PURPOSE. The purpose of 7 AAC 26.710 - 7 AAC 26.745 is to promote the health and safety of the people of Alaska by setting minimum standards for hospitals or medical clinics to voluntarily meet criteria adopted by the department so that they may represent themselves as trauma centers. Nothing in 7 AAC 26.710 - 7 AAC 26.745 is intended to require a hospital, clinic, or other entity to be certified as a trauma center in order to treat patients with traumatic injuries. However, under AS 18.08.084(e), a hospital, clinic, or other entity not certified as a trauma center under AS 18.08.082, may not represent itself as a trauma center.

History -
Eff. 4/7/96, Register 138
Authority -
AS 18.08.010
AS 18.08.080
AS 18.08.082
AS 18.08.084

7 AAC 26.715
APPLICATION FOR CERTIFICATION.
(a) An organization that wishes to apply for certification as a trauma center shall apply in writing to the department on a form obtained from the department.
(b) The application form will request the name of the organization and responsible official, the mailing address and, if different, the geographical address, evidence that the applicant meets the requirements of 7 AAC 26.720, and other information the department considers necessary to determine whether the applicant has met the qualifications for certification outlined in 7 AAC 26.720.
(c) A certificate as a trauma center will be issued by the department if the applicant meets the requirements of 7 AAC 26.720.

History -
Eff. 4/7/96, Register 138
Authority -
AS 18.08.010
AS 18.08.080
AS 18.08.082
AS 18.08.084

7 AAC 26.720
QUALIFICATIONS FOR CERTIFICATION.
(a) An organization applying for certification as a level I trauma center or specialty trauma referral center must
(1) provide evidence that the organization has received a certificate of verification as a level I trauma center from the Committee on Trauma, American College of Surgeons; and
(2) participate in the statewide trauma registry administered by the department and provide data to the department as required under 7 AAC 26.745.
(b) An applicant for certification as a level II trauma center or regional trauma center must
(1) provide evidence that the organization has received a certificate of verification as a level II trauma center from the Committee on Trauma, American College of Surgeons; and
(2) participate in the statewide trauma registry administered by the department and provide data to the department as required under 7 AAC 26.745.

(c) An applicant for certification as a level III trauma center or area trauma center must
(1) provide evidence that the organization has received a certificate of verification as a level III trauma center by the Committee on Trauma, American College of Surgeons; and
(2) participate in the statewide trauma registry administered by the department and provide data to the department as required under 7 AAC 26.745.

(d) An applicant for certification as a level IV trauma center or local trauma stabilization center must
(1) provide evidence that the organization has met the criteria listed for level IV trauma centers by the Committee on Trauma, American College of Surgeons, in Resources for Optimal Care of the Injured Patient: 1993, Chapter 6, Hospital Criteria; Resources for Optimal Care of the Injured Patient: 1993, Chapter 6, Hospital Criteria, as amended from time to time, is adopted by reference;
(2) agree for the department to conduct a site visit to verify that relevant criteria have been met, if the department notifies the organization that a site visit is necessary; and
(3) participate in the statewide trauma registry administered by the department and provide data as required under 7 AAC 26.745 , if the center is an acute care hospital.

(e) An applicant for certification as a level I or II trauma center with pediatric commitment shall provide evidence that the organization has received a certificate of verification for pediatric trauma care from the Committee on Trauma, American College of Surgeons.

History -
Eff. 4/7/96, Register 138; am 11/8/98, Register 148
Authority -
AS 18.08.010
AS 18.08.080
AS 18.08.082
AS 18.08.084
AS 47.05.012
Editor's Notes -
Information about the criteria used by the Committee on Trauma, American College of Surgeons, referred to in 7 AAC 26.720 , may be obtained from the Community Health and Emergency Medical Services Section, Division of Public Health, Department of Health and Social Services, P.O. Box 110616, Juneau, Alaska 99811-0616. Resources for Optimal Care of the Injured Patient: 1993 may be obtained from the American College of Surgeons, 633 North Saint Clair Street, Chicago, Illinois 60611-3211. Resources for Optimal Care of the Injured Patient: 1993 is available for inspection at the Department of Health and Social Services, Division of Public Health, Community Health and Emergency Medical Services Section, 410 Willoughby Avenue, Room 109, Juneau, Alaska 99811-0616.

