



COLORADO

**Health Facilities & Emergency
Medical Services Division**

Department of Public Health & Environment

Emergency Medical and Trauma Services Branch

2015 Annual Legislative Report

July 2014 - June 2015

Submitted to the Colorado Legislature

www.coems.info

Report to the Legislature Concerning the Emergency Medical and Trauma Services System

Report on the expenditure of moneys credited to the Emergency Medical and Trauma Services Account and the quality of the emergency medical and trauma services system pursuant to Colorado Revised Statutes §§ 25-3.5-606 and 25-3.5-709.

This report identifies many of the specific responsibilities of the Colorado Department of Public Health and Environment and provides information regarding progress in ensuring all Coloradans have rapid access to emergency medical care and transportation across the state. Undoubtedly, the work done by the professional EMS and trauma providers is the most valuable resource in the emergency medical and trauma services system. This report is dedicated to the ongoing support of these caregivers.

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This report is available online at www.coems.info

Executive Summary

The emergency medical and trauma services system in Colorado provides transportation and immediate care to the ill and injured 24 hours a day, 365 days a year. Emergency medical and trauma care services are defined as the immediate health care services needed as a result of an injury or sudden illness, particularly when there is a threat to life or long-term functional abilities. In addition, today's emergency medical and trauma services systems are full partners in the broader scope of health care across Colorado communities, with involvement in non-traditional issues such as time sensitive medical syndromes and healthy community programs. Patient outcomes depend on factors such as:

- availability of appropriately trained health care providers
- availability of properly equipped and positioned rescue units and ambulances (ground and air)
- location of trauma centers and other specialized health care facilities capable of treating time-sensitive conditions such as strokes and heart attacks
- availability of well-equipped hospitals and clinics with well-trained staff members to stabilize patients who are far from tertiary care

The emergency medical and trauma services system also provides care and transportation to patients in non-emergency situations and serves as the "safety net" for many Coloradans who might not have immediate access to other health care services. Emergency medical services (EMS) agencies and trauma facilities are finding themselves more engaged in activities around community health initiatives, resource coordination and emergency management planning.

The Emergency Medical and Trauma Services Branch at the Colorado Department of Public Health and Environment is responsible for reducing morbidity and mortality resulting from sudden illness and injury by overseeing the delivery of emergency medical and trauma services as described above. The regulatory responsibilities of the branch include the following:

- certification of emergency medical services providers
- recognition of educational institutions that deliver initial EMS provider training and continuing education
- licensure of air ambulance agencies
- administration and management of grants and funding
- designation of hospitals and other health care facilities as trauma centers
- regulation of scopes of practice for EMS providers
- regulation of the roles and responsibilities of EMS medical directors

Each year, the emergency medical services agencies in Colorado transport and provide quality medical care to more than 400,000 patients. Of these patients, approximately 25 percent are trauma (injured) patients, and 75 percent are patients with medical, psychiatric or other conditions. Approximately 200 licensed ambulance services, staffed by more than 17,000 EMS providers, provide out-of-hospital health care services to ill and injured patients. Additionally, 78 hospitals and community clinics have been designated as "trauma centers" and meet established criteria and standards for providing services to the acutely injured.

One of the most significant strengths of Colorado's emergency medical and trauma services system is the involvement and participation of the community's stakeholders. The State Emergency Medical and Trauma Services Advisory Council is a 32-member "Type II" advisory board made up of EMS and trauma system experts representing hospitals, public and private EMS agencies, fire service-based EMS and rescue agencies, air ambulance providers and local government officials. The council is

Executive Summary continued

statutorily required to review and recommend rules for promulgation by the Board of Health, recommend trauma center designation, advise the department on all funding matters related to EMS and trauma and provide resources dedicated to the care and transportation of the ill and injured. The partnership between the department, the council and the stakeholder community is very productive, and the department enjoys the benefit of this expert advice.

The department also benefits from another “Type II” advisory board established by House Bill 10-1260. The Emergency Medical Practice Advisory Council provides the department expert advice related to technical scope of care for EMS providers and advises on EMS medical director requirements. This is an 11-member council representing urban and rural EMS medical directors and providers. It recommends changes to EMS provider scope of practice rules for promulgation by the department’s chief medical officer and makes recommendations regarding waivers to the scope of practice rules for medical directors.

Colorado’s Regional Emergency Medical and Trauma Advisory Councils are equally important to the state’s emergency medical and trauma services system. These councils are created in statute to provide the critical link between the state’s 64 counties and the clinics, hospitals and EMS provider agencies within each region. This system provides localized support for the education, recruitment and retention of personnel, technical assistance to agencies and vital communication between state agencies and local constituents. During the past year, the regional councils have successfully created new biennial plans; supported multi-agency equipment grants (to take advantage of bulk pricing); built on the developing regional medical direction initiative; and represented the needs and interests of urban, rural and frontier constituents to the department and the state councils. Representatives from each region continue to meet quarterly with state council and department staff members to help ensure coordination and collaboration between state, regional and local partners.

Emergency Medical and Trauma Services Branch staff members strive to maintain open and effective communication with internal and external customers on a daily basis. Branch staff members present at a variety of conferences and trainings and represent department interests in external stakeholder groups. A weekly email update is sent to stakeholders and includes hot topics and newly released information as well as upcoming meetings and training events. The branch’s website, located at coems.info, provides useful and timely information including rules and regulations, applications, forms and access to the web portal. Additionally, the website allows people to check the current certification status of Colorado EMS providers, upload transport agency patient care reports and submit grant funding applications and quarterly progress reports.

The Emergency Medical and Trauma Services Branch is funded primarily from the Emergency Medical Services Account of the Highway Users Tax Fund based on a \$2 fee on each motor vehicle registered in the state. Funding is supplemented by the collection of trauma center designation fees, air ambulance licensure fees, provisional EMS provider certification fees and a federal grant to support emergency care for children. Staff members work diligently to ensure these resources are applied in the most effective manner possible. These efforts have resulted in the successful implementation of new funding approaches that more adequately support the needs of Colorado’s emergency medical and trauma services system in the 21st century.

Key Accomplishments in Fiscal Year 2015

- The department continues to use the funds collected through the \$2-per-motor vehicle registration fee in the EMS Account of the Highway Users Tax Fund to support Colorado's EMS and trauma system. Approximately \$6.7 million was distributed to support EMS and trauma statewide.
- Anticipating the 2015 transition to the International Classification of Diseases, Tenth Revision (ICD-10), the department provided training to trauma stakeholders on trauma registry reporting and ICD-10 coding. Additionally, the top 30 ICD-9 diagnoses codes were mapped to comparable ICD-10 coding examples to facilitate the transition.
- The department supported both statewide and regional continuous quality improvement efforts by analyzing data and preparing reports for stakeholders on a variety of topics, including but not limited to: patient volume reports for Level I, II and III trauma centers; trauma registry and EMS data quality/validity reports; EMS procedures and medications; ATV and motor vehicle related events; emergency department visits; volumes by catchment areas; alcohol and drug related events; co-morbidities; and age and gender adjusted outcomes.
- The department continued implementation of SB 13-225, which required the establishment of two governor-appointed advisory boards, one on stroke and the other on ST-Elevation Myocardial Infarction (STEMI). The two boards met multiple times during fiscal year 2015. The STEMI Task Force, which sunset on Aug. 1, 2015, drafted its recommendations in a final report to the legislature that was filed by July 31, 2015.
- The Colorado Resource for EMS and Trauma Education (CREATE) program continued to demonstrate success in fiscal year 2015. It disbursed funds in the form of education grants to help offset tuition, book and fee costs, with 877 students trained using support from these grant funds.
- The Governor signed into law HB 15-1015 on May 8, 2015, making Colorado one of the first states to adopt the Recognition of EMS Personnel Licensure Interstate Compact (REPLICA). Once ten states join, the compact will simplify the complexities of interstate licensing and certification of EMS Providers by allowing immediate recognition of certification in all participating states.
- Emergency medical services system consultations were conducted at the request of the Custer, Moffat, Montrose and Ouray county governments during the past year. The department worked collaboratively with regional and local stakeholders to assemble a team of practicing EMS professionals from communities across the state to assist these counties in analyzing their current EMS systems and developing strategies for improvement.
- The department committed significant resources to implementing an online certification system for EMS providers. The Online Application Tracking Hub (OATH) is a system that automates the application process for EMS providers to become certified and recertified, allows medical directors and education programs to confirm continued education and skills assessment, and provides an online lookup for the public to view EMS provider certification levels and status. The online system was rolled out in November 2014 and has been widely acclaimed as a success by EMS providers and service agencies.
- In order to reach a wider cross-section of stakeholders, a quarterly meeting of both Type II boards was held in alternate locations to the typical Front Range meeting location. The October 2014 State Emergency Medical and Trauma Services Advisory Board was held in Grand Junction, and the November 2014 Emergency Medical Practice Advisory Council was held in Keystone.

