

SECTION .0200 –STROKE CENTER DESIGNATION

10A NCAC 14L .0201 STROKE CENTER DESIGNATION REQUIREMENTS

(a) The Department shall designate hospitals licensed by the Division of Health Service Regulation pursuant to G.S. 131E-78.5 as certified "Designated Stroke Centers," as defined in Rule .0101(8) of this Subchapter, upon receipt of evidence provided by the hospital as defined in Paragraph (b) of this Rule that the hospital has received Primary Stroke Center or Comprehensive Stroke Center or Acute Stroke Ready certification by any of the following:

- (1) "The Joint Commission" (TJC), "American Heart Association" (AHA), and "American Stroke Association" (ASA) Comprehensive Stroke Center, Disease Specific Certification Program;
- (2) "Healthcare Facilities Accreditation Program" (HFAP);
- (3) "Det Norske Veritas" (DNV); or
- (4) other nationally recognized accrediting body that requires conformance to best practices for stroke care.

(b) Hospitals designated as a Primary Stroke Center or Comprehensive Stroke Center or Acute Stroke Ready Hospital shall notify the Office of Emergency Medical Services of the following information within 90 days of certification:

- (1) the name of the accrediting organization issuing certification to the hospital;
- (2) the date of certification;
- (3) the level of certification (Primary, Comprehensive or Acute Stroke Ready);
- (4) the date of renewal of the certification; and
- (5) the name and phone number of the primary contact person at the hospital who is responsible for obtaining the certification.

(c) The Department shall maintain a list of all Primary Stroke Centers, Comprehensive Stroke Centers and Acute Stroke Ready Hospitals on its website at <https://info.ncdhhs.gov/dhsr/ahc/listings.html>.

(d) Each designated Primary Stroke Center or Comprehensive Stroke Center or Acute Stroke Ready Hospital shall coordinate the provision of acute stroke care with other hospitals in their catchment area through written agreements that address the following minimum requirements:

- (1) transportation of acute stroke patients to the designated Primary Stroke Center or Comprehensive Stroke Center or Acute Stroke Ready Hospital; and
- (2) acceptance of patients initially treated at hospitals incapable of providing management of the acute stroke patient.

(e) The Office of Emergency Medical Services shall provide written notification annually through email to the medical directors of each EMS system and EMS provider a list of all Primary Stroke Centers, Comprehensive Stroke Centers and Acute Stroke Ready Hospitals contained on the Department's website.

(f) Hospitals shall notify the Office of Emergency Medical Services in writing within 30 days of any change to the hospital's Primary Stroke Center or Comprehensive Stroke Center or Acute Stroke Ready certification.

(g) Hospitals that have received a conditional certification are ineligible for designation by the Department as a Primary Stroke Center or Comprehensive Stroke Center or Acute Stroke Ready Hospital until the hospital receives Primary Stroke Center or Comprehensive Stroke Center or Acute Stroke Ready certification by the accrediting body issuing the certification.

(h) Hospitals that fail to maintain certification shall be removed from the Department's website by the Office of Emergency Medical Services within 30 days following receipt of written notification from the affected hospital.

(i) Non-certified hospitals shall not advertise or utilize signage representing the hospital as a Primary Stroke Center or Comprehensive Stroke Center or Acute Stroke Ready Hospital if the hospital has not received that designation by the Department.

*History Note: Authority G.S. 143B-10; 131E-78.5;
Eff. February 1, 2015;
Amended Eff. August 1, 2019.*