7 AAC 26.725
TERM OF INITIAL CERTIFICATION.
An initial certification expires on December 31 of the third year following the certification as a trauma center under 7 AAC 26.720 by the department.

History -
Eff. 4/7/96, Register 138
7 AAC 26.730

RECERTIFICATION.

(a) To renew a certification as a level I, level II, or level III trauma center, an applicant must
(1) provide evidence of reverification by the Committee on Trauma, American College of Surgeons;
(2) meet applicable requirements under \(7\) AAC \(26.720\); and
(3) complete and submit an application on a form provided by the department.

(b) To renew a certification as a level I or level II trauma center with a pediatric commitment, an applicant must
(1) provide evidence of reverification by the Committee on Trauma, American College of Surgeons;
(2) meet applicable requirements of \(7\) AAC \(26.720\); and
(3) complete and submit an application on a form provided by the department.

(c) To renew a certification as a level IV trauma center, the applicant must
(1) complete and submit an application on a form provided by the department;
(2) provide evidence that the applicant continues to meet the criteria listed for level IV trauma centers by the Committee on Trauma, American College of Surgeons, in Resources for Optimal Care of the Injured Patient: 1993, Chapter 6, Hospital Criteria; Resources for Optimal Care of the Injured Patient: 1993, Chapter 6, Hospital Criteria, as amended from time to time, is adopted by reference; and
(3) agree for the department to conduct a site visit to verify that relevant criteria have been met, if the department notifies the organization that a site visit is necessary.

(d) A recertification is valid for three years, and is subject to renewal under (a), (b), or (c) of this section.

History -
Eff. 4/7/96, Register 138; am 11/8/98, Register 148

Authority -
\(AS\) \(18.08.010\)
\(AS\) \(18.08.080\)
\(AS\) \(18.08.082\)
\(AS\) \(18.08.084\)

Editor's Notes -
Resources for Optimal Care of the Injured Patient: 1993 may be obtained from the American College of Surgeons, 633 North Saint Clair Street, Chicago, Illinois 60611-3211. Resources for Optimal Care of the Injured Patient: 1993 is available for inspection at the Department of Health and Social Services, Division of Public Health, Community Health and Emergency Medical Services Section, 410 Willoughby Avenue, Room 109, Juneau, Alaska 99811-0616.

7 AAC 26.735
ACTIONS NOT PROHIBITED.
Nothing in 7 AAC 26.710 - 7 AAC 26.745 prohibits a hospital, clinic, or other entity from treating a person with traumatic injuries even if the hospital, clinic, or other entity is not certified as a trauma center under this chapter so long as the hospital, clinic, or other entity may lawfully provide treatment in this state.
History -
Eff. 4/7/96, Register 138
Authority -
AS 18.08.010
AS 18.08.080
AS 18.08.082
AS 18.08.084

7 AAC 26.740
GROUNDS FOR SUSPENSION, REVOCATION, OR CONDITIONING A CERTIFICATE.
After compliance with the Administrative Procedure Act (AS 44.62), the department will, in its discretion, suspend, revoke, or condition a certificate issued under 7 AAC 26.720 or 7 AAC 26.730 for any of the following reasons:
(1) fraud or deceit in obtaining a certificate;
(2) gross misconduct by personnel employed by or on contract with the trauma center;
(3) failure to maintain appropriate staffing or equipment, or otherwise failing to continue meeting the criteria listed, if applicable, in Resources for Optimal Care of the Injured Patient: 1993, Chapters 6 and 11; Resources for Optimal Care of the Injured Patient: 1993, Chapters 6 and 11, as amended from time to time, is adopted by reference; or
(4) failure to comply with state law, including 7 AAC 26.710 - 7 AAC 26.745.
History -
Eff. 4/7/96, Register 138; am 11/8/98, Register 148
Authority -
AS 18.08.010
AS 18.08.080
AS 18.08.082
AS 18.08.084
AS 47.05.012
Editor's Notes -
Resources for Optimal Care of the Injured Patient: 1993 may be obtained from the American College of Surgeons, 633 North Saint Clair Street, Chicago, Illinois 60611-3211. Resources for Optimal Care of the Injured Patient: 1993 is available for inspection at the Department of Health and Social Services, Division of Public Health, Community Health and Emergency Medical Services Section, 410 Willoughby Avenue, Room 109, Juneau, Alaska 99811-0616.

