Iowa Trauma System

2011 The Iowa Trauma Coordinators (ITC).
The goal of Iowa’s trauma system is to match the patient’s medical needs to the existing medical resources.

The Iowa Trauma system was created in 2001 by the Iowa General Assembly and is housed within the Iowa Department of Public Health – Bureau of EMS.
Iowa’s trauma system is all-inclusive and requires that all community hospitals be designated as one of four levels: Resource, Regional, Area or Community.

Rules governing the trauma system can be found within Iowa Code and Iowa Administrative Rules *(Chapters 134-138).*
Iowa’s Trauma System is directed by the State Trauma Program Director and receives direction and guidance from two committees:

1. System Evaluation Quality Improvement Committee (SEQIC)
2. Trauma System Advisory Council (TSAC)
SEQIC’s scope of duties include:

- Analyzing trauma-related information and data
- Evaluating the standards for trauma care
- Recommending quality improvement strategies
- Designing and recommending corrective action plans
SEQIC’s duties cont.

- Monitoring, evaluating, and reevaluating trauma system-related corrective action plans implemented by the Iowa Dept. of Public Health.
Trauma System Advisory Council

TSAC’s scope of duties include:

- Advising the department on issues and strategies to achieve optimal trauma care delivery
- Assisting the department in the implementation of an Iowa trauma care plan
- Developing criteria for the categorization of all hospitals and emergency care facilities according to their trauma care capabilities
Trauma System Advisory Council

TSAC’s duties cont.

- Developing a process for verification of the trauma care capacity of each facility and the issuance of a certificate of verification
- Developing standards for medical direction, trauma care, triage and transfer protocols, and trauma registries
- Promoting public information and education activities for injury prevention
Trauma System Advisory Council

- TSAC duties cont.
  - Reviewing adopted rules
  - Making recommendations to the director for changes to further promote optimal trauma care.
Hospitals must reapply every three years to be re-certified as a trauma facility. An application is submitted to the Bureau of EMS verifying the hospital is meeting the categorization and verification criteria at the appropriate level.

Site visits are conducted at Resource, Regional and Area designated hospitals as part of the certification process.