

#13

MAY 22 2014



Chandler • Arizona
Where Values Make The Difference

Memorandum

Memo: MC14 - 012

DATE: May 22, 2014

TO: MAYOR AND CITY COUNCIL

FROM: DAVE BIGOS, MAYOR AND COUNCIL ASSISTANT *DB*

THRU: RICH DLUGAS, CITY MANAGER *RD*
NACHIE MARQUEZ, ASSISTANT CITY MANAGER *NM*
MARSHA REED, ASSISTANT CITY MANAGER *MR*

SUBJECT: Resolution No. 4770

RECOMMENDATION:

Request approval of Resolution No. 4770 authorizing the submittal of a \$1,047,031.00 Pass-Through Indian Gaming Grant application from Dignity Health Foundation, East Valley, to the Gila River Indian Community.

BACKGROUND/DISCUSSION:

The grant funding sought by Dignity Health Foundation, East Valley, is intended to provide equipment needed to operate a Level 1 Trauma Center, trauma-specific training for hospital staff and a course to develop rural trauma teams at outlying facilities. The attached Tribal application provides a detailed account of the request. It should be noted the request asks that payments be disseminated over a two-year period, which could tie up funding for other requesters in 2015.

PROPOSED MOTION:

Move to approve Resolution No. 4770 authorizing the submittal of a \$1,047,031.00 Grant application from Dignity Health Foundation, East Valley, to the Gila River Indian Community.

Attachments:

Resolution 4770

City Application

Tribal Application and/or Related Documentation on behalf of Dignity Health Foundation, East Valley

RESOLUTION NO. 4770

A RESOLUTION OF THE CITY COUNCIL OF THE CITY OF CHANDLER, ARIZONA, AUTHORIZING THE MAYOR TO SUBMIT AN APPLICATION FOR AN INDIAN GAMING REVENUE SHARING GRANT TO GILA RIVER INDIAN COMMUNITY ON BEHALF OF DIGNITY HEALTH FOUNDATION, EAST VALLEY, IN THE AMOUNT OF \$1,047,031.00.

WHEREAS, pursuant to A.R.S. § 5-601.02, Indian tribes entering into a tribal-state gaming compact shall contribute monies to “. . . cities, towns and counties . . . for government services that benefit the general public, including public safety, mitigation of impacts of gaming, and promotion of commerce and economic development”; and

WHEREAS, those Indian tribes entering into a tribal-state gaming compact have various grant application procedures for evaluating which cities, towns and counties, and which government services, will receive gaming revenue sharing contributions pursuant to A.R.S. § 5-601.02; and

WHEREAS, it has become a relatively common practice for cities to authorize the submission of grant applications for such Indian gaming revenue sharing grants on behalf of 501(c)(3) nonprofit organizations that are deemed to be providing government related services that benefit the general public; and

WHEREAS, Dignity Health Foundation, East Valley, a 501(c)(3) nonprofit organization, has requested that the City authorize the submission of an application for such Indian gaming revenue sharing grant funding to Gila River Indian Community on its behalf in the amount of \$1,047,031.00; and

WHEREAS, the deadline for accepting applications for grant funding by Gila River Indian Community is June 06, 2014; and

WHEREAS, the funding sought by Dignity Health Foundation, East Valley, is intended to provide equipment needed to operate a Level 1 Trauma Center, trauma-specific training for hospital staff and a course to develop rural trauma teams at outlying facilities; and

WHEREAS, the City Manager’s Office has reviewed the application materials prepared by Dignity Health Foundation, East Valley, and believes that the funding request described in such application materials qualifies as being for government related services that benefit the general public and is consistent with the City’s Administrative Regulation regarding such grant applications.

NOW, THEREFORE, BE IT RESOLVED by the City Council of the City of Chandler, Arizona, that:

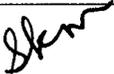
1. Dignity Health Foundation, East Valley, is hereby authorized to submit the application materials prepared by Dignity Health Foundation, East Valley, that are attached hereto, together with this Resolution, to Gila River Indian Community.
2. The Mayor is hereby authorized to execute the application, in the form attached hereto, in conjunction with the grant application to be submitted to Gila River Indian Community on behalf of Dignity Health Foundation, East Valley.
3. Within ten (10) days of the City's receipt of any grant funds from Gila River Indian Community pursuant to a grant application submitted on behalf of Dignity Health Foundation, East Valley, City staff is directed to mail a check to Dignity Health Foundation, East Valley, covering one hundred percent (100%) of the funds received by the City from Gila River Indian Community pursuant to such application.
4. The City, by virtue of this Resolution, is simply acting as a financial conduit between the Gila River Indian Community and Dignity Health Foundation, East Valley, and is in no way:
 - (a) Agreeing or obligating itself to monitor or report on the expenditure of any grant funding distributed to or on behalf of Dignity Health Foundation, East Valley; or
 - (b) Guaranteeing or warranting the accuracy, completeness or truthfulness of the information set forth in the application materials prepared by Dignity Health Foundation, East Valley; or
 - (c) Supervising, or taking any responsibility regarding, the actions or activities undertaken by Dignity Health Foundation, East Valley; or
 - (d) Representing that Dignity Health Foundation, East Valley, either has, or does not have, other sources of funding relating to the intended use of grant funding set forth in this Resolution, including funding from grant applications made on behalf of Dignity Health Foundation, East Valley, to other Indian tribes.

PASSED AND ADOPTED by the City Council of the City of Chandler, Arizona, this ____ day of _____, 2014.

ATTEST:

CITY CLERK
APPROVED AS TO FORM:

MAYOR

CITY ATTORNEY 

CERTIFICATION

I HEREBY CERTIFY that the above and foregoing Resolution No. 4770 was duly passed and adopted by the City Council of the City of Chandler, Arizona, at a regular meeting held on the ____ day of _____, 2014, and that a quorum was present thereat.

CITY CLERK

PRELIMINARY INFORMATION REGARDING REQUEST
THAT THE CITY OF CHANDLER PASS-THROUGH AN
APPLICATION FOR AN INDIAN GAMING REVENUE
SHARING GRANT ON BEHALF OF NON-PROFIT
ORGANIZATION

1. Requestor Name: Dignity Health Foundation East Valley
2. Address: 1727 West Frye Road, Suite 230, Chandler, AZ 85224
3. Contact Person and Contact Information: Aaron Peace, 1727 W. Frye Road Suite 230, Chandler, AZ 85224, (480) 728-3931, aaron.peace@dignityhealth.org.
4. Date of obtaining 501(c)(3) non-profit organizational status and verification of such status at time of the request. July 10, 1986
5. Describe the nexus between Requestor and the City of Chandler and its residents. Dignity Health and the City of Chandler have collaborated on projects to benefit Chandler residents including implementation of the Dignity Health Children's Dental Clinic, vision and hearing screening for young children, and a previous grant from the Gila River Indian Community to help expand Chandler Regional Medical Center.
6. Specifically, but concisely, describe how the grant funding sought by Requestor will be utilized (please do not just refer to general description included in the application materials). Dignity Health will use funding from Gila River Indian Community to provide equipment needed to operate a Level I Trauma Center, trauma-specific training for hospital staff, and a course to develop rural trauma teams at outlying healthcare and EMS organizations.
7. Describe how the use for which funding is sought will provide "government (related) services that benefit the general public, including public safety, mitigation of impact of gaming and promotion of commerce and economic development". (See A.R.S. § 5-601.02(H)(4)). With Chandler Regional's new Level I Trauma Center designation, trauma patients from Chandler and surrounding rural areas are being treated right here in the community. When time is of the essence in life and death trauma situations, more patients' lives and functionality will be saved by being treated in the East Valley.
8. Describe how the use for which funding is sought will benefit Chandler residents as a whole rather than simply benefiting a particular individual, entity or class of individuals. A Level I Trauma Center benefits every Chandler resident. Dignity Health has invested much in upgrading medical care available to all Chandler residents. It is seeking community partnerships to help provide some of the

equipment and training needed to deliver quality trauma care to Chandler residents.

9. Verify that no portion of the funding sought will be used to in any way promote or teach any religious or political viewpoint or cause. AP (initial)

10. Identify the Tribe that Requestor wishes the City to submit application materials on Requestor's behalf, and the deadline for such application submittal. Dignity Health requests that the City submit these application materials to the Gila River Indian Community with a deadline date of June 7, 2013.

