

# Legislation Details (With Board Report)

File #:	14-073	Name:	NMC Implementation Plan				
Туре:	General Agenda Item	Status:	Passed				
File created:	1/22/2014	In control:	Board of Supervisors				
On agenda:	1/28/2014	Final action:	1/28/2014				
Title:	<ul> <li>a. Receive a report (Attachment A &amp; B) from Emergency Medical Services ("EMS") Agency Director on development of Level II Trauma Care and the implementation plan submitted by Natividad Medical Center (NMC);</li> <li>b. Receive a report (Attachment A, C &amp; D) from the NMC Chief Executive Officer on the proposed implementation timeline, staffing and financial analysis of the Level II Trauma program;</li> <li>c. Receive a report (Attachment E) from CAO budget office Review of Independent Consultants NMC Trauma Feasibility Assessments</li> <li>d. Approve the Implementation Plan; and</li> <li>e. Authorize and Direct the NMC Chief Executive Officer to begin implementation of the Level II Trauma plan as directed by and in collaboration with the EMS Agency, and to return to the Board of Supervisors with necessary budgetary or contractual authorizations.</li> </ul>						
Sponsors:	Ray Bullick						
Indexes:							
Code sections:							
Attachments:	1. Attachment A NMC Implemenation timeline .pdf, 2. Attachment B EMS Agency Report.pdf, 3. Attachment C.pdf, 4. Attachment D.pdf, 5. Attachment E -CAO Report.pdf, 6. Completed Board Order						
Date	Ver. Action By	Act	ion Result				

Date	Ver.	Action By	Action	Result	
1/28/2014	1	Board of Supervisors	approved	Pass	

a. Receive a report (Attachment A & B) from Emergency Medical Services ("EMS") Agency Director on development of Level II Trauma Care and the implementation plan submitted by Natividad Medical Center (NMC);

b. Receive a report (Attachment A, C & D) from the NMC Chief Executive Officer on the proposed implementation timeline, staffing and financial analysis of the Level II Trauma program;

c. Receive a report (Attachment E) from CAO budget office Review of Independent Consultants NMC Trauma Feasibility Assessments

d. Approve the Implementation Plan; and

e. Authorize and Direct the NMC Chief Executive Officer to begin implementation of the Level II Trauma plan as directed by and in collaboration with the EMS Agency, and to return to the Board of Supervisors with necessary budgetary or contractual authorizations.

## **RECOMMENDATION:**

It is recommended that the Board of Supervisors:

- a. Receive a report (Attachment A & B) from Emergency Medical Services ("EMS") Agency Director on development of Level II Trauma Care and the implementation plan submitted by Natividad Medical Center (NMC);
- b. Receive a report (Attachment A, C & D) from the NMC Chief Executive Officer on the proposed implementation timeline, staffing and financial analysis of the Level II Trauma program;
- c. Receive a report (Attachment E) from CAO budget office Review of Independent Consultants NMC Trauma Feasibility Assessments

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### d. Approve the Implementation Plan; and

e. Authorize and Direct the NMC Chief Executive Officer to begin implementation of the Level II Trauma plan as directed by and in collaboration with the EMS Agency, and to return to the Board of Supervisors with necessary budgetary or contractual authorizations.

### SUMMARY:

This report summarizes the Emergency Medical Services Agency's (EMS) analysis of the implementation timeline and plan developed by NMC supporting their proposal to pursue designation as Monterey County's Level II Trauma Center and requests approval by your Board of the plan.

Natividad Medical Center received the recommendation by an independent review panel and the recommendation was accepted by the Board of Supervisors on October 1, 2013 to work toward designation Level II Trauma Center for Monterey County. Formal designation is contingent upon the successful implementation of proposed timeline and acquisition of identified staffing and equipment.

#### DISCUSSION:

Designation as a Level II Trauma Center is contingent upon NMC's successful implementation of its proposed timeline, staffing plan, acquisition of specialized medical equipment, and construction of ancillary facilities necessary to support operation of the Center.

