Agenda Item No.: **35.**

AGENDA SUMMARY PAGE

CITY COUNCIL MEETING OF: MARCH 2, 2016

DEPARTMENT: ADMINISTRATIVE SERVICES
DIRECTOR: TED OLIVAS ☐**Consent** ☒ **Discussion**

SUBJECT:
R-2-2016 - ABEYANCE ITEM - Discussion for possible action regarding a Resolution supporting the addition of a second Level 3 trauma center in Southern Nevada, located in the North/Northwest region of the Las Vegas Valley - All Wards

Fiscal Impact

☐ **No Impact** ☐ **Augmentation Required**

☐ **Budget Funds Available**

Amount:
Funding Source:
Dept./Division:

PURPOSE/BACKGROUND:
Currently, the closest trauma center for residents living in the North/Northwest region of Southern Nevada is located downtown at UMC. This means long transport times for residents in that area who are involved in serious medical situations. Councilman Beers and Councilwoman Tarkanian, the Citys representatives on the Southern Nevada Health District Board, have requested that council discuss adopting a resolution in support of adding a second Level 3 trauma center in Southern Nevada, located in the North/Northwest region of the Las Vegas Valley.

RECOMMENDATION:
None

BACKUP DOCUMENTATION:
1. Resolution No. R-2-2016
2. Map
3. Backup Documentation Submitted at the January 6, 2016 City Council Meeting
4. Submitted at Meeting - Comments and Letter of Concern from Culinary Workers Union, Local 226

Motion made by BOB BEERS to Approve with the deletion of the last whereas on Page 2, Lines 6, 7 and 8, and change the language of the Resolution to read: The City Council supports the addition of a second Level 3 trauma center in Southern Nevada located at Centennial Hills Hospital

Passed For: 4; Against: 3; Abstain: 0; Did Not Vote: 0; Excused: 0
BOB COFFIN, STEVEN D. ROSS, STAVROS S. ANTHONY, BOB BEERS; (Against-RICKI Y. BARLOW, LOIS TARKANIAN, CAROLYN G. GOODMAN); (Abstain-None); (Did Not Vote-None); (Excused-None)

NOTE: A previous motion for approval by Beers, failed with Coffin, Barlow, Tarkanian and Goodman voting No.

Minutes:
AMY LEONG appeared on behalf of the Culinary Workers Union Local 226, and submitted her comments and a letter from Local 226 for the record. Local 266 is concerned about the impact of a Level 3 trauma expansion on the existing system and does not believe there is a need for any expansion at this time. Additionally, an addition would take away resources from the successful Level 1 trauma center at University Medical Center (UMC) and would diminish the training of the already limited number of highly trained physicians in Las Vegas, during a time when the city is facing a physician shortage. This unnecessary expansion will result in higher costs for patients.

COUNCILMAN BEERS verified that the Culinary Workers Union Local 226 Health Fund is made up of several unions. He then explained that the Regional Trauma Advisory Board (RTAB) met and recommended against authorization of any Level 3 trauma centers. That recommendation will be considered by the Southern Nevada Health District (SNHD) board meeting at the end of March; the SNHD is not bound by the RTAB recommendation. The subject Resolution may or may not find favor with the City Council, but ought to be considered. He indicated that the backup documentation includes a map of existing trauma centers, and he pointed out that the closest trauma center for northwest residents is at UMC and it is a Level 1 trauma center, a 15-minute ambulance ride. The closest trauma center for residents in the Southwest is St. Rose Dominican Hospital, Rose de Lima Campus. The Resolution attempts to avoid the controversy of which company would be granted a Level 3 facility in Northwest Las Vegas. COUNCILWOMAN TARKANIAN pointed out that the recommendation suggested not looking at future needs but at the current need. COUNCILMAN BEERS clarified that the Resolution does not address future needs.

DR. JOHN FILES, Medical Director for Trauma at UMC, and Chairman of the Department of Surgery at the University of Nevada School of Medicine, stated that RTAB is comprised of 16 members representing the Valleys trauma centers, non-trauma hospitals, transport agencies, citizens at large and public policy makers. Patients injured who might have physiologic and anatomic abnormalities will be transported to Level 1 and 2 trauma centers and bypass Level 3 trauma centers. Those patients who are fully awake and stable, have normal vital signs, normal pulse and normal oxygen saturation will be transported at surface speed without lights and sirens to Level 3 centers; they are not at risk of life loss. The Golden Hour refers to a time period in which patients should arrive at a treatment facility and have their treatment initiated. The first 30 minutes is viewed to be pre-hospital and the other 30 minutes is viewed to be in-hospital; the SNHD uses a transport time of 30 minutes. Therefore, RTAB concluded there is no demonstrated need at the moment for a second Level 3 trauma center, and that the current centers are capable of treating patients. DR. FILES verified for MAYOR GOODMAN that RTABS decision carried with an overwhelming majority.