11. Identify any application for Indian gaming revenue sharing grant submitted on Requestor's behalf by another city, town or county, and the amount of funding sought. Dignity Health requests no other funding from another city.

12. Attach to the request all information that is to be submitted to the Tribe on Requestor's behalf.

13. Agree that, to the fullest extent permitted by law, Requestor shall defend, indemnify and hold harmless the City of Chandler, its Mayor and Council, officials, officers and employees from and against all losses, claims, suits, actions, payments and judgments, demands, expenses, damages, including consequential damages and loss of productivity, attorney's fees, defense costs or actions of any kind and nature relating to, arising out of, or alleged to have resulted from the City of Chandler's processing or consideration of this request to pass through an application for an Indian gaming revenue sharing grant on behalf of Requestor, or in passing through any grant funds awarded pursuant to such application.
AP (initial)

By signing below, Aaron Peace, asserts that he or she has the authority to execute the application on behalf of Requestor, has read, understands and agrees to be bound by Sections 9 and 13 of this application, and otherwise certifies that the information provided herein is believed to be true and correct.



(Signature)

Aaron Peace

(Print)

President and VP of Philanthropy

(Title)

April 29, 2014

(Date)

STATE OF ARIZONA)
)ss
County of Maricopa)

SUBSCRIBED AND SWORN to before me this 28 day of April,
2014 by Haron H. Peace

Marlene Ashton
Notary Public

My Commission Expires: 15 June 2015



MARLENE ASHTON
Notary Public — Arizona
Maricopa County
Expires 06/15/2015



Gila River Indian Community Grant Application

Municipality Information

Date of Application: April 29, 2014

Name of City, Town or County: City of Chandler

Mayor or Board of Supervisor's Chairman: Mayor Jay Tibshraeny

Mailing Address: P.O. Box 4008

City: Chandler State: AZ Zip Code: 85224-4008

Department/Non-Profit Information

Department or Organization Name: Dignity Health Foundation East Valley

Mailing Address: 1727 W. Frye Road, Ste. 230 City: Chandler State: AZ Zip Code: 85224

Contact Person*: Aaron Peace Title: President and Vice President of Philanthropy

Phone Number: 480-728-3931 E-mail Address: aaron.peace@dignityhealth.org

*The individual listed here will be our direct point of contact for grant-related questions or requests for information. Duplicates of all grant correspondence will be sent to the contact person.

Grant Information

Program or Project Name: Chandler Regional Medical Center Level I Trauma Center

Purpose of Grant: To provide some of the equipment needed to operate a Level I Trauma Center, trauma-specific training for hospital staff, and a course to develop rural trauma teams at outlying facilities.

Beginning and ending dates of Program or Project: 11/1/2014 to 10/31/2016

Amount Requested: \$1,047,031.00 Total Project Cost: \$1,047,031

Multi-year Request – If checked, # of years requested: 2 Amount/year: \$523,515.50

Priority Funding Area:

Economic Development Education Healthcare Public Safety Transportation

Geographic Area Served: Eastern Maricopa County, including Chandler, and parts of Pinal County

Signature:

Mayor OR Chairman BOS: _____ Date: _____

Typed Name and Title: **Mayor Jay Tibshraeny**



Gila River Indian Community Grant Application

Application Format (outline)

Please structure your proposal to provide the following information in the order indicated. Use the headings and subheadings provided. Then, in your own words, address the questions and issues posed in the outline. The questions reflect the general interests and concerns of the Gila River Indian Community, but are not intended to be conclusive. Additional information pertinent to your project should be included. Please be thorough yet strive for brevity. Please submit one original and five copies of your completed grant application, including attachments

A. NARRATIVE

1. Purpose of Grant

- a) Describe the proposed program or project
- b) Describe how the proposed program or project satisfies one or more of the “priority areas” identified by the Gila River Indian Community.
- c) Identify the needs/problems to be addressed, target population and number of people to be served by the project.
- d) Describe the project goals and objectives, and your plan to meet them.
- e) Define the project as a new or continuing program.
- f) Identify other organizations, partners or funders participating in the project and their roles (see attachments section).
- g) Indicate any application to and/or awards made by a Tribe other than the Gila River Indian Community for state shared revenues for this and/or any other projects/programs.
- h) Provide a timetable for implementation.
- i) Identify long-term funding resources or project sustainability.

2. Reports

- Describe your plan to document progress and results. Interim and final reports will be required for every grant awarded.

B. ATTACHMENTS

Required Attachments:

1. A resolution from the applicable governing body in support of the proposed project (eligible City, Town or County).
2. A proposed budget for the program or project.
3. List of other funders, potential funders and amounts committed or requested in support of the proposed project.

Optional Attachments:

1. Letters of support (optional) that substantiate need for the project and collaboration with other organizations.



Gila River Indian Community Grant Application

C. BUDGET DETAIL, IF APPLICABLE (Narrative description of unusual budget items, in-kind expenses, donations, etc.)

**Dignity Health Foundation East Valley
Request to Gila River Indian Community
For Support Of
Chandler Regional Medical Center Level I Trauma Center**

1. Purpose of Grant

Chandler Regional Medical Center (CRMC) was granted a provisional Level I Trauma Center designation in March, 2014 in conjunction with the hospital expansion and the new, state-of-the-art emergency department. A trauma center is a healthcare institution that has the resources and capabilities necessary to provide trauma services at a particular level to injured patients. Previously, all emergency departments in the East Valley could only resuscitate, stabilize and transfer trauma patients to a facility equipped to treat the patients' injuries. With the new designation, trauma patients from the East Valley and surrounding rural areas will be treated right here. When time is of the essence in life and death trauma situations, more patients' lives and functionality will be saved by being treated right here in the East Valley.

Dignity Health and the communities of the East Valley know that it is a necessity to provide a Level I Trauma Center to residents. As a result, Dignity Health has already invested more than \$8,500,000 to provide much of the infrastructure, equipment, staff and training to make it possible. Dignity Health needs help from the community to complete the process. We are requesting a contribution of \$1,047,031 from the Gila River Indian Community in up to two years.

Dignity Health Foundation – East Valley values the relationship that has been forged with the Gila River Indian Community. Together, we have accomplished much to ensure Phoenix's suburban eastern communities and rural areas have access to quality and compassionate healthcare. This year, we respectfully ask for the Community's partnership once again in helping us to purchase the remainder of the needed equipment necessary to establish CRMC's Level I Trauma Center and to provide training to residents and the rural hospitals which will stabilize and send trauma patients to CRMC.

Opening a Level I Trauma Center is part of CRMC's goal to proactively address the increased need for high-quality, compassionate healthcare services through improved facilities and expanded services. CRMC's new 153,000 square foot tower, due to open fall 2014, will increase the number of beds available to more than 300. In addition, the expansion will provide six new operating rooms, two new catheterization labs, and an expanded emergency department.

CRMC has been at the heart of health and well-being in our community since it began as a small community hospital in 1961. Today, it is a 243-bed facility with more than 850 doctors on staff representing all major specialties. CRMC is now at a critical point in its evolution and service to its community, one which mandates new and enhanced facilities and services in order to meet our region's healthcare demands throughout this decade and into the next.

a) Describe the proposed program or project

When someone is involved in a motor vehicle accident, a fall, or has an accident while hiking, biking, or operating an ATV, they go to the emergency room. But when injuries are combined with abnormally low blood pressure, respiratory failure, or unconsciousness, Level I trauma care is needed. This

application section will describe general trauma center information, the investment Dignity Health has made into providing trauma care, and CRMC's request from the Gila River Indian Community

Dignity Health's Level I Trauma Center

CRMC's provisional status as a Level I Trauma Center began in March 2014 from Arizona Department of Health Services (ADHS) – Bureau of Emergency Medical Services and Trauma Systems. The Center is equipped with advanced technology and dedicated trauma operating rooms. The trauma care team partners and coordinates with emergency medical services to provide critical care 24 hours a day.

Since the opening of the Level I Trauma Center in March, up to eight patients a day have been evaluated or treated for trauma. This is four more than were even anticipated. Clearly, the need for a trauma center in the East Valley was great. Of the six previous Level I trauma centers in metro Phoenix, five were clustered in Phoenix and one in Scottsdale.

