MOBILE STROKE UNIT PROGRAM

I. PURPOSE
   This policy establishes requirements for a mobile stroke program.

II. AUTHORITY
   California Health and Safety Code Division 2.5, §1797.90, 1797.220, 1797.221; California Code of Regulations, Title 22, Division 9, Chapter 7.2

III. DEFINITIONS
   Emergency Medical Services Agency (“LEMSA”) or “Agency”: The San Mateo County EMS Agency is designated as the Local Emergency Medical Services Agency (LEMSA) and is statutorily charged with primary responsibility for administration and medical control of emergency medical services in San Mateo County.

   Mobile Stroke Unit (“MSU”): An ambulance capable of delivering at minimum Advanced Life Support (“ALS”) services that has a Computerized Tomography (“CT”) scanner capable of performing head CTs in the community and prior to arriving at a hospital.

   Mobile Stroke Unit (“MSU”) Program: A predetermined plan that includes a MSU and MSU team who respond in an ambulance and provide high level acute stroke care at the scene of an emergency, during transport to an acute care hospital and while in an acute care hospital until responsibility is assumed by the emergency or other medical staff of that hospital. The program is approved by the EMS Agency to be deployed in the prehospital setting to provide rapid assessment of suspected acute stroke patients by utilizing a mobile computed tomography (“CT”) scanner on-scene and able to transmit images to a remote site and provide a hard copy to receiving hospitals. Further elements of the program can include treatment with intravenous thrombolytic therapy, hemostatic agents, and blood pressure medications and determination of appropriate hospital destination depending on CT scanner findings and consultation with closest receiving facility capable of supporting the suspected or confirmed stroke patient.

   Mobile Stroke Unit (“MSU”) Team: An organized group of health care providers that specialize in stroke care and may include, but not limited to a radiology technician, registered nurse, paramedic, emergency medical technician, and neurologist.

IV. MOBILE STROKE PROGRAM REQUIREMENTS
   A. A mobile stroke program shall meet the following requirements:
      1. Be approved by LEMSА.
2. Possess a physical response unit specially configured and suitable for the delivery of MSU services that has been appropriately authorized as emergency response vehicle by the California Highway Patrol and LEMSA.

3. Designate a program Medical Director who shall be responsible for the functions of the MSU. The MSU Program Medical Director shall be a physician on hospital staff at a San Mateo County hospital, licensed in the State of California, and Board Certified in Neurology, Neurosurgery, or Neuroradiology by the American Board of Medical Specialties.

4. Designate a Program Manager who shall be responsible for ensuring timely and accurate data collection and who works with the MSU Program Medical Director to develop a data collection process and a quality improvement program.

5. MSU shall be staffed with a minimum of one (1) stroke trained nurse, one (1) emergency medical technician or paramedic, and one (1) CT technician. A stroke neurologist may also be included as part of the team. Neurology services may be provided in person or via telemedicine consult.

6. Implement a quality improvement (“QI”) program for program monitoring and evaluation. Program results shall be shared with LEMSA and San Mateo County Stroke QI Committee quarterly, or when requested.

7. Transport patients to the closest appropriate stroke facility based on LEMSA protocols, regardless of the results of patient evaluation or treatment rendered by MSU, unless redirected by receiving facility.

8. Provide copies of all staff evaluation, lab results, electronic health records, and imaging to the receiving hospital upon delivery of the patient.

9. MSU Program shall develop activation, dispatch and longitudinal patient-care integration procedures in collaboration with the Authorized San Mateo County EMS Provider in each exclusive operating area in which the MSU delivers service and Public Safety Communications, which are subject to LEMSA approval.

10. A written agreement between MSU Program and each exclusive operating area provider in which MSU will operate shall be executed, which is subject to LEMSA approval. The agreement shall address, at minimum, the following:
   a. Staffing
   b. Billing
   c. Documentation Sharing
   d. Insurance and Indemnity

B. MSU Program shall develop policies and procedures that address patient care, include the following and are subject to LEMSA approval:
   1. Patient assessment and identification of patients requiring MSU services;
   2. indications for CT procedures for transmission and reporting;
3. indications and contraindications for IV thrombolytic therapy (based on current American Heart Association/American Stroke Association guidelines);

4. documentation of all evaluation and treatment (including lab results and copies of imaging); and

5. reporting of adverse events.

C. MSU Program shall develop policies that address data collection, dispatch, and interaction between staff of MSU and the 9-1-1 jurisdictional ambulance provider and first responders, which are subject to LEMSA approval.

V. MOBILE STROKE PROGRAM APPROVAL
A. MSU Programs shall submit a letter of intent to LEMSA outlining the following:
   1. Qualifications of the composition of MSU program;
   2. Proposed response area;
   3. Deployment and dispatch plan for integration with the 9-1-1 jurisdictional provider; and
   4. Data collection and quality improvement process.

B. Institutional Review Board approvals from all participating hospitals are to be shared with LEMSA.

C. If MSU will be used to transport stroke patients, submit a copy of the written agreement with the 9-1-1 jurisdictional provider/ EOA provider.

D. LEMSA will review and verify the submitted information. LEMSA reserves the sole discretion to approve or reject any MSU proposal as well as suspend, stipulate terms of cure of deficiency / non-compliance, or terminate the service of any MSU program.

E. After completion of the study program, MSU program will submit a comprehensive report to LEMSA. LEMSA will consider the report in conjunction with the Stroke QI Committee, in determining whether to approve MSU for continued operation in San Mateo County beyond the initial term of the pilot study.