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-06

RSC Preliminary Assessment Report

Completed by the Regional Stroke Coordinator within 20 working days of receiving the application file

PURPOSE
Documents the RSC's preliminary review. Submitted to the SSP Committee on Certifications and forms the basis for the formal document review and site visit decision.

SUBMIT TO
SSP Committee on Certifications via certifications.ssp@gmail.com within 20 working days of receiving the complete application file.

A APPLICATION DETAILS

Hospital Name	
Application Reference Number (SSP-CERT-LOG)	
Certification Tier Applied For	
Application Type (Initial / Recertification)	
Date File Received by RSC	
Date of Report Completion	
Regional Stroke Coordinator Name	
RSC Region	

B RATING SCALE REFERENCE

Rating	Label	Required Action
A	Fully Compliant	All documents present and satisfactory. Recommend proceeding to site visit.
B	Substantially Compliant	Minor gaps in 1–2 items. 14-day remediation window before report is finalized.
C	Partially Compliant	Significant gaps in 3–4 key elements. Conditional hold; 60-day BEST-PH remediation window.
D	Not Compliant	Fundamental requirements not met. Application deferred; 12-month remediation period.

C1 KEY ELEMENT REVIEW – Tier 1 (All Applications)

Rate each Key Element A / B / C / D using the scale above. Include document references and any gaps identified.

Key Element	Rating	Key Documents Reviewed	Findings / Gaps Identified
KE 1 — Acute Stroke Team		*Portfolios, credentials, on-call schedule, BEST-PH certs*	
KE 2 — Brain Imaging and Laboratory		*Radiology & Lab Scope of Service, response time logs*	
KE 3 — IV Thrombolysis Capability		*Alteplase stock, rTPA training certs, AST Activation Log*	
KE 4 — Written Stroke Protocols		*ED protocol, algorithm, order sets, in-patient code protocol*	
KE 5 — Stroke Education		*Annual education plan, attendance lists, activity reports*	
KE 6 — AST Activation Log		*Log completeness: all required data fields populated*	
KE 7 — Hospital Stroke Database		*Registry/database log, PI forms, committee minutes*	

C2 WSO CRITERION AREAS – Tier 2 and Tier 3 Only

WSO Criterion Area	Rating	Comments / Gaps Identified
Emergency Department and Basic Diagnostics		
Advanced Diagnostics (Tier 3 primary)		
Hyperacute Stroke Care and Thrombolysis		
Nursing Training and Competencies		
Stroke Unit and Inpatient Care		
Interdisciplinary Stroke Team		
Advanced Interventions (Tier 3 primary)		
Organization of Stroke Care		
Registry and Performance Improvement		

D OVERALL RECOMMENDATION

Overall Rating	☐ A — Fully Compliant ☐ B — Substantially Compliant ☐ C — Partially Compliant ☐ D — Not Compliant
Recommended Tier	☐ Tier 1 ☐ Tier 2 ☐ Tier 3 ☐ Lower than applied (explain in narrative)
Site visit Recommendation	☐ No site visit required ☐ Proceed to site visit (mandatory for Tiers 2 and 3) ☐ Conditional hold (remediation required) ☐ Defer application

Summary Narrative:

E REMEDIATION ITEMS (if Rating B, C, or D)

#	Item Requiring Remediation	Evidence / Documentation Required	Deadline
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			

F RSC DECLARATION

RSC Signature over Printed Name	
Date of Submission to the SSP Committee of Certifications	
Received by SSP Committee (Name and Date)	