

THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL

No. 1400 Session of 2011

INTRODUCED BY REICHLEY, CALTAGIRONE, CLYMER, D. COSTA, CUTLER, GILLESPIE, GRELL, HARKINS, JOSEPHS, MILNE, M. O'BRIEN, THOMAS, WATSON, BOBACK, KILLION, SWANGER, DONATUCCI, DAY, TOOHL, GEIST, SONNEY, MURT, KAUFFMAN, HENNESSEY, DENLINGER, RAPP, FARRY AND PASHINSKI, MAY 24, 2011

AS REPORTED FROM COMMITTEE ON HEALTH, HOUSE OF REPRESENTATIVES,
AS AMENDED, OCTOBER 5, 2011

AN ACT

1 Establishing a Statewide stroke system of care by ~~designating~~ ←
2 RECOGNIZING primary stroke centers and directing the creation ←
3 of emergency medical services training and transport
4 protocols.

5 The General Assembly finds and declares as follows:

6 (1) The rapid identification, diagnosis and treatment of
7 stroke can save the lives of stroke patients and in some
8 cases can ~~reverse~~ MINIMIZE neurological damage such as ←
9 paralysis and speech and language impairments, leaving stroke
10 patients with few or ~~no~~ MINIMAL neurological deficits. ←

11 (2) Despite significant advances in the diagnosis,
12 treatment and prevention, stroke is the third leading cause
13 of death and the leading cause of disability with an
14 estimated 795,000 new and recurrent strokes occurring each
15 year in this country, and, with the aging of the population,
16 the number of persons who have strokes is projected to
17 increase.

1 (3) Although treatments are available to improve the
2 clinical outcomes of stroke, many acute care hospitals lack
3 the necessary staff and equipment to optimally triage and
4 treat stroke patients, including the provision of optimal,
5 safe and effective emergency care for those patients.

6 (4) An effective system to support stroke survival is
7 needed in our communities in order to treat stroke patients
8 in a timely manner and to improve the overall treatment of
9 stroke patients in order to increase survival and decrease
10 the disabilities associated with stroke. There is a public
11 health need for acute care hospitals in this Commonwealth to
12 establish primary stroke centers to ensure the rapid triage,
13 diagnostic evaluation and treatment of patients suffering a
14 stroke.

15 (5) Primary stroke centers should be established for the
16 treatment of acute strokes. Primary stroke centers should be
17 established in as many hospitals as possible. These centers
18 would evaluate, stabilize and provide emergency and inpatient
19 care to patients with acute stroke.

20 (6) Therefore, it is in the best interest of the
21 residents of this Commonwealth to establish a program to
22 ~~facilitate development of stroke treatment capabilities~~ ←
23 ~~throughout the State. This program will provide~~ RECOGNIZE ←
24 ACCREDITED PRIMARY STROKE CENTERS WHOSE CRITERIA PROVIDE
25 specific patient care and support services ~~criteria that~~ ←
26 ~~stroke centers~~ THAT HOSPITALS must meet in order to ensure ←
27 that stroke patients receive sage and effective care.
28 Further, it is in the best interest of the people of this
29 Commonwealth to modify the State's emergency medical response
30 system to assure that stroke patients may be quickly

1 identified and transported to and treated in facilities that
2 have ~~specialized programs~~ STROKE PROTOCOLS for providing
3 timely and effective treatment for stroke patients.

4 The General Assembly of the Commonwealth of Pennsylvania
5 hereby enacts as follows:

6 ~~section~~ SECTION 1. Short title.

7 This act shall be known and may be cited as the Primary
8 Stroke Center ~~Designation~~ RECOGNITION Act.

9 Section 2. Definitions.

10 The following words and phrases when used in this act shall
11 have the meanings given to them in this section unless the
12 context clearly indicates otherwise:

13 "Department." The Department of Health of the Commonwealth.

14 "EMERGENCY MEDICAL SERVICES AGENCY MEDICAL DIRECTOR." AS
15 DEFINED IN 35 PA.C.S. § 8103 (RELATING TO DEFINITIONS).

