

# Indiana trauma designation system

- Authority—IC 16-19-3-28
  - ISDH is the trauma lead agency for Indiana
  - Specifically:
    - Authority to adopt rules
    - Concerning the development and implementation
    - Of standards and procedures for trauma care level designation of hospitals

## Vision and objectives

- Essentially—supplement the trauma center verification process of the American College of Surgeons
  - ACS addresses the more clinical aspects of trauma centers
  - ISDH responsibility—aspects of trauma system development
  - Asking a “little more” of trauma centers in Indiana
  - Must be both ACS-verified and ISDH-designated (ACS levels)

## Specific aspects of the process

- Hospitals first become ACS-verified, then ISDH-designated
  - Already ACS-verified? Grandfathered as designated
  - Meet designation requirements by next verification visit
- Additional asks of Indiana trauma centers:
  - Permit Commissioner's designee to attend verification visits
  - Level I and Level II centers must participate in ACS Trauma Quality Improvement program
  - Public education program to promote evidence-based injury prevention—collaborate with ISDH in statewide injury prevention
    - Level II centers must employ 1 full time injury prevention staff
  - Professional education outreach program to improve care of trauma patients—conduct 1 RTTDC course each year and two meetings yearly for all trauma providers

## Specific aspects of the process

- Additional asks of trauma centers:
  - Submit an annual report, including data on specific items
  - Transfer agreements requirement should include centers and other acute care facilities in the catchment area
- Designation is site-specific and not transferable
- Designated/verified at the same level
- Out-of-state centers are eligible for IN designation
- Designation co-terminous with verification
- ISDH will investigate complaints/lower than average performance and outcomes

## Provisional designation process

- “In the process of ACS verification”
  - Triage and Transport Rule—requires EMS Commission involvement
  - This Committee reviewed and improved those standards over the last couple of meetings
    - Pediatric standards—review those later today
  - Move those provisions from the EMS Commission rule and place in this rule—legally make their requirement go away
    - Essentially same set of standards

## Provisional designation process

- Special conditions for provisional designation
  - Within 1 year—begin the ACS verification process
  - Provisional designation lasts only 2 years
  - Submit data to Trauma Registry within 3 months
  - If hospital isn't ACS-verified within 2 years, hospital loses its “provisional” status and is not eligible to become a “provisional” trauma center for 3 years
- Next steps
  - Consult with ISDH Legal Affairs—draft a rule
  - Bring it back to you for further discussion
  - Take it to ISDH Executive Board for preliminary adoption

## “In the process” pediatric standards

- Adult trauma centers taking pediatric patients which admitted more than 100 injured children in the previous calendar year—trauma surgeons must be credentialed for pediatric trauma care by the hospital's credentialing body.
- Admit more than 100 injured children in the previous calendar year—must have a:
  - Pediatric emergency area
  - Pediatric intensive care area
  - Appropriate resuscitation equipment and a
  - Pediatric-specific trauma PIPS program.
- Did not admit more than 100 injured children:
  - Must review the care of injured children through the PIPS program.

## Pediatric standards

- Describe the facility's separate pediatric trauma team.
- Enumerate the average number of years experience of its nursing staff/describe nursing staff's annual turnover for the last 5 years.
- Adult trauma center taking pediatric patients—must list the number of physicians with additional pediatric training (fellowship) in the following areas:
  - Pediatric surgery
  - Neurosurgery
  - Orthopedic surgery
  - Emergency medicine



# Pediatric standards

- Enumerate all extra certifications for PICU nursing staff in the following areas:
  - TNCC
  - ATCN
  - Audit ATLS
  - CEN
  - PALS
  - ACLS
  - CCRN
  - CPAN
  - ENPC
  - CPN
  - Other