



THE CHALLENGE FOR THE 21st CENTURY



→ Brain disorders, both neurodevelopmental and neurodegenerative, will be the most disabling and most costly of the chronic diseases. They will be in the 21st century what infectious diseases were in the 20th century.

Stroke is a leading cause of death in the United States. 6.8 million Americans have had a diagnosed stroke. Approximately 795,000 American adults will have a first or recurrent stroke each year. Almost 136,000 Americans of all ages died of a stroke in 2009.

According to the American Heart Association/American Stroke Association (AHA/ASA), the estimated direct and indirect cost of stroke to the United States for 2010 was \$53.9 billion.

- Direct financial cost for care: \$28.3 billion.
- Indirect cost (measured in lost productivity):\$25.6 billion.

Acute Stroke Care Certification is an opportunity for healthcare organizations providing acute stroke intervention and treatment to demonstrate their commitment to excellence. The AACI Clinical Excellence certification process is voluntary and is intended to help healthcare organizations identify and correct problems associated with their delivery





of stroke care and to educate the community and other interested parties on the prevention of this deadly disease.

Additionally the program is designed to help improve the consistency and quality of care, patient satisfaction, and cost of services both in the acute setting and long term phase of rehabilitation.

Certification standards help to organize clinical management and facilitate consistency within the quality management system. A high level of program success is achieved using effective data-driven and rate based performance indicators. Achievement of clinical excellence certification signifies that the services you provide have the critical elements to achieve long-term success in improving clinical outcomes.

AACI Clinical Excellence Standards for Acute Stroke allows a healthcare institution to operate within its own scope of care and clinical management system - from hyper-acute emergency intervention to complete comprehensive diagnostic and rehabilitative services. We feel you know what areas of care and improvement are unique to your facility and community. Therefore we ask you to set, monitor and measure, and improve specific goals best associated with your needs.

Additionally AACI asks that each facility incorporate the methodology and reporting recommendations of the AHA/

ASA and the Brain Attack Coalition or similar organization in other areas of the globe. These efforts shall be consistent with and applicable to the individual facility's scope of care. Stroke Care Centres certification is based on:

- Effective use of recommendations and clinical practice guidelines to manage care.
- Implementation of performance measurement and improvement activities unique to your hospital,
- Reference to and guidance from a set of nationally recognized treatment goals as, for example, outlined by AHA/ASA in the United States.

At AACI we believe that every patient throughout the world using Stroke Care Centres services should receive the best care possible.

AACI provides expertise around the globe to develop healthcare standards in line with international best practice. Our goal is to help share good practice and innovation by utilising the knowledge and experience of experts, practitioners and patients, and to set measurable standards which encourage healthcare facilities to continually improve and evolve.

→ We have developed a comprehensive set of Standards specifically for Acute Stroke Centres; they are written to encourage services to develop and improve the clinical services that they offer.

AACI has utilised systematic reviews that have been undertaken recently within Stroke Care Centres, and used international evidence based clinical guidelines, to produce a set of Clinical Excellence Standards. These Standards will allow Stroke Care Centres to review themselves internally, and be externally surveyed in order to aid continual improvement in the quality of the service offered.

The survey process has been designed to ensure that there is as little burden to the Stroke Care Centre in terms of

preparation as possible. At AACI we believe that the survey and survey team should cause minimal disruption and be mutually focused on improvement.

Risk Based Approach

AACI survey team will always include clinicians who will review open and closed health records. This will ensure that the surveyors review the complexity and types of care managed by the service in real time.

Benefits of AACI Clinical Excellence Certification

The AACI Clinical Standard for Stroke Care Centres is designed to help:

- Strengthen community confidence in the quality and
- safety of care, treatment, and services,
- Promote a culture of excellence across the organization,
- Improve the quality of patient care by reducing variation in clinical process,
- Provide a framework to support the delivery of quality improvement,
- Contribute to embedding risk management into the SCC's culture,
- Reduce the likelihood of clinical error occurring and therefore reduce the financial costs of adverse events occurring in terms of additional treatment and days in hospital,

Achieving AACI Clinical excellence certification is an opportunity for you to document that your facility offers a quality environment which takes safety seriously and strives for continual improvement. You can use your Certificate of Excellence to provide assurance to your staff, your community, and other external stakeholders that you are committed to the prevention and treatment of stroke. AACI is committed to assisting your efforts by providing constructive feedback and reliable, accessible support in your endeavor. We know healthcare... we reduce risk.



DON'T FORGET!

F A S T

FACE ARMS SPEECH TIME







112!

Does one side of your face droop when you smile?

When you lift your arms, does one arm drift back down?

Is your speech slurred, or does it sound odd? If you see any of these signals in yourself or someone else, call 112 right away.

hours of make t

Getting medical treatment within **three hours** of the first symptoms of stroke can make the difference between recovery and lifelong disability.





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