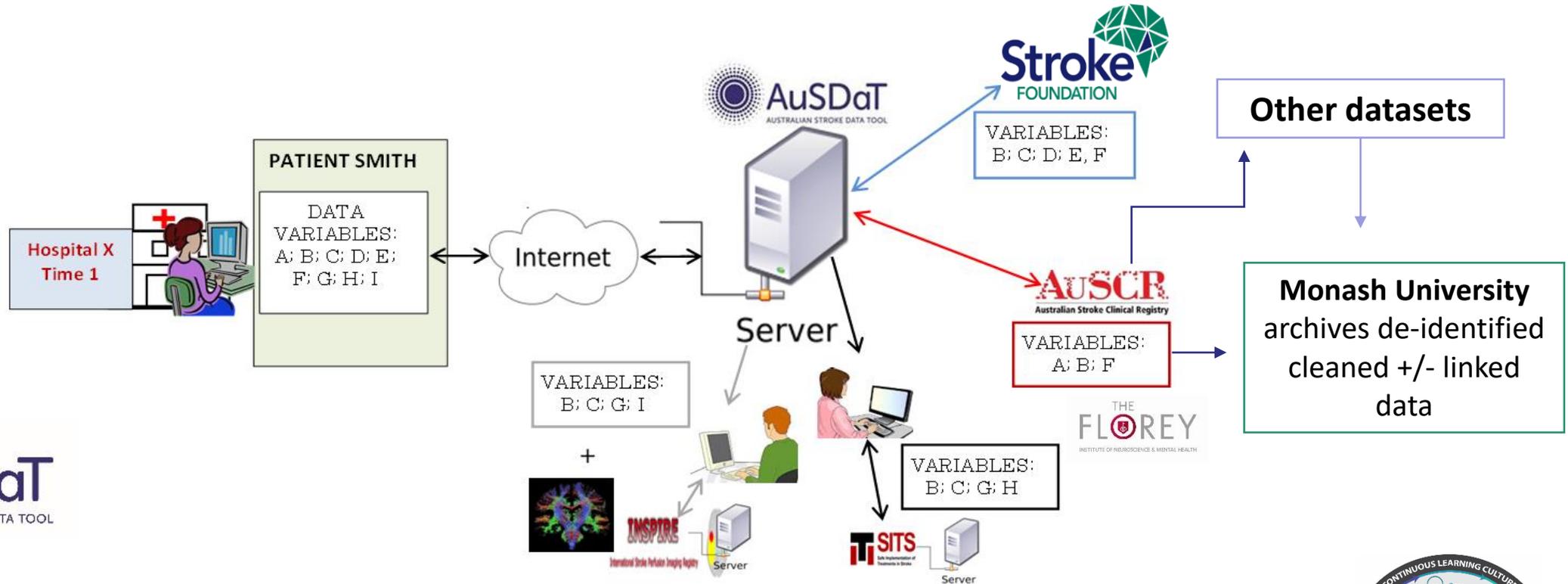


Source: Kelvin Hill, Heidi Li, Simon Turner, Jordi Elliott, Andrew Duan

Data collection and analysis

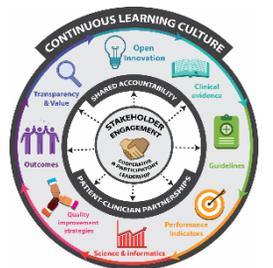


Data platform: Australian Stroke Data Tool facilitates ‘collect once use many’



Established 2015, first used for AuSCR in 2016

Ryan O, Ghuliani J, ..., Cadilhac DA. Development, Implementation and Evaluation of the Australian Stroke Data Tool (AuSDaT): comprehensive data capturing for multiple uses. *Health Information Management Journal*. 2022 doi:10.1177/18333583221117184



Quality improvement activities

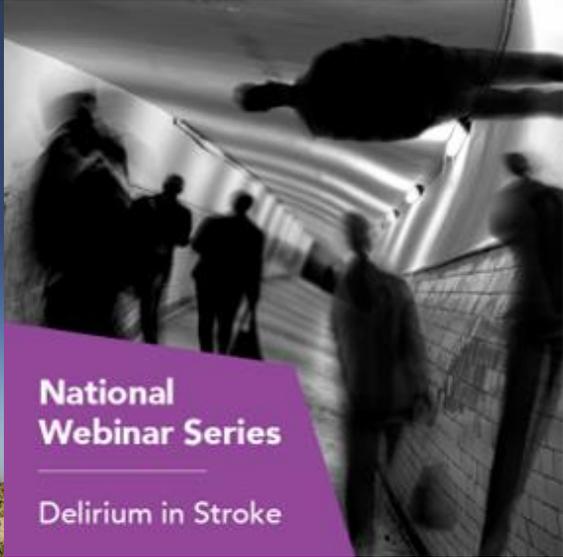
National Webinar Series



National Webinar Series
Introduction to Secondary Prevention Webinar

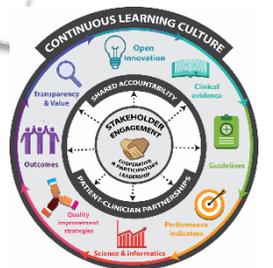


National Webinar Series
Delirium in Stroke



Improved patient care and outcomes

- Overall improvements found in the quality of acute care provided over last 10 years
- Continued monitoring is important to identify gaps in practice and equity of access issues
- Proactive, data-driven and theory-informed efforts to reduce the gaps are ongoing

