

### **Purpose:**

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

### **Procedure:**

1. Upon successful completion of the provisional year of accreditation, eligible level IV trauma centers enter a 4-year accreditation / survey cycle with a focused, panel review within 2-years.
  - a. The Pennsylvania Trauma Systems Foundation (PTSF) Board of Directors (Board) will determine eligibility for panel reviews based upon the trauma center's accreditation determination.
    - i. Refer to Policy AC-137: Accreditation Guidelines & 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. The Application for Survey (AFS) is due prior to the panel review meeting. The due date will be assigned by the PTSF and communicated via the Save The Date notification.
  - b. PTSF generated standardized level IV reports, consisting of:
    - i. Demographics Reports
    - ii. Quality Indicator Report, including Admission/Transfer summaries
  - c. PTSF will review the AFS and reports, and submit follow-up questions via the AFS clarification tab to the trauma center approximately 60-days prior to the panel review meeting.
    - i. Once received, the trauma center must submit a response to PTSF within two weeks.
    - ii. The reports and follow-up response(s) will be included with the AFS for the panel review team.
  - d. Participation at the panel review meeting, location and date will be determined by PTSF.
  - e. Panel review participants will consist of:
    - i. Two in-state surveyors:
      1. One physician (Surgeon or Emergency Medicine).
      2. One registered nurse.
    - ii. Hospital representation:
      1. Trauma Program Medical Director.
      2. Trauma Program Manager/Coordinator.
      3. Additional participants, as approved by the PTSF Director of Accreditation.
    - iii. PTSF staff.

- f. The medical records will be confirmed by the PTSF and communicated to the trauma center approximately three weeks prior to the panel survey.
  - i. Refer to g. ii (Hospital Presentation) details below for case selection requirements.
- g. The panel review meeting schedule will consist of:
  - i. Overview Discussion (Private: Survey Team, prior to hospital arrival)
    - 1. AFS review.
      - a. Surveyors receive the application approximately one month prior to the panel meeting.
    - 2. Review of standard reports/queries.
    - 3. Review of follow-up questions and hospital response, if applicable.
    - 4. Review of previous significant issues, if applicable.
  - ii. Hospital Presentation / Group Discussion approximately 90-minutes. This must be a PowerPoint presentation, including:
    - 1. General overview (approx. 10-minutes).
    - 2. Previous significant issue presentation, if applicable (approx. 15-minutes).
    - 3. Three ATLS formatted case presentations (approx. 45-minutes):
      - a. The trauma center identifies two cases:
        - i. One case demonstrating an identified opportunity for improvement, including actions, outcomes and loop-closure.
        - ii. One case demonstrating excellence, meeting desired outcomes.
      - b. The PTSF identifies one case based upon quality indicator report review.
    - 4. Closing discussion (approx. 20-minutes).
  - iii. Survey Team Discussion and recommendation for Board determination (Private: Survey Team).
- h. The PowerPoint presentation and the three PI case summaries must be submitted via email to the PTSF Director of Accreditation 1 week prior to the panel review.
- i. The summary from the panel review team will be reviewed by the Board at the following deliberations meeting.
- j. Board deliberation outcomes may include:
  - i. Reaccreditation for two years with the next survey being a Site Survey Review.
  - ii. Reaccreditation for two-years with a 1-year follow-up action plan and the next survey being a Site Survey Review.
  - iii. Required in-person traditional Site Survey Review at any time.

- k. The Accreditation Report from the panel review will contain at a minimum:
- i. Summary
  - ii. Case Review
  - iii. Significant Issues, if applicable
  - iv. Strengths
  - v. Opportunities for Improvement
4. Accreditation certificates will be issued based upon the effective dates for the accreditation period, as approved by the Board (refer to policy AC-114).

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Approved by PTSF Board of Directors:

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