

**Information Collection Request**

**Nonmaterial/Non-substantive Change Request**

**Paul Coverdell National Acute Stroke Program**

**(PCNASP) Reporting System**

**OMB No. 0920-1108**

**Justification**

**Program Official/Contact**

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## **Justification**

The Centers for Disease Control and Prevention's (CDC's) Paul Coverdell National Acute Stroke Program (PCNASP) has been approved to collect information from nine state health departments (awardees) to administer its state-based quality improvement program (OMB Control Number 0920-1108; expiration 09/30/2022). The National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), CDC, is submitting a change request for this approved OMB to update the collection of information from awardees funded through PCNASP.

Under the current OMB approval, PCNASP collects data from awardees, who work with their partners to collect data and conduct organized quality improvement activities for acute stroke patients from stroke onset when contact is made with the emergency medical service (EMS), through in-patient care, and after they are discharged from the hospital. Awardee partners can include hospitals, emergency medical service (EMS) agencies, and other healthcare providers (e.g., stroke rehabilitation facilities). The data collection spans the entire continuum of stroke care, including pre-hospital quality data, in-hospital quality data, and post-hospital quality data. In addition, PCNASP is approved to collect hospital inventory data, which includes information on hospital demographics (e.g., number of hospital beds) and their capacity to treat stroke patients. This data collection has been crucial to measuring the current state of stroke care, progress-to-date, gaps in care, and priority areas that need attention.

PCNASP is requesting a change request to update recent changes to data elements that are vital and necessary for awardees and their partners to continue improving quality of care and linking data across the system to improve stroke outcomes. This change request details the proposed continued data collection for PCNASP, and describes changes to the pre-hospital, in-hospital, and post-hospital data collection instruments. These changes reflect modifications to align with changes to the electronic data collection system commonly used by partners to submit data to awardees and adapt to new scientific research in the stroke field. The changes are needed to keep data collection accurate, and keep PCNASP current with scientific guidelines and research, while maintaining no change or a decrease in the burden of data collection.

## **Estimated Effect on Burden**

There are four categories of information collection: pre-hospital, in-hospital, post-hospital, and hospital inventory. Pre-hospital, in-hospital, and post-hospital quality of care data will be transmitted by awardees to CDC on a quarterly schedule. Hospital inventory data will be collected and transmitted annually. Awardees use their selected data systems to electronically receive or extract data from their partners.

We estimate there will be no significant change or increase in burden for PCNASP awardees. Most of the PCNASP awardees use the American Heart Association/American Stroke Association's (AHA/ASA) Get with the Guidelines-Stroke (GWTG-S) tool for data collection.

PCNASP has worked closely with AHA to leverage the data collection platform to collect data across the continuum of care, therefore easing data collection for awardees. Most of the changes to the approved OMB package reflect recent upgrades to this data collection tool. Maintaining the data elements in their current form without implementing the GWTG updates may in fact increase data collection burden on awardees as they may then need to request additional information from their partners to fulfill accurate reporting of the data. Therefore, data elements have been added, deleted, or modified to align with these recent changes. Other minor changes reflect the need to modify questions for clarity and/or formatting response options for accurate data collection.

The accompanying table is a crosswalk of the approved and corresponding proposed requested change to each data element, along with a brief explanation for the change.