The Independent Review Panel identified six conditions that Natividad Medical Center is required to meet prior to receiving designation as a Level II Trauma center. A summary of Natividad Medical Center's responses to the Emergency Medical Services Agency is provided below:

- Neurosurgery coverage. Natividad Medical Center is negotiating contracts with several neurosurgeons with significant Neurotrauma experience. These agreements will require Board of Supervisors approval and will be submitted for approval no later than 07/31/14. Natividad will go live with Neurosurgical coverage no later than 10/1/2014. Natividad Medical Center is proceeding with the purchase of required equipment to establish our Neurotrauma service. These items will be onsite no later than 5/31/2014. Operating Room, Emergency Department, Medical Surgical and Intensive Care Unit staff will begin training by 5/1/2014. NMC will partner with other Trauma Facilities to facilitate nursing education and training.
- 2. Angiography. Natividad Medical Center will ensure that conventional catheter angiography will be available 24 hours per day no later than 11/30/2014.

Mobile Angiography Lab onsite no later than June 30, 2014. We will begin angiography training of our current staff no later than May 1, 2014. Natividad Medical Center already contracts with Salinas Valley Radiologists to provide interventional physician services. We are currently meeting with the group to ensure that coverage meets ACS Trauma standards. If a contract amendment is required it will be presented to the Board of Supervisors before 9/30/2014

3. Continuing Medical Education. A variety of trauma-specific CME opportunities have been identified and information provided to department directors. Additionally, trauma CME's are being offered to physicians and nurses at NMC on a regular basis to assist in meeting the CME requirements per ACS guidelines. The ED Medical Director, ED trauma liaison and Trauma Medical Director have <u>currently</u> <u>met</u> the necessary CME requirements per ACS guidelines. The department medical directors, in cooperation with the Trauma Program manager, have been charged with ensuring physician compliance

with CME requirements.

- 4. Improved mechanism for physician to physician contact for arranging patient transfers. An interfacility patient transfer committee has been developed. A dedicated transfer line will be established to facilitate direct physician to physician communication. Policies and procedures for facilitating patient transfer, identifying available beds and arranging transport are in progress. Our call center will go live at time of designation though all infrastructures will be in place by 11/30/2014.
- 5. Trauma Medical Director and Trauma Program Manager should attend the Trauma Outcome Performance Improvement Course (TOPIC). The Trauma Medical Director and Trauma Program Manager will attend one of the two currently available TOPIC's courses in March or May 2014.
- 6. Representation from emergency medical services should be included on the facility's trauma performance committee. Additionally, a representative from trauma service (preferably the Trauma Medical Director) should participate with EMS performance improvement. Each of the respective program managers will be attending regularly scheduled meetings as per the recommendation.

#### **OTHER AGENCY INVOLVEMENT:**

This report has been coordinated with the County Administrative Office, NMC, and County Counsel.

#### FINANCING:

The Trauma program will produce an additional 14.3 inpatients per day. Trauma revenues are estimated at \$40.5M and total labor and non-labor expenses are estimated at \$26.9M resulting in a positive income of approximately \$13.6M per year. See attachment C.

An additional 69.8 staff FTEs will be phased in to support the Trauma Program during 2014 calendar year. The timeline to hire the additional FTEs is as follows: 7.2 FTEs during the first quarter of 2014, 29.6 FTEs during the second quarter of 2014, 24.0 FTEs during the third quarter of 2014 and 9.0 FTEs in the fourth quarter of 2014. The estimated costs are \$8.8M. Physician costs are \$4.4M, Other expenses \$5.5M and expenses for bad debts are \$8.1M.

The Trauma Program capital budget inclusive of operating room and monitoring equipment, summarized in Attachment D, is estimated to be \$2.0M. There is no impact to the General Fund.

Prepared by: Kirk Schmitt, EMS Agency Director, 4964 Gary Gray, CMO, NMC 755-4196

Approved by: Ray Bullick, Director of Health, 4526

Attachments:

Attachment A Natividad Center Trauma Implementation Timeline on file with the Clerk of the Board Attachment B EMS Agency Report on file with the Clerk of the Board Attachment C Trauma Program Financial Pro-Forma on file with the Clerk of the Board Attachment D Trauma Program Capital Budget on file with the Clerk of the Board Attachment E CAO Report on file with the Clerk of the Board