

### Purpose:

To demonstrate the trauma center's capacity and ability to care for trauma patients

### Procedure:

1. Level I, II and III trauma centers will submit trauma diversion information for the fiscal year July 1 through June 30 to the Pennsylvania Trauma Systems Foundation (PTSF) using a standard template that will be emailed in June and due by a July date to be determined by the PTSF.
2. Diversion includes any circumstances where trauma patients who are typically accepted or admitted to the trauma center are not admitted. This includes diversion of patients from the primary catchment area transported by emergency medical services (EMS), the inability to accept interfacility transfers and the transfer out of patients who would be otherwise admitted under normal circumstances.
3. PTSF staff member(s) will review Diversion Reports for patterns of diversion affecting the ability to provide consistent, essential care for the injured patient. A summary of the statewide findings will be distributed to the Board of Directors (Board).
4. If a trauma center is found to be non-compliant with the Standards of Accreditation, hospital specific information will be blinded and presented for review by the Board.
5. A letter outlining the Board's determination will be sent to the institution after Board review.
  - a) The Board will decide whether action is required from the institution.
  - b) The letter will be provided to the site surveyors at the time of the institution's next site visit.
  - c) A hospital that diverts trauma patients greater than five percent (5%) of the time (438-hours per year or 225-hours in a six-month period), as noted on their ED diversion annual report, is at risk for Board action up to and including suspension of trauma center accreditation.

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Approved by PTSF Board of Directors:

Original Date: 02/12/1996

Revise Date: 06/17/2003; 12/6/2006; 07/28/2010; 09/17/2014; 03/21/2017; 09/21/2018

Review Date: 05/17/2000; 12/12/2002; 04/01/2016; 07/01/2019; 09/16/2021

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