

Purpose:

To describe the process by which a level four trauma center participates in the reaccreditation process.

Procedure:

1. Upon successful completion of the provisional year of accreditation, level 4 trauma centers enter a four-year accreditation cycle with a focused, panel review in two years.
 - A. The Pennsylvania Trauma Systems Foundation (PTSF) Board of Directors (Board) will determine eligibility for Panel Review Survey based on accreditation determination.
 - i. Refer to Policy AC-137: Accreditation Guidelines and Continuum for Board Members for accreditation determination guidance.
2. The full Site Survey will follow the Site Survey Guidebook requirements.
3. The focused two-year Panel Review includes:
 - A. Submission of the eAFS, due 90-days prior to the panel review meeting.
 - B. PTSF generation of Level IV Standardized Reports.
 - i. The reports will consist of:
 - a) Demographics Report.
 - b) Quality Indicator Report.
 - C. PTSF will review eAFS and reports and submit follow-up questions to the Trauma Center 60-days prior to survey.
 - i. The Trauma Center must submit a response to the PTSF with 2 weeks of receipt.
 - ii. The reports and follow-up response will be included with the AFS for the Panel Review team.
 - D. Participation at the Panel Review meeting, location and date to be determined by the PTSF.
 - E. The Panel Review participants will consist of:
 - i. Two in-state surveyors:
 - a) One Physician (Surgeon or Emergency Medicine).
 - b) One Registered Nurse.
 - ii. Hospital representation:
 - a) Trauma Program Medical Director.
 - b) Trauma Program Manager.
 - c) Additional participants, as approved by the Director of Accreditation.
 - iii. PTSF staff members.
 - F. The Panel Review Meeting schedule will consist of:

- i. First 30-minutes: Overview discussion (Private: Survey Team).
 - a) Application Review.
 - The surveyors receive the application one month prior to the panel meeting.
 - b) Review of standard reports/queries.
 - c) Review of follow-up questions.
 - d) Review of previous significant issues, if applicable.
- ii. Second 30-minutes: Hospital presentation including:
 - a) General overview (5-minutes).
 - b) Three trauma case presentations (25-minutes).
 - (1) Case demonstrating an identified opportunity for improvement, including action and outcome—trauma center identifies case.
 - (1) Case demonstrating excellence, meeting desired outcomes—trauma center identifies case.
 - (1) Case based on Quality Indicator Reporting—PTSF selects case.
- iii. Third 30-minutes: Question and answer period.
 - a) Including follow-up to previous significant issues, if applicable.
- iv. Fourth 30-minutes: Survey Team discussion and board recommendation determination (Private: Survey Team).

G. The Survey Review Panel Team recommendations will be reviewed by the board at the following deliberations meeting (March, July, September & December).

H. Panel Report Deliberation outcomes may include:

- i. Reaccreditation for two years, the following survey will be a Site Survey Review.
- ii. Reaccreditation for two years, with a 1-year follow-up action plan. The following survey will be a Site Survey Review.
- iii. Required in-person traditional Site Survey Review at any time.

I. The Panel Survey's Deliberation Accreditation Report will contain at a minimum:

- i. Significant Issues.
- ii. Opportunities for Improvement.

4. Accreditation certificates will be issued based on the effect dates of the accreditation period as approved by the board (refer to Policy AC 114).

Approved by PTSF Board of Directors:

Original Date: 09/30/2016

Revise Date:

Review Date:

Juliet Altenburg, RN, MSN—Executive Director