

Joseph A. Ladapo, MD, PhD State Surgeon General

Vision: To be the Healthiest State in the Nation

Date

Via Overnight Mail

Hospital CEO Hospital Address

Dear CEO:

The Department of Health, (Department) Division of Emergency Preparedness and Community Support, Bureau of Emergency Medical Oversight, Trauma Section, has scheduled a site survey at your facility on **DATE**, to evaluate **HOSPITAL NAME** renewal application to continue as a **level** trauma center. Trauma center quality of care will be evaluated in accordance with the Department of Health Pamphlet 150-9, Trauma Center Standards, effective January 2010.

The entire survey team will meet with hospital administrators, physicians, and personnel during an opening session on the morning of **DATE**. The enclosed attachments include the day agenda, the survey team including Department staff and the surveyors' CVs. The preparation document will provide the trauma center staff guidance for the pre-on-site preparations, as well as on-site preparations.

Please complete the Electronic Pre-Survey Questionnaire (ePSQ) and return to the Department via the SharePoint website as outlined in the preparation document, no later than **60 days prior to the survey date.**

Please refer to the Department of Health trauma website, under the Trauma Center Designation tab for information regarding site survey preparation tools. <u>https://www.floridahealth.gov/licensing-and-regulation/trauma-system/trauma-center-designation.html</u>

We look forward to working with you during the survey. If you have any questions, or need additional information, please contact me at (850) 245-4054.

Sincerely,

Name Trauma System Administrator Bureau of Emergency Medical Oversight

Enclosures: Day Agenda Preparation Document List of the out-of-state survey team members and Department of Health staff Survey team's CVs

cc: Trauma Medical Director Trauma Program Manager

Florida Department of Health Division of Emergency Preparedness and Community Support Bureau of Emergency Medical Oversight 4052 Bald Cypress Way, Bin A-22 • Tallahassee, FL 32399-1701 PHONE:850-245-4440 • FAX: 850- 488-2512 FloridaHealth.gov

