
Purpose:

To provide a procedure for processing *permanent or temporary variance requests* from the current Pennsylvania Trauma Systems Foundation Standards. Requests may be made due to building construction, equipment failure requiring time to replace, key personnel changes or other major factors affecting the operations of a pursuing/accredited trauma center.

Procedure:

1. A signed letter (can be sent electronically), including any applicable supporting documentation must be sent to the Foundation stating the reason(s) and duration for the proposed variance. Please contact the PTSF Director of Accreditation for content recommendations.
2. All requests will be initially reviewed by a PTSF staff member then referred to the Standards Committee and/or the Executive Committee to determine if further information is required and to assess and the impact of the proposed variance on the operations of the trauma center and make a recommendation to the Board of Directors.
3. The Board of Directors (Board) shall determine whether to grant a variance, grant a variance with contingencies or suspend accreditation until such time as the trauma center is fully compliant with the standards.
4. All requests will be reviewed on a case-by-case basis and decisions will be based on the impact of the requested variance on the trauma center, trauma system and trauma patient care.
5. Variances must be requested as early as possible and not less than six months before the actual implementation of the proposed alternative plan. The Board may grant a waiver of the six month time frame in emergency situations.
6. If the proposed interim plan involves the cooperation of another hospital/trauma center, a written agreement with that hospital/trauma center must be completed and forwarded to the Foundation at the time of the variance request.
7. The hospital/trauma center seeking a variance will be notified of the status of its request as soon as possible but not later than three days after the next scheduled Board meeting.
8. If a hospital/trauma center is operating with a PTSF board-approved variance on the day of a site visit this information will be disclosed to the survey team members. Effort will be made to incorporate the variance (if applicable) into the overall medical records pull. Trauma centers must have information available to the survey team members related to the variance, associated performance improvement efforts and quality-related initiatives.
9. As a result of the site visit outcome, a hospital/trauma program may be required to reapply for a standards variance.
10. The hospital/trauma center must notify the Foundation in writing within seven calendar days after the variance is no longer necessary.

Approved by PTSF Board of Directors:

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