Section Updates

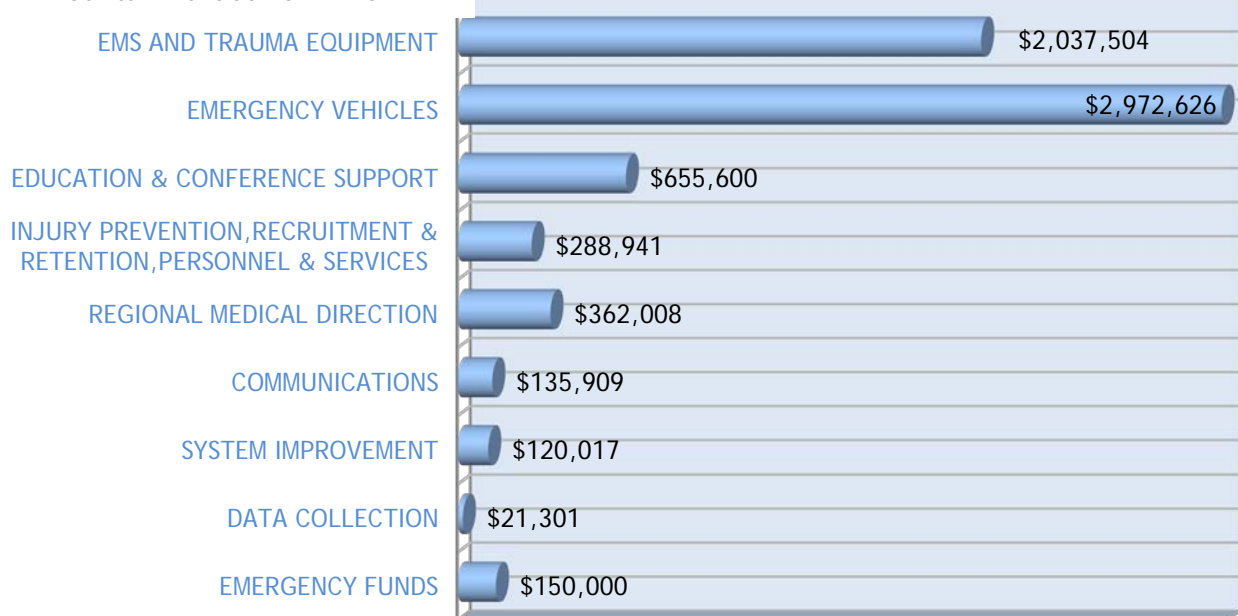
Funding Section

The fiscal year 2016 budget from the EMS Account for the EMS and Trauma Funding Program is \$6,693,896 and includes the statutory allocations of a minimum of \$150,000 for emergency medical personnel training and at least \$100,000 reserved for emergency grant awards.

Provider grants: The funding program maximizes impact on Colorado’s EMS and trauma system by leveraging provider grant state dollars with local matching dollars to ensure buy-in and support at the local level. Provider grant categories include ambulances/vehicles, communications, data collection, equipment, injury prevention, recruitment/retention, personnel/services and other. A total of \$5,456,281 was awarded in provider grants following a competitive scoring process that used a 50-point scoring tool. A list of the awards is found in [Attachment A](#).

System improvement funding: The funding program also provides support for regional and statewide projects. System improvement categories include technical assistance, system improvement, Regional Emergency Medical and Trauma Advisory Council operations and conference/forum support. Fiscal year 2016 is the second year of three in which funds are being set aside specifically for regional medical direction. A total of \$637,616 was awarded in system improvement funding following a competitive scoring process that used a 50-point scoring tool. This total includes \$362,008 distributed to the 11 regions to continue development of consistent, regionally relevant medical direction. A list of the awards is found in [Attachment A](#).

Amounts Awarded for FY16



Section Updates continued

Year-Round Education Opportunities

The Colorado Resource for EMS and Trauma Education (CREATE) program was successfully launched in July 2010 through the Colorado Rural Health Center. The CREATE program was developed to improve access to funding support for educating EMS and trauma providers on a continuing basis throughout each fiscal year, as opposed to the traditional provider grants program that was only open for applications one time per year. The CREATE program was funded at \$500,000 for fiscal year 2016 due to the continued need throughout the state, which significantly exceeds the \$150,000 statutory minimum. For fiscal year 2015, a total of \$378,608 was disbursed in the form of education grants to help offset tuition, book and fee costs, and 877 students were trained using support from these grants.

Trauma Section

The trauma system in Colorado was formally authorized in legislation in 1995. Since that time, much effort has gone into three primary and inter-related activities: trauma designation for acute care facilities, trauma system rule development and trauma system assessment.

Trauma Designation

Trauma center designation again was the most visible activity of the Trauma Section. All of Colorado's licensed health care facilities receiving trauma patients by ambulance or other means must participate in the trauma system by agreeing to follow rules regarding the care of those patients. Facilities may choose to be "non-designated" and thus agree not to keep any trauma patients with complex injuries. Facilities that agree to care for trauma patients receive site reviews and are designated by the state as Level I (highest) through Level V trauma centers.

Fiscal year 2015 saw five new trauma centers designated, continuing a multi-year trend. The new facilities included three "free-standing emergency departments":

- Colorado Canyons Hospital in Fruita (formerly known as Family Health West) became a Level IV.
- Porter Hospital in Englewood became a Level III.
- St. Anthony North 84 Avenue Emergency Department in Westminster became a Level IV.
- Saddle Rock Emergency Room in Aurora became a Level IV.
- Centennial Medical Plaza in Centennial became a Level IV.

One hospital, Haxtun Hospital District, did not renew its Level IV designation. The cumulative result is that the number of Level III trauma centers increased from 20 to 21 during fiscal year 2015, and the number of Level IVs increased from 35 to 38 in the same time period.

- As of June 30, 2015, there were 78 designated trauma centers in Colorado, with the majority of acute care general hospitals and critical access hospitals participating. See [Attachment B](#) for a list of trauma centers in Colorado.
- During the fiscal year, there were 37 designation reviews completed by a team of physicians, nurses and Trauma Section staff members.
- Additionally, staff members provided five on-site technical assistance visits, four revisits to check on compliance at previously reviewed facilities and two day-long trainings for trauma nurse coordinators reaching over 25 participants, almost all from rural areas.

