

	<b>COUNTY OF SACRAMENTO</b> EMERGENCY MEDICAL SERVICES AGENCY  <u>PROGRAM DOCUMENT:</u> <b>Stroke System Data Elements</b>	Document #	2528.05
		Initial Date:	01/13/19
		Last Approval Date:	03/26/24
		Effective Date:	11/01/26
		Next Review Date:	03/01/26

EMS Medical Director

EMS Administrator

**Purpose:**

- A. To standardize data elements collected using Get With The Guidelines-Stroke Registry (GWTG-Stroke Registry) from designated Stroke Centers and EMS providers to monitor, review, evaluate, and improve the delivery of prehospital advanced life support and hospital stroke care services.

**Authority:**

- A. California Health and Safety Code, Division 2.5
- B. California Code of Regulations, Title 22, Division 9

**Definitions:**

- A. **SCEMSA:** Sacramento County Emergency Medical Services Agency
- B. **Primary Stroke Center (PSC):** A hospital, designated by SCEMSA, that stabilizes and treats acute stroke patients, providing initial acute care, and may transfer to one or more higher level of care centers when clinically warranted. Primary Stroke Centers must be accredited as such by The Joint Commission and be designated by the SCEMSA.
- C. **Thrombectomy Capable Stroke Center (TCSC):** A primary stroke center with the ability to perform mechanical thrombectomy for the ischemic stroke patient. Thrombectomy Capable Stroke Centers must be accredited as such by The Joint Commission and be designated by the SCEMSA.
- D. **Comprehensive Stroke Center (CSC):** A hospital designated by SCEMSA, with specific abilities to receive and treat the most complex stroke cases and provide the highest level of care for stroke patients. Comprehensive Stroke Centers must be accredited as such by The Joint Commission and be designated by the SCEMSA.

**Policy:**

- A. SCEMSA has a standardized data collection and reporting process for the Sacramento County Stroke Critical Care System.
  - 1. Prehospital Stroke patient care elements selected by SCEMSA are compliant with the most current version of the California EMS Information Systems (CEMSIS) database, and the National EMS Information System (NEMESIS).
  - 2. Hospital Stroke patient care data elements required by SCEMSA are compliant with the GWTG-Stroke Registry.
- B. All prehospital agencies and hospitals that receive Stroke patients shall participate in the SCEMSA data collection process in accordance with SCEMSA policy.

- C. SCEMSA will extract the EMS elements from the CEMESIS database, and hospitals shall submit their data elements ~~at least~~ quarterly. Hospital data shall be submitted to ImageTrend Patient Registry no later than 90 days following the end of the quarter.
- D. Non-compliance with the data requirements can lead to program suspension.

**Cross Reference:** PD# 2522 – Electronic Health Care Record and Data Policy

**DRAFT**