

FACT SHEET

The AuSCR Fever Sugar Swallow (FeSS) Dataset

This fact sheet contains information on a new and **optional** AuSCR dataset to collect information on the use of the Fever, Sugar, Swallow Protocol at hospitals who are currently participating in the AuSCR. This dataset will be available for use from July 1st, 2019.

The AuSCR currently collects information on swallow screening and assessment prior to oral intake. However, the capture of additional information on the treatment of fever and glycaemic control are new.

What is FeSS?

In the Quality in Acute Stroke Care trial it was demonstrated that patients who had received care in a stroke unit with protocols to manage Fever, Sugar and Swallow (FeSS) had a 16% reduction in death and dependency at 90 days post stroke,² as well as reduced longer-term mortality.³

Stroke Foundation Clinical Guidelines

The clinical guidelines for stroke management 2017¹ use the best available clinical evidence to provide a series of recommendations to assist decision-making in the management of stroke and transient ischaemic attack (TIA). The following guidelines cover recommendations aligning with the FeSS protocol.

Pyrexia (fever) management

All stroke patients should have their temperature monitored at least four times a day for 72 hours².

Glycaemic Control

All stroke patients should have their blood glucose level monitored for the first 72 hours following admission, and appropriate glycaemic therapy instituted to treat hyperglycaemia (glucose levels greater than 10 mmol/L), regardless of their diabetic status².

Dysphagia

People with acute stroke should have their swallowing screened within four hours of arrival at hospital and before being given any oral food, fluid or medication⁴.

What variables will be captured in the FeSS dataset?

The current AuSCR datasets already collect data on swallow screening and assessment prior to oral intake. If you already collect this information as part of your AuSCR data collection then this will stay the same. The new and optional variables in the FeSS dataset will relate *only* to fever and hyperglycaemia.

There are six new questions in total (Table 1). These questions are also part of the Stroke Foundation acute clinical audit and so may be familiar to some users.

References

1. Stroke Foundation. Clinical Guidelines for Stroke Management 2017. Melbourne Australia. www.informme.org.au/en/Guidelines/Clinical-Guidelines-for-Stroke-Management-2017
2. Middleton S, McElduff P, Ward J et al (2011). Implementation of evidence-based treatment protocols to manage fever, hyperglycaemia, and swallowing dysfunction in acute stroke (QASC): a cluster randomised controlled trial. *Lancet*, 378(9804):1699-706.
3. Middleton S, Coughlan K, Mnatzaganian et al (2017). Mortality reduction for Fever, Hyperglycemia and swallowing nurse initiated stroke intervention. *Stroke*, 48(5):1331-1336.
4. Bray BD, Smith CJ, Cloud GC et al (2017). The association between delays in screening for and assessing dysphagia after acute stroke, and the risk of stroke-associated pneumonia. *Journal of neurology, neurosurgery, and psychiatry*, 88(1):25-30.

Table 1: Summary of variables in the current AuSCR and the new FeSS datasets

Fever (NEW)

- Temperature recorded ≤ 4 times on day 1 of admission
- Development of fever $\geq 37.5^{\circ}$ within 72 hours of admission
- Paracetamol administration for first elevated temperature within 1 hour

Sugar (NEW)

- Finger-prick blood glucose recorded 4 times on day 1 of admission
- Development of finger-prick blood glucose ≥ 10 mmols/L within 48 hours of admission
- Insulin administration within 1 hour of first elevated finger-prick blood glucose

Swallow (CURRENT)*

- Formal swallow screen date/time
- Swallow screen pass/fail
- Swallow assessment by Speech Pathologist date/time
- Swallow screen/assessment performed before oral medication
- Swallow screen/assessment before oral food/fluids

** Collected in the AuSCR Red, Black, Navy and Violet programs*

What are the benefits of using the FeSS dataset?

These new variables have been added to the AuSCR to better capture the provision of evidence-based care in line with the current clinical guidelines for stroke.¹ FeSS data can be used to drive local quality improvement projects.

What changes will I see when I log into the AuSCR? How do I create a FeSS record?

