Systems of Care for Time Sensitive Emergencies:

Stroke and STEMI Systems Update



MCRH March 26, 2025

Objectives



Review the pillars of systems of care



Discuss the status of system integration



Review project timelines and priorities for 2025 and 26



Discuss meetings, conferences, and other opportunities to engage

System Pillars

- Data/Registry
- Designation/Verification
- Regional Organization
- Education
- Advisory Bodies



Trauma Provides a Road Map



Trauma Pillars

Operationalized in stages and driven by Administrative Rules:

Image Trend contracted to provide a free web-based Trauma Registry

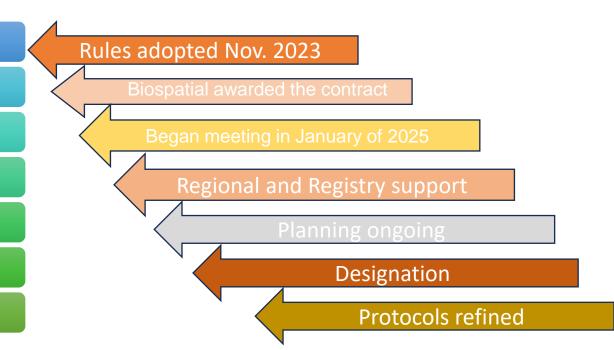
Advisory Committee

Staff support

Regional Trauma Networks organized- bylaws, org chart, RPRSO

Verification and Designation processes, policies, procedures

Triage and Transport Protocols



Stroke and STEMI Pillars

Goals and Objectives 2025-26



DATA/ REGISTRY

DESIGNATION

PRELIMINARY INTEGRATION WORK A Statewide Data Registry Fulfills several goals and requirements for systems.

- Adm Rules
- Overall Goal of Improving the Quality of Patient Care
- Supporting Population based targeted risk reduction strategies
- System evaluation
- Data driven decision making

Statutory/ Regulatory Language



Boiler Plate Language

The development and utilization of stroke and STEMI registries that utilize nationally recognized data platforms with confidentiality standards, as approved by the stroke advisory subcommittee and the STEMI advisory subcommittee as established under section 20910(1)(m) of the public health code, 1978 PA 368, MCL 333.20910

Administrative Rules

- Each service line has administrative rules that outline the registry guideline and requirements
- STEMI

R 330.209 Data collection. Rule 9. (1) The department, with the advice and recommendations of the statewide STEMI care advisory subcommittee and state EMS coordination committee, shall develop and maintain a statewide STEMI registry. The registry must contain all the following: (a) Standard STEMI data elements and definitions as a minimum set of elements for data collection, with the addition of elements as recommended by the statewide STEMI care advisory

Stroke

R 330.259 Statewide stroke registry. Rule 9. (1) The purpose of the stroke registry is to collect and analyze system data to evaluate the delivery of stroke care, develop stroke risk reduction initiatives, and provide resources for stroke research and education.

How is the data used?



- Performance Improvement
- Risk Reduction
- Designation
- Reporting

Examples from the Trauma System

- Annual Report
- Strategic Plan
- Regional Inventories
- Special Projects

Registry Implementation

- Transition plans are ongoing and stepped in order of system maturity, predicated on System Security plan
- Multiple entities involved
- Once we move towards trauma implementation, more details will be available



Meetings, Communication, and Staying Engaged

Advisory meetings

- Schedule is posted in the Systems of Care website
- Both groups are meeting virtually

Work groups

• Deployed as needed to assist with beta testing forms, documents, ect.

Quarterly Updates

 The next publication will go out in late April or early May

Frequently Asked Questions

 FAQs are updated as needed based on project progress

SAVE THE DATE CHIGAN SYSTEMS of CARE CONFERENCE MCA-TRAUMA-STROKE-STEMI

October 7 & 8, 2025

VanDyk Mortgage Convention Center Muskegon, MI

QUESTIONS?



Contacts



Eileen Worden, SOC Section Manager

wordene@michigan.gov

Katelyn Schaible, Stroke and STEMI Unit Manager

schaiblek2@michigan.gov

Theresa Jenkins, Stroke and STEMI Designation Coordinator

jenkinst4@michigan.gov

Devender Lali, Database manager

lalid@michigan.gov

Mark Ladetto, East Regions Stroke Coordinator

ladettom@michigan.gov

Christine Laking, East Regions STEMI Coordinator

lakingc@michigan.gov

Elizabeth Baty, West Regions STEMI Coordinator

batye@michigan.gov

Penny Stevens, West Regions Stroke Coordinator

stevensp2@michigan.gov