16 "JOINT COMMISSION." AN INDEPENDENT NATIONAL NOT-FOR-PROFIT
17 ORGANIZATION THAT DEVELOPS AND UPDATES ORGANIZATIONAL STANDARDS
18 AND PERFORMANCE MEASURES, CONDUCTS ON-SITE EVALUATIONS AND
19 AWARDS ACCREDITATION DECISIONS TO HEALTH CARE FACILITIES,
20 INCLUDING HOSPITALS, NURSING HOMES, HOME CARE AGENCIES AND
21 AMBULATORY PROVIDERS, THAT ARE ACCEPTED BY THE FEDERAL
22 GOVERNMENT FOR THE COMPLIANCE OF CONDITIONS OF PARTICIPATION FOR
23 MEDICARE.

24 Section 3. ~~Designation~~ RECOGNITION of centers.

25 (a) ~~Designation~~ GENERAL RULE.--Upon application by an
26 ~~accredited~~ A LICENSED acute care hospital, the department shall
27 ~~designate~~ RECOGNIZE the hospital as a primary stroke center if
28 the hospital is certified as a primary stroke center by the
29 joint commission or another ~~cabinet-approved~~ nationally
30 recognized ACCREDITING organization that provides certification

1 for stroke care. The designation shall last as long as the
2 hospital remains certified AS A PRIMARY STROKE CENTER.

3 (b) Suspension or revocation of ~~designation~~ RECOGNITION.--

4 The department may suspend or revoke a primary stroke center
5 ~~designation~~ RECOGNITION if the department determines that the
6 hospital is not in compliance with PROVISIONS OF this act
7 REQUIRING ACCREDITATION AS A PRIMARY STROKE CENTER.

8 Section 4. Emergency medical services.

9 (a) List of primary stroke centers.--~~By June 1 of each year,~~
10 ~~the~~ THE department shall:

11 (1) ~~Send~~ MAKE AVAILABLE a list of ACCREDITED primary
12 stroke centers to ~~the medical director of each licensed~~ EACH
13 emergency medical services ~~provider~~ AGENCY MEDICAL DIRECTOR
14 in this Commonwealth.

15 (2) Maintain a copy of the list of primary stroke
16 centers in the office designated with the department to
17 oversee emergency medical services.

18 (3) Post a list of primary stroke centers on the
19 department's Internet website.

20 (b) Assessment.--The department shall ~~adopt~~ MAKE AVAILABLE
21 and distribute a nationally recognized standardized stroke
22 triage assessment tool ~~no later than July 1, 2011, or within 60~~
23 days of the effective date of this act, ~~whichever is later.~~ The
24 department shall:

25 (1) ~~Provide~~ MAKE AVAILABLE a copy to ~~the medical~~
26 ~~directors of each licensed~~ EACH emergency medical services
27 ~~provider~~ AGENCY MEDICAL DIRECTOR in this Commonwealth so that
28 the directors can use the tool or a substantially similar one
29 to evaluate patients.

30 (2) Post the assessment tool on its Internet website.

1 (c) Protocols.--The department shall establish protocols
2 that are related to prehospital assessment, treatment and
3 transport of stroke patients by licensed emergency medical
4 services providers. The protocols shall include plans for triage
5 and transport of acute stroke patients to the closest primary
6 stroke center OR A FACILITY THAT CAN PROVIDE APPROPRIATE
7 TREATMENT IF THE PRIMARY STROKE CENTER IS NOT within a specified
8 time frame from onset of symptoms.

9 (d) Training.--The department shall establish protocols to
10 ensure that ~~licensed~~ CERTIFIED emergency medical services
11 providers ~~and 911 dispatch personnel~~, WITHIN THEIR SCOPE OF
12 PRACTICE, receive regular training on the assessment and
13 treatment of stroke patients.

14 (e) Compliance.--~~By July 1, 2011, or within~~ WITHIN 60 days
15 of the effective date of this act, ~~whichever is later~~, each
16 emergency medical services provider must comply with all
17 protocols and regulations promulgated by the department under
18 this act.

19 Section 5. Effective date.

20 This act shall take effect in 60 days.

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