NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

# NICE indicator guidance

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## Indicator CCG51

The proportion of people who have had or are having a stroke who are admitted to an acute stroke unit within 4 hours of arrival to hospital.

## Indicator type

Clinical commissioning group indicator.

## Rationale

People with stroke who receive timely treatment on specialist stroke units have better health outcomes. It is therefore important that all people with stroke are admitted to specialist stroke units as quickly as possible.

## Source guidance

[Stroke and transient ischaemic attack in over 16s: diagnosis and initial management. NICE guideline NG128](https://www.nice.org.uk/guidance/ng128) (2019), recommendation 1.3.1.

## Specification

Numerator: The number of acute stroke patients whose first ward of admission is a stroke unit AND who arrive on the stroke unit within 4 hours of arrival at hospital, except for those patients who were already in hospital at the time of new stroke occurrence, who should instead be admitted to a stroke unit within 4 hours of onset of stroke symptoms.

Denominator: All patients admitted to hospital with a primary diagnosis of stroke, except for those whose first ward of admission was ITU, CCU or HDU.

Calculation: (Numerator/denominator)\*100

Exclusions: Patients aged 15 and under.

Data source: [Sentinel Stroke National Audit Programme](https://www.strokeaudit.org/).

Minimum population: The indicator would be appropriate to assess performance of individual CCGs.

## Further information

This is NICE indicator guidance, which is part of the [NICE menu of indicators](https://www.nice.org.uk/Standards-and-Indicators/index). This document does not represent formal NICE guidance.