

**RESTRICTED DELIVERY CERTIFIED
MAIL
RETURN RECEIPT
REQUESTED**

Before the Iowa Department of Health and Human Services

<p>IN THE MATTER OF</p> <p>Stewart Memorial Community Hospital 1301 W. Main Street Lake City, IA 51449-1585 Facility Number: 000104</p>	<p style="text-align: right;">Case: 000104-19-03</p> <p style="text-align: center;">NOTICE OF PROPOSED ACTION</p> <p style="text-align: center;">CITATION AND WARNING</p>
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Pursuant to the provisions of Iowa Code Sections 17A.18 and 147A.23, and Iowa Administrative Code (I.A.C.) 641—134.3, the Iowa Department of Health and Human Services is proposing to issue a **Citation and Warning** to the Trauma Care Facility identified above.

The Department may cite and warn a Trauma Care Facility when it finds that the Trauma Care Facility has not operated in compliance with Iowa Code section 147A.23 and 641 IAC Chapter 134 including:

147A.23 (2)(c) Upon verification and the issuance of a certificate of verification, a hospital or emergency care facility agrees to maintain a level of commitment and resources sufficient to meet responsibilities and standards as required by the trauma care criteria established by rule under the subchapter.

Failure of the trauma care facility to successfully meet criteria for the level of assigned trauma care facility categorization. 641 IAC 134.2(2) and 641 IAC 134.2(7)b

641 IAC 134.2(7) (j) Trauma care facilities shall be fully operational at their verified level upon the effective date specified on the certificate of verification. Trauma care facilities shall meet all requirements of Iowa Code section 147A.23 and these administrative rules.

641 IAC 134.2 (3) Adoption by reference.

a. ... “ Criteria specific to Level IV trauma care facilities identified in the “Resources for Optimal Care of the Injured Patient 2014” (6th edition) published by the American College of Surgeons Committee on Trauma is incorporated and adopted by reference for Level IV hospital and emergency care facility categorization criteria...

b. “ Resources for Optimal Care of the Injured Patient 2014” (6th edition) published by the American College of Surgeons Committee on Trauma is available through the Iowa Department of Public Health, Bureau of Emergency and Trauma Services (BETS), Lucas State Office Building, Des Moines, Iowa 50319-0075, or the BETS Web site (<http://idph.iowa.gov/BETS/Trauma>).

The following events have resulted in the issuance of this proposed action:

On April 22, 2021 Stewart Memorial Community Hospital was issued a Letter of Warning for failure to comply with criteria for Level IV trauma care facility categorization, as evidenced by criterion deficiency (CD) related to annual review of advanced practitioners (CD 11-87).

This deficiency was resolved on May 16, 2022.

Criterion (11-87) – The trauma program must also demonstrate appropriate orientation, credentialing process and skill maintenance for advanced practitioners, as witnessed by an annual review by the trauma medical director.

Deficiency – The trauma program has not demonstrated an annual review process for advanced practitioners by the trauma medical director.

Resolution – Provide electronic communication to the State of Iowa Trauma Nurse Coordinator which demonstrates adoption of an annual review process for advanced practitioners by the trauma medical director 12 months from the date of this final report.

On March 5, 2024 a virtual reverification was conducted by a Department Trauma Facility Verification Survey Team, and Stewart Memorial Community Hospital failed to comply with criteria for Level IV trauma care facility categorization, as evidenced by criteria deficiencies (CD) related to state and regional trauma system planning (CD 1-3), transfer guidelines (CD 2-13), regular multidisciplinary meetings (CD 2-18), pediatric audit filters (CD 2-19), review of transferred patients through the PIPS process [CD 4-3, 13(4-3)], meaningful use of the registry and registry concurrency (CD 15-1, 15-3, 15-4, 15-6), PIPS program [CD 16(15-1), 16(2-17), 16(2-18), 16(15-3), 16-5, 16-11], and injury prevention in a leadership job description (CD 18-2). The facility also failed to fully resolve the criterion deficiency related to annual review of advanced practitioners (CD 11-87) following the 2024 reverification survey and the facility remains noncompliant with this criterion as demonstrated in the March 19, 2024 Final Report.

The facility is hereby **CITED** for failing to meet the above criteria of Level IV trauma care facility categorization. The facility is **WARNED** that failing to successfully meet all Level IV trauma criteria resolutions listed for each criterion during the specified timeframe for resolution following the date of the Final Report, may result in further disciplinary action including suspension or revocation of the Trauma Care Facility Designation.

You have the right to request a hearing concerning this notice of disciplinary action. A request for a hearing must be submitted in writing to the Department by certified mail, return receipt requested, within twenty (20) days of receipt of this Notice of Proposed Action. The written request must be submitted to the Iowa Department of Health and Human Services, Bureau of Emergency Medical and Trauma Services, Lucas State Office Building, 321 East 12th Street, Des Moines, Iowa 50319. If the request is made within the twenty (20) day time limit, the proposed action is suspended pending the outcome of the hearing. Prior to, or at the hearing, the Department may rescind the notice upon satisfaction that the reason for the action has been or will be removed.

If no request for a hearing is received within the twenty (20) day time period, the disciplinary action proposed herein shall become effective and shall be final agency action.

Margot McComas

March 19, 2024

Margot McComas, Bureau Chief
Iowa Department of Health and Human Services
Bureau of Emergency Medical and Trauma Services

Date