



COUNTY OF VENTURA HEALTH CARE AGENCY		EMERGENCY MEDICAL SERVICES POLICIES AND PROCEDURES	
Policy Title: Trauma Center Designation		Policy Number 1401	
APPROVED: Administration:	 Steven L. Carroll, Paramedic	Date: July 1, 2025	
APPROVED: Medical Director:	 Daniel Shepherd, M.D.	Date: July 1, 2025	
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- I. PURPOSE: To establish a procedure for the designation of trauma centers in Ventura County
- II. AUTHORITY: Health and Safety Code, §1797.160, §1797.161, and §1798, and California Code of Regulations, Title 22, §100136.03.
- III. POLICY:
 - A. Trauma System Assessment
 1. Changes to the trauma system design will be predicated on a needs assessment.
 2. Ventura County Emergency Medical Services Agency (VCEMS) will assess the trauma system biannually (every other year) using the “Needs Based Assessment of Trauma Systems (NBATS)” Tool.
 3. If a need is identified, VCEMS will provide an application process and a notice of intent to designate an additional trauma center. The notice will include:
 - a. Introduction and background information about Ventura County’s trauma system.
 - b. General information and instructions about trauma center designation including eligibility for application, primary service areas, fees, and EMS’s no guarantee policy of the minimum number of trauma patients
 - c. Level of designation desired
 - d. Reference to Title 22 and the American College of Surgeons “Resources for Optimal Care of the Injured

- Patient” (2022 Standards-Gray book) as the criteria for designation. Applicants will be required to describe their current compliance with these criteria or to indicate plans to achieve compliance within 6 months of the nomination for designation.
- e. List of the minimal requirements for designation that includes: hospital organization, medical staff support, the trauma program, the trauma medical director, the trauma resuscitation team, the trauma service, the trauma program manager, the trauma registrar and interventional radiology services on site. (Please refer to the “Resources for Optimal Care of the Injured Patient” (2022 Standards-Gray book) for full description of the above).
 - f. A list of trauma center conditions and requirements commensurate with the level of designation desired, which the applicant will be required to accept.
 - g. A contract between the applicant hospital and VCEMS to be completed when the hospital’s application has been approved. Applicants will be required to indicate their acceptance of the contract or to submit alternative language for any clause which they are unwilling to accept.
 - h. A schedule of fees for trauma center applications and ongoing designation/contracts.
4. The County may elect to issue an RFP.
 5. An acute care hospital in Ventura County seeking trauma center designation prior to, or en lieu of, a VCEMS initiated NBATS assessment, must fund a trauma system assessment. The consultant performing the assessment shall be selected in coordination with VCEMS.
 6. An acute care hospital who seeks/obtains Trauma Center Verification outside of the process outlined above will not be designated by VCEMS as a trauma center.

7. An updated trauma plan must be submitted and approved by the California EMS Authority, in accordance with CCR 100136.01 and 100136.04, prior to implementation of the additional trauma center.

B. Trauma Center Designation

1. VCEMS may form a review panel to evaluate applications. The format of application review will depend on process determined by VCEMS and will be outlined prior to releasing the applications.
2. A site visit will be required for designation.
3. Following the site visits, the review panel will report to VCEMS on its findings and recommendation on designation of trauma hospitals. This will include any recommended corrective action plan that would be required to meet trauma center requirements.4Review panel recommendations for approval will be submitted to the Ventura County Board of Supervisors for final designation.

C. Appeals

1. Notices of findings and copies of reports specific to each applicant will be sent to the appropriate applicant. Applicants will have 10 working days to appeal from the day of receipt of the preliminary recommendations of the review panel. Grounds for appeals are limited to alleged failure to follow the policy, RFP or proposal review process. Expert judgments or analyses of the survey team are not subject to appeal.
2. County will identify a three-member appeal panel whose members have expertise in proposal reviews and have no allegiance or affiliation with any hospital within the County or to any member of the review panel. The appeal panel will review the appeal and make a decision. All decisions are final and cannot be appealed further.
3. A fee of \$5,000 will be required to request an appeal. These funds shall be used by the County to recover costs of resources used to reply to the appeal.