Section Updates continued

Trauma Regulation

Rule development is another primary program function and is necessary to implement the concepts expressed in the emergency medical and trauma system legislation. Rules are under constant scrutiny to determine whether they reflect national standards, protect the public's health, are measurable and make sense for both the patient and the regulated community.

During fiscal year 2015 there were no changes to the trauma rules; however, important work was done to prepare for a major rule revision in fiscal year 2016. 6 CCR 1015-4, Chapter One of the trauma rules concerns trauma registry data collection activities. The department convened a workgroup at the request of the Statewide Trauma Advisory Committee to re-write trauma Chapter One. Major changes have been proposed through a public vetting process and are likely to be adopted and implemented in fiscal year 2016.

Trauma System Assessment

Trauma system assessment is the final piece of program development activity. Program staff members continually work with other section, department and national resources to assess and improve the program's effectiveness.

In addition to the rule change mentioned above, trauma staff members worked with stakeholders through the Statewide Trauma Advisory Committee to begin an important discussion regarding the scope of care offered at different level trauma centers. The first topic to be addressed is what types of orthopedic injuries can be safely cared for at Level IV trauma centers and what are the minimal resources required to provide that care. A similar discussion will take place for Level III facilities and for other specialty services including general surgery and neurosurgery.

STEMI and Stroke Systems of Care

In fiscal year 2013, Senate Bill 13-225 was passed by the Colorado Legislature and signed into law by Governor John Hickenlooper. The legislation called for creation of two governor-appointed advisory groups within the Colorado Department of Public Health and Environment: a 15-member ST-Elevation Myocardial Infarction (STEMI) Task Force and an 18-member Stroke Advisory Board. Implementation of this legislation is being carried out by the Emergency Medical and Trauma Services Branch because of its experience with EMS and trauma system development and because of the similarities in approach to dealing with any time-sensitive syndrome.

Each advisory group was charged with studying and making recommendations for developing a statewide plan to improve the quality of care for its respective population (STEMI or stroke patients). The groups were directed to study the creation of a state database/registry and public access to non-confidential information in that database/registry, plan to encourage coordination of services between rural and urban hospitals and consider whether a state designation of STEMI/stroke centers is appropriate or needed to assure access to quality care for Colorado residents with STEMI or stroke.

Data from the EMS system has been used extensively to describe the scope of prehospital care provided to potential STEMI/stroke patients in Colorado. In addition, staff members used the Colorado Hospital Discharge Dataset to examine patients with either a stroke or heart attack diagnosis.

The two boards met multiple times during fiscal year 2015. The Stroke Advisory Board issued its annual report to the legislature prior to the Jan. 1, 2015, deadline. The STEMI Task Force, which sunset Aug. 1, 2015, developed a final report to the legislature that was filed by July 31, 2015.

Section Updates continued

Trauma Registry and EMS Data Collection Program

Comprehensive data systems are essential to effectively plan, implement and evaluate a statewide emergency medical and trauma care system. Critical components include the Colorado Trauma Registry and the Colorado EMS Database, as well as appropriate resources and personnel for efficient data management, analysis and use of the data to evaluate the delivery of patient care.

Evaluation of the Trauma System

The Colorado Trauma Registry is a unique database designed to capture information on the care of trauma patients and on the leading causes of injury hospitalizations and deaths. The data in the Colorado Trauma Registry are used not only to evaluate the effectiveness of the trauma system, but also to identify and monitor the impact of injury prevention strategies. Each licensed hospital facility or clinic designated as a trauma center is required to submit a limited set of patient-specific information to the Colorado Trauma Registry. These data, combined with hospital discharge data and emergency department data from the Colorado Hospital Association and death certificate data from the department's Center for Health & Environmental Data, are used to evaluate and monitor the emergency medical and trauma care system's response to trauma patients and their needs. The Colorado Trauma Registry currently contains over 420,000 records. In response to requests by trauma stakeholders and in alignment with the National Trauma Data Standards (see www.ntdsdictionary.org), developed by the American College of Surgeons, staff members continue to update the Colorado Trauma Registry data elements and response options and provide technical assistance to users to improve the validity of trauma data reporting.

In fiscal year 2015, Colorado Trauma Registry data were used to evaluate several components of the trauma system including:

- Injury severity and length of stay reports
- Injuries resulting from falls
- Reports by state, region, county, and de-identified hospitals on volumes and outcomes
- Pediatric care (e.g., number of chest CTs)
- Geriatric events (e.g., hospitalizations resulting from falls)
- Injuries by catchment areas
- State-level data to assist in a geospatial EMS triage study
- Frequency of injury types and associated mechanisms
- Annual patient volume reports for Level I, II and III trauma centers
- Data for consultative visits
- ATV and motor vehicle related events
- Inpatient admissions
- Alcohol and drug related events
- Frequency of events including: diagnoses, procedures; spine, pelvic, chest and abdomen injuries; non-surgical, burn and orthopedic services

Section Updates continued

Evaluation of the Emergency Medical Services System

Collection and analysis of information from EMS agencies allow for the evaluation of care provided prior to arrival at the hospital for both medical and trauma patients. Licensed transporting agencies are required to collect the national elements subset of the National Emergency Medical Services Information System dataset (See www.nemsis.org.) and download this into the Colorado EMS Information System. These national data standards for EMS data collection were developed by the National Highway Traffic Safety Administration. Approximately 85 percent of the ambulance agencies registered in the Colorado EMS Information System were routinely downloading data during the last two quarters of fiscal year 2015. Since January 2007, ambulance agencies have submitted reports on more than 3.4 million EMS incidents. Staff members continue to provide technical assistance to users to improve the validity of the EMS data reporting system. Looking forward, a Data Task Force has been developed and is studying the steps necessary to transition to a new data collection system based on a Version 3 Data Standard of the National Emergency Medical Services Information System dataset (see <http://nemsis.org/v3/index.html>) over the next 15 months.

In fiscal year 2015, EMS data were used to evaluate several components of the emergency medical services care system, including the following:

- EMS agency data submission, timeliness, volume and completion rates
- EMS events by age groups, specific geographic area, etc.
- Vital signs, procedures
- Air medical transports
- EMS personnel types by county
- EMS Provider use of acts and medications
- Cardiac and stroke events
- Events by destination (e.g., number of events resulting in transport to acute care facilities)
- Primary/secondary impressions

Professional Standards Section

The department is the state agency responsible for the certification of EMS providers in Colorado and the oversight of EMS education programs that provide both initial and continuing education courses. As of June 30, 2015, there were 17,144 EMS providers certified in Colorado. During the year, the department processed approximately 6,250 applications for certification or certification renewal for EMS providers. This was a significant increase over prior years with the majority of the increase occurring after the November 2014 implementation of a new online application process that replaced the previous paper-based process. EMS provider practice levels include Emergency Medical Technician (EMT), Advanced Emergency Medical Technician (AEMT), Emergency Medical Technician-Intermediate (EMT-I) and Paramedic.

Number of certified EMS providers as of June 30, 2015:

17,144	12,402	119	559	4,064
Total EMS providers	EMT	Advanced EMT	EMT-Intermediate	Paramedic

The number of paramedics includes 112 who are endorsed to provide critical care acts and medications.

Section Updates continued

Investigation and Enforcement

The department continues to oversee discipline and enforcement activities for EMS providers. During fiscal year 2015, the department instituted 21 enforcement actions against certified EMS providers. Additionally, the department completed 861 background investigations on new and renewal applications, and investigated and closed 13 complaints.

Medical Direction

Medical oversight of EMS practice in Colorado occurs at the EMS agency level, as legislative requirements state that all EMS providers have a physician medical director in order to provide any direct patient care. Currently, the Emergency Medical Practice Advisory Council and Colorado regional medical directors continue to focus on system quality improvements.

