

SAN LUIS OBISPO COUNTY EMERGENCY MEDICAL SERVICES AGENCY
PREHOSPITAL POLICY

Policy Reference No: 161
Effective Date: 03/01/2012
Review Date: 03/01/2015

SUBJECT: TRAUMA SYSTEM ORGANIZATION AND MANAGEMENT

I. PURPOSE

This policy identifies San Luis Obispo County trauma system organization and management including the responsibilities of the EMS Agency.

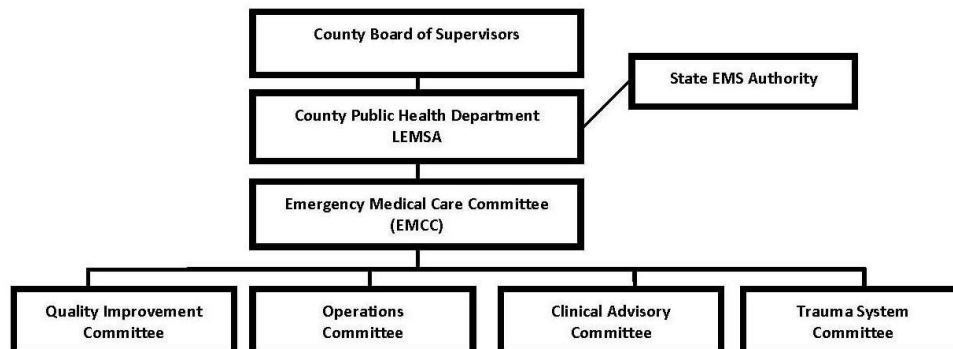
II. AUTHORITY

- A. California Health and Safety Code, Division 2.5
- B. California Code of Regulations, Title 22, Chapter 7, Section 100255

III. POLICY

- A. The County Board of Supervisors has the right to control, and is solely responsible for, the decision to implement a trauma care system in San Luis Obispo County.
- B. The County Board of Supervisors has designated the San Luis Obispo County Public Health Department (PHD) as the local EMS Agency (LEMSA).
- C. The County maintains the following responsibilities for the trauma system:
 - 1. Contract with designated trauma centers
 - 2. Establish service areas for trauma centers
 - 3. Authorize marketing and advertising related to the trauma system by trauma centers and prehospital providers
- D. The Emergency Medical Care Committee is appointed by the PHD.
- E. The Trauma System Committee (TSC) is advisory to the EMCC.
- G. Ad-hoc sub-committees of the TSC are time-limited with specific functions for the purpose of advising the TSC on specified tasks.

H. SLO County Trauma System Organizational Chart



I. Responsibilities of the local EMS Agency

1. Planning

- a) Develop and maintain/update a written trauma system plan that includes policies that assure compliance with the provisions the California Code of Regulations, Title 22, Division 9, Chapter 7, Article 2.
- b) Establish and coordinate a Trauma System Committee (TSC) to receive information from EMS providers, local hospitals and the local medical community.
- c) Obtain approval of the trauma system plan from the EMS Authority prior to its implementation.
- d) Advise the EMS Authority when there are any changes or revisions in policy or plan development.

2. Implementation

- a) Support the designation process as specified in the Trauma Center Designation policy.
- b) Implement a trauma registry system
- c) Coordinate targeted trauma system training programs for all system participants including prehospital EMS, receiving hospitals and trauma center(s)
- d) Coordinate with system participants to develop and implement a public information and education campaign about the new trauma system
- e) Coordinate with system participants to develop and implement injury prevention programs
- f) Coordinate with neighboring trauma systems:
 - (1) Participate in the Southwest Regional Trauma Coordinating Committee (RTCC)

- (2) Participate in OES Region I disaster planning and training activities
- (3) Ensure ongoing communication and cooperation regarding hospital diversion and quality improvement participation and data sharing with neighboring LEMSAs when trauma patients are transported to out-of-county trauma centers

3. Evaluation

- a) Monitor system participants for compliance with Trauma System Evaluation and Quality Improvement policy
- b) Perform monthly analysis of trauma registry data, and provide quarterly reports of aggregate trauma registry data to Trauma System Committee (TSC)
- c) Transmit trauma registry data in specified format and frequency to the EMS Authority
- d) Coordinate TSC meetings to receive information from all trauma system participants on the evaluation of the trauma system
- e) Coordinate multidisciplinary and confidential trauma case reviews
- f) Coordinate trauma center site reviews
- g) Provide annual trauma system status reports to the EMS Authority and system participants
- h) Conduct a trauma system performance evaluation every two years with the report available to all system participants