That means people who were badly injured in a car crash or severely injured on the fringes of metro Phoenix were often flown by emergency medical helicopter or transported by ambulance to a Level I trauma center in Phoenix or Scottsdale. The time it takes to stabilize and transport patients with life-threatening injuries to another facility has put outlying residents at a severe disadvantage.

Time is critical for trauma patients. Emergency medical physicians say that proper medical care within one hour of a severe injury can mean the difference between temporary or permanent disabilities or life and death. Dr. Brian Tiffany, chief of staff at Chandler Regional and an emergency room physician, says that "the closer you are to a medical center, the better your outcomes are. The general consensus has been we need more trauma care centers in the East Valley."

In a partnership with Barrow Neurological Institute, as a Level I Trauma Center, CRMC has medical and surgical specialists on hand around-the-clock to provide the full range of care for every aspect of injury from prevention through rehabilitation. CRMC's trauma team includes trauma critical care/acute care surgeons, neurosurgeons, orthopedic surgeons, emergency doctors and nurses, radiologists and CT technicians.

Level I Trauma Center Designation. Arizona Department of Health Services (ADHS) has established criteria and standards for designating trauma centers at varying levels based on a hospital's resources and capabilities. Arizona's Trauma System ensures that each trauma patient is cared for at a healthcare institution with the resources and capabilities that match the patient's treatment needs. Establishing and maintaining criteria and standards for Arizona trauma centers insures the right care, at the right place, at the right time, helps people continue to live to their full potential, despite having experienced a severe injury¹.

Numbers to be Served. Initial estimates indicate the number of patients the Level I Trauma Center will serve will be between 1,600 to 1,700 patients per year. This includes patients with mild, moderate and major trauma. It is estimated that approximately 24% of patients coming to the trauma center each year will be major trauma victims who can only be treated in a Level I Trauma Center. Other estimations are as follows:

¹ ADHS, Trauma Program Information, <http://azdhs.gov/bems/documents/trauma/GeneralTraumaInformation.pdf>

- 89% of patients are estimated to be blunt trauma victims
- Approximately 50% of patients will sustain injuries due to motor vehicle accidents
- 70% of patients will be brought by ground ambulance
- Approximately 61% of patients will be admitted to the hospital due to their injuries
- An estimated 30% of patients will be discharged home after receiving treatment in the trauma center

Dignity Health's Investment:

Dignity Health has been committed to do everything possible to make the Level I Trauma Center an outstanding success and bring excellent trauma services to the community. Dignity Health's investment in the surgeons, support staff, education, facility and much of the equipment to meet the East Valley's trauma needs is as follows:

Equipment. In preparation leading up to our designation as a Level I Trauma Center, Dignity Health purchased more than \$1.5 million worth of equipment necessary for treating trauma patients. This included a surgical microscope, a spinal surgery table, a surgical eye microscope, a bone drilling set, a head holder for holding the head in neutral position during cervical spine surgery and a vision enhancement system for advanced eye lens surgery. Nearly a half million dollars alone was used to purchase tools needed to help make surgery more efficient, to help minimize infection risk by ensuring staff and patient safety, and to help minimize patient trauma through blood reinfusion. In addition, many of the necessary trays, lead aprons, vein finders, and trauma gurneys have been acquired. A complete list of purchased equipment is attached.

Staff. Dignity Health has acquired surgeons, support staff and management to staff the Trauma Center.

- *Surgeons.* Our trauma team provides round-the-clock coverage with critical care, orthopedic and neurological surgeons specially trained to treat the most severe trauma emergencies. The trauma surgical team includes the following:
 - Forrest "Dell" Moore, M.D., F.A.C.S., Trauma Medical Director. Dr. Moore has 10 years of experience in trauma and acute-care surgery and fellowship training in trauma/surgical critical care
 - Asser Youssef, M.D., F.A.C.S., Director of Surgical/Trauma Critical Care. Dr. Youssef is fellowship trained in trauma/surgical critical care.
 - Ashley Northcutt, M.D. Dr. Northcutt is fellowship-trained in trauma critical care.
 - Nicholas Thiessen, M.D. Dr. Thiessen has special fellowship training in trauma and surgical critical care.
 - Alan Cook, M.D., F.A.C.S., Director of Trauma Research. Dr. Cook is fellowship-trained in trauma critical care.
 - Ian Thomas, D.O. Dr. Thomas is a fellowship-trained trauma critical care surgeon.
 - 3 neurosurgeons
 - 5 orthopedic trauma surgeons

Dignity Health has invested salary support so that trauma surgeons from among those listed are available 24 hours a day to the community. Dignity Health's in-kind investment in surgical support for the trauma center, which includes in-house trauma surgeons and trauma

anesthesiologists and round-the-clock availability of neurosurgery, orthopedic trauma, hand surgery and plastic surgery is \$5.5 million.

- Support Staff. Trauma, neurosurgery, and orthopedic Nurse Practitioners and Physician Assistants, along with the Trauma Registrar, have been hired to provide support for the trauma program and to assist the surgeons with patient care. Their salaries and benefits have totaled an approximate \$1.5 million investment.
- Management Staff. New staff that Dignity Health acquired to manage the trauma program include:
 - Lori Wass, RN, BSN, MSN, Trauma Program Manager. Ms. Wass has clinical experience in critical care, cardiology, quality management, performance improvement and regulatory knowledge. She is a member of the Society of Trauma Nurses; she is a course coordinator for Advanced Trauma Life Support courses and Rural Trauma Team Development Course.

Salaries and benefits of the new trauma program management staff reflect a \$100,000 investment. Together, Dignity Health's in-kind contributions to the trauma center total more than \$8,500,000. The Trauma Center organizational chart is attached.

East Valley Trauma Service Line Steering Committee. Prior to the opening of the Trauma Center, this Committee met for a year to develop plans for the center. It now meets on a regular basis to ensure quality care, evaluate processes and make system adjustments. Composed of our new Trauma Medical Director, hospital Chief Executive Officer, Chief Nursing Officer, Chief Operating Officer, Director of Emergency and Trauma Services, Senior Project Manager, Director of Business Development, Chief Medical Officer, Vice President of Patient Management and Trauma Program Manager, this Steering Committee helped to develop the physical plans for the new emergency department in the tower, the trauma center organizational structure, steps to meet Level I designation requirements, and the vision for the trauma center in our community. The Committee is committed to review all systems on a continual basis to ensure that the trauma center runs in the most efficient manner possible.

Staff Training. The Arizona Trauma Center has a rigorous set of standards that a Level I Trauma Center must meet or exceed to ensure staffs have the knowledge, skills, and abilities required to provide high quality patient care.

Curriculum developed by the Emergency Nurses Association and the Association of Trauma Surgeons were foundational to the Dignity Health trauma education program. Every member of the trauma team was required to obtain certification in either Advanced Trauma Life Support (ATLS), Advanced Trauma Care for Nurses (ATCN) or Trauma Nursing Core Course (TNCC). Each certificate represents 2 full days of class room and competency validation. The courses are based research evidence that suggest optimal care of the trauma patient is best accomplished within a framework in which all members of the trauma team use a systematic, standardized approach to the care of the injured patient. The purpose of the courses is to present core-level knowledge, refine skills and build a firm foundation in trauma nursing. In preparation for the Trauma Center opening, course content included penetrating and blunt force traumas epidemiology, biomechanical injuries, initial assessment, management of patients with shock, brain and craniofacial trauma, chest and neck, abdominal, spinal cord, vertebral column, and musculoskeletal trauma in addition to burns, and trauma during pregnancy. Psychosocial aspects of trauma and family-centered care as it relates to trauma were also included. Physicians, Nurse

Practitioners, Registered Nurses and other members of the health care team from departments such as Nursing Support, Emergency Department, Hospital Leadership, ICU, Perioperative, Maternal Child Health, Telemetry, Orthopedics, Radiology, and Medical/Surgical attended these advanced courses. To support initial and ongoing trauma education a majority of the center's education department also obtained certification.

All of CRMC's approximately 2000 employees required some degree of education tailored to their specific roles. This education included computer-based learning modules, extensive courses with multiple components, lectures, skills demonstration, simulation experiences, equipment training, policy and procedure reviews, protocol reviews, and mock trauma events.