Regional medical direction involves a coordinated effort among Colorado's 11 Regional Emergency Medical and Trauma Advisory Councils (RETACs) and was developed to:

- Facilitate communication and cooperation among EMS agency medical directors, allowing them to share ideas, discuss problems and communicate within their peer groups.
- Provide resources for agency medical directors to enhance their ability to perform their job functions.
- Facilitate improved efficiency in protocol development and delivery of education.
- Provide a forum for the resolution of system issues at both local and regional levels.
- Create opportunities for continuous quality improvement at both the EMS agency level and regional levels, provide benchmarks and best practices and allow for the monitoring of outcomes to guide the continued provision of quality care.

The regional medical direction initiative allows each of the 11 regions within the state to play an integral part in developing medical direction that is consistent with standards across the state and meet local needs. The regional medical directors meet quarterly to share and discuss current local issues as well as best practices in regional medical oversight.

The State Emergency Medical and Trauma Services Advisory Council approved allocating \$363,000 in grant funds each year for three years for the purpose of funding regional medical direction. Guaranteed funding eliminates the need for regions to submit annual competitive grant requests, allowing them to concentrate on meeting program deliverables and outcomes. Each year, funding is based upon performance reviews of the regions' abilities to meet previous year's defined deliverables.

To ensure that these public funds are being well spent, the program must demonstrate that it creates added value for the Colorado EMS and trauma system. Therefore, all EMS agency medical directors and EMS agency clinical coordinators will be surveyed several times throughout the three year program to determine what value they receive from regional medical direction. The initial survey, completed in early 2015, demonstrated the importance of communication among EMS medical directors and the value of continuous quality improvements as a tool for agency medical directors. Overall, the consensus of the agency medical directors who responded to the initial survey was that the regional medical direction initiative was a valuable resource that facilitated their ability to provide better medical oversight of their EMS agencies and ultimately improve EMS care throughout Colorado.

Section Updates continued

Successes of the regional medical direction initiative include:

- Ten of the eleven regions now have regional protocols, and many of the regions are working together to develop multi-region protocols.
- A quarterly newsletter facilitates communication between the regional medical directors and their regions' EMS agency medical directors. In addition, all regions now have regular meetings of their agency medical directors to facilitate the sharing of best practices and the discussion of changes in EMS practice, state and national benchmarking, local practice and operational issues and ways to improve medical oversight.
- Several regions have begun regional continuous quality improvement programs to evaluate care within their region.
- Many of the regions have developed education and training programs that are shared among the agencies within the region.

Emergency Medical Practice Advisory Council

During fiscal year 2015, the Emergency Medical Practice Advisory Council reviewed and finalized recommendations for changes to the rules pertaining to EMS practice and medical director oversight that implemented 2014 legislation requiring the department to establish an endorsement for paramedics to provide a critical care level of care.

The council continued to effectively meet its obligation to review and make recommendations on requests for waivers to the EMS practice rules by EMS agency medical directors. As of June 30, 2015, there were 379 active waivers covering 58 waived acts and/or medications.

Air Ambulance Licensing

In fiscal year 2015, the department licensed 19 fixed and rotor wing air ambulance services providing transportation to patients in Colorado. Five of these services have corporate headquarters in Colorado. There are 28 fixed and rotor wing bases in Colorado with a total of 90 aircraft, and there are additional out-of-state services with bases situated near the state borders, generally within an hour flight distance. A map of licensed air ambulance services can be found at www.coems.info.

EMS System Consultative Reviews

Emergency medical services system consultations were conducted at the request of the Custer, Moffat, Montrose and Ouray County governments during the past year. The department worked collaboratively with regional and local stakeholders to assemble a team of practicing EMS professionals from communities across the state to assist these counties in analyzing their current EMS systems and developing strategies for improvement. After each review, department staff members and the review team met with local officials and stakeholders to provide a formal report on each county's system assessment and recommendations for enhancing their systems.

Related Activities

Communication Systems

Public access in the emergency medical services setting is defined as the ability of an individual to secure prompt and appropriate emergency medical care. All counties in the state have E911 telephone services.

Related Activities continued

The existing Colorado digital trunked radio system provides statewide, two-way interoperable communications to state, local, tribal and a limited number of federal government agencies over a shared communication platform. The digital trunked radio system in Colorado consists of 216 remote tower sites, more than 1,000 agencies and 81,000 subscriber units (individual radios) spread across five zones. The system carried more than 103 million calls in calendar year 2014.

Local agencies provide additional funding to add infrastructure to the overall digital trunked radio system. Several digital trunked radio tower sites are scheduled to be built in the near future.

On April 24, 2015, Governor Hickenlooper signed SB 15-234 that included funding for the Public Safety Communications Network to replace the statewide legacy microwave infrastructure.

The Emergency Medical and Trauma Services grants program continues to help improve and expand communication infrastructure throughout the state. Funding has provided equipment to agencies so they can use the digital trunked radio system and keep other legacy communication systems operational.

Injury Prevention

Injury prevention efforts at the state level are coordinated through the Violence and Injury Prevention-Mental Health Promotion Branch in the Prevention Services Division at the department. The branch builds capacity and sustainability at the community, regional and state levels by providing culturally appropriate programming and quality technical assistance and by maintaining diverse community partnerships.

During fiscal year 2015, the Violence and Injury Prevention-Mental Health Promotion Branch continued to collaborate with the Emergency Medical and Trauma Services Branch. The two branches share information and coordinate priorities through the efforts of a joint advisory committee, the Injury Community Planning Group, which meets at least quarterly. Since all trauma centers are required to be involved in injury prevention activities, trauma center staff members regularly attend this meeting to look for ways to collaborate on prevention programs. Many trauma centers are actively involved in current collaborative efforts on senior fall prevention, suicide prevention, booster seat use and safe driving initiatives. Department staff members provide coordination for coalitions and technical support in program planning and evaluation for these efforts. In addition, this group is a source of information on training and funding opportunities.

Funding for the department's injury prevention activities primarily comes through grants and cooperative agreements between the department and federal agencies such as the Centers for Disease Control and Prevention and the Administration for Community Living. Limited state general funds are provided to the Office of Suicide Prevention for its activities and to the Colorado Child Fatality Prevention System. State funds also have been distributed through the Emergency Medical and Trauma Services Branch's grants program to providers interested in implementing local injury prevention programs.

During fiscal year 2015, the Violence and Injury Prevention-Mental Health Promotion Branch continued to collaborate with the Emergency Medical and Trauma Services Branch on the Injury Prevention Winnable Battles, which aim to decrease teen motor vehicle fatalities, increase adult seatbelt use and decrease hospitalizations related to older adult falls by 2016. One Regional Emergency Medical and Trauma Advisory Council (RETAC) and 16 trauma centers received a Violence and Injury Prevention Program of Excellence Award for their work in older adult fall prevention activities. Additionally, the Violence and Injury Prevention-Mental Health Promotion

Related Activities continued

Branch partnered with the Colorado Department of Transportation to host the first annual *Improving Colorado's Road Health Summit*, a two-day conference that featured topics such as marijuana impaired driving, occupant protection, distracted driving and teen motor vehicle safety. Over 160 participants attended the summit, including many EMS and trauma partners.

Additionally, the Violence and Injury Prevention-Mental Health Promotion Branch provided support for hospital systems to train and implement *Stepping On*, an evidence-based older adult falls prevention program that has been shown to decrease falls risk among older adults by 70 percent. There are three hospital-based *Stepping On* master trainers in Colorado who are training leaders within their hospital systems and communities to facilitate the eight-week program for older adults. This year, these master trainers trained 53 hospital staff members as *Stepping On* leaders. Between July 1, 2014, and June 30, 2015, the leaders provided 35 *Stepping On* classes, reaching 425 older adults.