When you log into the AuSCR, you will see the tabs for all of the programs in which your hospital participates. This will now include an AuSCR FeSS tab. Once a patient has been entered into the AuSCR, the record can be expanded to enter the new FeSS variables relating to fever and glycaemic control (Figure 1).

Alternatively, import templates are also available that include the FeSS variables and automated upload systems may be updated to include the variables. Figure 2 show how the FeSS variables appear in the AuSDaT.

How do I interpret the new variables in the FeSS dataset?

An updated version of the AuSCR Data Dictionary will be available from the AuSCR website (www.auscr.com.au) or from your AuSCR State Coordinator.

How do I access my FeSS data?

You can export all data from the FeSS dataset at any time in the same way as you currently export your AuSCR data by pressing the data export button on the Patient Record Details page. Just make sure that you have selected the FeSS program tab at the top of the page.

FeSS live data reports will also be available which will combine all the FeSS variables (ie from your current AuSCR dataset and the new FeSS dataset) into one report. Comparisons between your hospital, and peer, state and all other AuSCR hospitals will also be possible.

Does my hospital need any new approvals to use the FeSS dataset?

No amendments to current Human Research Ethics Approvals or local Research Governance Office approvals for your hospital are required.

Figure 1: Expanding a patient record to collect the new FeSS variables

1. Find the AuSCR record, then expand to AuSCR FeSS.
2. Tabs for the variables for both programs will then be visible. Click on “show/hide programs” and unselect AuSCR Red, then click on “apply”.
3. Only the tabs for the variables required for the FeSS program will be shown.

1

Record attributes
Patient record ID 193207
Percentage complete 48%
Hospital South Park Hospital
Created on 27/05/2019
Created by JOT GHULIANI

Programs
This record includes data collected for the following programs:

Program	Completeness	Errors	Incomplete	Complete	Status	Action
AUSCR-RED-1	52%		48%		Open	No actions available

Expand this record for:

Collected data

- AuSCR ED Dataset
- AuSCR FeSS (Final)

Auditor information

Ref	Name	Value
1.00	Hospital name	South Park Hospital
1.02	Auditor name	JOT GHULIANI

2

Programs
This record includes data collected for the following programs:

Program	Completeness	Errors	Incomplete	Complete	Status	Action
AUSCR-RED-1	52%		48%		Open	No actions available
AUSCR FeSS (Final)	15%		85%		Open	No actions available

Expand this record for:

Collected data

- Auditor information
- Patient demographics
- Admission and transfer information
- Pre stroke history
- Acute clinical data
- Telemedicine and reperfusion
- Other clinical information
- Secondary prevention
- Discharge information

Auditor information

Ref	Name	Value
1.00	Hospital name	South Park Hospital
1.02	Auditor name	JOT GHULIANI

3

Programs
This record includes data collected for the following programs:

Program	Completeness	Errors	Incomplete	Complete	Status	Action
AUSCR-RED-1	52%		48%		Open	No actions available
AUSCR FeSS (Final)	15%		85%		Open	No actions available

Expand this record for:

Collected data

- Patient demographics
- Admission and transfer information
- Acute clinical data
- Other clinical information

Patient demographics

Patient details

Ref	Name
2.06	First name
2.07	Last name
2.09	Date of birth
2.10	Age
2.13	Gender

When do I need to register my interest in collecting the FeSS dataset? Is there a cut-off date?

You can register your interest to use the FeSS dataset at any time. However – it will only become available on July 1, 2019. The way that you choose to use the dataset is flexible. You can use it for all of your AuSCR eligible patients, a subset of your patients or for a defined period of time. Use of the AuSCR FeSS dataset will be ongoing.

What do I need to do to if my hospital wants to use the FeSS dataset?

Completing the six new questions which comprise the FeSS dataset is optional. If you want your hospital to gain access to the new FeSS dataset then please contact your AuSCR State Coordinator or the AuSCR Office (admin@auscr.com.au).

Your State Coordinator can also give you more information on how to use the FeSS dataset by expanding existing AuSCR episodes, generating live data reports and exporting your data.