Clinicians also attend trauma education intensives that covered the following content: ventilator and advanced airway management, spinal immobilization, spinal orthotics, chest tube management, skin and wound management, pain management, neurologic assessment and management, neurology case presentation, proper positioning of the spinal cord injured patient, and other life threatening conditions. Other education offerings included managing psychosocial and spiritual needs of the trauma patient as well as Trauma Surgeon case study presentations.

Resident Training. Beginning in June, CRMC will begin training Army residents from William Beaumont Army Medical Center to be general surgeons. The Accreditation Council for Graduate Medical Education and the Residency Review Committee for Surgery has approved CRMC as an integrated site for the residency program. Courses residents will take include advanced trauma operative courses in addition to general and thoracic surgery. The training will enable Army surgeons to treat our Armed Forces. Two to three post-graduate year surgical residents will rotate through Chandler Regional's program every 2-4 months. The residents will also be performing research which will be presented at national conferences. To maintain a Level I Trauma Center designation, the facility must perform education and research. This program will not only provide skilled surgeons for our Armed Forces around the world, it will fulfil the education requirements for CRMC's trauma center designation. Please see attached press release outlining the collaboration.

Dignity Health's Request from Gila River:

Dignity Health has invested staff, education, equipment and facility upgrades to ensure that residents of the East Valley who need trauma services can be treated quickly and efficiently in their own community. But Dignity Health also seeks partnership from community members in providing this service. Ongoing needs exist and we are seeking partnership from the Gila River Indian Community in providing these essential equipment and training items.

Specific equipment. Through this application, we are requesting funds to purchase equipment that is needed to operate a Level I Trauma Center, above what Dignity Health is providing. Trauma centers must have equipment specifically designed to care for trauma victims. Equipment we are requesting from Gila River Indian Community is as follows:

Ultrasound machine	Panorex X-ray	Multiplate CR readers
Level 1 infuser	EM System	CR conversion kit
Bladder scanner	TQIP	2 Tube stations
ET CO2 monitoring modules	Blood freezer	Hypothermia machine
for Dash 4000	Countertop CR X-ray unit	invasive

Portable ultrasound	Bair huggers	Hypothermia machine non-
Bispectral index monitor	Pressure measurement	invasive
Flo-track	compartment	
Transport ventilators		

Education. The East Valley Dignity Health Learning Institute and Trauma Manager provided the required initial education in preparation of Level I Trauma Center designation. Ongoing staff training and competency validation, along with education to rural hospitals and the community is essential to maintain Level I Trauma Center status. These requirements ensure that all trauma centers, EMT organizations and rural hospital emergency rooms maintain a coordinated trauma system. Ongoing community education will emphasize injury prevention themes that arise from our community trauma database. Educational funds requested from the Gila River Community will be divided into two categories: internal education and community education.

- Internal Education. Education needs within Dignity Health are as follows:
 - Simulation Technology. A high-fidelity simulation manikin, “Trauma Hal,” will provide a realistic training experience for multi-disciplinary hospital staff. Training using the simulation man will enable hospital staff to practice procedures and learn about the body’s reaction to trauma. Clinical simulation technology has advanced to the point that a real life experience can be provided to the health care professional to obtain the needed skills for victims of trauma when seconds count and can mean the difference between life and death. Having a trauma simulator such as Trauma Hal will allow the East Valley Learning Institute Simulation Lab to provide realistic training to improve the skills necessary to care for trauma victims and illustrate how a body reacts to trauma and how to mitigate these life threatening situations.
 - Staff Training. Additional staff trauma training is included in this request which includes:
 - Approximately 15 new nurses to take the ATCN and TNCC trainings as described above
 - Advanced trauma training for ICU, perioperative, and medical, surgical and orthopedic staff
 - Trauma symposiums at St. Joseph’s Hospital and Medical Center for critical care, perioperative, medical, surgical and orthopedic staff
 - Training Equipment. Staff must be trained in the use of basic and advanced trauma equipment. Education equipment requested as part of this grant submission to provide initial and ongoing training for the trauma program includes a wound kit, splint, pelvic binder and rapid infuser.
- Community Education. Education that Dignity Health will provide to the community is as follows:
 - Rural Trauma Team Development Course. This course was developed by the American College of Surgeon’s Committee on Trauma to teach rural providers and clinicians the fundamental elements of injury resuscitation. The course is being offered to rural providers in our area that will transfer patients to our facility. It provides education that would enable

their staff to help stabilize patients, if necessary, before the patients are transported to our trauma facility. The course content includes key concepts relative to organization of the trauma receiving area, utilization of available resources and regional system relationships. The course is offered in a single day to enable a rural provider to form a trauma team consisting of at least three core members that could include physicians, nurse practitioners, physician assistants, nurses, pre-hospital personnel, technicians and administrative support. Staff from CRMC and St. Joseph's Hospital and Medical Centers will travel to rural facilities and deliver the training which includes team performance scenarios and organizational systems to perform primary assessments. Twelve courses will be delivered to surrounding medical, EMS, and fire departments per year.

- Simulation Torso. To enhance the Rural Trauma Team Development Course, a portable simulation manikin, consisting only of a torso, is needed to provide hands-on training for rural provider staff. Similar to "Trauma Hal" which will be used within CRMC, the simulation torso will be taken to rural providers to offer training in specific procedures.

b) Describe how the proposed program or project satisfies one or more of the "priority areas" identified by the Gila River Indian Community.

This request falls under Gila River Indian Community's priority funding area of healthcare services. Currently, patients in the Southeast Valley needing care for the most critical injuries are flown to Phoenix or Scottsdale. According to the 2012 annual report of the Arizona Bureau of Emergency Medical Services and Trauma System, only 42 percent of patients critically injured in Maricopa County last year arrived at a Level I Trauma Center within the "golden hour," the first hour after a severe injury. In Pinal County, the percentage of those getting necessary treatment within the "golden hour" is much less – only 10 percent! During the golden hour, the lives of a majority of critically injured trauma patients can be saved if definitive surgical intervention is provided. To this end, we are excited that the communities of Apache Junction, Casa Grande, Chandler, Florence, Gila River, Gilbert, Globe, Maricopa, Mesa, Miami, Queen Creek, Sun Lakes, and Tempe will benefit from the proximity of CRMC's trauma center.

c.) Identify the needs and problems to be addressed, target population and number of persons to be served by this project.

Since the 1990's Chandler has experienced exponential growth and has been one of the fastest growing cities in the country. In the 90's alone, the population grew by 97%. Population growth has slowed recently due to the economic downturn, however, due to Chandler's focus on attracting companies to provide good-paying jobs, it continues to grow at a slower steady rate.

CRMC is growing to meet the needs of this ever-expanding population. One of the clear needs for the East Valley is trauma services. In FY 2009-2010, CRMC reported more than 61,000 Emergency Department visits. Many of these visits were for ambiguous "symptoms, signs and ill-defined conditions." However, an Emergency Department visit for injury or poisoning was the second highest visit category for adults and the highest category for children².

² Chandler Regional Medical Center, Community Health Needs Assessment CY 2009, Center for Health Information & Research, Arizona State University, April 2012

Injuries are the leading cause of death for people ages 1-44 in Arizona. More than 24,000 people are severely injured in Arizona annually – 1,400 severe injuries occur in rural and frontier regions, necessitating long distance transport of trauma patients. Arizona’s trauma system ensures each patient is cared for at an institution with resources and capabilities that match the patient’s needs³.

In 2007, the American College of Surgeons’ trauma committee reviewed Arizona’s trauma system and concluded it was fragmented, lacked timely access for some residents and had inadequate data reporting and coordination. At that time, the report estimated that about 320 deaths could be prevented each year with a more inclusive trauma system. In order to achieve full designation, a trauma center must meet standards established by the ACS verification process. According to the ACS Arizona Trauma System Consultation Report, one of the vulnerabilities for the state of Arizona was the clustering of Level 1 trauma centers in the middle of large urban areas, leaving limited resources in rural areas⁴.

