1 A bill to be entitled 2 An act relating to stroke centers; amending s. 3 395.3038, F.S.; directing the Agency for Health Care Administration to include hospitals that meet the 4 5 criteria for acute stroke ready centers on a list of 6 stroke centers; creating s. 395.30381, F.S.; requiring 7 stroke centers to provide certain information to the 8 Department of Health; authorizing the department to 9 establish a statewide stroke registry; requiring the department to contract with a private entity to 10 11 establish and maintain a stroke registry, subject to 12 an appropriation; providing immunity from liability under certain circumstances; authorizing the 13 14 department to develop electronic reporting forms and post such forms on its website; authorizing the 15 16 department to adopt rules; amending s. 395.3041, F.S.; 17 conforming a provision and deleting obsolete dates; providing an effective date. 18 19 20 Be It Enacted by the Legislature of the State of Florida: 21 Section 395.3038, Florida Statutes, is amended 22 Section 1. 23 to read: State-listed primary stroke centers and 24 395.3038 25 comprehensive stroke centers; notification of hospitals.-

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- (1) The agency shall make available on its website and to the department a list of the name and address of each hospital that meets the criteria for an acute stroke ready center, a primary stroke center, or and the name and address of each hospital that meets the criteria for a comprehensive stroke center. The list of primary and comprehensive stroke centers must include only those hospitals that attest in an affidavit submitted to the agency that the hospital meets the named criteria, or those hospitals that attest in an affidavit submitted to the agency that the hospital is certified as an acute stroke ready center, a primary stroke center, or a comprehensive stroke center by a nationally recognized an accrediting organization.
- (2) (a) If a hospital no longer chooses to meet the criteria for an acute stroke ready center, a primary stroke center, or a comprehensive stroke center, the hospital shall notify the agency and the agency shall immediately remove the hospital from the list of stroke centers.
- (b)1. This subsection does not apply if the hospital is unable to provide stroke treatment services for a period of time not to exceed 2 months. The hospital shall immediately notify all local emergency medical services providers when the temporary unavailability of stroke treatment services begins and when the services resume.
 - 2. If stroke treatment services are unavailable for more

than 2 months, the agency shall remove the hospital from the list of primary or comprehensive stroke centers until the hospital notifies the agency that stroke treatment services have been resumed.

- (3) The agency shall adopt by rule criteria for an acute stroke ready center, a primary stroke center, and a comprehensive stroke center which are substantially similar to the certification standards for the same categories of primary stroke centers of a nationally recognized accrediting organization the Joint Commission.
- (4) The agency shall adopt by rule criteria for a comprehensive stroke center. However, if the Joint Commission establishes criteria for a comprehensive stroke center, agency rules shall be substantially similar.
- (4)(5) This act is not a medical practice guideline and may not be used to restrict the authority of a hospital to provide services for which it is licensed under chapter 395. The Legislature intends that all patients be treated individually based on each patient's needs and circumstances.
- Section 2. Section 395.30381, Florida Statutes, is created to read:
 - 395.30381 Statewide stroke registry.-
- (1) Each acute ready stroke center, primary stroke center, and comprehensive stroke center shall report to the department information specified in department rule, including, but not

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limited to, demographic information, stroke severity
assessments, diagnostic and examination results, time from
symptom onset to hospital arrival, in-hospital treatments and
events, mortality, and discharge destination for each stroke
patient treated by a stroke center.

- registry to ensure that patient care quality assurance proceedings, records, and reports required to be submitted under subsection (1) are maintained and available for use to improve or modify the stroke care system, ensure compliance with standards, and monitor stroke patient outcomes. Subject to a specific appropriation for this purpose, the department shall contract with a private entity to establish and maintain a stroke registry.
- (3) No liability of any kind or character for damages or other relief shall arise or be enforced against any acute ready stroke center, primary stroke center, or comprehensive stroke center by reason of having provided such information to the department.
- (4) The department may develop electronic forms for each acute ready stroke center, primary stroke center, and comprehensive stroke center to report required information to the registry. The department must post these forms on its website.
 - (5) The department may adopt rules to administer this

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101	section.
TOT	section.

- Section 3. Subsections (1), (2), and (4) of section 395.3041, Florida Statutes, are amended to read:
- 395.3041 Emergency medical services providers; triage and transportation of stroke victims to a stroke center.—
- (1) By June 1 of each year, the department shall send the list of <u>acute stroke ready centers</u>, primary stroke centers, and comprehensive stroke centers to the medical director of each licensed emergency medical services provider in this state.
- (2) The department shall develop a sample stroke-triage assessment tool. The department must post this sample assessment tool on its website and provide a copy of the assessment tool to each licensed emergency medical services provider no later than June 1, 2005. Each licensed emergency medical services provider must use a stroke-triage assessment tool that is substantially similar to the sample stroke-triage assessment tool provided by the department.
- (4) Each emergency medical services provider licensed under chapter 401 must comply with all sections of this act $\frac{by}{July}$ 1, 2005.
 - Section 4. This act shall take effect July 1, 2017.

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