

Purpose:

To provide a process for hospitals representatives to change trauma center accreditation level.

Procedure:

1. Hospital representatives should submit a request to PTSF to change the trauma center's accreditation level.
 - A. The request must communicate the intention for the change in the current accreditation level and the request must also ask to schedule a survey.
 - i. Elevation in trauma center accreditation level request:
 - a. Hospital representatives should submit the Letter of Request (LOR) to PTSF as soon as possible. The LOR must include a timeline for when hospital representatives would like the trauma center to undergo a survey for the accreditation level change. The timeline assists PTSF staff members' ability to facilitate education and schedule the survey.
 - b. PTSF must receive the LOR no later than July 1 of the year prior to the requested year of survey.
 - c. The LOR permits PTSF to publicly disclose that hospital representatives seek to elevate the trauma center's accreditation level.
 - ii. Decrease in trauma center accreditation level request:
 - a. Hospital representatives should submit the communication to PTSF as soon as possible. The communication must outline the desired change in trauma center accreditation level and the intended effective date. This communication must acknowledge the intent to maintain compliance with current PTSF Standards of Accreditation until the effective date as approved by the PTSF Board of Directors (Board).
 - b. Additional details are outlined in the "Decrease in trauma center accreditation level request" portion of this policy.

Elevation in trauma center accreditation level request:

1. Hospital representatives must submit payment of the appropriate survey fee upon invoice.
 - A. The appropriate survey fee corresponds to the hospital's trauma center accreditation level request.
 - B. If a hospital representative previously paid the survey fee for the current trauma center accreditation level, a PTSF staff member invoices the hospital for the remainder of the fees that correspond with the trauma center accreditation level change request (if applicable).
 2. Determine survey type:
 - A. When hospital representatives request a trauma center accreditation level elevation during the normal survey cycle/anticipated survey year based on the current accreditation certificate, the survey will follow the traditional accreditation survey process and schedule.
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- B. When the request for trauma center accreditation level elevation occurs prior to the normal survey cycle/anticipated survey year based on the current accreditation certificate, hospital representatives may request a modified survey.
 - i. Qualifications to request a modified elevation survey:
 - a. No significant issues on latest accreditation report.
 - b. The trauma center was granted an unconditional three-year accreditation status.
 - ii. "Modified" Team Composition
 - a. One Nurse Surveyor
 - b. One Physician Surveyor
 - iii. Schedule/Expectations
 - a. Elevation to Level I:
 - (1.) Focus on PTSF Standards of Accreditation in the areas of residency, research, and intensive care unit.
 - (2.) A focused case review of patients who were transferred from the hospital.
 - b. Elevation to Level II:
 - (1.) Focus on PTSF Standards of Accreditation in the areas of general surgery, neurosurgery, and additional required subspecialist.
 - (2.) A focused case review of patients who were transferred from the hospital.
 - c. Elevation to Level III:
 - (1.) Focus on PTSF Standards of Accreditation in the areas of general surgery, orthopedic surgery, anesthesia, operating room, and inpatient departments.
 - (2.) A focused case review of patients who were transferred from the hospital.
 3. Complete the Application for Survey (AFS)
 - A. The PTSF "Save the Date Notice" communicates the AFS submission deadline, which is based on the survey date. Refer to the "Site Survey Guidebook" for additional details.
 - B. PTSF staff members will review the AFS submission. If PTSF staff members determine that the trauma center has not significantly met criteria for trauma center accreditation level elevation pursuit, hospital representatives are notified to reconsider the request to elevate to a higher trauma center accreditation level and/or re-identify the survey as a re-accreditation of the current trauma center accreditation level.
 4. Survey Participation
 - A. PTSF staff members schedule surveys at least six months in advance.
 - i. Level I, II, and, III surveys typically occur March to June.
 - ii. Level IV surveys typically occur from June to August.
 - B. If there is a conflict with the date of the site visit or the members of the survey team, the hospital must notify PTSF, via email, as soon as possible, or no later than five business days after receipt of the notification. Modifications are not guaranteed, but every effort is made to accommodate requests. Refer to AC-130: Process for Becoming an Accredited Trauma Center.
 - C. Survey day format adheres to the most current version of the "Site Survey Guidebook."
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NOTE: Trauma centers with an accreditation level elevation request may not utilize the virtual survey process; elevation surveys must occur on-site.

5. Board Deliberation and Outcome

- A. Trauma centers with an elevation in trauma center accreditation level request are eligible for up to a three-year survey cycle based upon several criteria.
 - i. Factors that determine the duration of accreditation include but are not limited to:
 - a. accreditation history
 - b. significant issue(s)
 - c. overall compliance with the PTSF Standards of Accreditation
 - d. current accreditation cycle
 - e. trauma center accreditation level pursued by the proposed elevation survey
- B. Trauma centers granted an elevation in trauma center accreditation level are eligible for an immediate upgrade status based upon the accreditation deliberation decision. Pro-rated participation fees apply.
- C. Trauma centers not granted elevation of trauma center accreditation level may reapply the following year.
- D. Following Board deliberations, a PTSF staff member issues a press release, which announces the current accredited trauma centers. The press release includes any newly accredited hospitals and elevated trauma center accreditation levels, see AC-132: Media Notification Regarding Trauma Center Status.

Decrease in trauma center accreditation level request:

After the Board approves the decrease in trauma center accreditation level and the effective date, the following occurs:

1. Communications

- A. A PTSF staff member issues a statewide press release, which lists the trauma center accreditation level change and the effective date.
 - i. See AC-132: Media Notification Regarding Trauma Center Status for other PTSF communications that occur simultaneously, such as PTSF Notification to the EMS Bureau of the Pennsylvania Department of Health.
 - ii. Insurance companies may refer to PTSF's press release to determine whether insurance benefits applicable to level I and II trauma centers still apply.
- B. Internal/external hospital communications shall not occur until after the transmission of PTSF's press release. PTSF staff will request a meeting with hospital leadership and public relations staff to plan appropriate communications.
- C. Trauma center leadership shall also notify trauma centers within their region regarding potential impacts.

2. Board Approved Actions

- A. On behalf of the Board, PTSF staff members communicate additional actions. Additional Board actions may include the submission of policies appropriate for the new level of accreditation and the potential need for a survey prior to the next scheduled survey.

- B. In accordance with AC-128: Notification Regarding Changes in Trauma Center Operations for Pursuing & Accredited Trauma Centers, hospital representatives must contact PTSF if at any time the hospital is unable to comply with PTSF Standards of Accreditation either prior to the effective date of the new level of trauma center accreditation or after the effective date. Based on the new level of trauma center accreditation, trauma center funding and insurance benefits may change. Hospital representatives should consult PTSF staff to discuss potential implications.

Withdrawal of trauma center accreditation request.

1. Hospital representatives should submit documentation to PTSF to declare voluntary withdrawal of trauma center accreditation.
2. Please see “Decrease in trauma center accreditation level request” (1. A.-C.) for information on appropriate communications.
3. Hospital representatives should coordinate with PTSF staff to establish timelines for collection of trauma registry and performance improvement data.
4. Pennsylvania Department of Health and Human Services (DHS) issued trauma center funding is pro-rated based on the effective date of the withdrawal. PTSF’s President or designee will notify the DHS regarding the effective date.
5. Should hospital representatives wish to reapply for trauma center accreditation please follow the process outlined in AC-130: Process for Becoming an Accredited Trauma Center.

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

Original Date: 07/29/2015

Revise Date: 09/29/2017, 09/21/2018, 5/23/2023, 09/19/2024

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