For people just having suffered a traumatic injury, there is a one-hour period of time, called the “golden hour” in which their lives are more likely to be saved if definitive medical intervention is provided. This one-hour time span incorporates all of the events that transpire after a significant injury has taken place including notifying the police, dispatching an ambulance to the scene, transporting the victim to the hospital, summoning the appropriate surgical and support staff and performing the surgery. This is an extraordinary amount of activity that needs to happen within one hour, particularly if the injury takes place in an outlying or rural area. In Pinal County in 2011, only 107 out of 1,128 trauma patients received the stabilization treatment necessary within the golden hour. That’s only 10.12 percent of Pinal County trauma patients⁵. The time it takes to transport Eastern Maricopa County and Pinal County victims to a Level I Trauma Center will be greatly reduced when they don’t have to be taken to downtown Phoenix or Scottsdale, ensuring that many more people will receive lifesaving treatment within that “golden hour.”

Need for staff training. A Level I Trauma Center is required by the State of Arizona to provide continuing education to its staff and outreach education to allied health personnel, pre-hospital personnel and the community⁶. Operating a trauma center requires that specific physician specialists and support teams are always available to treat people in need of trauma services. Staff training on a constant basis is necessary to ensure these support teams are ready to provide life-saving medical care. It takes very specialized training for surgeons, physicians, nurse practitioners, registered nurses and staff to provide care that saves lives and improves patient recovery at every stage of the process. For effective treatment to be provided as quickly as needed in a trauma situation, a systematic approach is necessary. The optimal care of the trauma patient is best accomplished within a framework in which all members of the trauma team use a systematic, standardized approach to the care of the injured patient. Staff must receive ongoing training to be able to operate effectively within that system.

³ Trauma Program Information, Arizona Department of Health Services, <http://www.azdhs.gov/bems/documents/trauma/GeneralTraumaInformation.pdf>

⁴ ACS College of Surgeons Committee on Trauma, Phoenix, AZ, November 26-29, 2012, <http://www.azdhs.gov/bems/documents/trauma/acs-az-trauma-system-consultation-report.pdf>

⁵ State Trauma Advisory Board 2012 Annual Report, <http://azdhs.gov/bems/documents/data/ASTR/2012-stab-annual-report.pdf>

⁶ Arizona Trauma Center Standards, 2007, <http://www.azdhs.gov/bems/documents/trauma/ExhibitI-ArizonaTraumaCenterStandards.pdf>

Need for Rural Trauma Team Development Course. While only 25 percent of our population lives in rural regions, more than 60 percent of the trauma deaths in America occur in these remote geographic segments of the country⁷. Dignity Health is committed to preparing our rural partners to be part of a well-functioning trauma system throughout our region of service. The coordinated responses of EMS, paramedics, rural trauma services, ancillary services, and CRMC as a Level I Trauma Center all work together to ensure that as many trauma patients as possible are treated within the “golden hour” of opportunity and are restored to health and function as quickly as possible.

Offering this course to our partners will help them to improve quality of care in rural areas by developing a timely, organized and rational response to the care of the trauma patient and a team approach that addresses the initial assessment and stabilization of the injured. The organization of this part of the overall regional trauma team will help to increase the efficiency of resource utilization and improve the level of care provided to the injured patient in the rural environment. Facilities have already expressed interest in receiving the course and more will be identified as our staff reach out to the community.

Need for Simulation Technology. The ability to provide realistic trauma simulated experiences to the multidisciplinary team and to rural hospitals will increase the effectiveness of training and provide the community a great benefit in being prepared for any trauma victim. Practicing the skills necessary to care for trauma victims such as emergency needle decompression of a collapsed lung or control of massive bleeding from a detached limb in a simulated experience will enhance the ability of the healthcare team to respond quicker and more efficiently to these emergencies in real emergency situations. Some of the capabilities of Trauma Hal versus other simulators are the ability to simulate massive bleeding from arteries with blood pressure and heart rate appropriate reactions which are controlled by a wireless tablet, sensors in wounds to detect appropriate pressure reducing techniques to stop the bleeding when appropriate tourniquet application has been applied, the ability to do needle decompression with sensors that detect proper positioning which activate an audible hiss such as in real life situations when a tension pneumothorax has occurred, and the Trauma Hal is equipped with the FAST I Locator for insertion of a sternal or tibial inter-osseous needle when intravenous access is difficult to obtain.

Trauma teamwork training conducted in simulation scenarios offers the additive benefit to traditional didactic training and will enhance performance and possibly reduce errors while protecting patients from unnecessary risks. Lastly, simulation based training provides the added opportunity to be used as a measurement tool linked to targeted teamwork, competencies and learning objectives.

d.) Describe the project goals and objectives, and your plan to meet them.

Level I Trauma Center Goals

- Provide advanced trauma life support and critical access to a Level I Trauma Center for people in the immediate and surrounding communities within the “golden” hour
Action Plan
 1. Acquire and maintain equipment to be continuously ready to care for severely injured patients

⁷ American College of Surgeons, Rural Trauma Team Development Course, <http://www.facs.org/trauma/rttdc/>

2. Provide adequate staffing levels and management to provide round-the-clock care for trauma patients
 3. Provide consistent training to hospital personnel so that all staff operate within the trauma system efficiently and effectively
- Comply with requirements set forth by the American College of Surgeons' Committee on Trauma with the goal of providing optimal care for trauma patients
Action Plan
 1. Submit trauma data to state database and National Trauma Database
 2. Develop trauma performance indicators
 3. Adhere to the criterion for optimal care of the trauma patient
 4. Report compliance with criterion based on evaluation of the trauma audits monthly
 - Keep our emergency transport services within our community to shorten response times
Action Plan
 1. Coordinate and integrate trauma care using standard protocols and Centers for Disease Control (CDC) accepted triage criteria
 2. Provide appropriate placement of the patient in the healthcare system
 3. Enhance communication with the pre-hospital providers in regards to trauma patients brought to the facility
 4. Identify education needed for pre-hospital providers, provide all necessary education and offer feedback
 5. Pre-hospital and functional outcomes will be tracked and used to improve policies, procedures and processes throughout the trauma continuum.
 - Reduce morbidity and mortality through primary injury prevention efforts
Action Plan
 1. Annually design and deliver outreach efforts to the community conducted by our trauma facility
 - Enable surrounding rural facilities to develop rural trauma teams
Action Plan
 1. Provide a Rural Trauma Team Development course to the rural facilities in the surrounding area with the following objectives: 1) Define roles and responsibilities for the rural trauma team; 2) appropriate care of the injured patient; 3) identify local resources and limitations; 4) initiate patient transfer process; 5) establish a performance improvement process; and 6) define the relationship between the rural trauma facility and the regional trauma system.

e) Define the project as a new or continuing program.

CRMC's Level I Trauma Center is a new program. Planning for the trauma center began approximately two years ago and it received its provisional trauma center status in March 2014. The trauma center is currently housed in CRMC's present emergency room. It will move into CRMC's new emergency room when the expansion project is completed this Fall. The emergency room has been designed to accommodate a trauma center.

f) Identify other organizations, partners or funders participating in the project and their roles.

Operating a Level I Trauma Center that will benefit all surrounding areas of the East Valley will involve Emergency Medical Services transport agencies and fire departments from all the communities including Chandler, Gilbert, Sun Lakes, Gila River, Phoenix, Casa Grande and Maricopa. With the partnership of these agencies, response times for critically injured patients will be reduced and transport vehicles will stay in our communities ready to answer a call, rather than transporting patients across the Valley for the treatment that they need. CRMC will provide educational opportunities by patient follow up and outreach trauma education to the surrounding EMS transport agencies and Fire Departments. The following are quotes from local fire chiefs on what this trauma center will mean to them:

"A Level I trauma center has been needed in the East Valley for a long time now. It will provide a much shorter response time to our critically injured citizens when minutes can mean life or death. Our firefighter paramedics will benefit from the outstanding experience and education that a Level 1 Trauma Center brings and even more importantly the safety of our firefighters will increase because it decreases the amount of time they are in the back of an ambulance traveling with a patient to the hospital." *Chief Jeff Clark - Chandler Fire Department*

"A Level I Trauma Center in the East Valley will provide improved emergency services for the residents of and visitors to the Sun Lakes community. Reduced ambulance transport times to the trauma center coupled with quicker treatment of traumatic injuries will save lives." *Chief Paul S. Wilson - Sun Lakes Fire District*

"With these patients, time can be the difference between life and death," *Assistant Chief Mary Cameli – Mesa Fire and Medical Department*

g) Indicate any application to and/or awards made by a Tribe other than the Gila River Indian Community.

