



MICHIGAN TRAUMA FACILITY INAUGURAL DESIGNATION PERIOD
For Level III and Level IV Facilities
In-state verified only

Inaugural Designation Period

The inaugural designation period is a three year (maximum) period established by the Michigan Department of Health and Human Services, Trauma Section, during which a hospital that intends to commit its resources to developing a Level III or Level IV trauma program has the opportunity to collect and analyze trauma patient data, examine available resources, and build their trauma program under provisional status. This is not intended for hospitals that are or intend to become an American College of Surgeons verified trauma facility (Level I, Level II or Level III). The inaugural period will begin on December 1, 2014 and end December 31, 2017. All hospitals in the state are expected to complete the Michigan trauma facility designation process by December 31, 2017. This date may be revised after all acute care facilities seeking designation have had site visits, and applied for designation.

This inaugural designation period is germane to the hospitals that are not verified and are planning an in-state review. These facilities are in the process of building and documenting their trauma program. During this inaugural designation period trauma regions should refrain from significantly altering trauma patient flow patterns and should continue to allow the transport of trauma patients to hospitals based on the presumed level of their post-inaugural designation. Doing so will allow the individual hospital to collect the necessary data to support its decision to seek the level of state trauma facility designation for which it is most qualified.

Hospitals will notify the Regional Trauma Network (RTN) in writing regarding their intention to seek designation by the State of Michigan as a trauma facility as well as submitting the requisite Pre-Review Questionnaire (PRQ) found on the Michigan Trauma website at www.michigan.gov/traumasystem to the RTN. This notification shall include the level of trauma care that most closely matches that which the hospital is currently providing care based on the published criteria for a Level III or Level IV Michigan trauma facility. Hospitals are required to submit a report of their progress in trauma program development to the RTN and copy to the Regional Trauma Coordinator including a (revised if necessary) PRQ. The report must be submitted at least annually or within five business days of a significant change in available resources impacting trauma care. Unsatisfactory progress may result in a re-evaluation of status when discussing transport and destination decisions the regional level.