



Stroke and ischaemic attack: 4-hour admission to a stroke unit

NICE indicator

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www.nice.org.uk/indicators/ind34

Indicator

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

Network / system level indicator.

The indicator would be appropriate to understand and report on the performance of networks or systems of providers.

This document does not represent formal NICE guidance. For a full list of NICE indicators, see our [menu of indicators](#).

To find out how to use indicators and how we develop them, see our [NICE indicator process guide](#).

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 (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 intensive therapy unit, critical care unit, or high dependency unit.

Calculation: Numerator divided by the denominator, multiplied by 100.

Exclusions: Patients aged 15 and under.

Data source: [Sentinel Stroke National Audit Programme \(SSNAP\)](#).

Minimum population: The indicator would be appropriate to assess the performance of

networks or systems of providers.

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