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|  | 4204 | Trauma Center Designation Criteria, Requirements, and Responsibilities |
| Nor-Cal EMS Policy & Procedure Manual | | Trauma Care System |
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| Approval: | | SIGNATURE ON FILE |

AUTHORITY:

California Health and Safety Code, Division 2.5, Chapter 2 § 1797.67 & 1797.88, Chapter 6 § 1798.102, 1798.150, 1798.170, and 1798.172, California Code of Regulations, Title 22, Division 9, Chapter 7.

PURPOSE:

To outline the criteria, requirements, and process for facility Trauma Center designation in the NOR-CAL EMS region.

DEFINITIONS:

- I. A **Level I Trauma Center** provides the highest level of trauma care through its diverse resource availability. Additionally, a level I center provides leadership in patient care, education, and research for trauma, including prevention programs.
- II. A **Level II Trauma Center** possesses similar resources as a Level I Trauma Center yet does not participate at the research level.
- III. A **Level III Trauma Center** is capable of assessment, resuscitation, and emergency surgery if warranted. According to pre-existing arrangements, injured patients are stabilized before transfer (if indicated) to a facility with a higher level of care.
- IV. A **Level IV Trauma Center** can provide 24-hour physician or ATLS certified mid-level coverage, resuscitation, and stabilization to injured patients before they are transferred if indicated. According to pre-existing arrangements, injured patients are stabilized before transfer to a facility with a higher level of care.

TRAUMA CENTER REQUIREMENTS:

- I. Trauma Center designation in the NOR-CAL EMS region requires the following:
 - A. The facility is licensed by the California Department of Public Health Services as a general acute care hospital.
 - B. The facility has a special permit for basic or comprehensive emergency medical service, according to the provisions of the California Code of Regulations Title 22, Division 5.

TRAUMA CENTER REQUIREMENTS *(Continued)*:

- C. The facility is accredited by a Centers for Medicare and Medicaid Services approved deeming authority.
- D. The facility meets all requirements in the California Code of Regulations Title 22, Division 9, Chapter 7, for the applicable level of Trauma Center designation.
- E. The facility meets the minimum standards published in the current edition of the American College of Surgeons Committee on Trauma (ACS-COT) Resources for the Optimal Care of the Injured Patient document for the applicable level of designation.
- F. The facility meets the ACS-COT or NOR-CAL EMS trauma center verification requirements in this policy for the applicable level of designation.
- G. The facility agrees to accept the transfer of all major trauma patients whose clinical condition requires a higher level of care than can be provided at the sending facility unless the Trauma Center is on trauma diversion or internal disaster.
- H. The facility has a written transfer agreement with a higher level of Trauma Center (if applicable), providing for the transfer of trauma patients whose clinical condition requires a higher level of care than can be provided at their facility.
- I. The facility will submit all required trauma patient data into the NOR-CAL EMS regional trauma registry.
 - 1. Each trauma center shall submit patient data in an agreed-upon format and within the time requirements published in the most current edition of the ACS-COT Resources for the Optimal Care of the Injured Patient document.
 - 2. Each trauma center shall ensure that the data entered into the NOR-CAL EMS regional trauma registry is valid and without known errors.
 - 3. Level III trauma centers located within the NOR-CAL EMS region shall provide NOR-CAL EMS with their American College of Surgeons Trauma Quality Improvement Program (ACS TQIP®) Benchmark Report on a bi-annual basis.
- J. The facility will submit all required trauma patient data to the California EMS Authority data management system, as required by California Code of Regulations Title 22, Division 9, Chapter 7.
- K. The facility will actively participate in the NOR-CAL EMS regional trauma system quality improvement (QI) process, including required attendance at scheduled NOR-CAL EMS Trauma QI meetings.
- L. The facility will have a QI process established to provide ongoing feedback to:
 - 1. Tracking patients transferred for high need trauma services.
 - 2. Prehospital patients meeting trauma triage criteria.

TRAUMA CENTER REQUIREMENTS *(Continued)*:

- M. The facility will provide CE opportunities, a minimum of four (4) hours per year, for EMS personnel in trauma care areas.
 - N. The facility will maintain active injury prevention programs targeted at reducing preventable injuries in the community.
 - O. The facility will pay the initial and annual Trauma Center designation fees as required by NOR-CAL EMS.
- III. The diversion of patient trauma patients must only occur during an internal disaster or when emergent trauma services are otherwise unavailable.
- A. The following are notified as soon as possible during any event where trauma services are not available:
 - 1. NOR-CAL EMS.
 - 2. Trauma center emergency department – to include an updated status on EMResource indicating trauma services are “*unavailable*.”
 - 3. Appropriate adjacent trauma centers.
 - 4. Appropriate prehospital provider agencies.
 - B. Upon notification, the facility will provide an estimated time of availability as well as updates of any timeframe changes.
 - C. A **NOR-CAL EMS Ambulance Patient Diversion Form** describing events inhibiting patient delivery will be submitted to NOR-CAL EMS by the end of the next business day.

