

p e n n s y l v a n i a
TRAUMA
SYSTEMS
f o u n d a t i o n

Strategic Plan
2022 – 2024

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Introduction

The Pennsylvania Trauma Systems Foundation (PTSF) is the accrediting body for trauma centers throughout the Commonwealth of Pennsylvania. PTSF was created by the combined efforts of the Pennsylvania Medical Society and The Hospital & Healthsystem Association of Pennsylvania along with the Pennsylvania State Nurses Association, the Pennsylvania Emergency Health Services Council and the Pennsylvania Department of Health. The Commonwealth of Pennsylvania first recognized PTSF in December 1984 when Act 209 was signed into law by Governor Thornburgh. Act 209 expired in June 1985 and a comprehensive Emergency Medical Service Act (Act 45) was signed into law in July 1985 again recognizing the PTSF as the accrediting body for the trauma centers in Pennsylvania.

A strategic plan was completed and adopted by the PTSF Board of Directors in December of 2017. Following a successful implementation of many of the objectives, the next iteration of the strategic plan was discussed in the Spring of 2020, however due to the COVID-19 global pandemic, the planning activities were deferred to the Spring of 2021. To assist with the creation of the plan, staff leadership engaged CTY Consulting Group, LLC to facilitate the process. This document is the result of the efforts of the Board of Directors and staff leadership.

Overview of the Planning Process

The planning process began with a retreat of staff leadership. Topics discussed included a review of the mission, vision, and values statements, a review of the value proposition, the status of items from the prior strategic plan, a review of the internal and external survey results, and preparation for the Board retreat.

Two surveys were created and distributed electronically. One survey was geared towards PTSF external stakeholders. 111 responses were received, 39, or 35.1%, were affiliated with an Adult Level I Trauma Center, 23, or 20.7%, were affiliated with an Adult Level II Trauma Center, 1, or 1%, were affiliated with an Adult Level III Trauma Center, and 8, or 7.2%, were affiliated with an Adult Level IV Trauma Center. 57.6% identified as Urban, 38.7% as Rural. The top 4 positions that responded were, Trauma Program Manager/Coordinator (28%), Trauma Program Medical Director (16%), Performance Improvement Coordinator (12%), and Registrar (12%). The other survey was internally focused and answered by 6 PTSF team members.

A retreat for PTSF staff and the Board of Directors was conducted March 16, 2021. During the retreat the participants were presented the 2018 – 2020 Strategic Plan Accomplishments and the results of the external survey that was conducted. Breakout group strategic discussion topics included Trauma System Development and Performance Improvement. Following the retreat, results were compiled, and several draft iterations of the plan were discussed with staff and the Executive Committee of the Board. Mission, Vision, and Values were not explored for revision and remain the same.

Mission Statement

Optimal outcomes for every injured patient.

Vision Statement

We are committed to Zero Preventable Deaths from injury in Pennsylvania.

Values Statement

Excellence - *We promote and support quality results and optimal outcomes through continuous performance improvement, education and collaboration.*

Innovation - *We seek and support research and best practices that standardize and shape the future of trauma care.*

Integrity - *We are committed to honesty, fairness and transparency.*

Teamwork - *We encourage respectful multidisciplinary collaboration to develop standards, solve problems and achieve common goals.*

Value Proposition

Through our unique:

- *Expert team of accreditation, performance improvement and trauma registry professionals;*
- *Advanced technology for the acquisition of trauma center data and performance improvement;*
- *Committees comprised of trauma center staff focusing on patient outcomes, trauma registry data, standards of accreditation and research;*
- *Relationships with state and national trauma organizations;*
- *Streamlined Trauma Center Accreditation process;*
- *Board of Directors comprised of administrators, legislators, nurses, and physicians who are leaders in their field;*

We will deliver value to the trauma centers and customers we serve by:

- *Providing quality education to hospitals;*
- *Educating the public and legislators on the value of trauma centers/systems;*
- *Providing data to support research and performance improvement;*
- *Participating in national trauma center/system forums to advance trauma care statewide and nationally; and*
- *Developing strategic plans to provide the highest caliber of trauma center care in the country.*

Strategic Conclusions

1. The PTSF has a favorable reputation among stakeholders around the Commonwealth.
2. PTSF has a reputation for providing timely, helpful responses to inquiries.
3. PTSF education programs are well regarded.
4. Overall, the PTSF accreditation process is viewed positively.
5. The cost of maintaining accreditation is a challenge for some hospitals.
6. Shortage of qualified trauma personnel is a concern across many parts of the state.
7. The proper placement of trauma centers is critical to optimizing the trauma system.
8. Significant trauma data has been collected and analyzed and should continue to be leveraged to improve care.

Strategic Imperatives, Goals, and Objectives

Strategic Imperative #1: Continue to Develop a Comprehensive Trauma System in Pennsylvania

1. Goal #1: Promote Trauma Center Development Among Non-Trauma Centers

- Objective #1 - Promote research regarding the value of Level IV trauma center accreditation for the trauma system and trauma centers
- Objective #2 - Implement strategies to engage non-trauma centers in exploring Trauma Center accreditation.
- Objective #3 - Enhance Mentoring Process of new trauma center staff and staff in non-trauma centers to improve trauma clinical care and promote relationship building.

2. Goal #2: Advocate for Legislation that will Improve the Trauma System in Pennsylvania

- Objective #4 - Work with industry partners to advocate for EMS legislation designed to improve trauma care in Pennsylvania in the areas of EMS, Injury Prevention, Clinical Care, and trauma system enhancement.

Strategic Imperative #2: Continue to Improve Trauma Center Outcomes

3. Goal #3: Optimize V5 Outcomes and PTOS Collector Software Tools to Optimize PTSF and Trauma Center PI Efforts

- Objective #5 - Create an RFP process, issue RFP, collect responses and select most qualified, competitively priced vendor.
- Objective #6 - *Create a process and timeline for transitioning trauma centers and the PTSF office to updated software platforms supporting trauma registry, performance improvement, and accreditation needs.*
- Objective #7 - Re-launch Technology Committee to support PTSF staff in advancing software development efforts.

4. Goal #4: Develop and Promote a Standardized Application of Nomenclature within the Performance Improvement Outcomes Software

- Objective #8 -_Revise Outcomes manual with standardized definitions.
- Objective #9 -_Perform inter-rater reliability case reviews of mortality cases between hospitals (PI Focus Groups) to build consensus on classification within a presented case.

5. Goal #5: Identify Trauma Center/System of Care Deficiencies and Develop Plans to Improve Trauma Outcomes

- Objective #10 -_Annually identify targeted areas of focus.
- Objective #11 -_Form work groups to develop plans for improved performance.
- Objective #12 -_Annually provide education to trauma centers regarding evidence-based best practices.
- Objective #13 - Submit article for publication on one PI related project.

Strategic Imperative #3: Optimize PTSF Operations

6. Goal #6: Optimize PTSF Staffing to accomplish the Work Resulting from Increased Trauma Centers

- Objective #14 - Perform Staffing Analysis based on a three-year projection of work duties, hospital involvement, and technology needs internally and externally.

7. Goal #7: Streamline the Board Accreditations Deliberations Process

- Objective #5 - Create an Ad Hoc Committee of the Board to review all facets of accreditation deliberations focused on the contents of the Deliberation Packet Information and review of the process of packet including issues surrounding Conflicts of Interest and lack of physician reviewers.