# STROKE SOCIETY OF THE PHILIPPINES AND WORLD STROKE ORGANIZATION
# STROKE CENTER CERTIFICATION PROGRAM

*"Strengthening the Nation Through Certified Excellence in Stroke Care."*

SSP-CERT-FORM-03

## Document Submission Checklist

*Use this checklist to compile and verify the application package before submission*

**INSTRUCTIONS**
Tick each item once the document is prepared and included in the package. All documents must be in PDF format. Sensitive patient data need not be submitted digitally - a redacted log, template, or process description is acceptable; original records will be verified during the site visit.

**TIER 1 – SSP-Certified Acute Stroke Ready Hospital (ASRH)**

| Document | ☐ | Notes |
|---|---|---|
| **ADMINISTRATIVE** | | |
| Letter of Intent: signed by CEO/MD on official hospital letterhead | ☐ | |
| Pre-Application Self-Assessment Checklist Form | ☐ | |
| Hospital Application Certification Form | ☐ | |
| Document submission Checklist Form | ☐ | |
| Proof of certification fee payment | ☐ | |
| **KE 1 — ACUTE STROKE TEAM** | | |
| Portfolio of all AST members (name, designation, credentials, specialization) | ☐ | |
| BEST-PH Level I attendance certificates for all AST members | ☐ | |
| On-call schedule confirming 24/7 AST availability (current and signed) | ☐ | |
| Telemedicine agreement and vendor credentials, Memorandum of Understanding (if no in-house neurologist) | ☐ | |
| Stroke Committee meeting minutes with attendance (last 4 meetings) | ☐ | |
| **KE 2 — BRAIN IMAGING AND LABORATORY** | | |
| Radiology Scope of Service (24/7 availability, on-call response times, STAT process) | ☐ | |
| Imaging order-to-interpretation response time log | ☐ | |
| Laboratory Scope of Service (24/7 availability, STAT protocol) | ☐ | |
| Lab turnaround time log (last 10 entries) | ☐ | |
| **KE 3 — CAPABILITY TO PERFORM IV THROMBOLYSIS** | | |
| Pharmacy stock record: alteplase (minimum 2 vials; expiry > 6 months from date of application) | ☐ | |
| BEST-PH IV rTPA training certificates for all AST members | ☐ | |
| AST Activation Log (last 12 months - sensitive patient identifiers may be redacted) | ☐ | |
| **KE 4 — WRITTEN STROKE PROTOCOLS** | | |
| ED written stroke protocol covering ischemic stroke, TIA, and ICH (dated and signed) | ☐ | |

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|---|---|---|
| Visual stroke code algorithm / decision flowchart | ☐ | |
| Thrombolysis order set (inclusion/exclusion criteria, dosing guide, monitoring protocol) | ☐ | |
| In-patient stroke code protocol | ☐ | |
| **KE 5 — STROKE EDUCATION** | | |
| Annual stroke education plan (dates, targeted staff, hours - current calendar year) | ☐ | |
| Attendance master lists for all activities (last 12 months) | ☐ | |
| Activity summary reports with photographs (last 12 months) | ☐ | |
| **KE 6 — AST ACTIVATION LOG** | | |
| AST Activation Log (date, time, response time, diagnosis, treatment, disposition) | ☐ | |
| **KE 7 — HOSPITAL STROKE DATABASE AND PERFORMANCE IMPROVEMENT** | | |
| Hospital stroke database or registry log printout / export | ☐ | |
| Data tracking sheets and action plans | ☐ | |
| Performance Improvement Plan Form (at least 1 completed cycle with outcome) | ☐ | |
| Stroke Committee meeting agendas and signed minutes (last 12 months) | ☐ | |
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**TIER 2 – SSP-WSO Essential Stroke Center (additional documents beyond Tier 1)**

| Document | ☐ | Notes |
|---|---|---|
| **PORTAL AND ADMINISTRATIVE** | | |
| WSO portal application confirmation with assigned reference number | ☐ | |
| Proof of Tier 2 certification fee (Private: USD 1,000 / Government: USD 500) | ☐ | |
| **INFRASTRUCTURE AND STAFF CREDENTIALS** | | |
| Center structure overview (beds, scanners, stroke unit, staffing summary) | ☐ | |
| Stroke Team credential documents by staff category | ☐ | |
| **TRAINING RECORDS** | | |
| Nursing staff stroke training records (minimum 4 hours/year; attendance with agendas) | ☐ | |
| Emergency physician training records (minimum 4 hours/year) | ☐ | |
| Stroke unit / Neuro-ICU physician training records (minimum 8 hours/year) | ☐ | |
| Physiotherapy and Occupational Therapy training records | ☐ | |
| **PROTOCOLS AND PATHWAYS** | | |
| Service protocol implementation document (written stroke protocol with guideline references) | ☐ | |
| Stroke patient care pathway (from ED admission through discharge and follow-up) | ☐ | |
| **MULTIDISCIPLINARY TEAM AND REGISTRY DATA** | | |
| Multidisciplinary team meeting records (agendas, attendance lists, signed minutes) | ☐ | |
| Registry data export (minimum 12 months; all WSO KPIs 1–13 fully populated) | ☐ | |

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| Confirmation that data is uploaded and accessible on the WSO certification portal | ☐ | |
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**TIER 3 – SSP-WSO Advanced Stroke Center (additional documents beyond Tier 2)**

| Document | ☐ | Notes |
|---|---|---|
| **ADVANCED CAPABILITIES** | | |
| Neurointerventionalist credentials and 24/7 on-call schedule | ☐ | |
| Angio suite availability documentation and readiness protocol | ☐ | |
| Thrombectomy case log (minimum 10 cases/year; last 12 months) | ☐ | |
| Hemicraniectomy on-call arrangement documentation | ☐ | |
| ICU on-site availability documentation and stroke case acceptance protocol | ☐ | |
| MRI availability documentation and stroke imaging protocol | ☐ | |
| **EXTENDED REGISTRY DATA** | | |
| Registry data export (minimum 2 years; all 17 WSO KPIs fully populated) | ☐ | |
| KPI 14–17 data (thrombectomy rate, door-to-puncture times, TICI scores) | ☐ | |
| **RESEARCH AND REGIONAL COORDINATION (Recommended)** | | |
| Evidence of stroke research activity (publications, active trials, or IRB-approved protocols) | ☐ | |
| Telestroke program documentation and signed agreements with peripheral/rural centers | ☐ | |
| Coordinated referral system documentation (referral pathways and protocols) | ☐ | |
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