

**RESTRICTED DELIVERY CERTIFIED MAIL  
RETURN RECEIPT REQUESTED**

Before the Iowa Department of Public Health

IN THE MATTER OF: UnityPoint Health St. Luke's Sioux City 2720 Stone Park Blvd Sioux City, IA 51104 Facility Number: 000102	Case Number: T102-17-02  NOTICE OF PROPOSED ACTION  <b>CITATION AND WARNING</b>
--	---

Pursuant to the provisions of Iowa Code Sections 17A.18, 147A.23, and Iowa Administrative Code (I.A.C.) 641—134.3, the Iowa Department of Public Health 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 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 III 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 III hospital and emergency care 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>).*

On July 26, 2018 the facility submitted the Self-Assessment Categorization Application (SACA). An on-site verification was conducted by a Department Trauma Facility Verification survey team on September 19, 2018. The final report dated October 11, 2018 noted criteria deficiencies for well-defined transfer plans, bypass protocol, annual provider assessment, peer review meeting attendance, transfer agreement with a burn center, National Trauma Data Bank (NTDB) submission, registry concurrency, and over-triage and under-triage reporting. These deficiencies were to be resolved before October 2019.

Upon review of the submitted documentation on October 11, 2019 four of the 2018 deficiencies remained and required resolution. From October 2019 through February 2020 the department provided technical assistance and communication with the facility regarding the remaining deficiencies. As of February 2020, the facility resolved one of the four remaining deficiencies. The three remaining deficiencies are noted below and result in the issuance of this proposed action:

Criterion - Finally, these data must be collected in compliance with the National Trauma Data Standard (NTDS) and submitted to the National Trauma Data Bank® (NTDB®) every year in a timely fashion so that they can be aggregated and analyzed at the national level.

Deficiency – The trauma center does not submit data to the National Trauma Data Bank.

Resolution – Provide electronic documentation to the State of Iowa Trauma Coordinator which demonstrates yearly submission of data to the National Trauma Data Bank 12 months from the date of this final report.

During the monitored reporting year, the facility failed to submit data to the NTDB.

Criterion – Trauma registries should be concurrent. At a minimum, 80 percent of cases must be entered within 60 days of discharge.

Deficiency – The trauma registry is not concurrent. Only 28 percent of cases were entered within 60 days of discharge during the reporting period.

Resolution – Provide electronic documentation to the State of Iowa Trauma Coordinator which demonstrates the trauma registry concurrency meeting the benchmark of 80 percent of cases entered within 60 days of discharge during the 12 months following the date of this final report.

During the monitored reporting year, the facility entered 42.6 percent of cases into the trauma registry within 60 days of discharge. Therefore, the facility is below the 80 percent of cases entered within 60 days of discharge benchmark required by criteria.

Criterion - Rates of under-triage and over-triage must be monitored and reviewed quarterly.

Deficiency – Rates of under-triage and over-triage are not monitored and reviewed quarterly.

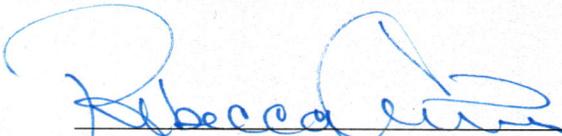
Resolution – Submit electronic documentation which demonstrates the adoption of a process by which rates of under-triage and over-triage are monitored and reviewed quarterly 12 months from the date of this final report.

During the monitored reporting year, the facility did not monitor and review rates of under-triage and over-triage quarterly.

The facility is hereby **CITED** for failing to meet the above criteria of Level III trauma care facility categorization. The facility is **WARNED** that failing to successfully meet all Level III trauma criteria resolutions listed for each criteria during the 12 month time frame following the date of this citation and warning 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 Public Health, Bureau of Emergency and Trauma Services, Lucas State Office Building, 321 E 12<sup>th</sup> St, 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.**

  
\_\_\_\_\_  
Rebecca Curtiss, Bureau Chief  
Iowa Department of Public Health  
Bureau of Emergency and Trauma Services

3/4/2020  
Date