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### PURPOSE:

The purpose of this conflict of interest policy is to protect the Foundation's interest whenever it considers entering into a review, accreditation determination, transaction or arrangement that might benefit the private interest of a director or would impair or potentially impair the objectivity of a director, or where an action by a director might conflict with the interest of the Foundation.

This policy is further designed to specifically ensure that any deliberations, discussions or actions concerning a hospital's trauma center accreditation application or review are unbiased. This policy is intended to supplement but not replace any applicable state laws governing conflicts of interests applicable to non-profit corporations.

Similarly, it is the policy of the Foundation to assure that no conflict of interest exists between any directors who have a consultative role with any hospital under accreditation review.

To assure the integrity of the Board deliberation process is maintained, directors will be allowed a limited scope of consultative practice, and will be excused from the board accreditation deliberation process for any hospital for which they have had a consultative role.

### DEFINITIONS:

Affected Individuals—any director, officer or member of a committee with board delegated powers who has a direct or indirect financial interest or fiduciary relationship with a health care entity or system is an interested person. If a person is an interested person with respect to any entity in the health care system in which the Foundation transacts business, he or she is an interested person with respect to all entities in the health care system.

Consultant/Consultative Role—any relationship in which a director actively assists, facilitates or consults with a hospital preparing for PTSF trauma center accreditation. The following activities are considered consultative, regardless of whether a fee for the service is incurred: conference calls, site visits, mock surveys, or hospital identifiable chart reviews. Exclusions to this definition shall include visiting professor engagements, anecdotal conversation in a business and/or conference setting, or situations whereby a department colleague is actively engaged in a consultative role for a facility. In the latter circumstance, it is expected that the Board member would not engage in any dialogue with that colleague on identifiable information about the status of the trauma center.

### PROCEDURE:

1. Each member of the PTSF Board of Directors shall disclose all affiliations with all hospitals in Pennsylvania. Affiliation is defined as a financial interest in or fiduciary, employment or consultative relationship with, a health care or related facility.
2. All PTSF board members will be notified of this policy (BD-106) and will be asked to complete a disclosure/conflict of interest statement as a component of the appointment process and annually thereafter. Any board member who meets the definition of trauma program "consultant" should refrain

from accepting additional consultant roles during their term as a PTSF board member. Likewise, each director shall disclose any actual or possible conflicts of interest concerning any proposed transaction or arrangement with PTSF to the entire board or board committee on which he or she serves.

3. No member of the board shall be present at any board or committee deliberations, discussions or actions under the following conditions:
  - Board member who is employed in the same county as the applicant hospital. This policy may only be waived for those members who work in the same county but are not employed at the hospital when the applicant hospital submits a written request to have all board members who work in the county of the hospital under review present during board deliberations. All written requests for conflicts and waivers must be signed by either the Trauma Program Medical Director or Trauma Program Manager. All requests for waivers will be reviewed by PTSF staff.
  - Board member is employed at the hospital under review.
  - A paid contractual agreement is present between the board member's hospital and the hospital under review to provide trauma program services.
4. The Chairman of the Board of Directors shall appoint from the members of the board a nine person ad hoc Conflict of Interest Committee with a member from each HSA Region represented on the board included in the committee.
5. When a conflict of interest issue is raised by any of the parties, the Conflict of Interest Committee members who do not have a conflict with the hospital under discussion may determine in their sole discretion whether members of the Board not disqualified under Paragraph 2 above shall be present at Board discussions or decisions related to an application in order to avoid the appearance of bias.
6. Conflicts submitted by hospitals which cite board members will be evaluated for consideration based on the following factors:
  - Perception of competition by either board member or hospital/health system
  - Distance between board member's hospital and the hospital applying for accreditation
  - Level of involvement of board member or board member's hospital/ health system in reviewed hospital's trauma program within past three years regardless of whether there is a contractual arrangement for consultative services. This can include:
    - Acting as a site surveyor
    - Performing mock surveys
    - Performing external peer reviews and mentoring
  - Prior employment history of board member at hospital within past three years
7. An applicant for trauma center accreditation will receive a list of board members who will participate in the accreditation decision. An applicant may object in writing to the Chairman setting forth the grounds for its objections to the participation of any board member in board or committee deliberations, decisions or actions. The Conflict of Interest Committee as appointed by the Chairman of the Board will review those objections and advise the applicant in writing of their determination.

8. If the board or committee has reasonable cause to believe that a director or member has failed to disclose actual or possible conflicts of interest, it shall inform the director of the basis for such belief and afford the director an opportunity to explain the alleged failure to disclose.
9. If, after hearing the response of the director and making such further investigation as may be warranted in the circumstances, the board or board committee determines that the director has in fact failed to disclose an actual or possible conflict of interest, it shall take appropriate disciplinary and corrective action.
10. The minutes of the board and committee meetings shall contain:
  - The names of the persons who disclosed or otherwise were found to have a conflict of interest in connection with an actual or possible conflict of interest, the nature of the conflict of interest, any action taken to determine whether a conflict of interest was present, and the board's or committee's decision as to whether a conflict of interest in fact existed.
  - The names of the persons who were present for discussions and votes relating to the transaction or arrangement, the content of the discussion, including any alternatives to the proposed transaction or arrangement, and a record of any votes taken in connection therewith.
11. Each director and committee member with board delegated powers shall annually sign/acknowledge a statement which affirms that such person:
  - Has received a copy of the Conflicts of Interest policy,
  - Has read and understands the policy,
  - Has agreed to comply with the policy, and
  - Understands that the Foundation is a 501(c) 3 organization and that in order to maintain its federal tax exemption it must engage primarily in activities which accomplish one or more of its tax-exempt purposes.

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Approved by PTSF Board of Directors and/or Executive Committee:

Original Date: 02/12/1986

Revise Date: 04/02/1998, 06/20/2002, 12/14/2005, 09/11/2007, 03/10/2011, 12/06/2012

Review Date: 19/09/1999, 12/05/2005, 09/20/2007, 03/13/2008, 07/19/2018

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*Patrick M. Reilly, MD, FCCP, FACS, Board Chairman*