COUNCILMAN ANTHONY referred to the map of areas in the northwest without trauma centers, and stated that those who live in the City of Las Vegas, Clark County and North Las Vegas are underserved. He opined that it would not cost the City of Las Vegas any money if a hospital chooses to apply for a Level 3 trauma center. DR. FILES indicated that RTABS responsibility was to interpret the regulations of the SNHD and determine whether the need was

demonstrated. SNDHS opinion was that at this moment there was no demonstrated need because patients are getting the right care, at the right place. at the right time, and they are not suffering from extended transports; the survival rate is excellent compared to other systems in the United States. COUNCILMAN ANTHONY stated that he will support the Resolution because he believes his constituents need a trauma center in the Northwest Area.

MAYOR GOODMAN asked what precludes Mountain View Hospital from opening a Level 3 trauma center. COUNCILMAN ANTHONY stated that he would recommend that SNHD consider at least one Level 3 trauma center in the northwest part of the Valley, given the areas rapid growth. COUNCILWOMAN TARKANIAN wondered if RTAB would consider a location for a Level 3 trauma center where the greatest need is and not where growth might occur in the future.

COUNCILMAN BEERS explained that the reason the RTAB would not consider extending the trauma centers is because it might reduce the existing trauma centers effectiveness in responding to trauma because fewer cases would come in. Additionally, insurance payouts could increase for people taken to the trauma facility. DR. FILES added that in August of 2005, two trauma centers were added to the SNHD trauma service area, and the trauma center at UMC lost a third of its patients and the loss has not been recovered. In order to train resident doctors, nurses and military readiness before deployment in emergency medicine, they require a high-volume trauma center to continue operating. If every hospital in the Valley were allowed to become a trauma center, UMC would be out of business.

COUNCILMAN COFFIN remarked that when he was in a car accident, he was taken to a local hospital not properly staffed. In the seven hours he was there, he was examined by only one doctor, which led him to believe the hospital was not ready for emergencies. The growth is happening in the Northwest, which could increase serious accidents. He supported the proposal of a second Level 3 trauma center. COUNCILWOMAN TARKANIAN opined that it is not just adding a trauma center but also the support staff.

DR. FILES discussed with COUNCILMAN BARLOW his 20-year practice at UMC, and that current patient capacity is 3,000 per year. If this level is maintained and growth continues, additional centers should open. RTAB is using the metrics required to demonstrate a need for additional trauma centers; however, at this time, no need was demonstrated. DR. FILES further explained that a need-based assessment task force would evaluate all hospitals that have applied, as well as any other community stakeholder, to evaluate and identify what would be the benchmarks, thresholds and triggers to look at new trauma centers. Regarding collecting a debt of the services provided, DR. FILES stated that having a trauma center designation, allows hospitals, by law, to charge facility fees and upcharge other service fees. The concern is that directing patients not in need of trauma care to a low-level trauma center could inflate health care costs. This has to be balanced against making sure that every patient who needs high-level care gets to those centers in a timely manner and receives appropriate care.

MAYOR GOODMAN verified that RTAB agreed that all hospitals that have applied will be assessed and if the necessity should arise, it would make a recommendation to the SNHD. MAYOR GOODMAN opined that no decision should be made until the professional body comes back with a recommendation, independent of SNHDS recommendation.

COUNCILMAN ROSS asked that Planning staff brief the Mayor and City Council with regards to the Skye Canyon residential development, which will create significant growth for the community; the Paiute Reservation is part of that equation. This is an opportunity to send a message to SNHD as to what the City Council thinks about the need in the Northwest.

COUNCILMAN BARLOW and COUNCILWOMAN TARKANIAN both felt choosing a hospital for a trauma center is premature. COUNCILWOMAN TARKANIAN asked that perhaps the motion not name a hospital, but rather look at areas with the greatest need. MAYOR GOODMAN stated that she would support having the professionals determine the area in need for a Level 3 trauma center.

COUNCILMAN BEERS referred to Lines 6, 7 and 8 on Page 2 and asked that whereas clauses be deleted. MAYOR GOODMAN asked if COUNCILMAN BEERS would consider an abeyance until a decision is made. COUNCILMAN BEERS pointed out that an abeyance would deny the City an opportunity to provide input to the SNHD; hospital facilities vying for this request will be meeting with the City Council. Perhaps the right answer should be that St. Rose Dominican Hospital should not become a Level 3 trauma center because existing Levels 1 and 2 trauma centers are capable of handling the existing trauma load.

COUNCILMAN BEERS suggested approving the Resolution as written, with the deletion of whereas in Lines 6, 7 and 8 on Page 2. If his motion should fail, he suggested including that if the SNHD determines a Level 3 trauma center is appropriate for the Valley, that it be located in one of the Northwest hospital facilities. COUNCILMAN COFFIN asked that it not be hospital specific. After further discussion, COUNCILMAN BEERS moved for approval of the Resolution with the deletion of whereas on Page 2, Lines 6, 7 and 8, and to change the language of the Resolution to read: The City Council support the addition of a second Level 3 trauma center in Southern Nevada located at Centennial Hills Hospital. COUNCILMAN BARLOW could not support the location as recommended by COUNCILMAN BEERS because he would prefer a recommendation from the SNHD as to the location. COUNCILWOMAN TARKANIAN agreed, and added that the medical professional group should be making the decision, and she opined that this is a political situation and a political move.