

Data Pulse

March, 2017

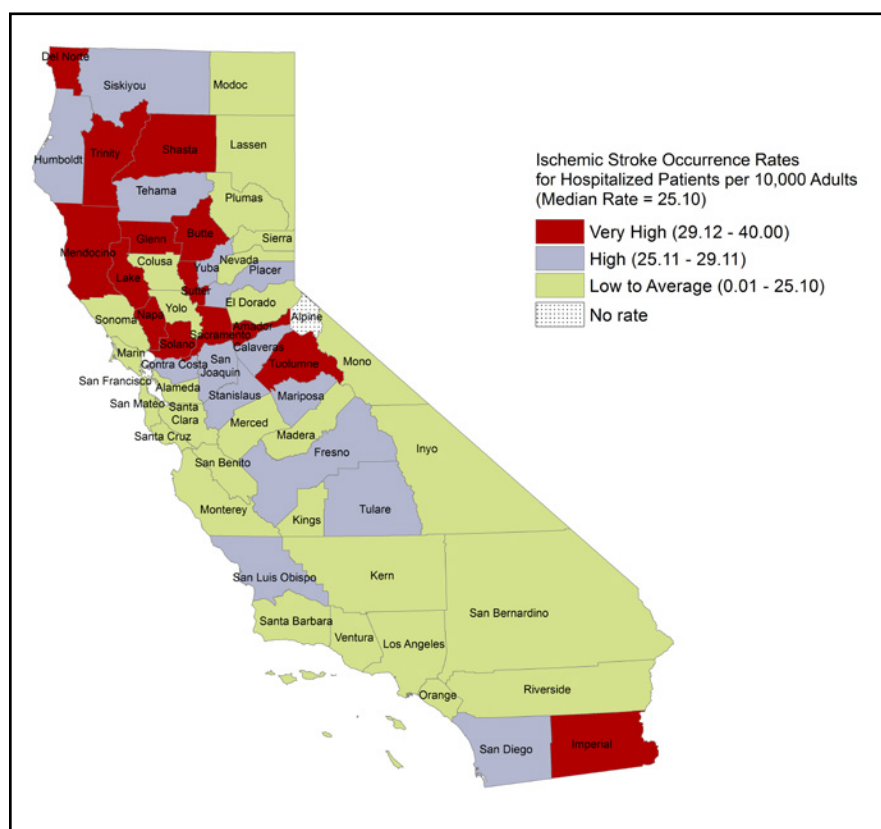
County Variation in Occurrence and Death Rates for Hospitalized Ischemic Stroke Patients in California

County-level differences in stroke occurrence rates and death rates may arise from geographic differences in stroke awareness and healthcare access. This report presents geographic differences in occurrence and death rates for hospitalized ischemic stroke patients in California counties from 2013 to 2014.

Key Findings:

- ◆ Many Northern and Central California counties had higher occurrence rates compared with the median county rate.
- ◆ Many Northern and Central Sierra California counties had higher death rates compared with the median county rate.

The county occurrence rate for hospitalized ischemic stroke patients varied by location. Counties with greater occurrence rates should focus on stroke prevention by increasing awareness of stroke risk factors, so individuals within the county can use that knowledge to reduce their chances of having a stroke.



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The most common type of stroke, ischemic stroke, occurs when an artery supplying blood to the brain becomes blocked. Timely interventions are critical to reverse the damage, reduce mortality and disability, and improve survivor quality of life.

This data pulse was based on OSHPD hospital reports about the quality of ischemic stroke care in California hospitals. Over 270 hospitals were rated on mortality and readmissions within 30 days following a patient's discharge from the hospital.

These reports can be found at: <http://www.oshpd.ca.gov/HID/Ischemic-Stroke-Report.html>

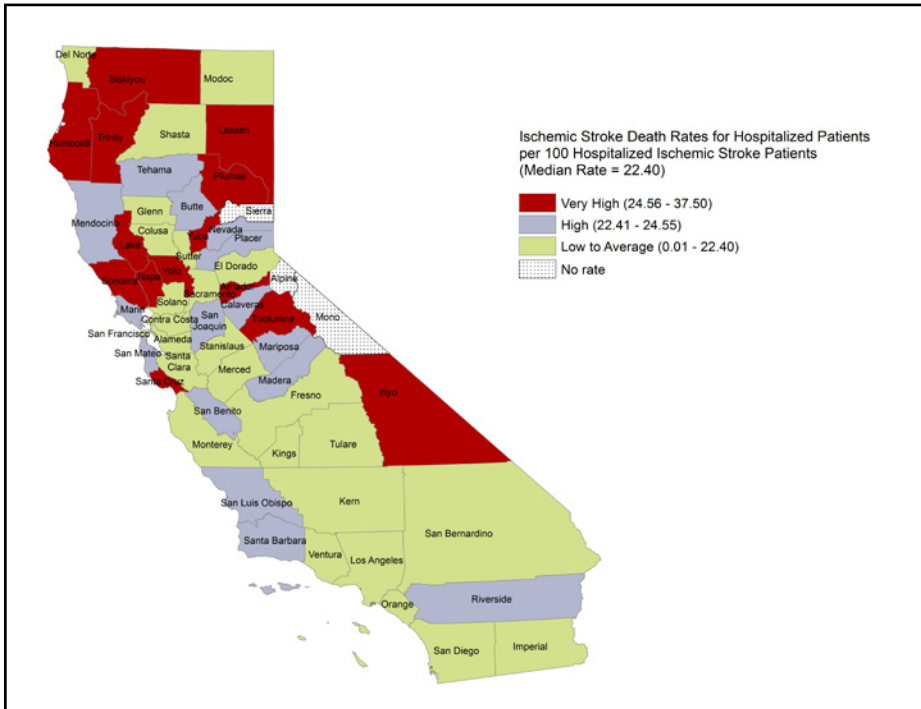
Ischemic Stroke Open Data:

<https://chhs.data.ca.gov/Healthcare/Ischemic-Stroke-30-Day-Mortality-and-30-Day-Readmi/6yg2-gk2b>

OSHPD's Healthcare Outcomes Center:

<http://www.oshpd.ca.gov/HID/Find-Data.html>

The county death rate for hospitalized ischemic stroke patients varied by location. Counties with greater death rates should focus on getting faster treatment to stroke patients. These include: (a) increasing the recognition of stroke warning signs and symptoms and quickly calling 9-1-1, and (b) reducing the time it takes for a stroke patient to arrive at a hospital.



California's Office of Statewide Health Planning and Development (OSHPD) is the leader in collecting data and disseminating information about California's healthcare infrastructure. OSHPD promotes an equitably distributed healthcare workforce, and publishes valuable information about healthcare outcomes.

OSHPD also monitors the construction, renovation, and seismic safety of hospitals and skilled nursing facilities and provides loan insurance to assist the capital needs of California's not-for-profit healthcare facilities.

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Data source and methods

Data used were from the California patient discharge data (PDD), collected by the Office of Statewide Health Planning and Development (OSHPD) and California death certificate records (Death Statistical Master File) from the California Department of Public Health (2013 and 2014). Data analyses were performed using SAS statistical software SAS Enterprise Guide Version 7.1.



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