



Memorandum #03-17

Date: July 27, 2017

To: SOUTHERN NEVADA DISTRICT BOARD OF HEALTH

From: John Hammond, Paramedic, EMS & Trauma System Manager
Michael D. Johnson, PhD, Director of Community Health
Joseph P. Iser, MD, DrPH, MSc, Chief Health Officer

Subject: Request for Approval of Renewal of Authorization of Sunrise Hospital & Medical Center as a Level II Center for the Treatment of Trauma

I. BACKGROUND:

In accordance with Clark County Trauma Regulation 300.200 any hospital that desires renewal of designation as a center for the treatment of trauma in Clark County shall first request renewal of authorization from the Board. The hospital must show that it continues to meet the requirements of the Trauma Regulations, as well as demonstrate its capacity, capability and commitment to provide trauma services and to contribute to the current and future needs of the trauma system.

II. RECOMMENDATION:

Upon receipt and review of the application for renewal of authorization as a center for the treatment of trauma, the Office of Emergency Medical Services & Trauma System recommends the Board approve Sunrise Hospital & Medical Center's request to seek designation as a Level II center for the treatment of trauma based on their demonstrated willingness to submit trauma data to Southern Nevada Health District (SNHD) and the State Trauma Registry; to actively participate in the Regional Trauma Advisory Board (RTAB) and EMS/Trauma Performance Improvement activities; to provide standard financial information to assist in the assessment of the financial stability of the trauma system; and to comply with all applicable SNHD regulations and State Health Division requirements for authorized and designated centers for the treatment of trauma.

III. CONDITIONS:

The attached application for renewal of authorization as a Level II center for the treatment of trauma has been unanimously approved by the RTAB. The RTAB and staff recommend Board approval of the renewal of authorization under the condition that Sunrise Hospital & Medical Center shall apply to the State Health Division for renewal of their designation, which includes verification by the American College of Surgeons.

JH:jt

Attachments:

- A. Public Notice dated 6/26/2017
- B. Sunrise Hospital & Medical Center's Application for Renewal of Authorization as a Level II Center for the Treatment of Trauma

NOTICE OF PUBLIC HEARING

NOTICE IS HEREBY GIVEN that a public hearing will be held before the Southern Nevada Health District's Board of Health on July 27, 2017, at 8:30 a.m. at the Southern Nevada Health District, 280 S. Decatur., Las Vegas, Nevada, pursuant to Nevada Revised Statutes 439.366 and 450B.237 for the purpose of requesting approval of renewal of authorization of Sunrise Hospital and Medical Center as a Level II Trauma Center.

All interested persons may appear at the hearing and submit data, views or arguments regarding the proposed amendments. Written data, views and arguments may also be submitted to the District Board of Health in advance of the hearing, addressed to the Chairman of the Southern Nevada District Board of Health at P.O. Box 3902, Las Vegas, NV 89127. The District Board of Health will consider fully all written and oral submissions on the proposed amendments prior to taking action thereon. Questions may be directed to Southern Nevada Health District's Office of Emergency Medical Services & Trauma System at (702) 759-1050.

Dated: Jun 20, 2017

To be published: June 26, 2017

A handwritten signature in black ink, appearing to read "John Hammond", is written over a horizontal line.

John Hammond, EMS & Trauma System Manager
Southern Nevada Health District

Briefly describe any changes in the hospital's longitudinal commitment (expected to be greater than five years) to provide trauma services in the community during the past designation period:

Sunrise Hospital and Medical Center has been approved to build a new tower, which will include a new Adult ED and Trauma Bays that will incorporate care efficiency design with technology. This new tower will also increase capacity for patient care areas such as the Trauma ICU.

A new 256 slice CT scanner has been purchased and is pending installation in June of 2017.

Sunrise Trauma provides the training to UNSOM Residents for their Trauma-Surgical-Critical Care Rotation.

Additional information the applicant would like to provide in support of their request:

Sunrise Hospital and Medical Center has demonstrated its support for the Trauma Program not only through the provision of technology and development of the nursing staff through training and education, rather in the growth of its Program Team as well. Since the last reverification Trauma Services at Sunrise Hospital and Medical Center received the following additional staffing: Trauma Program Manager (TPM), Trauma Performance Improvement (PI) Nurse, 3 more trauma registrars (for a total of 5), and an Administrative/Trauma Registry Assistant.

Starting in July, Sunrise Trauma will begin a research program that will be a collaborative effort with both UNLV and UNSOM.

Has the applicant been in compliance with the conditions for authorization as a center for the treatment of trauma as outlined below during this past designation period?

1. Submitted trauma data to SNHD and the State Trauma Registry.

Yes No

2. Actively participated in the Regional Trauma Advisory Board and Trauma System Performance Improvement activities.

Yes No

3. Provided standard financial information to assist in the assessment of the financial stability of the trauma system, when requested.

Yes No

4. Complied with all applicable SNHD regulations and State Health Division requirements for authorized and designated centers for the treatment of trauma.

Yes No

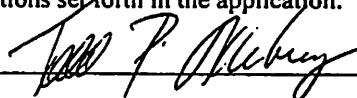
I have read and completed the application to the best of my ability and attest to the fact the information provided is true and complete to the best of my knowledge.

I authorize the release of such information as may pertain to the purpose of this application.

I understand any misstatements or omissions of material facts may cause forfeiture of the right to authorization as a center for the treatment of trauma.

I understand and agree to comply with the conditions set forth in the application.

Signature of Hospital Administrator or Owner



Date: 4/26/17

Printed Name of Hospital Administrator or Owner: Todd P. Sklamberg

Title of Person signing the Application: Chief Executive Officer