

ASSEMBLY BILL

No. 861

Introduced by Assembly Members Hill and Nestande

February 17, 2011

An act to add a heading as Article 1 (commencing with Section 104100) to, and to add Article 2 (commencing with Section 104141) to, Chapter 1 of Part 1 of Division 103 of, the Health and Safety Code, relating to stroke.

LEGISLATIVE COUNSEL'S DIGEST

AB 861, as introduced, Hill. California Stroke Registry.

Existing law authorizes the State Department of Public Health to perform studies, demonstrate innovative methods, and disseminate information relating to the protection, preservation, and advancement of public health.

This bill would establish the California Stroke Registry, to be administered by the State Department of Public Health, as specified, to serve as a centralized repository for stroke data to promote quality improvement for acute stroke treatment. The bill would require that the program be implemented only to the extent funds from federal or private sources are made available for this purpose.

Vote: majority. Appropriation: no. Fiscal committee: yes.
State-mandated local program: no.

The people of the State of California do enact as follows:

1 SECTION 1. The Legislature finds and declares all of the
2 following:

1 (a) Stroke, also known as cerebrovascular accident or brain
2 attack, is the third leading cause of death and the leading cause of
3 severe, long-term disability and death in California.

4 (b) Stroke kills approximately 15,585 Californians each year
5 and accounts for almost 200,000 hospitalizations.

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

11 SEC. 2. The heading of Article 1 (commencing with Section
12 104100) is added to Chapter 1 of Part 1 of Division 103 of the
13 Health and Safety Code, to read:

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15 Article 1. High Blood Pressure
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17 SEC. 3. Article 2 (commencing with Section 104141) is added
18 to Chapter 1 of Part 1 of Division 103 of the Health and Safety
19 Code, to read:

20
21 Article 2. California Stroke Registry
22

23 104141. (a) The State Department of Public Health shall
24 establish a statewide California Stroke Registry. The purpose of
25 this registry is to serve as a centralized repository for stroke data
26 to promote quality improvement for acute stroke treatment. The
27 registry shall align with the stroke consensus metrics developed
28 by national health organizations such as the federal Centers for
29 Disease Control and Prevention, The Joint Commission, the
30 American Heart Association, and the American Stroke Association.
31 The acquisition of data for the registry shall encompass all areas
32 of the state for which stroke data are available.

33 (b) The registry shall be under the direction of the director and
34 housed within the California Heart Disease and Stroke Prevention
35 Program. The cardiovascular disease program may accept, on
36 behalf of the state, grants of public or private funds.

37 (c) The department may contract with an agency, including, but
38 not limited to, a health systems agency, single county health
39 department, multicounty health department groupings, or nonprofit
40 professional associations, representing a designated reporting

1 region for the purposes of collecting and collating acute stroke
2 data.

3 (d) The department may contract, or provide grant awards, to
4 implement public health activities to fulfill required funding award
5 objectives.

6 (e) In establishing this system, the director shall:

7 (1) Maintain a statewide stroke database that compiles
8 information and statistics on stroke care. To the extent possible,
9 the department shall coordinate with the organizations specified
10 in subdivision (a) to avoid duplication and redundancy in data
11 collection.

12 (2) Recommend that hospitals and emergency medical services
13 agencies report case-specific data on the treatment of individuals
14 with suspected acute stroke to the representative of the department
15 authorized to compile the stroke data, or any individual, agency,
16 or organization designated to cooperate with that representative.

17 (3) Encourage sharing of information and data among health
18 care providers to improve the quality of care for stroke.

19 (4) Facilitate the communication and analysis of health
20 information and data among the health care professionals providing
21 care for individuals with stroke.

22 (5) Consult with the Stroke Advisory Committee of the
23 American Stroke Association regarding ways in which to improve
24 the quality of stroke care and delivery in California.

25 (f) All information collected pursuant to this section shall be
26 confidential. For purposes of this section, this information shall
27 be referred to as “confidential information.” The department, or
28 its designee, shall use this information to evaluate measures
29 designed to improve the quality of acute stroke treatment.

30 104141.5. (a) Persons with a valid scientific interest who are
31 engaged in demographic, epidemiological, or other similar studies
32 related to health, and who meet qualifications as determined by
33 the department, and who agree, in writing, to maintain
34 confidentiality, may be authorized access to confidential
35 information. Before confidential information is disclosed for study,
36 researchers shall do both of the following:

37 (1) Obtain approval of their committee for the protection of
38 human subjects established in accordance with Part 46
39 (commencing with Section 46.101) of Title 45 of the Code of
40 Federal Regulations.

1 (2) Provide documentation to the department that demonstrates
2 to the department’s satisfaction that the entity has established the
3 procedures and ability to maintain the confidentiality of the
4 information.

5 (b) Notwithstanding any other law, any disclosure authorized
6 by this section shall include only the information necessary for the
7 stated purpose of the requested disclosure, used for the approved
8 purpose, and not be further disclosed.

9 (c) The furnishing of confidential information to the department
10 or its authorized representative in accordance with this section
11 shall not expose any person, agency, or entity furnishing
12 information to liability, and shall not be considered a waiver of
13 any privilege or a violation of a confidential relationship.

14 (d) The department shall maintain an accurate record of all
15 persons who are given access to confidential information. The
16 record shall include the name of the person authorizing access;
17 name, title, address, and organizational affiliation of persons given
18 access; dates of access; and the specific purpose for which
19 information is to be used. The record of access shall be open to
20 public inspection during normal operating hours of the department.

21 (e) Notwithstanding any other law, no part of the confidential
22 information shall be available for subpoena, nor shall it be
23 disclosed, discoverable, or compelled to be produced in any civil,
24 criminal, administrative, or other proceeding, nor shall this
25 information be deemed admissible as evidence in any civil,
26 criminal, administrative, or other tribunal or court for any reason.

27 (f) This section shall not prohibit the publication by the
28 department of reports and statistical compilations that do not in
29 any way identify individual cases or individual sources of
30 information.

31 (g) Notwithstanding the restrictions in this section, the individual
32 to whom the information pertains shall have access to his or her
33 own information in accordance with Chapter 1 (commencing with
34 Section 1798) of Title 1.8 of the Civil Code.

35 104142. For the purpose of this article, stroke means either of
36 the following:

37 (a) Ischemic stroke, defined as an occlusion of a blood vessel
38 that blocks blood flow to the brain, depriving the brain of oxygen,
39 and resulting in brain tissue death. This definition includes transient

1 ischemic attacks, defined as stroke-like symptoms for less than 24
2 hours.

3 (b) Hemorrhagic stroke, defined as a rupture of a blood vessel,
4 resulting in bleeding into or around the brain.

5 104142.5. Nothing in this article shall preempt the authority
6 of facilities or individuals providing diagnostic or treatment
7 services to patients with stroke to maintain their own facility-based
8 stroke registries.

9 104143. This article shall not be construed as a medical practice
10 guideline and shall not be used to restrict the authority of a hospital
11 to provide services for which it has received a license under state
12 law.

13 104143.5. This article shall be implemented only to the extent
14 funds from federal or private sources are made available for this
15 purpose.

16 104144. All contracts with, and the utilization of, the program's
17 fiscal intermediary shall not be subject to Part 2 (commencing with
18 Section 10100) of Division 2 of the Public Contract Code.

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