STATE OF COLORADO

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Dedicated to protecting and improving the health and environment of the people of Colorado

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Colorado Department of Public Health and Environment

Designation Review Committee

Meeting Minutes

November 1, 2012

CDPHE Staff: Grace Sandeno, Margaret Mohan
Via Telephone: Becky Oliver, Nancy Frizell, Amanda Soychak, Mary Shelton, Paula Golden, Amy Carter, Nat Anderson

Roll Call/Call to Order: 4:00 PM

Members	Serving as:	In Person	By Phone	Absent
Denise Stong	Trauma Nurse Coordinator		X	
Edward Lopez	General Surgeon Level III		X	
Arlene Harms	Health Care Facility Admin		X	
Zane Laubhan	Prehospital/EMS Provider		X	
Eugene Eby	Emergency Physician		X	
Eric Schmidt	RETAC Rep	X		
Charles Mains	General Surgeon		X	
Phyllis Uribe	Trauma Nurse Coordinator		X	
Jeff Beckman	Emergency Physician		X	

Organizational Issues:

- Quorum established
- Minutes from the September 6, 2012 meeting; motion to accept as written – Lopez, 2nd Uribe, passed unanimously.

Trauma Program Report:

- Yampa Valley Medical Center in Steamboat Springs received an automatic recommendation as a level IV trauma center, by having no deficiencies and no items met with reservations when reviewed on September 20, 2012. The department issued a level IV designation based on the recommendation.
- Summit Medical Center in Frisco received an automatic recommendation as a level III trauma center, by having no deficiencies and no items met with reservations when reviewed on September 21, 2012. The department issued a level III designation based on the recommendation.
- Mercy Medical Center in Durango received an automatic recommendation as a level III trauma center, by having no deficiencies and no items met with reservations when reviewed on September 27, 2012. The department issued a level III designation based on the recommendation.
- St. Anthony North Hospital in Westminster received an automatic recommendation as a level III trauma center, by having no deficiencies and no items met with reservations when reviewed on October 24, 2012. The department issued a level III designation based on the recommendation.

DRC Recommendations - See page 2

Facility	Review Results/ Review Team Recommendation	Motion	W/POC	W/RR	Second	Abstain	Unanimous
Southwest Memorial Hospital	**Current Review:** September 26, 2012 The following issues were identified through the review process: • **Met with Reservations -** A. Hospital Administration and Organization - 3. A trauma program with policies that identify and establish the scope of trauma care for both adult and pediatric patients, including - a. Initial resuscitation and stabilization **Reviewers comment:** The policy should be revised to indicate care expectations to establish consistency among providers. ATLS standards should be used as benchmarks. • **Met with Reservations -** A. Hospital Administration and Organization - 9. A quality improvement program as defined in Section 308 - The **process** should include the elements as described in 6 CCR 1015-4, Chapter Three, section 308 **Reviewers comment:** The need exists to improve the documentation of process, actions and loop closure. Deaths need to be scored as preventable, potentially preventable or non-preventable. Follow up from receiving facilities needs to be improved. • **Met with Reservations -** A. Hospital Administration and Organization - 9. A quality improvement program as defined in Section 308 - **Accountability** can be demonstrated by meeting criteria as described in 6 CCR 1015-4, Chapter Three, section 308 • **Reviewers comment:** Inconsistency in documentation and evaluation of trauma team activation occurrences and response times.						
	Motion: Approve designation with plan of correction	Eby	X		Lopez		X
Conejos County Hospital	**Current Review:** October 23, 2012 The following issues were identified through the review process: • **Met with Reservations -** A. Hospital Administration and Organization - 9. A quality improvement program as defined in Section 308 - **Accountability** can be demonstrated by meeting criteria as described in 6 CCR 1015-4, Chapter Three, section 308 **Reviewers' comments:** A defined C-spine clearance policy should be developed and followed by all practitioners.						
	Discussion: Representatives from the facility asked the committee to consider that the criteria judged to be lacking fit more appropriately with the Scope of Care expectations rather than Quality Improvement. After discussion the committee agreed and requested the citation be changed.						
	Motion: Change the criteria determined to be Met with Reservation from 6 CCR 1015-4, Chapter Three, § 308 - Quality Improvement to 6 CCR 1015-4, Chapter Three, § 306.1.C. Approve designation with plan of correction.	Eby	X		Beckman	Mains Stong	X