Dignity Health has not applied to nor received any other awards for this project or any other project from another Tribe.

h) Provide a timetable for implementation.

Please see attached timeline.

i) Identify long-term funding resources or project sustainability.

Patients who will be admitted to the Level I Trauma Center will have a variety of payment options including: commercial insurance, Medicare/Medicaid, Arizona Healthcare Cost Containment System (AHCCCS), and private pay. Arizona's Medicaid, AHCCCS, has been in existence for thirty years and is a stable source of medical assistance. The Arizona legislature is currently considering reversing recent cuts to the AHCCCS system and expanding it to the amount of coverage it offered in the past. Those who still won't qualify for Medicaid, will be eligible for the insurance programs to be offered through the president's Affordable Care Act. Dignity Health is actively advocating for the restoration of Arizona's enhanced Medicaid coverage and the expansion of Medicaid in the federal government's affordable care act program.

Dignity Health Foundation East Valley
 Chandler Regional Medical Center Level I Trauma Center
 Gila River Indian Community Grant Application 2014
BUDGET

In-kind Dignity Health donations to this project are described within the grant application narrative.

Trauma Center Equipment Item	Quantity	Hospital Department	Amount Requested from GRIC	Detail
Ultrasound machine	1	Surgery	63,000	
Level 1 infuser	1	Surgery	9,000	
Bladder scanner	1	ED	5,000	
Panorex X-ray	1	Rad	50,000	
EM System		ED	65,000	
TQIP		ED	9,000	
Blood freezer	1	Lab	9,000	
Countertop CR x ray unit	1	Rad	50,000	
Multiplate CR Readers	2	Rad	240,000	
DR Conversion Kit	1	Rad	120,000	
Tube Station	1	TeleCP	18,255	
Tube Station	1	TeleNeuro	18,255	
Hypothermia machine (invasive)	1	ICU	45,000	
Portable Ultrasound	1	ICU	47,000	
Bispectral Index Monitor	1	ICU	8,000	
Flo-Track	3	ICU	64,200	
Transport Ventilators	2	ICU	30,000	
Bair Huggers	2	ICU	60,000	
Pressure Measurement Compartment	1	ICU	6,000	
Hypothermia machine (non-invasive)	1	ICU	8,000	
SUBTOTAL			924,710	

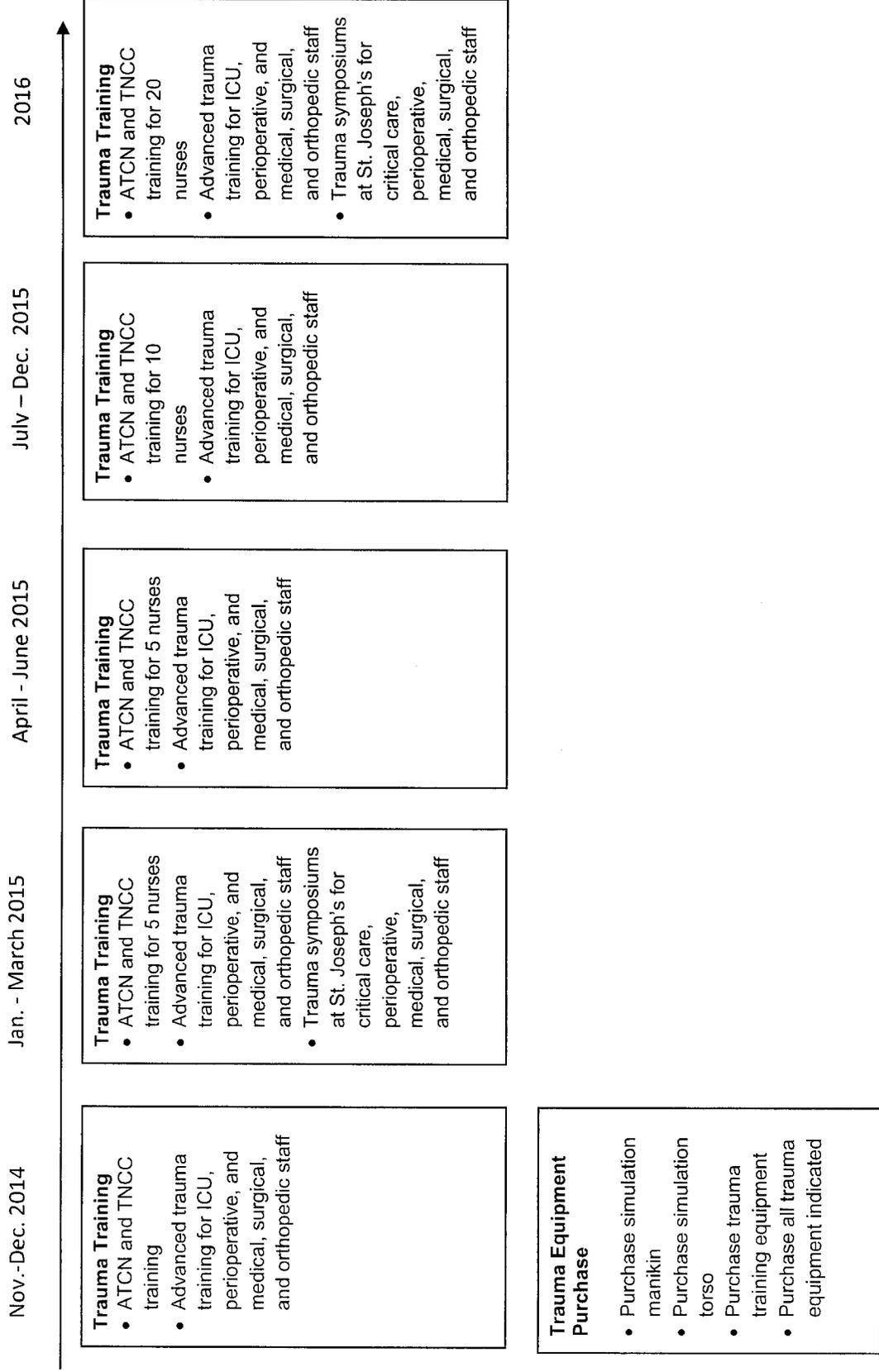
Rural Trauma Team Development Course				
Simulation Torso	1	Trauma	20,000	
Books - Outreach	330		16,500	3 classes X 30 participants each (Year 1); 4 classes x 30 participants (Year 2); 4 classes x 30 participants (Year 3) X \$50
SUBTOTAL			36,500	

Trauma Center Education				
Simulation manikin	1		60,000	
Trauma Training Equipment		All Departments		
Gaumard Trauma wound kit	1		450	
Laerdal Trauma makeup	1		450	
Gaumard Casualty wound kit	1		595	
Rapid blood/fluid infuser	1		8,094	
EVD Set Up	1		570	
Cranial Access Kit	1		287	
ED Core Staff Advanced Trauma Training		Emergency Department		
Advanced Trauma Training (ATCN course)			2,850	1 conference \$285 X 10 RNs
Advanced Trauma Training (TNCC course)			1,250	1 conference \$250 X 5 RNs
Trauma Symposium at St. Joseph's			2,000	10 RNs X \$200
ICU Core Staff Advanced Trauma Training		Critical Care		
Trauma Symposium at St. Joseph's			2,000	10 RNs X \$200
Perioperative Core Staff Advanced Trauma Training		Perioperative		
Trauma Symposium at St. Joseph's			600	3 conference X 1 RN X \$200
ATCN			855	3 conference X 1 RN X \$285
Staff Trauma Training		Telemetry		
Trauma Symposium at St. Joseph's			2,000	10 RNs X \$200
Med/Surg/Ortho Core Staff Advanced Trauma Training		Med/Surg/ Ortho		