Emergency Medical Services for Children

The department is authorized under CRS 25-3.5-204 to establish a program and receive funds to improve the quality of emergency care to pediatric patients throughout the state, including a component to address public awareness of pediatric emergencies and injury prevention. The Emergency Medical and Trauma Services Branch was re-awarded a federal EMS for Children State Partnership Grant in 2014 that continues through early 2017. A cooperative agreement is in place with the Pediatric Emergency Medicine Section of the University of Colorado, School of Medicine to implement this grant. This partnership between state institutions leverages the clinical expertise and research capacity of the University of Colorado with the regulatory and program expertise of the department.

In the past year, the program collaborated extensively with Children's Hospital Colorado to deliver mobile simulation-based training to over 420 EMS and hospital providers in communities across the state. The program is also working with the designated family representative to improve emergency clinician access to information on children with special healthcare needs. The program also supported educational events produced by the Rocky Mountain Hospital for Children, Denver Health and Children's Hospital Colorado and worked with the department to offer a grant incentive category for pediatric equipment needs. Finally, a program to better support instructors of pediatric emergency care across the state was initiated in the spring of 2015 that will be continuing into the next fiscal year.

Fiscal Year 2016 Public Notice of Funding Awards for Provider Grants and System Improvement Requests								
Applicant Name	Category	Score	Match (%)	Total Project Amt	Applicant Match	State Amount Requested	ProvGr Awarded	Sys Imp Awarded
Adams County Fire Protection District	Ambulance and Other Vehicles	44.10	50%	\$159,035.00	\$79,517.50	\$79,517.50	\$79,286.50	
Agate Fire Protection District	Ambulance and Other Vehicles	43.17	10%	\$163,811.00	\$16,381.10	\$147,429.90	\$147,429.90	
Baca Grande Property Owners Association	Ambulance and Other Vehicles	43.90	50%	\$186,000.00	\$93,000.00	\$93,000.00	\$85,110.00	
Banner Health North Colorado Medical Center Paramedic Services	Ambulance and Other Vehicles	38.40	50%	\$198,763.00	\$99,381.50	\$99,381.50	\$90,800.50	
Beulah Fire Protection and Ambulance District	EMTS Equipment	46.17	50%	\$4,363.35	\$2,181.68	\$2,181.67	\$2,181.67	
Beulah Fire Protection and Ambulance District	Pediatric Incentive Equipment	42.67	25%	\$1,229.70	\$307.43	\$922.27	\$659.78	
Burlington Fire Protection District	EMTS Equipment	41.90	50%	\$5,775.00	\$2,887.50	\$2,887.50	\$2,887.50	
Byers Fire Protection District No. 9	Ambulance and Other Vehicles	43.32	50%	\$156,000.00	\$78,000.00	\$78,000.00	\$78,000.00	
Catholic Health Initiatives Colorado Foundation	EMTS Equipment	38.50	50%	\$81,379.09	\$40,689.55	\$40,689.54	\$40,689.54	
Central Mountains RETAC	Regional Medical Direction	NA	0%	\$33,000.00	\$0.00	\$33,000.00		\$33,000.00
Chaffee County Emergency Medical Service	Technical Assistance	40.67	0%	\$23,423.80	\$0.00	\$23,423.80		\$23,423.00
Cheyenne County (Plains to Peaks RETAC)	Regional Medical Direction	NA	0%	\$33,000.00	\$0.00	\$33,000.00		\$33,000.00
Cheyenne County (Plains to Peaks RETAC)	EMTS Equipment	38.83	50%	\$91,599.42	\$45,799.73	\$45,799.69	\$40,994.28	
Cheyenne County Ambulance Service	Ambulance and Other Vehicles	45.30	50%	\$150,000.00	\$75,000.00	\$75,000.00	\$75,000.00	
Cheyenne County Ambulance Service	Communications	42.40	50%	\$12,000.00	\$6,000.00	\$6,000.00	\$6,000.00	
Cheyenne County Ambulance Service	Data Collection	43.13	50%	\$8,087.50	\$4,043.75	\$4,043.75	\$3,733.28	
CHI CO Foundation	Injury Prevention	43.15	50%	\$6,254.00	\$3,127.00	\$3,127.00	\$3,127.00	
City of Colorado Springs Fire Department	Communications	31.58	50%	\$881,412.00	\$440,706.00	\$440,706.00	\$0.00	
City of Pueblo	Pediatric Incentive Equipment	41.75	25%	\$9,719.85	\$2,429.97	\$7,289.88	\$5,793.64	
City Of Yuma Ambulance Service	Ambulance and Other Vehicles	43.70	50%	\$201,881.00	\$100,940.50	\$100,940.50	\$78,939.00	
Costilla County Ambulance	Ambulance and Other Vehicles	44.81	50%	\$173,220.00	\$86,610.00	\$86,610.00	\$85,110.00	
County of Washington	Ambulance and Other Vehicles	44.20	50%	\$89,264.00	\$44,632.00	\$44,632.00	\$44,632.00	
Crystal Park Metropolitan District	Ambulance and Other Vehicles	38.90	10%	\$80,000.00	\$8,000.00	\$72,000.00	\$56,916.00	
Crystal Park Metropolitan District	Communications	46.00	10%	\$18,368.00	\$1,836.80	\$16,531.20	\$16,531.20	
Cunningham Fire Protection District	EMTS Equipment	42.63	50%	\$31,089.05	\$15,544.53	\$15,544.52	\$15,544.53	
DeBeque Fire Protection District	EMTS Equipment	47.18	50%	\$12,140.00	\$6,070.00	\$6,070.00	\$6,070.00	
Del Norte Fire Department	Ambulance and Other Vehicles	36.83	10%	\$30,000.00	\$3,000.00	\$27,000.00	\$0.00	
Denver Fire Department	EMTS Equipment	33.20	50%	\$27,000.00	\$13,500.00	\$13,500.00	\$0.00	
Denver Health and Hospital Authority	EMTS Equipment	32.52	50%	\$1,290,974.53	\$645,487.30	\$645,487.23	\$0.00	
Douglas County Search and Rescue Team, Inc.	EMTS Equipment	42.90	10%	\$4,836.00	\$483.60	\$4,352.40	\$4,352.40	
Dove Creek Volunteer Ambulance Service	Personnel and Services	38.07	50%	\$84,821.92	\$42,410.96	\$42,410.96	\$42,410.96	
East Phillips County Hospital District	EMTS Equipment	38.67	50%	\$34,462.26	\$17,231.13	\$17,231.13	\$17,231.13	
East Phillips County Hospital District	Pediatric Incentive Equipment	40.50	25%	\$2,790.64	\$697.67	\$2,092.97	\$2,092.97	
El Paso County Medical Society	Personnel and Services	29.90	50%	\$6,000.00	\$3,000.00	\$3,000.00	\$0.00	

