

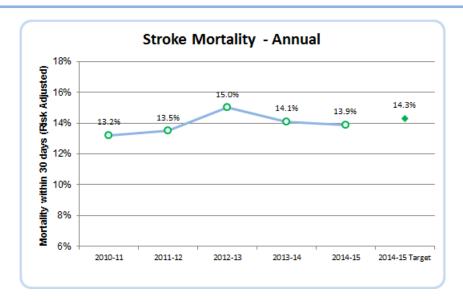
Stroke Mortality

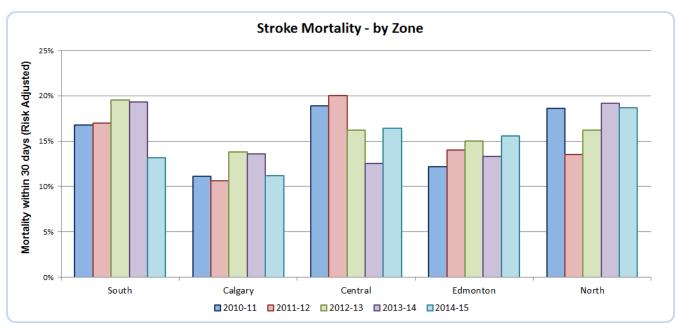
Measure Definition

The probability of dying in hospital within 30 days for patients admitted because of stroke. This measure represents hospital deaths occurring within 30 days of first admission to a hospital with a diagnosis of stroke. This measure is adjusted for age, sex and other conditions.

Understanding this Measure

Stroke is a significant cause of death and disability in the Canadian population. This rate may be influenced by a number of factors, including effectiveness of emergency treatments and quality of care in hospitals.







Stroke Mortality – Actions

Provincial/ Strategic Clinical Network (SCN)

- Preparing for transition to operations for the stroke unit equivalent care (SUEC) at 13 primary stroke centres and early supported discharge (ESD) at 5 primary stroke centres. This initiative is part of the Stroke Action Plan supported by the Cardiovascular Health and Stroke SCN.
- Redesign aspects of the provincial stroke system of care to improve access to Endovascular Therapy (EVT).
- Implement local process improvements to improve Door-to-Needle (DTN) times for tPA for acute stroke; and reduce median DTN times.

South

- Continued implementation, monitoring, and evaluation of Rural Stroke Action plan: ESD, SUEC and Community support of stroke patients.
- Continue work with SCN to implement best practice in stroke care.

Calgary

- Continued improvement in Door-to-Needle (DTN) times for tPA for acute stroke; and a reduction in median DTN times.
- Incorporate quality review of Alberta stroke strategy guidelines in the action plan including SUEC at primary stroke centres.

Central

- Lower Door-to-Needle Time for acute ischemic strokes at Primary Stroke Centres.
- Sustain and enhance SUEC at Primary Stroke Centres.

Edmonton

 Increase access to same day assessment for high risk TIA (Transient Ischemic Attack) Orders Set patients.

North

- Collaborate in the Worksite Vascular Screening & Early Management Demonstration Projects.
- Engage and actively participate in the QuICR Door to Needle Initiative.

IN SUMMARY

Heart disease and stroke share many of the same risk factors. Understanding how these conditions are connected and coordinating decision-making based on this information allows AHS to improve care for patients.

DID YOU KNOW

The Stroke Action Plan (SAP) addresses the quality of and access to stroke care in rural and small urban stroke centres across Alberta.

SAP includes various initiatives including creating standards for stroke unit equivalent care (SUEC) for small rural centres and facilitating early supported discharge (ESD) from acute care by delivering expert stroke rehabilitation into community-based services.



Stroke Mortality – Zone Details

The probability of dying in hospital within 30 days for patients admitted because of stroke. This measure represents hospital deaths occurring within 30 days of first admission to a hospital with a diagnosis of stroke. This measure is risk adjusted for age, sex and other conditions.

				Q4 YTD			2014-15
Stroke Mortality within 30 days	2011-12	2012-13	2013-14	2013-14	2014-15	Trend *	Target
				Last Year	Current		8
Provincial	13.5%	15.0%	14.1%	14.1%	13.9%	1	14.3%
South Zone	17.0%	19.5%	19.3%	19.3%	12.2%	1	17.8%
Calgary Zone	10.6%	13.8%	13.6%	13.6%	11.7%	1	13.2%
Central Zone	20.0%	16.2%	12.5%	12.5%	16.3%	\downarrow	15.5%
Edmonton Zone	14.0%	15.0%	13.3%	13.3%	14.8%	\downarrow	14.4%
North Zone	13.5%	16.2%	19.2%	19.2%	20.3%	\downarrow	15.6%

Trend: \uparrow Improvement \rightarrow Stability \downarrow Area requires additional focus

Stroke Cases (Index)*	2011-12			Q4 YTD	
		2012-13	2013-14	2013-14	2014-15
				Last Year	Current
Provincial	3,236	3,329	3,316	3,316	3,564
South Zone	212	198	242	242	283
Calgary Zone	1,222	1,313	1,251	1,251	1,310
Central Zone	331	314	299	299	323
Edmonton Zone	1,243	1,265	1,305	1,305	1,412
North Zone	228	239	219	219	236

^{*}Total number of hospital stays where a first stroke was diagnosed.