PURPOSE:
The inaugural period is a three year period established by the Michigan Department of Health and Human Services during which a facility that intends to commit its resources to developing and/or maintaining a trauma program has the opportunity to collect and analyze trauma patient data, and to examine available resources. The inaugural period allows the facility to build their trauma program while receiving appropriate trauma patients under provisional status as approved by the local medical control authority.

The inaugural timetable for facilities planning on an in-state review and subsequent designation is from December 1, 2014 through December 31, 2017. All acute care facilities planning to become verified and designated trauma facilities are expected to complete the verification process.

PROCEDURE:
Facilities will notify their Regional Trauma Network (RTN) Chair and the Regional Trauma Coordinator (RTC) in writing regarding their intention to seek in-state verification and designation as a trauma facility. The following documents are required:

1.) A completed Pre-Review Questionnaire (PRQ). The PRQ for in-state facilities can be found at www.michigan.gov/trauma.

2.) Notification of the level of trauma care the facility will be applying for that most closely matches the level of care currently provided based on published criteria.

3.) Ongoing reporting to the RTN Chair and RTC on program progress annually or within five business days if there has been a significant change in resources impacting trauma care.

4.) Failure to submit correspondence outlining progress to the RTN Chair and RTC annually, at minimum, presumes the facility will not be a trauma facility and the following applies: Rule 325.130 Rule 6

   (1) A healthcare facility, which intends to provide trauma care, shall obtain designation as a trauma facility, and a healthcare facility shall not self-designate itself as a trauma facility.

   (2) A healthcare facility shall not use the work “trauma” to describe its facility, or in its advertising, unless it obtains and maintains designation as a “trauma facility”.

The Regional Trauma Networks, in their capacity as Medical Control Authorities, will use the submitted documents when determining patient flow patterns and considering destination decisions. This will allow the facility to collect data to evaluate its trauma resources and fully develop a trauma program.