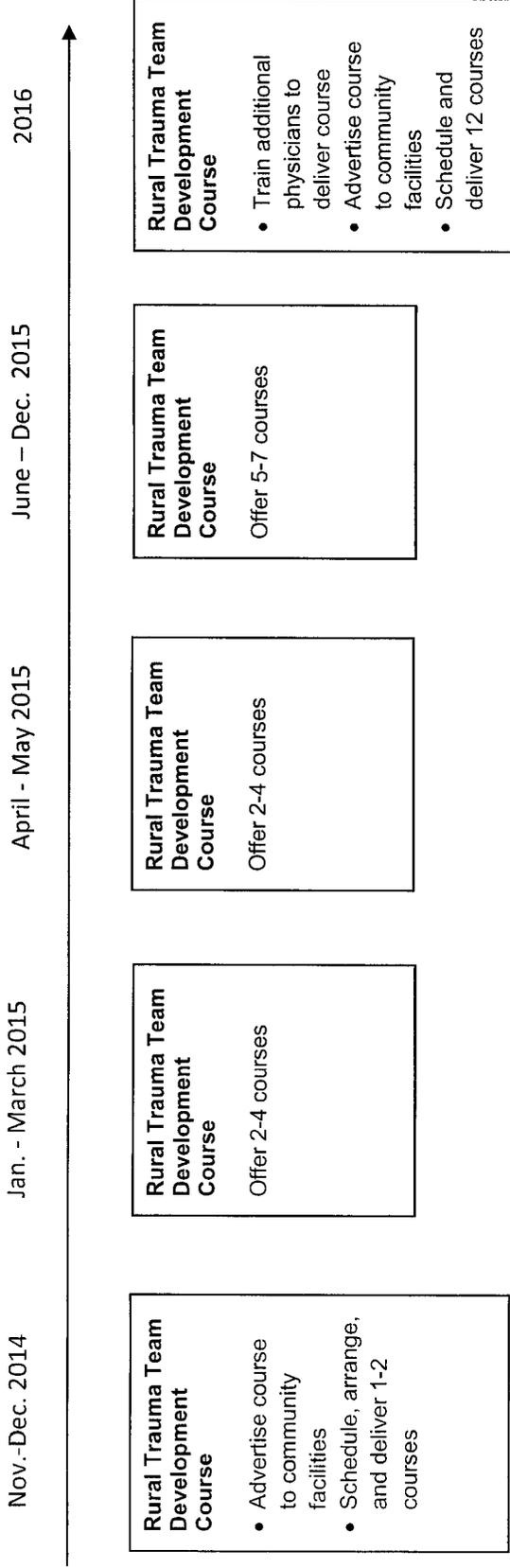
Trauma Symposium at St. Joseph's			2,000	10 RNs X \$200
Education Specialists	Education			
Trauma Symposium at St. Joseph's			1,600	8 RNs X \$200
Society of Trauma Nurse Membership			220	
SUBTOTAL			\$85,821	
TOTAL			1,047,031	

**Dignity Health Foundation East Valley
Chandler Regional Medical Center Level I Trauma Center**

TIMELINE

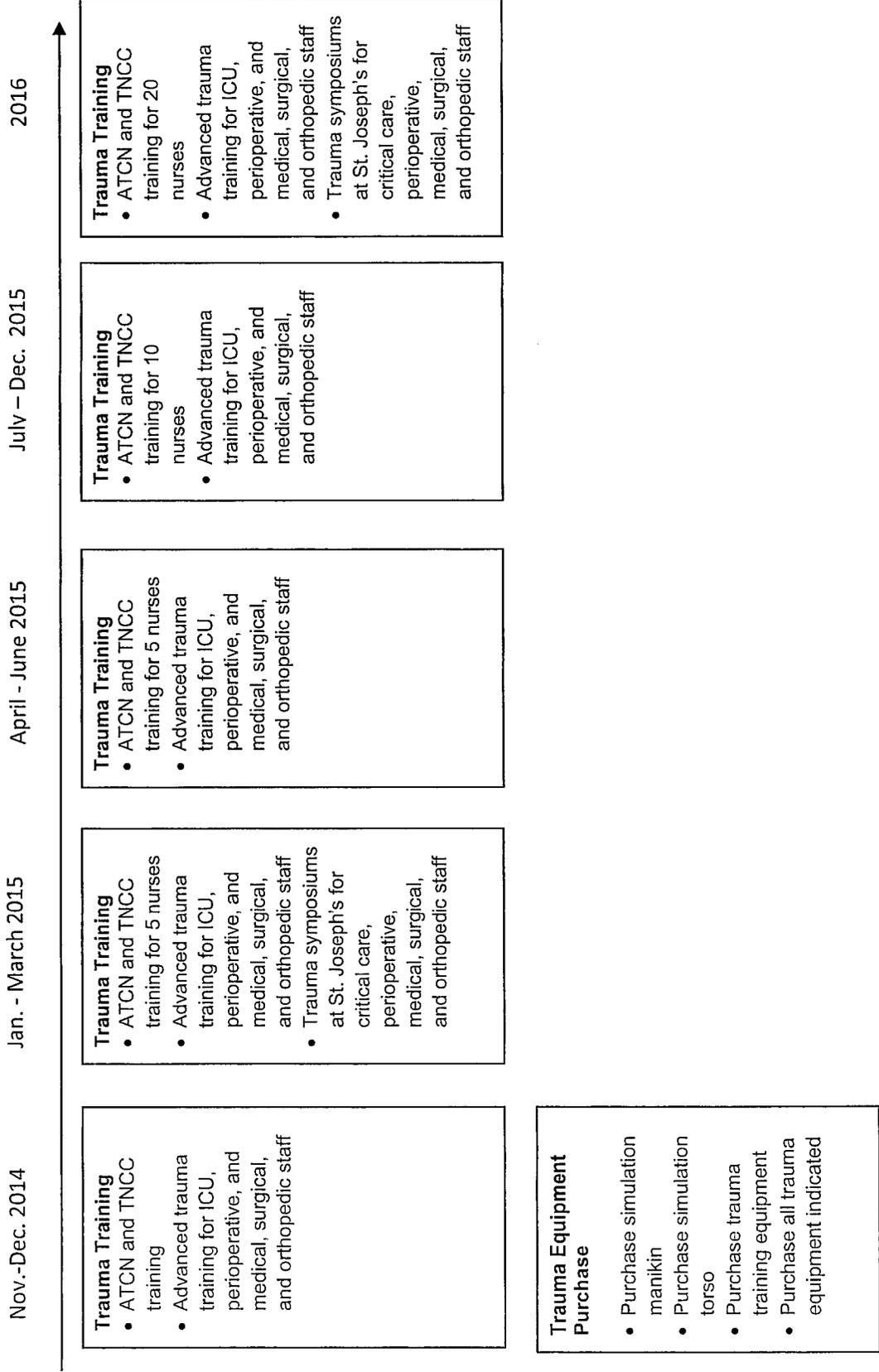


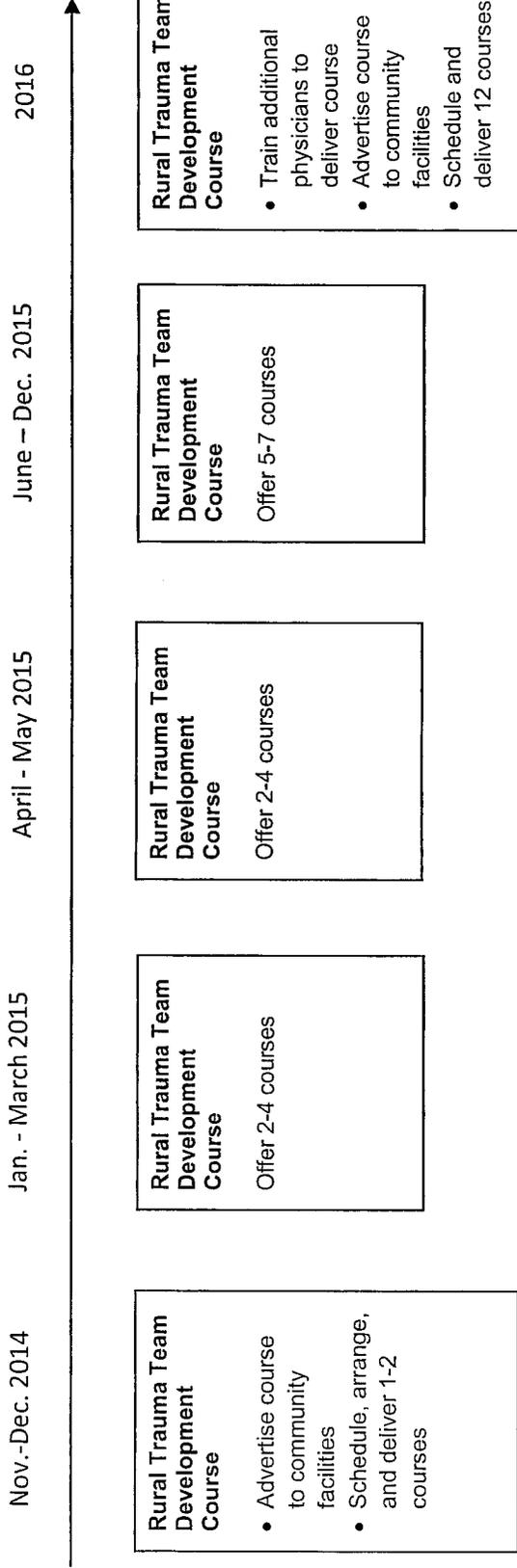
Dignity Health Foundation – East Valley
 Chandler Regional Medical Center Level I Trauma Center
 Timeline



