PURPOSE
To establish standards for the designation, re-designation, and de-designation, of specialty care centers (Trauma, STEMI, and Stroke) in Riverside county.

AUTHORITY
California Health and Safety Code - Division 2.5, Chapter 6: Facilities [1798.100 - 1798.183.]
California Code of Regulations, Title 22, Division 9, Chapter 7: Trauma Care Systems
California Code of Regulations, Title 22, Division 9, Chapter 7.1: ST-Elevation Myocardial Infarction Critical Care System
California Code of Regulations, Title 22, Division 9, Chapter 7.2: Stroke Critical Care Systems

SPECIALTY CARE SYSTEM ASSESSMENT
The need for additional specialty care centers in Riverside county, regardless of type, shall be assessed by the Riverside County EMS Agency (REMSA). This assessment will include, but not be limited to:

- Geographic location(s) of the proposed specialty care center(s) which will include, at a minimum, appropriateness based on projected population growth
- Prehospital transport time(s)
- Projected patient volume
- Projected impact on existing designated center(s)
- Hospital services available for specialty care

INITIAL DESIGNATION / HIGHER LEVEL CENTER DESIGNATION PROCEDURES
Prior to receiving an application for specialty care designation, the requesting hospital must submit a letter of intent to REMSA. Once reviewed, a specialty care system assessment will be performed within ninety (90) days of the date of the received request.

- Applicants requesting consideration to be designated as a Trauma receiving center in Riverside county must refer to policy #5304 (Trauma Center Standards) for more information regarding designation requirements.

- Applicants requesting consideration to be designated as a STEMI receiving center in Riverside county must refer to policy #5401 (STEMI Center Standards) for more information regarding designation requirements.

- Applicants requesting consideration to be designated as a Stroke receiving center in Riverside county must refer to policy #5701 (Stroke Center Standards) for more information regarding designation requirements.

REMSA approved accreditation/certification/verifying programs:

<table>
<thead>
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<th>Trauma</th>
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<td>American College of Surgeons (ACS)</td>
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*Level IV trauma centers must remain in compliance with current ACS standards

If it is determined that the addition of a new or higher level of specialty care service would fill a recognized service gap in that geographical area, the requesting hospital must present a proposal of their program to the appropriate committee (Trauma, STEMI, or Stroke), which will include all relevant data that validates how their program will fill that gap.
1. Following the committee meeting, a recommendation will be made to the REMSA Medical Director.
2. If the requesting hospital’s proposal establishes that they are able to satisfy the needs of the system, they will receive an application for their specialty care program.

Once submitted to REMSA, the application review process will be completed within ninety (90) days. Specialty care center designation may be granted only after the following criteria have been met:

- A system assessment of program gaps
- Recommendation to the REMSA Medical Director from the appropriate specialty care committee(s)
- A satisfactory review of a completed application
- REMSA participation in initial accreditation / certification / verification survey(s)
- Supporting written documentation and
- An initial, and satisfactory, site survey by REMSA personnel

**RE-DESIGNATION PROCEDURES**
To achieve re-designation as a specialty care center in Riverside County, each specialty care center must:

1. Meet all applicable regulations listed in Title 22, Division 9, for the specific requested program, and the standards and requirements listed in all applicable REMSA policies
2. Successfully pass an audit performed by REMSA
3. Achieve re-accreditation / recertification / reverification by one (1) of the below organizations:

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REMSA staff will attend and perform audits during the entirety of all accreditation, certification, or verification surveys. A copy of the renewal certificate will be provided to REMSA no less than thirty (30) days prior to current expiration.

**DESIGNATION TERMINATION / SUSPENSION PROCEDURES**

**Termination for Cause**
REMSA may terminate its specialty care center designation agreement with any designated specialty care center if it is determined that they have:

1. Failed to comply with current regulations as outlined in Title 22, Division 9
2. Failed to comply with current REMSA policy as outlined in policies 5304, 5401 and/or 5701
3. Had their license to operate as a PRC revoked or suspended

**Suspension of Designation**
REMSA may immediately suspend its specialty care center designation agreement with any designated specialty care center upon written notice if it is determined that they:

1. Have failed to cooperate with quality assurance procedures, audit findings and/or recommendations provided by REMSA.
2. Are in gross default of material obligation as specified in their agreement with REMSA.

Failure to remedy the issues identified in #1 and/or #2 above (“Suspension of Designation”) within the time specified by REMSA will result in termination of the agreement for specialty care designation.

**Voluntary De-Designation**
Any specialty care center may voluntarily terminate their agreement for specialty care services upon thirty (30) days written notice to REMSA.