TRAUMA CENTER DESIGNATION PROCESS:

- I. NOR-CAL EMS will perform a trauma system needs assessment before consideration of any additional trauma centers in the NOR-CAL EMS region.
- II. Any hospital seeking NOR-CAL EMS Trauma Center designation will submit a letter of intent to the NOR-CAL EMS Chief Executive Officer. This letter shall be on hospital letterhead and include a minimum of the following:
 - A. The requested level of Trauma Center designation and anticipated start date for the provision of trauma services.
 - B. Identification of the Trauma Program Medical Director, Trauma Program Manager, and Trauma Program Registrar.
 - C. Confirmation of commitment and support by hospital administration and physician staff for the applicable level of Trauma Center designation, including signatures of the hospital Chief of Staff and Chief Executive Officer (CEO).

TRAUMA CENTER DESIGNATION PROCESS *(Continued)*:

- II. Within ninety (90) calendar days of receiving a letter of intent that complies with the criteria listed in this section of the policy, NOR-CAL EMS will perform a trauma system needs assessment. The NOR-CAL EMS Chief Executive Officer will consequently make a designation recommendation to the NOR-CAL EMS Governing Board of Directors based on the trauma system needs assessment results.
- III. Upon direction from the NOR-CAL EMS Governing Board of Directors to proceed with the Trauma Center designation process, the following will occur:
 - A. NOR-CAL EMS will establish a Trauma Center contract with the hospital.
 - B. The hospital shall complete a Trauma Center consultative review:
 1. An ACS-COT Consultative Review is required for any hospital requesting Level III Trauma Center designation.
 2. A NOR-CAL EMS Consultative Review is required for any hospital requesting Level IV Trauma Center designation.
 - C. The NOR-CAL EMS Regional Executive Director, in consultation with the NOR-CAL EMS Medical Director, will make a recommendation to the NOR-CAL EMS Governing Board of Directors to grant or deny NOR-CAL EMS Trauma Center designation based on the results of the consultative review.
 - D. The hospital shall obtain and continually maintain Level III Trauma Center ACS-COT or Level IV NOR-CAL EMS verification within three (3) years of completion of the consultative review to maintain NOR-CAL EMS Trauma Center designation.
 - E. Failure to comply with the criteria and standards contained in this policy, applicable statutes/regulations, and/or NOR-CAL EMS Trauma Center contracts may result in probation, suspension, denial, or revocation of a NOR-CAL EMS Trauma Center designation.
 - F. The NOR-CAL EMS Governing Board of Directors shall have final authority in any Trauma Center designation matters.

TRAUMA CENTER DESIGNATION MAINTENENCE AND REVIEW:

- I. Level III and IV Trauma Centers designations will be awarded for up to five (5) years.
- II. At a minimum of every two (2) years after the designation has been awarded, an internal compliance audit shall be performed by Nor-Cal EMS. If requirements are not met by the Trauma Center, the Denial, Revocation or Suspension of Designation policy will be implemented.
- III. If the facility is not compliant by the second review, one more opportunity to correct any deficiencies will be provided and a follow-up site review will be conducted as necessary.
- IV. If the facility is still not compliant, the designation process may be repeated after one (1) year.

TRAUMA CENTER MARKETING AND ADVERTISING:

I. Level III and Level IV Trauma Centers:

- A. In accordance with Section 1798.165 of the Health and Safety Code, “No health care provider shall use the following terms or similar terminology in its signs or advertisements or printed materials and information it furnishes to the general public, unless the use is authorized by the local EMS Agency:
 - 1. Trauma facility
 - 2. Trauma hospital
 - 3. Trauma center
 - 4. Trauma care provider
 - 5. Trauma vehicle
- B. Prior to implementation of any marketing or advertising material within the NOR-CAL EMS region, materials will be reviewed by the LEMSA to ensure materials provider:
 - 1. Accurate information
 - 2. Avoid false claims
 - 3. Are not critical of other providers
 - 4. Does not include financial incentives to any providers or third parties.
- C. Any local consumer protection ordinances related to advertising and marketing must be adhered to.