PURPOSE:

Data related to care of trauma patients is required for evaluation of the function of the Michigan trauma system and performance of designated facilities that are part of the system. To become and remain a designated trauma facility, the facility must meet the data submission requirements set forth in the Administrative Rules:

R325.133 Data Collection
Rule 9 (1) (b) (iv) (A) “Data related to trauma incidents shall be submitted to the statewide trauma registry according to the data submission timelines.”
(1)(3)(a) “All designated facilities shall participate in data submission.”

R325.134 Statewide Trauma Registry
Rule 10 (1) (3) “All health care facilities shall submit to the department trauma data determined by the department to be required for the department's operation of the state trauma registry.”

R325.135 Regional Performance Improvement
Rule 11 (6) (d) “Data driven provision of care defined by available data metrics supported by the region, the statewide trauma advisory subcommittee, and the department.”

POLICY:

MDHHS published policy that outlines data submission requirements, Michigan Criteria for Trauma Facility Designation.

Section 1.
1. C. 1. “…data must be submitted into the State Trauma Registry prior to applying for designation as a Michigan trauma facility for the first time,” and
1. C. 2 “To maintain designation … data is to be submitted… quarterly.”
Failure to adhere to these data submission requirements are listed as Critical Deficiencies (MI-CD 1-2 and MI-CD 1-3).
PROCEDURE:

A. Data Submission and Deadlines:

1) Data submission deadlines are specified in the MDHHS Michigan Criteria for Trauma Facility Designation and posted on the MDHHS Trauma Section website, http://www.michigan.gov/traumasytem. Facilities will not be required to submit data to the Michigan Trauma Registry more than four times per year (quarterly) but may submit data to the Registry at any time.

2) Prior to any data submission deadline, a reminder email is sent to the facility at least 10 business days before the deadline from the MDHHS Trauma Section.

3) Designated trauma facilities will submit required data elements for cases meeting inclusion criteria to the MI Trauma Registry on or before posted deadlines, thereby fulfilling the requirements set forth in R 325.133 and R325.134.
   a. If data will not be submitted due to the fact that no cases meet the Michigan Trauma Registry inclusion criteria for the specified time period, the facility must notify StateTraumaRegistrar@Michigan.gov on or before the data submission deadline. In this case, the data submission requirement will be considered met.
   b. If extenuating circumstances prevent the timely submission of the data, the facility will notify StateTraumaRegistrar@Michigan.gov of the issue before the data submission deadline.
      i. If the delay is due to technical difficulties that cannot be remedied by the facility in time for data submission (such as software malfunctions), the facility will not be penalized for any missed deadline and the process in section B will not apply.
      ii. The facility must keep the MDHHS Trauma Section informed of progress in resolving the issue that is preventing data submission. After the issue is resolved, the facility will submit missed data on or before the next data submission deadline.
      iii. If the issue is unable to be resolved and the facility misses two consecutive data submission deadlines, the process outlined in section C may be followed.
B. Step 1 – Missing the Data Submission Deadline*:

Defined as the required data are not present in the Michigan Trauma Registry within 10 business days after the deadline. If this happens the following will occur:

1) The MDHHS Trauma Section will attempt to notify the Trauma Registrar and/or Trauma Program Manager on record at the facility of the missed deadline via email.

2) If a facility does not reply within 10 business days of the email with a satisfactory remediation plan for the missing data, a notification letter will be sent electronically to the Trauma Medical Director and/or Trauma Program Manager on record for the facility.

3) If a facility does not submit the missing data within 10 business days of the second notification date, the process outlined in section C.1) may be followed.

C. Step 2 – Missing Two Consecutive Data Submission Deadlines*:

Defined as the required data are not present in the Michigan Trauma Registry within 10 business days after the deadline, for the second consecutive data submission deadline. If this happens the following will occur:

1) The facility's designation status will be automatically suspended for a maximum of 60 calendar days from the missed deadline. A notification regarding the suspension and the effective date will be sent electronically to the Trauma Medical Director and/or Trauma Program Manager on record for the facility.
   a. The Regional Trauma Coordinator and the EMS Division’s MCA Coordinator will be notified of the suspension.
   b. In order to unsuspend their designation status, the facility must submit all the required data to the Michigan Trauma Registry no later than 60 calendar days from the date of the notification and receive confirmation of receipt from the MDHHS Trauma Section.

2) If a facility does not submit the required data by the last day of their 60-day suspension, the designation status will be revoked. A notification of the revoked designation status and the effective date will be sent electronically to the Trauma Medical Director and/or the Trauma Program Manager on record for the facility.
Data Submission and Missed Deadlines for Designated Facilities

a. The Regional Trauma Coordinator, the EMS Division’s MCA Coordinator, and the pertinent MCAs will be notified of the revoked status.

b. If the facility wishes to regain designation status, they will need to re-apply for designation as described in the Administrative Rules and the MDHHS published policy, Designation Process and Timeline.

*Note: It is imperative that the facility communicate any and all updated contact information to MDHHS Trauma Section to ensure the correspondence outlined above is received by the appropriate personnel. MDHHS Trauma Section is not responsible for any correspondence missed or not received by the appropriate staff at a facility due to out-of-date contact information.