Fiscal Year 2016 Public Notice of Funding Awards for Provider Grants and System Improvement Requests								
Applicant Name	Category	Score	Match (%)	Total Project Amt	Applicant Match	State Amount Requested	ProvGr Awarded	Sys Imp Awarded
Elizabeth Fire Protection District	Personnel and Services	43.70	50%	\$77,760.00	\$38,880.00	\$38,880.00	\$38,880.00	
Elk Creek Fire Protection District	EMTS Equipment	40.97	50%	\$21,097.00	\$10,548.50	\$10,548.50	\$10,548.50	
Foothills RETAC	Regional Medical Direction	NA	0%	\$33,000.00	\$0.00	\$33,000.00		\$33,000.00
Front Range Fire Rescue Authority	Ambulance and Other Vehicles	41.00	50%	\$171,333.00	\$85,666.50	\$85,666.50	\$84,666.50	
Gateway-UnawEEP Fire Protection District	Communications	43.35	10%	\$2,168.15	\$216.82	\$1,951.33	\$1,951.33	
Gateway-UnawEEP Fire Protection District	Data Collection	45.38	10%	\$6,080.00	\$608.00	\$5,472.00	\$5,472.00	
Gateway-UnawEEP Fire Protection District	EMTS Equipment	36.73	10%	\$39,123.85	\$3,912.39	\$35,211.46	\$0.00	
Gunnison Valley Hospital - EMS	Ambulance and Other Vehicles	44.40	50%	\$172,507.00	\$86,253.50	\$86,253.50	\$85,110.00	
Gunnison Valley Hospital - EMS	EMTS Equipment	41.20	50%	\$10,550.49	\$5,275.25	\$5,275.24	\$5,275.24	
Haxtun Hospital District	EMTS Equipment	44.94	10%	\$69,169.50	\$6,916.95	\$62,252.55	\$62,252.55	
Highland Rescue Team Ambulance District	Ambulance and Other Vehicles	45.25	50%	\$102,964.86	\$51,482.43	\$51,482.43	\$51,482.43	
Hinsdale County EMS	EMTS Equipment	44.00	50%	\$2,065.00	\$1,032.50	\$1,032.50	\$1,032.50	
Keefe Memorial Hospital	EMTS Equipment	47.70	50%	\$4,649.00	\$2,324.50	\$2,324.50	\$2,200.00	
Kiowa County Ambulance Service	Technical Assistance	42.67	0%	\$25,960.00	\$0.00	\$25,960.00		\$24,596.00
Kiowa Fire Protection District	Ambulance and Other Vehicles	39.50	10%	\$187,992.00	\$18,799.20	\$169,192.80	\$149,857.20	
Kiowa Fire Protection District	EMTS Equipment	37.25	10%	\$34,118.35	\$3,411.85	\$30,706.50	\$0.00	
Kit Carson County Ambulance Service	Ambulance and Other Vehicles	44.40	10%	\$156,877.00	\$15,687.70	\$141,189.30	\$141,189.30	
Kit Carson County Ambulance Service	EMTS Equipment	43.85	10%	\$51,222.18	\$5,122.23	\$46,099.95	\$46,099.95	
La Junta Rural Ambulance Service	Ambulance and Other Vehicles	46.65	50%	\$160,878.00	\$80,439.00	\$80,439.00	\$80,439.00	
Lake Dillon Fire Protection District	EMTS Equipment	44.65	50%	\$28,938.42	\$14,469.23	\$14,469.19	\$14,469.19	
Larkspur Fire Protection District	Personnel and Services	36.50	10%	\$71,741.78	\$7,174.22	\$64,567.56	\$0.00	
Livermore Fire Protection District	EMTS Equipment	44.68	50%	\$5,196.75	\$2,598.39	\$2,598.36	\$2,598.36	
Logan County Government	Ambulance and Other Vehicles	43.50	50%	\$147,500.00	\$73,750.00	\$73,750.00	\$73,750.00	
Logan County Government	EMTS Equipment	41.42	50%	\$28,097.45	\$14,048.73	\$14,048.72	\$14,048.72	
Lower Valley Hospital Association	EMTS Equipment	29.63	50%	\$76,916.00	\$38,458.00	\$38,458.00	\$0.00	
Lower Valley Hospital Association	Pediatric Incentive Equipment	34.04	25%	\$764.00	\$191.00	\$573.00	\$0.00	
Lutheran Hospital Association of the San Luis Valley	EMTS Equipment	39.77	50%	\$135,535.45	\$67,767.73	\$67,767.72	\$64,460.92	
Lutheran Hospital Association of the San Luis Valley	Pediatric Incentive Equipment	38.83	25%	\$12,192.47	\$3,048.14	\$9,144.33	\$4,017.80	
Mancos Ambulance Association	EMTS Equipment	41.85	50%	\$20,921.80	\$10,460.91	\$10,460.89	\$10,460.89	
Middle Park Medical Center-Kremmling	Pediatric Incentive Equipment	40.74	25%	\$4,363.92	\$1,090.99	\$3,272.93	\$3,272.93	
Mile-High RETAC	Regional Medical Direction	NA	0%	\$33,000.00	\$0.00	\$33,000.00		\$33,000.00
Mile-High RETAC	Conference and Forum Support	38.00	0%	\$121,475.52	\$0.00	\$121,475.52		\$121,475.52
Mile-High RETAC	RETAC Operations	32.89	0%	\$20,845.00	\$0.00	\$20,845.00		\$0.00

Fiscal Year 2016 Public Notice of Funding Awards for Provider Grants and System Improvement Requests								
Applicant Name	Category	Score	Match (%)	Total Project Amt	Applicant Match	State Amount Requested	ProvGr Awarded	Sys Imp Awarded
Montrose County Sheriff's Posse, Inc.	Communications	39.80	10%	\$97,493.75	\$9,749.38	\$87,744.37	\$87,744.37	
Montrose County Sheriff's Posse, Inc.	EMTS Equipment	40.43	10%	\$11,258.78	\$1,125.88	\$10,132.90	\$8,248.93	
Morgan County Ambulance Service	Pediatric Incentive Equipment	43.48	25%	\$8,451.33	\$2,112.84	\$6,338.49	\$6,338.49	
North Fork Ambulance Association	Personnel and Services	41.43	50%	\$210,759.24	\$105,379.62	\$105,379.62	\$105,379.62	
Northeast Colorado RETAC	Regional Medical Direction	NA	0%	\$33,000.00	\$0.00	\$33,000.00		\$33,000.00
Norwood Fire Protection District	Ambulance and Other Vehicles	45.00	50%	\$192,000.00	\$96,000.00	\$96,000.00	\$92,636.00	
Ouray County Emergency Medical Service	Pediatric Incentive Equipment	41.25	25%	\$3,900.00	\$975.00	\$2,925.00	\$2,925.00	
Ouray County Emergency Medical Service	Personnel and Services	44.10	50%	\$38,937.60	\$19,468.80	\$19,468.80	\$19,468.00	
Palmer Lake Volunteer Fire Department	Communications	41.60	10%	\$12,620.00	\$1,262.00	\$11,358.00	\$11,358.00	
Paradox Valley Ambulance Association	Ambulance and Other Vehicles	46.33	10%	\$148,928.00	\$14,892.80	\$134,035.20	\$134,035.20	
Parkview Medical Center	EMTS Equipment	41.23	50%	\$6,590.00	\$3,295.00	\$3,295.00	\$3,295.00	
Poudre Valley Health System Foundation	Ambulance and Other Vehicles	34.40	50%	\$96,549.00	\$48,274.50	\$48,274.50	\$0.00	
Poudre Valley Health System Foundation	EMTS Equipment	33.10	50%	\$97,123.70	\$48,561.85	\$48,561.85	\$0.00	
Poudre Valley Health System Foundation	Pediatric Incentive Equipment	35.90	25%	\$2,045.00	\$511.25	\$1,533.75	\$0.00	
Regents of University of Colorado	System Improvement	43.71	0%	\$71,988.20	\$0.00	\$71,988.20		\$71,988.20
Rico Fire Protection District	EMTS Equipment	46.83	50%	\$24,421.00	\$12,210.50	\$12,210.50	\$12,210.50	
Ridgway State Park	EMTS Equipment	42.58	50%	\$4,000.00	\$2,000.00	\$2,000.00	\$2,000.00	
Saguache County	Personnel and Services	44.20	50%	\$30,912.00	\$15,456.00	\$15,456.00	\$15,456.00	
San Luis Valley RETAC	Regional Medical Direction	NA	0%	\$32,010.00	\$0.00	\$32,010.00		\$32,010.00
San Luis Valley RETAC	EMTS Equipment	38.80	50%	\$2,016,806.62	\$1,008,403.31	\$1,008,403.31	\$988,990.26	
Silverton-San Juan County Ambulance	Personnel and Services	43.38	50%	\$36,000.00	\$18,000.00	\$18,000.00	\$18,000.00	
Snowmass-Wildcat Fire Protection District	Ambulance and Other Vehicles	42.90	50%	\$194,959.00	\$97,479.50	\$97,479.50	\$87,833.00	
South Fork Fire Protection District	Ambulance and Other Vehicles	45.43	50%	\$172,107.00	\$86,053.50	\$86,053.50	\$85,110.00	
South Y-W Ambulance Service, Inc.	EMTS Equipment	41.48	10%	\$56,189.56	\$5,618.96	\$50,570.60	\$50,570.60	
Southeast Colorado Hospital Ambulance Service	Ambulance and Other Vehicles	41.48	50%	\$67,874.50	\$33,937.25	\$33,937.25	\$33,937.25	
Southeast Colorado RETAC	Regional Medical Direction	NA	0%	\$33,000.00	\$0.00	\$33,000.00		\$33,000.00
Southeast Colorado RETAC	Conference and Forum Support	43.00	0%	\$20,124.50	\$0.00	\$20,124.50		\$20,124.50
Southern Colorado RETAC, Inc	Regional Medical Direction	NA	0%	\$33,000.00	\$0.00	\$33,000.00		\$33,000.00
Southern Colorado RETAC, Inc	EMTS Equipment	37.60	50%	\$1,153,324.29	\$576,662.15	\$576,662.14	\$261,794.77	
Southwest Health Systems	Ambulance and Other Vehicles	45.76	50%	\$104,985.00	\$52,492.50	\$52,492.50	\$51,093.00	
Southwest Health Systems	EMTS Equipment	42.23	50%	\$3,989.97	\$1,994.99	\$1,994.98	\$1,994.98	
Southwest RETAC	Regional Medical Direction	NA	0%	\$33,000.00	\$0.00	\$33,000.00		\$33,000.00
Southwest Teller County EMS	Communications	42.10	50%	\$17,245.44	\$8,622.72	\$8,622.72	\$8,622.72	
Southwest Teller County EMS	Pediatric Incentive Equipment	42.70	25%	\$1,600.00	\$400.00	\$1,200.00	\$1,200.00	

