

Acute coronary syndromes: 6d-Patients referred to cardiac rehabilitation or other secondary prevention program

Identifying and definitional attributes

Metadata item type:	Indicator
Indicator type:	Indicator
Short name:	Indicator 6d-Patients referred to cardiac rehabilitation or other secondary prevention program
METEOR identifier:	612089
Registration status:	<ul style="list-style-type: none">• Health, Standard 12/09/2016
Description:	Proportion of patients a final diagnosis of acute coronary syndrome (ACS) with a documented referral prior to separation to a cardiac rehabilitation or an alternative secondary prevention program.
Rationale:	<p>Cardiac rehabilitation or other secondary prevention programs are recommended to reduce risk of subsequent cardiac events.</p> <p>All patients with cardiovascular disease should have access, and be actively referred, to comprehensive ongoing prevention and cardiac rehabilitation services. Specific guidelines are available for Indigenous populations (NHMRC 2005).</p>
Indicator set:	Clinical care standard indicators: acute coronary syndromes Health , Standard 12/09/2016
Outcome area:	Individualised care plan Health , Standard 12/09/2016

Collection and usage attributes

Computation description:	<p>Both the numerator and the denominator include patients with acute chest pain, or other symptoms suggestive of ACS.</p> <p>Both the numerator and denominator exclude patients for whom cardiac rehabilitation or other secondary prevention program are contraindicated (where the contraindication is documented in the patient's medical record). Contraindications may include advance care directives, being on a palliative care pathway, and clinical judgement, subject to discussion with patients, family and carers.</p> <p>Presented as a percentage.</p>
Computation:	$(\text{Numerator} \div \text{denominator}) \times 100$
Numerator:	Number of patients with a final diagnosis of ACS with a documented referral prior to separation from hospital to a cardiac rehabilitation or an alternative secondary prevention program.
Denominator:	Number of patients with a final diagnosis of ACS separated from hospital.

Comments: The World Health Organization (1993) has defined cardiac rehabilitation as:

"the sum of activities required to influence favourably the underlying cause of the disease, as well as the best possible, physical, mental and social conditions, so that they (people) may, by their own efforts preserve or resume when lost, as normal a place as possible in the community. Rehabilitation cannot be regarded as an isolated form or stage of therapy but must be integrated within secondary prevention services of which it forms only one face."

For additional information on cardiac rehabilitation, see the *Recommended Framework for Cardiac Rehabilitation* (National Heart Foundation of Australia and Australian Cardiac Rehabilitation Association 2004).

Representational attributes

Representation class: Percentage

Data type: Real

Unit of measure: Episode

Format: N[NN]

Source and reference attributes

Reference documents: National Heart Foundation of Australia and Australian Cardiac Rehabilitation Association 2004. Recommended framework for cardiac rehabilitation '04. Canberra: NHFA and ACRA.

NHMRC (National Health and Medical Research Council) 2005. Strengthening cardiac rehabilitation and secondary prevention for Aboriginal and Torres Strait Islander peoples. Canberra: NHMRC.

WHO (World Health Organization) 1993. Needs and action priorities in cardiac rehabilitation and secondary prevention in patients with CHD. Geneva: WHO.