7 AAC 26.742
APPEAL OF DENIAL OF CERTIFICATE.
An applicant that is denied an initial certification under 7 AAC 26.720 or recertification under 7 AAC 26.730 may file an appeal under AS 44.62 (Administrative Procedure Act).
History -
Eff. 4/7/96, Register 138
(a) The department will establish a trauma registry review committee in accordance with AS 18.23.070 (5)(A).

(b) The trauma registry review committee shall keep trauma registry data confidential in accordance with AS 18.23.030, except that reports on

(1) trauma patients admitted to the hospital, declared dead in the emergency department, or transferred to another acute care hospital for treatment will be provided to that hospital; these reports include a patient log, a trauma service summary, a quality assurance summary, and a survival probability summary;

(2) patients treated by a state certified emergency medical service will be provided to that service, including a summary of activity, a quality assessment summary, a quality assurance summary, and a documentation compliance summary; and

(3) trauma registry data, not including patient identifiers, physician identifiers, or hospital identifiers, may be provided to epidemiologists, health planners, medical researchers, or other interested persons to study causes, severity, demographics and outcomes of injuries, or for other purposes of studying the epidemiology of injuries or emergency medical services and trauma system issues.

(c) An acute care hospital in this state certified as a level I, level II, level III, or level IV trauma center under 7 AAC 26.710 - 7 AAC 26.745 must participate in the statewide trauma registry administered by the department. A hospital not certified as a trauma center under 7 AAC 26.710 - 7 AAC 26.745 may participate in the statewide trauma registry administered by the department. A hospital that participates in the statewide trauma registry shall make available to the department abstracts in the form prescribed by the department of the medical records of all trauma patients who were admitted to the hospital, declared dead in the emergency department, or transferred to another hospital for treatment.

(d) The department will, in its discretion, delegate the responsibility for collecting data under this section to a hospital, other public agencies, or to private persons or agencies, if the person or agency agrees to maintain confidentiality of the data in accordance with 7 AAC 26.790 (b).

(e) A trauma center certified under 7 AAC 26.710 - 7 AAC 26.745 must provide trauma registry data to the department at least quarterly of each year on March 31, June 30, September 30, and December 31 of that year. Data on all trauma patients discharged between January 1 and March 31 must be submitted to the department by June 30. Data on all trauma patients discharged between April 1 and June 30 must be submitted to the department by September 30. Data on all trauma patients discharged between July 1 and September 30 must be submitted to the department by December 31. Data on all trauma patients discharged between October 1 and December 31 must be submitted to the department by March 31 of the following year.

(f) A hospital not certified as a trauma center under 7 AAC 26.710 - 7 AAC 26.745 may provide trauma registry data to the department at least semi-annually each year on June 30 and December 31. Data on all trauma patients discharged between July 1 and December 31 may be submitted to
the department by June 30 of the following year. Data on all trauma patients discharged between January 1 and June 30 may be submitted to the department by December 31 of the same year. (g) The department will provide reports for quality review of trauma care under (b)(1) of this section to each acute care hospital or state certified emergency medical service within 30 days following the receipt of trauma registry data from that hospital or state certified emergency medical service.

History -
Eff. 4/7/96, Register 138
Authority -
AS 18.08.015
AS 18.08.080

ARTICLE 08