Fiscal Year 2016 Public Notice of Funding Awards for Provider Grants and System Improvement Requests								
Applicant Name	Category	Score	Match (%)	Total Project Amt	Applicant Match	State Amount Requested	ProvGr Awarded	Sys Imp Awarded
Southwestern Highway 115 Fire Protection District	EMTS Equipment	40.65	50%	\$4,929.00	\$2,464.50	\$2,464.50	\$2,464.50	
St Thomas More Health Foundation	EMTS Equipment	42.08	50%	\$57,485.50	\$28,742.76	\$28,742.74	\$28,742.74	
Stadium Medical	EMTS Equipment	21.01	50%	\$223,657.26	\$111,828.63	\$111,828.63	\$0.00	
Sterling Fire Department	Communications	33.80	50%	\$21,355.50	\$10,677.75	\$10,677.75	\$0.00	
Sterling Fire Department	EMTS Equipment	38.10	50%	\$43,020.15	\$21,510.08	\$21,510.07	\$21,510.07	
Sterling Fire Department	Personnel and Services	32.50	50%	\$64,400.00	\$32,200.00	\$32,200.00	\$0.00	
Summit County Government	Ambulance and Other Vehicles	45.75	50%	\$813,279.00	\$406,639.51	\$406,639.49	\$366,760.80	
Summit County Government	EMTS Equipment	38.60	50%	\$4,695.90	\$1,173.99	\$3,521.91	\$3,187.80	
Summit County Government	Pediatric Incentive Equipment	39.40	25%	\$271,395.00	\$135,697.50	\$135,697.50	\$135,697.50	
Tallahassee Volunteer Fire Protection	Communications	26.15	10%	\$87,848.60	\$8,784.86	\$79,063.74	\$0.00	
Thompson Valley Health Services District	Ambulance and Other Vehicles	41.60	50%	\$145,504.00	\$72,752.00	\$72,752.00	\$72,752.00	
Town of Jamestown	Communications	41.38	10%	\$4,112.70	\$411.27	\$3,701.43	\$3,701.43	
Town of Jamestown	Data Collection	42.22	10%	\$1,619.98	\$162.00	\$1,457.98	\$1,457.98	
Town of Jamestown	EMTS Equipment	43.98	10%	\$4,359.59	\$435.99	\$3,923.60	\$3,923.60	
Town of Limon	Ambulance and Other Vehicles	45.90	10%	\$140,955.64	\$14,095.57	\$126,860.07	\$126,860.07	
Town of Limon	Personnel and Services	45.10	10%	\$51,355.20	\$5,135.52	\$46,219.68	\$46,219.68	
Tri-Lakes Monument Fire Protection District	Ambulance and Other Vehicles	41.00	50%	\$346,440.00	\$173,220.00	\$173,220.00	\$173,220.00	
Trinidad Ambulance District	Ambulance and Other Vehicles	40.20	50%	\$174,037.21	\$87,018.61	\$87,018.60	\$87,018.60	
Trinidad Area Health Association	EMTS Equipment	43.53	10%	\$67,448.00	\$6,744.80	\$60,703.20	\$60,703.20	
Upper Pine River Fire Protection District	Data Collection	42.37	50%	\$12,275.00	\$6,137.50	\$6,137.50	\$6,137.50	
Ute Mountain Ute Tribal EMS	Ambulance and Other Vehicles	32.23	50%	\$360,000.00	\$180,000.00	\$180,000.00	\$0.00	
Walsh Ambulance Service	EMTS Equipment	44.00	50%	\$17,007.73	\$8,503.87	\$8,503.86	\$8,503.86	
West Custer County Hospital District	Ambulance and Other Vehicles	45.65	10%	\$125,462.00	\$12,546.20	\$112,915.80	\$112,915.80	
West Douglas County Fire Protection District	Data Collection	42.50	50%	\$10,000.00	\$5,000.00	\$5,000.00	\$4,500.00	
West Metro Fire Protection District	Ambulance and Other Vehicles	35.61	50%	\$200,979.00	\$100,489.50	\$100,489.50	\$0.00	
Western Regional EMS, Inc. (NWRETAC)	Regional Medical Direction	NA	0%	\$33,000.00	\$0.00	\$33,000.00		\$33,000.00
Western Regional EMS, Inc. (NWRETAC)	Conference and Forum Support	42.75	0%	\$14,000.00	\$0.00	\$14,000.00		\$14,000.00
Western RETAC	Regional Medical Direction	NA	0%	\$32,998.40	\$0.00	\$32,998.40		\$32,998.40
Western RETAC	EMTS Equipment	40.40	50%	\$27,541.00	\$13,770.50	\$13,770.50	\$13,216.00	
Western RETAC	RETAC Operations	31.71	0%	\$30,250.00	\$0.00	\$30,250.00		\$0.00
Wheat Ridge Fire Protection District	EMTS Equipment	41.46	50%	\$31,455.00	\$15,727.50	\$15,727.50	\$15,727.50	
Windsor Severance Fire Protection District	Ambulance and Other Vehicles	42.70	50%	\$121,472.00	\$60,736.00	\$60,736.00	\$60,736.00	
Wray Community District Hospital	EMTS Equipment	44.20	50%	\$50,046.75	\$25,023.38	\$25,023.37	\$25,023.37	
						\$8,543,180.69	\$5,456,280.78	\$637,615.62