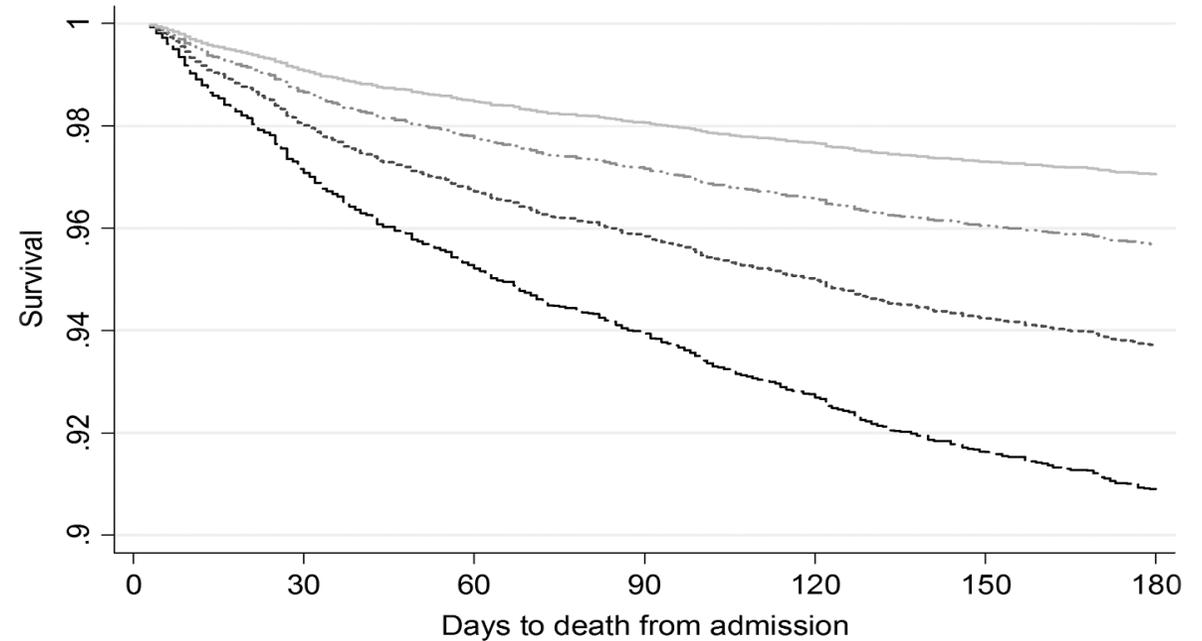


Improved patient care and outcomes

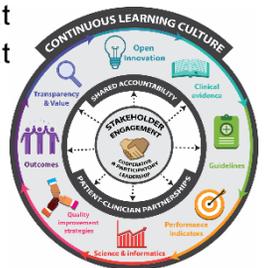


Within 180 days:

- 70% reduced hazard of death
- 18-point increase in QoL



——— 0 quality indicators - - - - - 1 quality indicat
 - · - · - 2 quality indicators ——— 3 quality indicat



Improved patient care and outcomes

76% (87/115) use telehealth services for acute assessment/treatment (31 provide service to other hospitals)

	Formal telestroke service 25 hospitals N=860 cases	No formal telestroke service 13 hospitals N=412 cases
Thrombolysis (IS)	76/723 (11%)	23/294 (8%)
Thrombolysis within 60 mins of hospital arrival	19/76 (25%)	2/23 (9%)
Median door to needle time (hours:minutes) (median, Q1, Q3)	1:14 (1, 1:45)	1:47 (1:27, 2:17)
Median time from onset to thrombolysis (hours:minutes) (median, Q1, Q3)	2:48 (2:13, 3:32)	3:47 (2:32, 4:41)



Lived experience expert

Lived experience expert perspective

Ms Jennifer Muller









The challenges and solutions

The challenges

- Funding and technology constraints
- Data siloes compromise ready access to the data
- Increasing complexity for linkage across data sets
- Economies of scale lacking: no shared technology, licensing or resourcing
- Security and privacy concerns
- Population level reporting is achieved by very few registries
- Timely reporting of data is lacking

The challenges

- AuSDaT v2.0
- Implementation of recommendations from external review of AuSCR
 - National
 - Live reporting
 - State-based sustainable funding
 - Focus on quality improvement
- Stroke Unit Certification pilot

What can you do?

Learn the F.A.S.T. signs of
STROKE

 **F**ACE
drooped?

 **A** RMS
can't be raised?

 **S** PEECH
slurred or confused?

 **T** I ME
is critical! Call 000.

If you see any of these signs
Act FAST call triple zero (000)





**Help
Stroke Foundation
support our stroke
community.**

**Scan here and donate
today!**

Summary



Summary

- Data does improve patient outcomes
- Lived experience perspective is key
- Challenges
- Solutions

Acknowledgements

Thank you to all the hospitals that participate in the National Stroke Audit, AuSCR and clinicians who contributed to data collection



InformMe



lmurphy@strokefoundation.org.au

dominique.cadilhac@florey.edu.au