**Dignity Health Foundation East Valley
Chandler Regional Medical Center Level I Trauma Center**

TIMELINE





After the initial start-up costs, the Trauma Center will be somewhat sustained through these commercial and government reimbursements for trauma services. However, it is not expected that these parties will completely cover the cost of providing services to the medically indigent. Since the area is severely underserved by existing trauma providers and a Level I Trauma Center expansion is long overdue, Dignity Health Foundation – East Valley will continue to build a solid fundraising program which strengthens its relationships with private and public donors, volunteers and community partners to assist in future funding for Level I Trauma Center equipment and training. Various funding strategies include, but are not limited to, mail appeals and individual, major and planned gift opportunities as well as seeking corporate and foundation support. Dignity Health is committed to the establishment of long-term sustainability and growth.

2. Reports

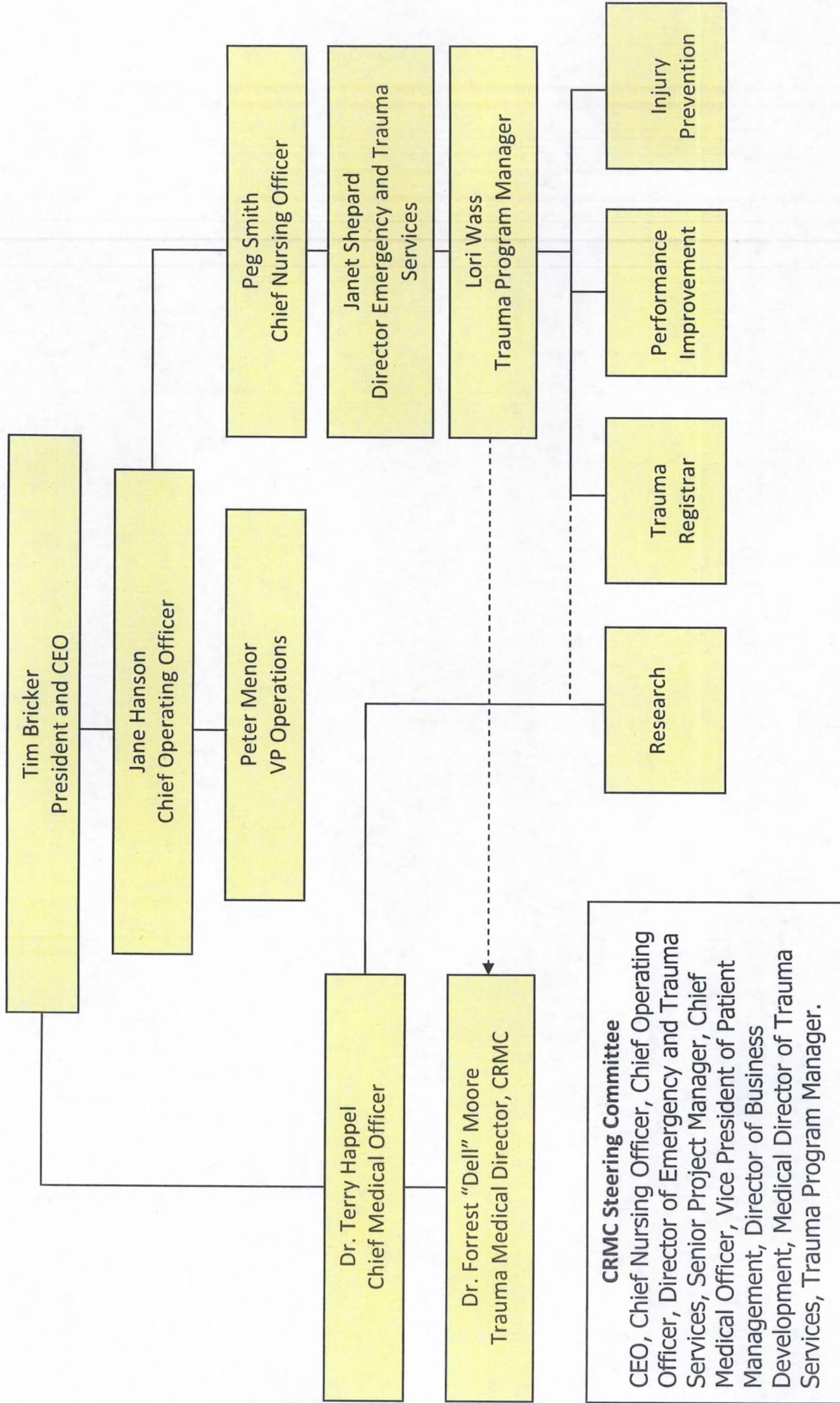
CRMC will supply Gila River Indian Community with all required reporting documentation. In addition, leadership and staff from CRMC will report on progress in person, as needed. Tours will be available for Gila River leadership and community members to learn more about the trauma facility.

**Dignity Health Foundation East Valley
Chandler Regional Medical Center Level I Trauma Center**

LIST OF FUNDERS

Dignity Health has contributed more than \$8,500,000 towards the Level I Trauma Center as described in the grant application narrative. Long term funding sources to maintain the Level I Trauma Center will be sustained through commercial and government reimbursements which include Medicare/Medicaid, AHCCCS, and health insurance reimbursement. These are also described in the grant application narrative.

Chandler Regional Medical Center- Trauma





April 29, 2014

Ms. Cheryl Pablo, Program Administrator
Grant Committee Members
Gila River Indian Community
P.O. Box 2172
Sacaton, AZ 85147

Dear Ms. Pablo and Grant Committee Members,

Havasu Regional Medical Center is pleased to support Chandler Regional Medical Center's Level I Trauma Center. We are committed to providing outstanding emergency care to our community and part of our educational program will be Chandler Regional's Rural Trauma Team Development Course.

Our ongoing mission at Havasu Regional is to meet both the needs and expectations of our patients and their families, to provide them with both timely information and heartfelt encouragement. By combining hi-tech medical equipment and state-of-the-art technology with the healing powers of a kind word and a friendly smile, we constantly seek a higher level of patient-centered care.

We look forward to participating in educational opportunities from Chandler Regional's Level I Trauma Center staff and respectfully ask for your consideration of this funding request.

Sincerely,

A handwritten signature in cursive script that reads "Danielle Stello RN".

Danielle Stello, RN
Trauma Program Manager
Havasu Regional Medical Center



City of Casa Grande Fire Department

Scott R. Miller, Fire Chief

April 28, 2014

Ms. Cheryl Pablo, Program Administrator
Grant Committee Members
Gila River Indian Community
P.O. Box 2172
Sacaton, AZ 85147

Dear Ms. Pablo and Grant Committee Members,

Casa Grande Fire Department is pleased to support Chandler Regional Medical Center's Level I Trauma Center. We are committed to providing outstanding emergency care to our community and part of our educational program will be Chandler Regional's Rural Trauma Team Development Course.

Our ongoing mission at Casa Grande Fire Department is to provide quality customer service, professional fire protection and life safety to meet the needs of the community. To meet the needs of our growing community, our department is expanding and our vision is to be on the leading edge of fire service trends.

We look forward to participating in educational opportunities from Chandler Regional's Level I Trauma Center staff and respectfully ask for your consideration of this funding request.

Sincerely,

Eric Johnson

Eric Johnson