Designated Trauma Centers as of June 30, 2015

Level	Facility Name	City
IV	Animas Surgical Hospital	Durango
IV	Arkansas Valley Regional Medical Center	La Junta
III	Aspen Valley Hospital (CAH)	Aspen
III	Avista Adventist Hospital	Louisville
NonD	Banner North CO Emergency Care (CCEC)	Greeley
II	Boulder Community Hospital	Boulder
III	Castle Rock Adventist Hospital	Castle Rock
IV	Centennial Medical Plaza	Englewood
RPTC	Children's Hospital Colorado	Aurora
NonD	Children's Hospital Colorado at Parker Adventist Hospital	Parker
NonD	Children's Hospital Colorado at St. Joseph Hospital	Denver
NonD	Church Ranch Emergency Room	Westminster
IV	Colorado Canyons Hospital and Medical Center	Fruita
III	Colorado Plains Medical Center	Fort Morgan
IV	Community Hospital	Grand Junction
IV	Conejos County Hospital Corporation (CAH)	La Jara
NonD	Crested Butte Medical Center (CCEC)	Crested Butte
IV	Delta County Memorial Hospital	Delta
I	Denver Health Medical Center	Denver
V	Denver Heath East Grand Clinic (CCEC)	Winter Park
IV	East Morgan County Hospital (CAH)	Brush
IV	Estes Park Medical Center (CAH)	Estes Park
II	Good Samaritan Medical Center	Lafayette
IV	Grand River Medical Center (CAH)	Rifle
NonD	Greeley Emergency Center (CCEC)	Greeley
IV	Gunnison Valley Health (CAH)	Gunnison
NonD	Haxtun Hospital District (CAH)	Haxtun
IV	Heart of the Rockies Regional Medical Center (CAH)	Salida
IV	Keefe Memorial Hospital	Cheyenne Wells
IV	Kit Carson County Memorial Hospital (CAH)	Burlington
IV	Lincoln Community Hospital (CAH)	Hugo
II	Littleton Adventist Hospital	Littleton
III	Longmont United Hospital	Longmont
III	Lutheran Medical Center	Wheatridge
III	McKee Medical Center	Loveland
II	Medical Center of Aurora	Aurora
II	Medical Center of the Rockies	Loveland
IV	Melissa Memorial Hospital (CAH)	Holyoke
II	Memorial Hospital Central (Univ. of Colorado Health)	Colorado Springs
NonD	Memorial Hospital North (University of Colorado Health)	Colorado Springs
III	Mercy Regional Medical Center	Durango
IV	Middle Park Medical Center - Granby Campus	Granby
IV	Middle Park Medical Center - Kremmling Campus	Kremmling
III	Montrose Memorial Hospital	Montrose

IV	Mt San Rafael Hospital (CAH)	Trinidad
II	North Colorado Medical Center	Greeley
III	North Suburban Medical Center	Thornton
NonD	North Suburban Medical Center- Notheast ER (CCEC)	Westminster
NonD	North Suburban Medical Center-Northwest ER (CCEC)	Thornton
NonD	Ortho Colorado Hospital	Lakewood
IV	Pagosa Springs Medical Center	Pagosa Springs
III	Parker Adventist Hospital	Parker
II	Parkview Medical Center	Pueblo
NonD	Parkview Pueblo West Emergency Services (CECC)	Pueblo West
II	Penrose Hospital	Colorado Springs
IV	Pikes Peak Regional Hospital (CAH)	Woodland Park
IV	Pioneers Medical Center (CAH)	Meeker
IV	Platte Valley Medical Center	Brighton
III	Porter Adventist Hospital	Denver
III	Poudre Valley Hospital	Fort Collins
IV	Presbyterian/St Luke's Medical Center	Denver
NonD	Prowers Medical Center (CAH)	Lamar
IV	Rangely District Hospital (CAH)	Rangely
IV	Rio Grande Hospital (CAH)	Del Norte
IV	Rose Medical Center	Denver
IV	Saddle Rock Emergency Room (CCEC)	Aurora
IV	San Luis Valley Regional Medical Center	Alamosa
IV	Sedgwick County Health Center	Julesburg
III	Sky Ridge Medical Center	Lone Tree
NonD	Southland ER Parker Adventist (CCEC)	Aurora
NonD	Southeast Colorado Hospital (CAH)	Springfield
IV	Southwest Memorial Hospital (CAH)	Cortez
IV	Spanish Peaks Regional Health Center (CAH)	Walsenburg
V	St. Anthony Breckenridge Community Clinic (CCEC)	Breckenridge
NonD	St. Anthony Copper Mountain (CCEC)	Cooper Mountain
I	St. Anthony Hospital	Lakewood
V	St. Anthony Keystone Medical Clinic (CCEC)	Keystone
III	St. Anthony North Health Campus	Westminster
IV	St. Anthony North 84th Ave ED	Westminster
III	St. Francis Medical Center	Colorado Springs
NonD	St. Joseph Hospital	Denver
III	St. Mary-Corwin Medical Center	Pueblo
II	St. Mary's Hospital	Grand Junction
IV	St. Thomas More Hospital	Canon City
NonD	St. Vincent General Hospital District (CAH)	Leadville
III	Sterling Regional Medical Center	Sterling
III	Summit Medical Center	Frisco
I	Swedish Medical Center	Englewood
NonD	Swedish SW ER (CCEC)	Littleton
V	Telluride Medical Center (CCEC)	Telluride
IV	The Memorial Hospital (CAH)	Craig
NonD	UC Health Emergency Room (CCEC)	Broomfield
NonD	UC Health Emergency Room (CCEC) Meadow Grass Dr	Colorado Springs

NonD	UC Health Emergency Room (CCEC) Firestone Blvd	Firestone
NonD	UC Health Emergency Room (CCEC) Woodman Rd	Colorado Springs
NonD	UC Health Emergency Room (CCEC) Ralston Rd	Arvada
NonD	UC Health Emergency Room (CCEC) Powers Blvd	Colorado Springs
NonD	UC Health Emergency Room (CCEC) West Bowles Ave	Littleton
NonD	UC Health Emergency Room (CCEC) Green Valley Ranch Blvd	Denver
NonD	UC Health Emergency Room (CCEC) Fountain Mesa Ridge	Fountain
NonD	UC Health Emergency Room (CCEC) Colorado Blvd	Thornton
NonD	UC Health Emergency Room (CCEC) Colorado Blvd	Thornton
NonD	UC Health Emergency Room (CCEC) 104th Ave	Commerce City
NonD	UC Health Emergency Room (CCEC) Smoky Hill Rd	Aurora
II	University of Colorado Hospital	Aurora
III	Vail Valley Medical Center	Vail
III	Valley View Hospital	Glenwood Springs
NonD	Weisbrod Memorial County Hospital (CAH)	Eads
IV	Wray Community District Hospital (CAH)	Wray
IV	Yampa Valley Medical Center	Steamboat Springs
IV	Yuma District Hospital (CAH)	Yuma

RPTC (Regional Pediatric Trauma Center)	1
Level I	3
Level II	11
Level III	21
Level IV	38
Level V	4
Total Designated Trauma Centers	78
Total Non-Designated Facilities	32
Total	110

CCEC - Indicates licensure as community clinic with emergency care

CAH - Indicates licensure as a Critical Access Hospital

All other hospitals are licensed as acute care hospitals