

IC 16-41-41

Chapter 41. Stroke Prevention Task Force

IC 16-41-41-1

"Task force"

Sec. 1. As used in this chapter, "task force" refers to the stroke prevention task force established by section 2 of this chapter.

As added by P.L.69-2004, SEC.2.

IC 16-41-41-2

Stroke prevention task force established

Sec. 2. The stroke prevention task force is established.

As added by P.L.69-2004, SEC.2.

IC 16-41-41-3

Members of task force

Sec. 3. (a) The task force consists of eighteen (18) members as follows:

- (1) The state health commissioner or the commissioner's designee.
- (2) The secretary of family and social services or the secretary's designee.
- (3) Two (2) representatives of a stroke support organization.
- (4) Four (4) physicians with an unlimited license to practice medicine under IC 25-22.5 and with expertise in stroke, including at least:
 - (A) one (1) physician;
 - (B) one (1) neurologist;
 - (C) one (1) physician with expertise in the area of cerebrovascular accidents; and
 - (D) one (1) emergency care physician who is a member of the American College of Emergency Physicians.
- (5) One (1) health care provider who provides rehabilitative services to persons who have had a stroke.
- (6) One (1) nurse with a license to practice under IC 25-23 and who has experience in the area of cerebrovascular accidents.
- (7) One (1) representative nominated by the Indiana Hospital Association.
- (8) One (1) representative from an emergency medical services organization or provider.
- (9) One (1) representative from the Indiana Minority Health Coalition.
- (10) One (1) stroke survivor or stroke survivor caregiver.
- (11) One (1) recreational therapist who provides services to persons who have had a stroke.
- (12) One (1) representative from the Indiana Primary Health Care Association.
- (13) One (1) representative from the health insurance industry.
- (14) One (1) clinical pharmacist who practices in the community and not in a hospital.

(b) The governor shall appoint the members of the task force designated by subsection (a)(3) through (a)(14). The governor may remove an appointed member for cause.

As added by P.L.69-2004, SEC.2. Amended by P.L.59-2008, SEC.1.

IC 16-41-41-4

Terms of members

Sec. 4. Each member of the task force serves a term of four (4) years. A member appointed to fill a vacancy holds office for the remainder of the unexpired term.

As added by P.L.69-2004, SEC.2.

IC 16-41-41-5

Quorum

Sec. 5. Ten (10) members of the task force constitute a quorum for transacting all business of the task force. The affirmative votes of a majority of the voting members appointed to the council are required for the task force to take action on any measure.

As added by P.L.69-2004, SEC.2. Amended by P.L.59-2008, SEC.2.

IC 16-41-41-6

Governor appoints chair and vice chair

Sec. 6. The governor shall appoint one (1) council member to serve as chair and one (1) council member to serve as vice chair. The chair and vice chair shall serve a term of one (1) year.

As added by P.L.69-2004, SEC.2. Amended by P.L.59-2008, SEC.3.

IC 16-41-41-7

Quarterly meetings

Sec. 7. The task force shall meet at least quarterly.

As added by P.L.69-2004, SEC.2.

IC 16-41-41-8

Department provides staff

Sec. 8. The state department shall provide staff for the task force.

As added by P.L.69-2004, SEC.2.

IC 16-41-41-9

Duties of task force

Sec. 9. The task force shall do the following:

(1) Prepare a report each year on the operation of the task force and provide the report to the following:

(A) The governor.

(B) The commissioner of the state department.

(C) The legislative council. The report under this clause must be in an electronic format under IC 5-14-6.

(2) Develop a standardized stroke template checklist for emergency medical services protocols to be used statewide.

(3) Develop a thrombolytic checklist for emergency medical services personnel to use.

- (4) Develop standardized dispatcher training modules.
 - (5) Develop a yearly training update and continuing education unit for first responders that includes the Cincinnati Stroke Scale.
 - (6) Develop an integrated curriculum for providers, including:
 - (A) emergency medical services personnel;
 - (B) hospitals;
 - (C) first responders;
 - (D) physicians; and
 - (E) emergency room staff.
 - (7) Develop a standard template of protocols that include thrombolytic treatment.
 - (8) Create a more refined and specific hospital survey stroke assessment tool to assess the capability of hospitals in treating patients who have had strokes.
 - (9) Research the feasibility of a state based primary stroke center certification program.
 - (10) Develop a stroke survivor mentor program targeting survivors after rehabilitation is complete.
 - (11) Distribute the rehabilitation survey developed by the Great Lakes Stroke Network throughout Indiana to freestanding rehabilitation hospitals.
 - (12) Implement a statewide patient and community education initiative targeting at-risk populations in Indiana.
 - (13) Investigate the use of telemedicine in Indiana for the treatment of neurologic and radiologic stroke patients.
- As added by P.L.69-2004, SEC.2. Amended by P.L.59-2008, SEC.4.*

IC 16-41-41-10

Expenses of task force

Sec. 10. The expenses of the task force shall be paid from:

- (1) funds appropriated to the task force by the general assembly; and
- (2) grant money awarded to the task force.

As added by P.L.69-2004, SEC.2. Amended by P.L.59-2008, SEC.5.

IC 16-41-41-11

Task force expires

Sec. 11. This chapter expires July 1, 2012.

As added by P.L.69-2004, SEC.2. Amended by P.L.59-2008, SEC.6.