

# Stroke Encounter Quality Improvement Project (SEQIP)

## Coordinator:

Lonna Boisseau  
Program Manager  
Heart Disease and Stroke Prevention Program  
Division of Prevention and Quality Improvement  
Kentucky Department for Public Health  
(502) 564-0646  
lonna.boisseau@ky.gov

**State Website:** <https://www.chfs.ky.gov/agencies/dph/dpqi/cdpb/Pages/heartdiseasestroke.aspx>

**National Website:** [CDC Division for Heart Disease and Stroke](#)

## Why is it used?

- SEQIP was created in 2009 as a statewide voluntary stroke quality improvement initiative of the Kentucky Heart Disease and Stroke Prevention Task Force - Cardiovascular Health (CVH) Delivery Systems Subcommittee and the American Heart Association/ American Stroke Association (AHA/ASA).
- To identify demographic variables associated with stroke prevalence to improve program or policy decision making.
- Data on standardized evidence-based measures help SEQIP hospitals monitor and improve acute stroke care processes and clinical outcomes.
- To ensure SEQIP hospitals are achieving greater than 85% on the Get With the Guidelines® performance measures.

## What data is collected?

- Demographic information including gender, age, race, ethnicity and place of residence.
- Complete information regarding type of stroke.
- Complete information on clinical measures related to stroke care from hospital admission to discharge.
- A few pre-hospital and post-hospital discharge points.

## How is data collected?

- Hospitals enter data into the Get With the Guidelines® -Stroke database maintained by IQVIA, a health information technology and clinical research organization.
  - All certified stroke centers in Kentucky are required to participate in the SEQIP data registry per [KRS 211.575](#).

## Data Strengths

- Allows for a thorough understanding of stroke types and severity.
- Contains detailed information on clinically relevant measures.
- Stores information regarding medical management strategies from hospital arrival to discharge, facilitating quality improvement at hospitals.

**Data Limitations:**

- Pre-hospital and post-hospital discharge information is limited.
- Stroke data from hospitals that do not use the Get With the Guidelines® database is not included.
- Many patient records have incomplete information.

**How is the system evaluated?**

- Data collection is routinely monitored utilizing quality control standards developed by the American Heart Association.

**Data Set Availability:**

- Fully identified data set is not available to the public.

**Data Release Policy:**

- Requests for specific analyses can be made to the program manager / data contact.

**Data Publications:**

- The Heart Disease and Stroke Prevention Program produces an annual statewide summary and can be found at the website listed above.

**Suggested Citation**

Kentucky Cabinet for Health and Family Services. The SEQIP Stroke Registry [year] Annual Report. Frankfort, KY: KY Cabinet for Health and Family Services, Department for Public Health Heart Disease and Stroke Prevention Program, Stroke Encounter Quality Improvement Project, [year].

**Contributing Authors:**

Samantha Albuquerque, DrPH, MS, Kentucky Department for Public Health  
Adam Berrones, PhD, Kentucky Department for Public Health